



**Scope of Practice Overview
June 2023**

Scope Modernization Bill

- a. S769-A sponsored by Senator Jeremy Cooney and A6958-A sponsored by Assemblymember Karines Reyes in the Assembly
- b. The legislation will create a scope of practice for Certified Registered Nurse Anesthetists (CRNAs) that clearly defines what CRNAs can do in New York
- c. CRNAs are currently recognized under Department of Health regulations but with no defined scope of practice
- d. Certified Registered Nurse Anesthetists (CRNAs) are the oldest type of Advanced Practice Registered Nurses in the country and have been providing anesthesia care for over 150 years
- e. New York is the **only** state in the country that has failed to recognize the vital role CRNAs play in delivering safe, compassionate, and cost-effective anesthesia services
- f. Oversight of the license will be under the State Education Department Office of Professions, as with all other nursing specialties
- g. The original version of the legislation used the supervision model that has been used for Nurse Practitioners in the State. After many conversations, the bill was amended to a different model. For CRNAs with less than 3,600 hours of experience, there will be direction which means the coordination and communication between the CRNA and the physician, dentist or podiatrist. For CRNAs with over 3,600 hours of experience, the CRNA will function in an interdependent role as a member of the health care team overseen by a physician, dentist or podiatrist.
- h. All supervision requirements for CRNAs were waived by executive order during the COVID-19 pandemic and are currently waived as a result of the safe staffing emergency. We therefore have over three years' worth of data that proves that there were no negative patient outcomes as the result of supervision removal
- i. New York is losing CRNAs to other states that allow them to practice to the full extent of their education and training
- j. The bill will grant prescriptive authority to CRNAs



Memorandum in Support -
S769-A (Senator Cooney)/A6958-A (Assemblymember Reyes)

Relates to certified registered nurse anesthetists

The New York State Association of Nurse Anesthetists (NYSANA) **strongly supports** S769-A (Cooney)/A6958-A (Reyes), which creates licensure with a scope of practice for certified registered nurse anesthetists. NYSANA is the statewide professional association representing the interests of over 1,900 Certified Registered Nurse Anesthetists (CRNAs) and Student Registered Nurse Anesthetists (SRNAs) providing high-quality, safe and cost-effective anesthesia care to residents across New York State.

Currently in New York, CRNA practice is not codified in law. Instead, the scope of practice for CRNAs is defined through educational requirements and Health Department regulations. This legislation would create a scope of practice for CRNAs, allowing a CRNA to obtain a license, and practice to the full extent of their education and training. Oversight of the license will be under the NY State Education Department Office of Professions, as with all other nursing specialties.

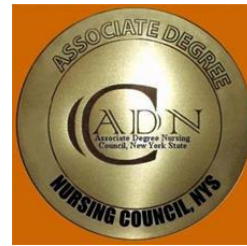
CRNAs have been providing anesthesia care to patients for more than 150 years. Anesthesia is a recognized area of specialty in medicine and nursing. Regardless of whether the educational background is in nursing or medicine, all anesthesia providers provide anesthesia to facilitate diagnostic, therapeutic and surgical procedures. Nurse anesthesia is the nation's oldest advanced practice nursing specialty, dating back to the Civil War.

Anesthesia is safer today than at any other time. Current data demonstrates there is *no* significant difference in patient outcomes based on different types of anesthesia providers. Studies show the provision of anesthesia with a CRNA-only model costs hospitals significantly less than any other model utilized. Furthermore, the value and need for CRNAs was highlighted at a new level during the COVID-19 pandemic when CRNAs stepped into key leadership roles in treating COVID-19 patients. Just a few of the ways CRNAs helped was by educating nursing staff on advanced critical care skills, organizing COVID-19 airway teams, functioning as advanced practice registered nurses in the ICU and standardizing airway management and procedures. CRNAs rose to the challenge in ways that show their value, and the need for New York to finally adopt a defined scope of practice for the profession is upon us.

Unfortunately, New York is the only state that does not fully recognize CRNA practice. The time has come for New York to grant full recognition of CRNAs, which will lead to greater access to high quality care and help resolve problems that question liability, supervision and authority to administer anesthesia.

Originally, this legislation was based on the model used in the Nurse Practitioner Modernization Act of 2015. However, after many conversations, the bill was amended to a different model. For CRNAs with less than 3,600 hours of experience, there will be direction which means the coordination and communication between the CRNA and the physician, dentist or podiatrist. For CRNAs with over 3,600 hours of experience, the CRNA will function in an interdependent role as a member of the health care team overseen by a physician, dentist or podiatrist. Given that all supervision requirements have been waived by executive order during the COVID-19 pandemic and safe staffing emergencies, and years' worth of data proves that there were no negative patient outcomes as the result of supervision removal, we believe we are well past time for this legislation to be adopted.

For these reasons, NYSANA **strongly supports** S769-A (Cooney)/A6958-A (Reyes), which creates a scope of practice for certified registered nurse anesthetists and urges its swift passage.



