



The New York State Society of Anesthesiologists, Inc.

228 Park Ave S, PMB 614149, New York, New York 10003-1502 US

TELEPHONE: 212-867-7140 | FAX: 929-205-7836 | WEBSITE: www.nyssa-pga.org

Testimony for the Joint Legislative Budget Higher Education Hearing February 24, 2026

Honorable Chairs and Members of the Senate and Assembly Higher Education Committees, Senate Finance Committee and Assembly Ways & Means Committee: On behalf of the New York State Society of Anesthesiologists, thank you for the opportunity to submit testimony related to our priorities for the SFY 2026-2027 State Budget.

The New York State Society of Anesthesiologists, Inc. (“NYSSA”) is a medical society representing 4,400 physicians specializing in the field of anesthesia who provide care in hospitals, ambulatory surgical centers, and critical care settings across New York State. Our members evaluate patients before surgery, develop and direct anesthesia plans, manage life-threatening emergencies, and lead care teams at the most critical moments in a patient’s medical journey. NYSSA is an organization dedicated to advancing the specialty of anesthesiology and providing the safest, highest-quality patient care to the citizens of New York State.

NYSSA supports budget policies that strengthen New York’s physician workforce pipeline, preserve patient access to safe physician-led care, and ensure that our medical schools and residency training programs have the capacity to train the next generation of physicians. We respectfully urge continued investment in programs that expand residency training capacity, reduce barriers for qualified medical graduates, and improve recruitment and retention of physicians across the state.

Our comments focus on critical areas of state budget policy related to workforce development, medical education capacity, loan repayment programs, and strategies to expand access to anesthesia care in underserved and rural communities.

Workforce Development and the Physician Pipeline

New York’s medical schools, teaching hospitals, and academic health centers are essential to ensuring that patients across the state have access to highly trained physician specialists. In anesthesiology, safe care depends on rigorous medical education, extensive supervised clinical training, and the ability to exercise independent medical judgment in high-risk situations. This training pipeline is not only critical to workforce stability, but also to preserving New York’s longstanding patient safety standards in anesthesia care.

When patients encounter life-threatening emergencies requiring immediate medical intervention, it is imperative that we preserve equal access to the physician-led supervision and the safety standard which currently exists in the New York State Health Code (which has been in existence since 1989). The New York State Health Code requires the supervision of the nurse anesthetist by an anesthesiologist who must

be immediately available, or the operating physician who must accept the responsibility of the nurse anesthetist.

Becoming an anesthesiologist requires four years of medical school, four years of residency training, and often additional fellowship specialization. Maintaining sufficient medical school and residency capacity is essential to ensure that New York can retain the physicians it trains and sustain access to surgical and emergency services statewide.

New York must also remain mindful that physician recruitment and retention are influenced not only by training capacity, but by the overall practice environment, including reimbursement pressures, administrative burdens, and liability costs.

The anesthesia work force, consisting primarily of anesthesiologists and nurse anesthetists, has seen a modest increase over the past several years according to data from the Centers for Medicare & Medicaid Services (CMS) and the American Medical Association (AMA). This data confirms that New York state, unlike several other states, has a relatively stable number of anesthesiologists and nurse anesthetists.

NYSSA respectfully urges the Legislature to support the following workforce and training initiatives through the SFY 2026–2027 State Budget:

Expansion of Residency Programs

Increasing anesthesiology residency positions will help sustain access to surgical, obstetric, and critical care services across the state. Other states, including California, have implemented initiatives to expand specialty training capacity, and similar approaches should be explored in New York to ensure long-term workforce stability.

Increased Opportunities for International Medical Graduates

United States International Medical Graduates (IMGs), who have gone to medical school abroad, often cannot find residency spots after graduation despite being qualified and eager to serve patients. Increasing residency spots outside of CMS-funded caps, particularly in rural counties of New York State, would bring valuable workforce capacity home and expand health care access in underserved communities.

New York State should also consider temporary pathways for foreign graduates (non-U.S. residents) to enter the workforce for a defined period of time through structured programs aligned with board eligibility requirements. The American Board of Anesthesiology (ABA) currently provides pathways with limited allocations per hospital. Consideration should be given to expanding these allocations to support physician workforce growth.

Continued Support for Student Loan Forgiveness Programs

Loan relief remains one of the most important recruitment and retention tools for physicians, especially for those considering practice in rural or underserved regions. NYSSA urges continued and expanded support for student loan repayment and forgiveness programs that encourage physicians to remain in New York after completing their training.

Licensed Certified Anesthesiologist Assistants (CAAs) Under Physician Supervision

NYSSA supports the licensure of Certified Anesthesiologist Assistants (CAAs) in New York, provided they practice within a physician-led model in which supervision is immediate and meaningful. Twenty-four jurisdictions currently recognize CAAs, where they function as members

LEGISLATIVE REPRESENTATION

Charles J. Assini, Jr., Esq. | NYSSA Legislative Counsel and Representative | 1036 Onondaga Road, Niskayuna, NY 12309
TELEPHONE: 518-461-3680 | E-MAIL: Chuck@AssiniLaw.com and cc: Grace@AssiniLaw.com

Reid, McNally & Savage, LLC | NYSSA Lobbyists | 1 Commerce Plaza, Suite 402, Albany, New York 12210
TELEPHONE: 518-465-7330 | FAX: 518-465-0273 | E-MAIL: Bobr@lobbywr.com and cc: Kellyk@lobbywr.com | WEBSITE: www.lobbywr.com

of the anesthesia care team under physician oversight.

