SB 102 & HB 445 – Myth vs Fact

Legislation: "In any case where it is lawful for a duly licensed physician practicing medicine under the laws of this state to administer anesthesia, such anesthesia may be administered by a certified registered nurse anesthetist, provided that such anesthesia is administered under the direction and responsibility of pursuant to an order by a duly licensed physician, <u>dentist</u>, or <u>podiatrist</u>. Anesthesia administered by a certified registered nurse anesthetist pursuant to this Code section shall be considered the practice of nursing."

Here's what the bill does in a nutshell:

- 1. Authorizes Certified Registered Nurse Anesthetists (CRNA) to practice without physician direction and responsibility (oversight).
- 2. Moves state regulation of anesthesia (medical acts by CRNAs) from the GA Composite Medical Board to the Georgia Board of Nursing.

Myth	Fact
Removing physician oversight would expand patient access to care.	Nurse anesthetists already work in every city in Georgia where surgical procedures are conducted. Adding more surgeons/proceduralists increases access to care. This bill does not do that.
Removing physician oversight would decrease health care costs.	Nurse anesthetists are not going to charge patients less. Payors' reimbursement for anesthesia services is generally the same whether the anesthesia is administered by an Anesthesiologist, a CRNA directed by the operating physician, or in the team approach where an Anesthesiologist medically directs up to four anesthetists (CRNAs or Certified Anesthesiologist Assistants).
Patients would receive the same level of care and experience the same outcomes with CRNA independent practice.	Peer reviewed independent studies and research by the Veteran's Administration demonstrates that patients are best served when there is physician administered anesthesia care or where there are two heads and four hands (CRNA or CAA directed by a physician) materially involved in the preoperative patient evaluation, during the administration of anesthesia, and in patient recovery.
Patients welcome scope of practice changes.	Sixty-eight percent of U.S. voters say it is very important to them for a physician to be involved in diagnosis and treatment decisions. Patients want and expect a physician to be present on their care team.