

Written statement for the Record by:
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Joint Legislative Budget Subcommittee on Health

February 12, 2018

Good afternoon distinguished members of the subcommittee. My name is Cheryl Spulecki. I am currently the President of the New York State Association of Nurse Anesthetists and Assistant Program Director and Clinical Coordinator of the SUNY at Buffalo Nurse Anesthesia Program. I am testifying today in support of authorizing full scope of practice for Certified Registered Nurse Anesthetists as part of this year's health budget proposal.

NYSANA is the statewide professional association representing New York's nearly 1600 Certified Registered Nurse Anesthetists and Student Registered Nurse Anesthetists. You might have heard of us, as we have been coming to Albany for nearly 20 years advocating for state recognition for CRNAs as advanced practitioners commensurate with our national certification, advanced education, clinical training and experience. We are grateful the Governor through his budget proposal has included provisions to finally advance this issue and we look forward to working with the legislature to ensure passage in the final budget.

Background:

More than 30 years of scientific study has demonstrated that CRNAs administer safe, quality care with patient outcomes equivalent to anesthesiologists. CRNAs practice in every setting where anesthesia is offered, for every type of procedure including complex procedures like open-heart surgery and every category of patient, from pediatrics to geriatrics. This includes metropolitan hospitals New York City such as Sloan Kettering, level one trauma centers like Erie County Medical Center, suburban locations such as South Buffalo Mercy, and a majority of the rural healthcare facilities: United Memorial Medical Center in Batavia, Mount St. Mary's Hospital in Lewiston, and Wyoming County Hospital System in Warsaw. It has been well-established that when anesthesia is provided by a CRNAs it is the practice of nursing and when provided by a physician it is the practice of medicine. Similar to other specialties, there is

overlap among anesthesia specialists. Regardless of who your anesthesia provider is, however, we administer anesthesia services in exactly the same way: our techniques are the same, the equipment, anesthesia agents and drugs we use are the same and most importantly our patient outcomes are the same.

Patient Access:

History and recent national surveys indicate the demand for anesthesia will outpace the supply of providers over the next several years. Policy makers should take note of the growing need for services when considering state certification through enacting scope of practice laws. New York State is lacking a scope of practice law of which currently inhibits our availability and growth to practice to the full extent of our education. A recent study of the geographic distribution of anesthesia providers shows that CRNAs more often work in areas with lower median income, higher unemployment, uninsured and higher Medicaid enrolled as compared to anesthesiologists. This geographic imbalance is no more pronounced than in our rural counties across Upstate, NY. In fact, in New York, and nationally, CRNAs are the sole anesthesia providers in most rural hospitals. Allowing CRNAs to practice as advanced practice nurses, as is currently afforded Nurse Practitioners, will not only continue to ensure patient access among vulnerable populations, but also help NYS meet increasing demand and better respond to the changing health care landscape. Our hospital operating rooms cannot run without us in a cost effective safe manner.

Cost-effectiveness and efficiency:

The current state of our health care budget is challenging. Hospitals, nursing homes, providers and patients will all be potentially impacted by not only the state's current deficit, but also what is happening in Washington, D.C. CRNAs can be a part of the solution. By more fully utilizing these advanced practitioners, facilities experience greater efficiencies in the delivery of care but also additional revenues that can free up resources for other critical services. It is well publicized that on average anesthesiologists enjoy one of if not the highest paid jobs in American, earning two to three times that of CRNAs. While it is true that Medicare and other payers reimburse roughly the same for anesthesia services regardless of the provider, the anesthesiologists' higher compensation then must be shouldered by the hospitals and inevitably patients. Bottom line: removing restrictive barriers to practice including outdated, unnecessary supervision requirements translates into greater patient access to more efficient and cost-effective care for our hospitals at a time when they must fully utilize every resource they have.

Education: The education of our CRNAs touts a challenging rigorous program of graduate work including thousands of clinical hours and didactic instruction including evidence based research, nurse practitioner required course work, and complex anesthesia principles. Of all the anesthesia professionals, CRNA graduate students are the ONLY provider with a prereq of intensive care training as an ICU RN: on average 3-5 years. Our candidates are the best of the best RNs with work experience as Emergency Flight, Cardiac, Pediatric, and Surgical ICU Nursing. In NYS, our Nurse Anesthesia Programs rank nationally, all within the top 20, one within the top 10. With this being said, no difference in our performance as compared to dental

anesthesiologists or physician anesthesiologists has ever been proven. We do it with grace, compassion, vigilance and intellect as nurses have undoubtedly been recognized as the most trustworthy profession in the United States of America.

Conclusion:

On behalf of NYSANA I want to thank you for this opportunity to speak publicly about our support for adopting full scope of practice for CRNAs in this year's budget. Let's make 2018 the year we finally achieve what 48 other states have already done. And CRNAs will continue providing safe, high-quality and cost-effective anesthesia services to the residents of this state. I am happy to answer any questions.