In discussions with major New York hospital systems and academic programs, NYSSA has been informed of growing interest in establishing CAA educational programs. Establishing licensure in New York would expand access to anesthesia services, support workforce stability in hospitals, and generate economic and educational opportunity for the state, while preserving patient safety.

NYSSA supports the licensure and practice of both CAAs and CRNAs within a physician-led framework that ensures a supervising physician is immediately available. Maintaining this structure is essential to protecting New York’s longstanding safety standards in anesthesia care.

Strengthening the Rural Pass-Through Program

NYSSA encourages state leaders to advocate federally for expanding the Anesthesia Rural Pass-Through program to include physicians, which would help sustain rural hospitals and expand specialty access in underserved communities.

The Rural Pass-Through program is where Medicare permits certain low-volume, rural hospitals to pay for the services of nurse anesthetists and anesthesiologist assistants through a Medicare Part A, cost-based “pass-through” mechanism. The mechanism is used in lieu of a Part B payment for anesthesia services. Medicare should extend this program to all members of the anesthesia care team, including anesthesiologists (MD/DO), who are presently excluded by law from participating.

The federal government can directly improve care expansion in rural and underserved areas by strengthening the Anesthesia Rural Pass-Through program, and New York officials should consider supporting this effort.

Preserving Safe Anesthesia Standards

As the Legislature considers workforce solutions, patient safety must remain the guiding principle. Despite advances in medicine, every surgical procedure carries inherent risk. Anesthesia is a specialty in which clinical decisions often must be made in seconds and where complications can escalate quickly. For that reason, New York has long maintained a physician-led anesthesia care model that ensures accountability for the most complex medical decisions involved in anesthesia delivery.

Within this framework, the physician assumes primary responsibility for directing and overseeing the patient’s medical care working in coordination with nurse anesthetists. This longstanding safety standard is reflected in the New York State Health Code and has contributed to the high level of anesthesia safety achieved in this state.

The anesthesiologist-led care team model depends on clearly defined roles and appropriate supervision. Nurse anesthetists are valued members of the anesthesia care team, and their education and clinical training are structured within a supervised framework. Removing that structure alters accountability and can increase patient risk. Recent regulatory findings in other states underscore these concerns.

In 2024, the Centers for Medicare & Medicaid Services (CMS), following an investigation by the California Department of Public Health (CDPH), cited two hospitals for permitting nurse anesthetists to administer anesthesia without required physician orders and beyond the scope of their authority. The findings included serious patient harm and anesthesia-related deaths, resulting in corrective action plans and temporary suspension of surgical services.

LEGISLATIVE REPRESENTATION

Charles J. Assini, Jr., Esq. | NYSSA Legislative Counsel and Representative | 1036 Onondaga Road, Niskayuna, NY 12309
TELEPHONE: 518-461-3680 | E-MAIL: Chuck@AssiniLaw.com and cc: Grace@AssiniLaw.com

Reid, McNally & Savage, LLC | NYSSA Lobbyists | 1 Commerce Plaza, Suite 402, Albany, New York 12210
TELEPHONE: 518-465-7330 | FAX: 518-465-0273 | E-MAIL: Bobr@lobbywr.com and cc: Kellyk@lobbywr.com | WEBSITE: www.lobbywr.com

Workforce expansion and patient safety are not mutually exclusive. We respectfully urge the Legislature to consider whether proposed scope expansions align with the education, training, and clinical preparation necessary for independent medical decision-making in anesthesia care. NYSSA supports solutions that strengthen access to care while preserving the physician-led model that protects patients at their most vulnerable moments.

OPPOSE: Allow Physician Assistants to Practice Independently (H/MH Article VII Part N, Subpart E)

The New York State Society of Anesthesiologists respectfully opposes proposals that would weaken New York’s longstanding standard of physician-led care by authorizing physician assistants to practice independently. NYSSA urges the Legislature to once again reject this proposal and to prioritize patient safety by ensuring that patients continue to receive care directed by clinicians with the highest level of medical education, training, and clinical preparation.

Physician assistants play an important and valued role in New York’s health care system. Their education and training are designed within a collaborative model that includes physician supervision and coordination. Removing that physician role raises serious concerns, particularly when patients require complex diagnostic evaluation, medication management, and ongoing clinical assessment. These responsibilities require the depth of preparation and independent medical judgment that comes from a physician’s education and residency training.