Memorandum in Support - S769-A (Senator Cooney)/A6958-A (Assemblymember Reyes)
Relates to certified registered nurse anesthetists

Our organizations strongly support S769-A/A6958-A, which would create licensure with a scope of practice for certified registered nurse anesthetists (CRNAs). CRNAs are masters and doctorate educated advance practice professionals, who are required to undergo robust education and training. This legislation would grant CRNAs the full authority to administer patient care commensurate with their advanced education, training and experience and to ensure anesthesia services are safe and affordable for every patient in New York.

New York is the only state in the entire country that does not recognize CRNAs and the critical services they provide. This legislation will increase access to high quality anesthesia services in rural, and other underserved areas, and encourage CRNAs to practice in this state and provide these needed services.

For these reasons, our organizations know that we must act promptly to remedy this situation and create a license and scope of practice for CRNAs, which is why we strongly support S769-A/A6958-A and urge its swift passage.

American Nurses Association - New York
Council of Associate Degree Nursing In New York State, Inc.
Healthcare Association of New York State
NY Council of PeriOperative Registered Nurses
New York Organization for Nursing Leadership
The Nurse Practitioner Association New York State

A 6958 (Reyes)

S 769 (Cooney)

MEMORANDUM IN SUPPORT

Amending the Education Law in relation to creating the profession of nurse anesthetist

NYSNA represents more than 42,000 registered nurses throughout New York and is a leading advocate for universal access to high quality health care for all New Yorkers, regardless of ability to pay. As a union representing nurses, we also advocate for the establishment of safe standards of patient care and regulation of professional nursing scope of practice.

The proposed legislation (S 769) would create a new certified registered nurse anesthetist (CRNA) title and establish formal parameters and regulations applicable to CRNA practice.

Under current law, CRNA practice is not formally codified and CRNAs are permitted to provide anesthesia services if they meet required education and training criteria and are under the direct supervision of an anesthesiologist or other licensed anesthetist who is present or readily available during the procedure.

The legislation would clearly define the scope of practice of CRNAs and allow licensed CRNAs to practice more independently and without direct physician supervision. CRNAs with less than 3,600 hours of practical experience would be required to maintain a written practice agreement with a physician who would oversee their practice. CRNAs with 3,600 or more hours of experience would be able to independently provide anesthesia services under a collaborative agreement with a physician.

This legislation is directly patterned on a similar model that successfully expanded the role and scope of practice of Nurse Practitioners, allowing them to fill an increasingly important role as primary and acute care providers.

New York is one of the few remaining states that does not formally recognize CRNAs as a licensed professional title. During the COVID pandemic, however, the restrictions on CRNA practice were suspended in order to maintain the availability of anesthesia services as medical staff shifted to treating COVID patients. There were no issues or negative effects on patient care reported. CRNAs have played a significant role in providing anesthesia services throughout the state, and their role is particularly important in medically underserved areas.

NYSNA believes that CRNAs should be allowed to independently practice to the full extent of their training and the scope of practice provided for in this legislation. After enactment of this law and the establishment of the new CRNA professional title, we would urge the legislature to consider further legislation to expand the right CRNAs to practice independently and to the full scope of their license.

NYSNA strongly supports enactment of this legislation.



MEMORANDUM OF SUPPORT: S.769/A.6958

March 31, 2023

BILL NUMBER: S.769 (Cooney)/A.6958 (Reyes)

TITLE OF BILL: An act to amend the education law, in relation to creating the profession of nurse anesthetist.

PURPOSE OF BILL: This bill creates a scope of practice for certified registered nurse anesthetists.

STATEMENT OF SUPPORT: The provision of quality, accessible health care services to New Yorkers is an ongoing goal of AARP New York. We believe that nurses should achieve higher levels of education and training and should practice to the full extent of their education and training. Such policies put patients first by allowing New Yorkers to get the care they need whenever and wherever they need it.

CRNAs are master's-educated nurses who are required to undergo a vigorous licensure process in order to obtain certification. Studies in anesthesiology safety have demonstrated that there is no difference in the quality of care provided by CRNAs and their physician counterparts.¹ By providing high-quality anesthesia care with reduced expense to patients and insurance companies, CRNAs help to control escalating healthcare costs.

However, without title recognition, there is no guarantee that those individuals representing themselves as CRNAs have, in fact, fulfilled the necessary licensure requirements. This compromises patient safety, especially in rural and underserved communities, where CRNAs are often the sole anesthesia providers.

Title recognition will ensure that only nurses who have been properly educated will provide specialized care and will prohibit health care facilities from improperly using unqualified individuals as CRNAs.

Without title recognition, CRNAs are unable to apply for direct reimbursement for services to patients provided through state sponsored Medicaid programs. This roadblock not only increases costs but limits the state's ability to provide care to millions of uninsured low-income residents.

Title recognition for CRNAs is not only essential for the public's protection, but also an important step towards safer and cost-effective health care that puts New York's patients first.

For the above reasons, AARP supports this legislation.

