



## THE REPORT OF THE DIRECTOR OF THE DIVISION OF PUBLIC HEALTH ON THE PROPOSAL TO LICENSE ANESTHESIOLOGIST ASSISTANTS

**Date:** March 31, 2023

**To:** The Speaker of the Nebraska Legislature  
The Chairperson of the Executive Board of the Legislature  
The Chairperson and Members of the Legislative Health and Human Services Committee

**From:** Tim Tesmer, MD  
Chief Medical Officer  
Director, Division of Public Health  
Department of Health and Human Services

### Introduction

The Regulation of Health Professions Act (as defined in Neb. Rev. Stat., Section 71-6201, et. seq.) is commonly referred to as the Credentialing Review Program. The Department of Health and Human Services Division of Public Health administers this Act. As Chief Medical Officer I am presenting this report under the authority of this Act.

### Summary of the Anesthesiologist Assistants Proposal

Anesthesiologist Assistants are seeking to become licensed practitioners in Nebraska working under the supervision of Anesthesiologists.

The full text of their proposal can be found under the appropriate review subject area of the credentialing review program link at <https://dhhs.ne.gov/Licensure/Pages/Credentialing-Review.aspx>

### Summary of Technical Committee and Board of Health Recommendations

The technical review committee members recommended against the proposal. The Board of Health also recommended against the proposal. I concur with these recommendations. My comments regarding my reasons for supporting the proposal follow, below.

## **The Director's Recommendations on the Proposal**

### **Discussion on the four statutory criteria of the Credentialing Review Program as they relate to the Anesthesiologist Assistants**

Criterion one: Unregulated practice can clearly harm or endanger the health, safety, or welfare of the public.

It is true that there is a shortage of licensed providers in area of anesthesia care. However, the question is would this proposal make this situation better or worse for patients here in Nebraska? This question is one that I will attempt to address throughout the rest of this report.

Criterion two: Regulation of the profession does not impose significant new economic hardship on the public, significantly diminish the supply of qualified practitioners, or otherwise create barriers to service that are not consistent with the public welfare and interest.

Information available from some states which have licensed CAAs has raised concerns about potential negative impacts of licensing CAAs on CRNA education and training as well as on the employment of CRNAs, particularly in large urban health centers, for example. In some states CAA licensure has resulted in a reduction in access to education and training for CRNAs resulting in an exodus of CRNAs which in turn threatens to damage access to this type of care especially in rural areas wherein CRNAs are often the sole providers of such care. This in turn highlights another concern about this proposal which is that because CAAs are not able to practice independently—but only under the supervision of an anesthesiologist—they are unlikely ever to be employed in rural areas because rural facilities could not afford to hire both a CAA and a supervising Anesthesiologist at the same time. Additionally, the ability of CAAs to competently handle emergent situations wherein their supervisory might be unavailable is questionable, adding more weight to the argument that employing CAAs could create more potential for harm than good.

Criterion three: The public needs assurance from the state of initial and continuing professional ability.

It is unclear whether licensing CAAs would provide any improvement in access to high quality, cost-effective anesthesia care even in urban areas of Nebraska given the relatively small numbers of CAAs likely to be available after initial licensure. This, in addition to the concerns raised in the discussion above, reinforces the idea that there would be few if any benefits to licensing CAAs in our state.

Criterion four: The public cannot be protected by a more effective alternative.

I see nothing in this proposal that would indicate that it would, if passed, have a positive impact on access to high quality anesthesia care in our state.

### **Final Thoughts**

In making decisions on scope of practice issues, the underlying principle of how the proposal would affect the health of Nebraska citizens statewide is paramount.

The current Anesthesiologist Assistants proposal neither satisfies nor upholds this principle.

Timothy A. Tesmer, MD