The depth and breadth of a physician’s education are central to patient safety. Physicians complete four years of medical school followed by three to seven years of residency and, in many cases, fellowship training, totaling thousands of hours of supervised clinical experience before practicing independently. This training is structured to develop diagnostic reasoning, clinical judgment, and the ability to manage complex and rapidly evolving medical conditions. That level of preparation equips physicians to oversee and coordinate both primary and specialized patient care. Surveys consistently show that patients value this training and believe physician involvement in diagnosis and treatment decisions is important to achieving the best possible health outcomes. For these reasons, proposals affecting independent medical decision-making must be evaluated carefully against the education and clinical preparation required to protect patient safety.

Expanding scopes of practice is often presented as a simple solution to workforce shortages. However, multiple studies have found that independent practice models can increase health care utilization and cost, including higher rates of diagnostic testing, referrals, and emergency department use. These patterns can delay care for patients, increase system costs, and raise concerns about quality and oversight. Scope expansion should not be treated as a substitute for strengthening New York’s physician workforce pipeline.

NYSSA recognizes the importance of expanding access to care, particularly in underserved communities. Workforce challenges should be addressed through affirmative solutions that improve recruitment and retention and expand medical education and residency training capacity. Policies that focus on loan repayment incentives, training expansion, and reducing unnecessary administrative burdens are more likely to improve access without compromising patient safety.

In 2024, New York enacted reforms expanding regulatory flexibility for physician assistants. NYSSA believes those changes should be fully implemented and evaluated for their impact on patient safety and access before the Legislature considers any additional measures that further reduce physician involvement in patient care.

LEGISLATIVE REPRESENTATION

Charles J. Assini, Jr., Esq. | NYSSA Legislative Counsel and Representative | 1036 Onondaga Road, Niskayuna, NY 12309
TELEPHONE: 518-461-3680 | E-MAIL: Chuck@AssiniLaw.com and cc: Grace@AssiniLaw.com

Reid, McNally & Savage, LLC | NYSSA Lobbyists | 1 Commerce Plaza, Suite 402, Albany, New York 12210
TELEPHONE: 518-465-7330 | FAX: 518-465-0273 | E-MAIL: Bobr@lobbywr.com and cc: Kellyk@lobbywr.com | WEBSITE: www.lobbywr.com

In summary, this proposal would weaken essential safeguards that protect patient safety by removing the coordination and oversight provided by physicians to ensure the delivery of quality patient care. We thank you for your past opposition and urge you to again oppose these provisions.

OPPOSE: Transfer Oversight of Physicians, PAs, & Specialist Assistants from SED to DOH (H/MH Article VII Part N, Subpart D)

The SFY 2027 Executive Budget includes a proposal to transfer definitions of medical misconduct for licensed physicians, physician assistants, and specialist assistants from the Education Law to the Public Health Law, shifting regulatory authority from SED to DOH. DOH would also take over the responsibility of certifying the qualifications of professionals who own and operate medical entities.

NYSSA has significant concerns about this proposed restructuring. The proposed transfer raises important questions regarding processing times of licenses, increased regulatory burden on physicians, a bifurcation on how health professions are regulated in New York, and others. At a time when New York is focused on strengthening its physician workforce, additional regulatory uncertainty could have unintended consequences for recruitment, retention, and system stability.

For these reasons, the New York State Society of Anesthesiologists respectfully urges your opposition to this proposal and requests that it be rejected in the budget.

Conclusion

The members of the New York State Society of Anesthesiologists are committed to ensuring that New Yorkers continue to have access to safe, high-quality anesthesia care in every region of the state, regardless of socioeconomic status or practice setting. The stability of our health care system depends on maintaining strong medical education and residency training capacity, supporting the recruitment and retention of physicians, and preserving the physician-led model of care that has long protected patient safety in New York.

As you finalize the SFY 2026–2027 State Budget, NYSSA respectfully urges the Legislature to:

- Expand anesthesiology residency positions and strengthen specialty training capacity;
- Increase opportunities for International Medical Graduates to complete training and practice in New York;
- Continue and expand student loan repayment and forgiveness programs;
- Support the licensure of Certified Anesthesiologist Assistants under appropriate physician supervision;
- Advocate for federal reforms to strengthen the Anesthesia Rural Pass-Through program; and
- Preserve New York’s longstanding anesthesia safety standards reflected in the State Health Code.

NYSSA urges the Legislature to reject proposals that would undermine patient safety in anesthesia care, weaken physician-led care, or create unnecessary regulatory uncertainty.

We appreciate the opportunity to provide this testimony and remain committed to partnering with the Legislature to strengthen New York’s physician workforce pipeline, expand access to safe surgical and emergency care, and protect patients across the State.

LEGISLATIVE REPRESENTATION

Charles J. Assini, Jr., Esq. | NYSSA Legislative Counsel and Representative | 1036 Onondaga Road, Niskayuna, NY 12309
TELEPHONE: 518-461-3680 | E-MAIL: Chuck@AssiniLaw.com and cc: Grace@AssiniLaw.com

Reid, McNally & Savage, LLC | NYSSA Lobbyists | 1 Commerce Plaza, Suite 402, Albany, New York 12210
TELEPHONE: 518-465-7330 | FAX: 518-465-0273 | E-MAIL: Bobr@lobbywr.com and cc: Kellyk@lobbywr.com | WEBSITE: www.lobbywr.com
