

Testimony of Jay Nachtigal, MD  
Senate Public Health and Welfare Committee  
Written Proponent Regarding SB 223  
March 18, 2019

Chair Suellentrop and members of the Committee. I am urging you to support licensure of Certified Anesthesiologist Assistants (CAAs) in Kansas. I am a physician anesthesiologist practicing at KU Medical Center in Kansas City, Kansas. I am a native Kansan, having grown up in Halstead, Kansas, and have lived here most of my life. I appreciate the opportunity to provide written support of SB 223.

My practice utilizes the Anesthesia Care Team model of physician-led anesthesia care, whereby a physician anesthesiologist directs mid-level providers. I am an advocate of this model, as it allows multiple well-trained providers to focus on safely caring for the patient during surgical procedures, which are critical times in patients' lives. Our surgical patient population is growing and getting older and sicker. A team-based approach is successfully utilized in other high-risk, high-stress environments like the military, the airline industry, and other healthcare settings such as the ICU. It is critically important in the operating room as well to have multiple "hands on deck" focused on the patient to help ensure the safest care possible.

Our ability to deliver high-quality care for Kansans has been limited by shortages of anesthesia-trained providers. As part of an Anesthesia Care Team, qualified anesthesia providers such as CAAs and CRNAs are essential for managing patients undergoing surgery. CAAs are already practicing in the surrounding states of Missouri, Oklahoma & Colorado, as well as in 15 other states and the Veterans' Affairs system. As a largely rural state, it is often difficult to recruit and fill the need for anesthesia care providers in Kansas. Even in urban areas it has been necessary to search throughout the country to find candidates for our open positions, incurring significant expense to do so. If a new pool of qualified anesthesia providers were available, this would increase the available anesthesia workforce locally and help alleviate the current and future shortages we face. This is not an effort to displace CRNAs, who are highly valuable members of the team. Studies in other states have shown that adding CAAs does not impact the growth of CRNAs in the state. In fact, states with CAAs have higher job growth rates for CRNAs. It is truly a manpower issue.

Moreover, the existing shortages are only projected to worsen. GasWork.com, an anesthesia jobs website, currently shows 51 open CRNA positions in Kansas. This situation exists despite significant growth in CRNA training class sizes over the last several years. Studies by the Rand Corporation project continued shortages of both anesthesiologists and CRNAs in Kansas. The Kaiser Foundation and others indicate that there are also significant current and projected shortages of nurses and primary care providers. Trying to fix the anesthesia provider shortage by further increasing CRNA class sizes will only serve to draw talented candidates away from nursing and primary care, further worsening the needs in those areas. Instead, adding a new provider pool in the form of CAAs will help solve the anesthesia workforce shortage without sabotaging other areas of healthcare in the state.

CAAs must meet rigorous training criteria, including an undergraduate premedical degree, a standardized admissions test, educational tracks designed by anesthesiologists, and over 2,000 hours of clinical experience. CAAs and CRNAs are treated as equivalent providers by the Federal Government (Medicare and Medicaid) and by private insurers. There is no differentiation between either type of provider from a billing and reimbursement perspective.

I am also supportive of licensure of CAAs to provide more choice in anesthesia providers. Currently, anesthesiology is the only medical specialty in Kansas that does not have a choice of physician extender. CAAs and CRNAs are analogous to the PAs and ARNPs already successfully utilized and working together in other areas of medicine within Kansas. The field of anesthesiology deserves to have the same freedom of choice and the same larger pool from which to hire the best, most qualified candidates. Thank you for your consideration of this important issue.