

Testimony on House Bill 191
Expanded Scope of Practice for Certified Registered Nurse Anesthetists
The Ohio Foot & Ankle Medical Association
The House Health Committee
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Chairman Huffman, Ranking Member Antonio and the members of the House Health Committee, on behalf of Ohio's podiatric physicians and surgeons that make up the Ohio Foot & Ankle Medical Association (OHFAMA), I would like to offer our association's continued opposition to House Bill 191. This legislation would provide a vastly expanded scope of practice to Certified Registered Nurse Anesthetists in Ohio. I have reviewed the "Dash 5" version of this proposed legislation and would like to briefly offer OHFAMA's continued concerns with certain provisions of this legislation.

Let me point out that our podiatric physicians and surgeons value the role CNRA's currently play in the "team approach" to treating patients in the current health care environment. However, OHFAMA joins the rest of the physician community in trying to identify the current problem that exists for **patients** in the current health care system that would cause the need for this bill. The following is a brief list of concerns with the "Dash 5" version of HB 191:

- HB 191 would seem to grant CRNA's undefined authority to order such things as treatments, tests and drugs for patients but to our understanding, specifics in each of these areas are not defined in the bill. This could easily lead to duplicative orders and unnecessary testing in today's overly-strained health care system. In addition, HB 191 would grant CRNA's ordering authority for pain medications, including controlled substances. Ohio has done much work over the last few years to closely monitor and evaluate the prescribing of these medications. OHFAMA sees no reason why our state should reverse this trend through this legislation;
- The latest version of HB 191 would seem to leave the definition of the term "perianesthesia period" rather open-ended and quite frankly, undefined. This is very troubling as we would have no idea when this period begins nor ends. There seems to be no current definition of this term in Ohio law and depending on each facility's interpretation, the ordering authority of a CRNA would simply be undefined;
- OHFAMA strongly believes the verbal ordering section of the bill needs much more refinement. As we read the "Dash 5" of the bill, our association continues to have great concern that the CRNA would not have to be with the patient when ordering drugs, test, treatments or fluids. This ordering authority continues to be very broad and misdirected away from direct physician involvement in the patient care process; a provision we strongly believe does not enhance patient care; and

- There appears to be a “disconnect” on the use of the term “supervision” in the bill, making it rather undefined in certain sections of the Ohio Revised Code. The latest version of HB 191 appears to maintain current Ohio law by requiring the CRNA to be in the immediate presence of a physician, dentist or podiatric physician or surgeon when administering anesthesia and other related functions to the patient. However, HB 191 later seems to reverse current Ohio law in the ordering authority area by simply using the term “supervision” regarding the physician, dentist or podiatric physician. As you can imagine, many of my members have already begun to pose numerous questions on what exactly this means regarding their direct involvement regarding “supervision” in this expanded scope area.

On behalf of our podiatric physicians and surgeons, OHFAMA would like to thank the members of the House Health Committee for consideration of our continued concerns with HB 191. In the opinion of our members, there are still many questions to be resolved over the complexities of this legislation and we hope the General Assembly will take the time to properly debate all of the issues contained in this bill. As always, please feel free to contact me if you should have any further questions.