

Nurse Anesthetists: Bridging the Access to Care Gap in Rural Georgia

Senate Study Committee on Rural Medical Personnel Recruitment

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What is a CRNA?

- Certified Registered Nurse Anesthetists, or CRNAs, are Advanced Practice Registered Nurses (APRNs) with specialized training in anesthesia.
- CRNAs practice in **every setting** where anesthesia is delivered, including:
 - Hospital operating rooms, OB Delivery rooms; Dental offices, Podiatrists, Ophthalmologists, Plastic Surgeons and Pain Management Specialists, ambulatory surgery centers; and in all U.S. military facilities.
- CRNAs are the **only** anesthesia professionals (compared with AAs and anesthesiologists) with required critical care experience *before* beginning formal anesthesia education.
- CRNAs are among the nation's most trusted professions according to Gallup.

Education & Training

- Today, CRNAs have **full practice authority** in every branch of the military and are the primary providers of anesthesia care to U.S. military personnel on the front lines, navy ships, and aircraft evacuation teams around the globe.
- A CRNA must complete seven to nine years of education and experience.
- All students entering an accredited CRNA program must be enrolled in a **doctoral program**. After 2025, all Georgia CRNA graduates will have a Doctorate of Nursing Practice.
- CRNA graduates have an average of 9,369 hours of clinical experience, including 733 hours of nursing, 6,032 hours as a Critical Care RN, and 2,604 hours during their anesthesia program.
- Unlike physicians, CRNAs must be board-certified to practice and are required to report that board certification every 8 years.

How can CRNA's help rural medical personnel shortages?

- CRNAs provide anesthesia services in rural areas, increasing access to surgical procedures and reducing the need for patients to travel long distances for care.
- CRNAs collaborate with other healthcare providers to develop comprehensive care plans for patients in rural areas, ensuring that they receive the necessary medical attention.
- Anesthesiologists will not practice in some Georgia hospitals because they cannot pay as much as they want to earn. A CRNA can deliver anesthesia and keep the hospital's Operating Room open to deliver surgery.

Best Practices from other States

- Over 22 states have enacted legislation that allows the Governor to inform CMS that their state will “opt out” of allowing CRNAs to practice without physician supervision.
- This allows hospitals and facilities to collect funds from CMS for CRNA-provided healthcare and anesthesia services, giving much-needed revenue to rural hospitals.
- These states have seen increased access to care, improved patient outcomes, and cost savings.
- State legislation enabling governors to “opt out” has proven to be an effective solution to address rural medical staffing challenges.

What can we do in Georgia?

- SB 102 and HB 445 were introduced in 2023. These bills updates the CRNA statute, allowing anesthesia administration "pursuant to an order by" instead of "under the direction and responsibility" of a duly licensed physician, dentist, or podiatrist.
- This change eliminates the burdensome requirement for constant physician supervision and responsibility during anesthesia delivery.
- Removal of direction requirements empowers CRNAs to independently assess, diagnose, and manage anesthesia care all within their expertise, training, and scope of practice.

Governor's Workforce Commission Recommendations

“Rural areas can often operate on skeleton crews of healthcare workers that must re-direct advanced procedures to better-equipped facilities. For instance, this is especially true of surgical procedures that require anesthesia, because, while a rural facility may have a surgeon, they may not have an anesthesiologist. In many rural areas, demand for anesthesiologists is filled by nurse anesthetists who must currently operate under the license of a physician even if that physician does not have expertise with anesthesia.”

-Georgia Healthcare Workforce Commission January 2023

Providing the Highest Quality of Care

- CRNA's operating as the sole anesthesia provider has a track record as a safe delivery model.
- Numerous peer-reviewed studies have shown that CRNAs are safe, high quality and cost-effective anesthesia professionals who should practice to the full extent of their education and abilities.
- A 2010 study published in the journal Nursing Economics indicated that CRNAs acting as the sole anesthesia provider is **the most cost-effective model** for anesthesia delivery, and *there is no measurable difference in the quality of care* between CRNA-only and other anesthesia delivery models.

Georgia's Opportunity

- Georgia has the opportunity to adopt legislation to address its rural medical personnel shortages.
- By allowing CRNAs to provide anesthesia services without supervision by a doctor who may not have any experience in anesthesia, Georgia can improve access to care in rural areas.
- Many hospitals in Georgia, including Piedmont, Grady, and Hometown Health, were in support of SB 102 to allow Georgia facilities to deliver anesthesia without outdated and expensive physician supervision requirements.

Questions?