



June 10th, 2025
Ohio House Health Committee

Dear Chair Schmidt, Vice-Chair Deeter and all distinguished members of the House Health Committee:

I appreciate the opportunity to comment on consultation practice for certified registered nurse anesthetist in HB 52. My name is Alicia Plemmons, PhD, and I am an assistant professor and director of the Knee Regulatory Research Center at West Virginia University. This comment is not submitted on behalf of any party or interest group.

My research, and the research of my colleagues, studies patient outcomes in terms of safety, quality, cost, and access under different scope of practice expansions. Over the past year, there has been tremendous leaps in what we know about CRNA effectiveness. Research has found data-driven insight into the effectiveness of similar policies in other states:

1. Greater job autonomy through collaboration or consultation arrangements, not direct supervision models, is associated with better retention of obstetric anesthesia services for rural communities.¹
2. There is a shortage between 2.6 and 12 percent for anesthesiologists compared to surgical procedure demand, which is expected to increase 2-3 percent per year. At the same time, the Health Resource and Services Administration expect a 14 percent increase in CRNAs by 2037. Collaborative and consultation practice allows for additional providers to be available for the increased demand for surgical support as the U.S. population ages.²
3. Expanded CRNA autonomy from supervision to consultation or collaboration models has been adopted by 25 states since 2001 through partially or fully opting out of a federal physician supervision requirement. All these states still maintain their partial or full opt-out of the federal Medicare requirement.
4. CRNA provides similar levels of care, yet bill at only 80 percent of the anesthesia fee schedule. As anesthesia care is one of the most expensive components of medical and dental surgical practices, this may result in more cost-effective services for low-income populations.

22 percent of Ohio residents live in a rural area with reduced access to necessary medical and dental that is partially driven by a lack of providers able to administer anesthetics. The data suggests the proposed consultation framework for certified registered nurse anesthetists represents an improvement for access to healthcare for the Buckeye state.

Best regards,

¹ <https://doi.org/10.1111/jrh.70021>

² <https://data.hrsa.gov/topics/health-workforce/workforce-projections>

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