Please contact Bill Ferris or David McNally at (518) 434-4194 with any questions.

¹ <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2008.0966>

Given the importance of this issue and as part of our ongoing effort to let our members know of action taken on key issues, we will be informing them how their legislators vote on this legislation.



Position Statement

S-769 (Senator Cooney)/A-6958 (Reyes)

The New York Organization for Nursing Leadership (NYONL) SUPPORTS title recognition for Certified Registered Nurse Anesthetists (CRNA).

RATIONALE: As written the bills:

- Ensure that only licensed and certified individuals/nurses will engage in this specialized scope of practice.
- Establish a unified standard of care.
- Promote improved access to high quality care in all areas of New York State.
- Provide for cost effective health care while preventing inappropriate substitution in the healthcare setting.

CRNAs are nationally certified advanced practice nurses with advanced education at the masters or doctor of nursing practice level, who have completed a rigorous educational program in the specialty, including extensive clinical training and have passed the national examination in the specialty. In order to ensure that only those properly prepared provide this level of specialized care, the title should be formally recognized in New York State. It is imperative that patients in all areas of New York receive the same level of quality service.

There is a history of over 125 years of care being given by those in this first nursing specialty. Given that research has documented that there are substantially comparable outcomes of care provided by CRNAs, that CRNAs are currently the major providers of millions of anesthesia cases performed especially in rural settings in New York and in the military, and that extending full scope of practice privileges to CRNAs will expand access to healthcare services, **NYONL supports a bill reflecting title protection with full scope of practice, without requirements for collaborative practice agreements and collaborating physicians**

Therefore NYONL, which is made up of the Nurse Executives to whom the CRNAs frequently report, applauds the formal recognition of the title protection and supports passage of an amended version of this legislation which will provide for full scope of practice.

CRNAs: Essential Providers of Safe, High-Quality Care in Labor & Delivery

New York's birthing centers and maternity wards are closing at an *alarming* rate



Nearly 30 facilities have closed in 15 years, at a rate of about two per year since 2008



The majority of these wards were located Upstate



A major reason behind many of these closures was lack of access to anesthesia care



81.2% of rural counties in the U.S. have no physician anesthesiologist

CRNAs Deliver High-Quality & Safe Anesthesia Care

There is no difference in maternal outcomes between CRNA-only hospitals versus physician anesthesiologist-only hospitals



New York must pass **S769-A/A6958-A** (S. Cooney, A. Reyes) to help preserve access to maternal care and birthing centers

New York is the **only state** that does not fully recognize CRNAs, and we lose qualified CRNAs as a result

New Yorkers **cannot afford the closure** of any more maternity wards due to lack of access to anesthesia care



[NYSANA.com](https://www.nysana.com)

Sources: Silberstein, "Bill would require more oversight for N.Y. maternity ward closures," Times Union (Oct. 20, 2023); Cohen et al 2021, The Journal of Rural Health; Needleman & Minnick 2009, Health Services Research.

CRNAs: Ensuring Safe Anesthesia Care

WHY SURGEONS AND OTHER HEALTHCARE PROVIDERS RELY ON CRNAs

Certified Registered Nurse Anesthetists (CRNAs) are advanced practice registered nurses who collaborate with surgeons, obstetricians, dentists and other healthcare providers to deliver safe, high-quality and cost-effective anesthesia care to patients in virtually every healthcare setting.

Access to Care



CRNAs practice in **all 50 states** and in the military, safely providing more than 50 million anesthetics each year.

Patient Safety



National studies confirm that CRNAs are integral to high-value anesthesia care delivery where quality and safety are emphasized.*



Anesthesia care is **nearly 50x safer** than it was in the 1980s.**

This is due to **advancements in monitoring** technology, anesthetic drugs, provider education, and standards of care.

Risk Management



CRNAs are **educated, trained and experienced** in providing anesthesia care for complicated medical procedures and handling emergency situations.



As licensed professionals, CRNAs are responsible and accountable for decisions made and actions taken in their professional practice.



Case law shows that surgeons and other healthcare providers face no increase in liability when working with a CRNA versus a physician anesthesiologist.

For a surgeon (or other healthcare provider) to be liable for the acts of an anesthesia professional, the surgeon must control the actions of the CRNA or anesthesiologist and not merely supervise or direct them.



Courts apply the same standard to judge whether a surgeon is liable for the acts of a CRNA or an anesthesiologist.

On a nationwide basis, the average 2020 malpractice liability insurance premium for self-employed CRNAs was **36 percent less than it was in 1988**. When trended for inflation through 2020, **the reduction in premium is 71 percent**.



Cost Savings

Healthcare facilities that hire anesthesiologists to supervise CRNAs in an effort to manage risk may more than triple the costs of anesthesia delivery without improving patient outcomes, lowering risk or reducing liability coverage costs.



*RTI

**Institute of Medicine

American Association of Nurse Anesthesiology© 2021

ANESTHESIAFACTS.com



NYSANA.com/info



AANA.com