

Sub. HB 224 – PROPONENT TESTIMONY
Ohio Senate Health, Human Services and Medicaid Committee
Sonya Moore CRNA, DNP

Good afternoon Chairman Burke, Vice Chair Huffman, Ranking Member Antonio, and members of the Senate Health, Human Services and Medicaid Committee. My name is Sonya Moore. I am a Certified Registered Nurse Anesthetist, or CRNA, and I am also the director of one of the seven nurse anesthesia educational programs in Ohio. As a program director, I coordinate a complete program of study for critical care registered nurses to become CRNAs. I would like to provide some information about the educational preparation of CRNAs. CRNAs are Advanced Practice Registered Nurses. In order to become a CRNA, an individual must meet, at a minimum, these requirements:

- They must be a licensed, baccalaureate prepared, Registered Nurse.
- They must have at least one year of experience working in a critical care environment, managing unstable patients who need continuous life-sustaining treatments, invasive interventions, and constant monitoring. While one year is the minimum level, most applicants have 3 or more years of experience in this type of environment.
- They must complete an accredited graduate program of study in anesthesia that provides a minimum of a Master's degree, and by 2022, must earn a doctoral degree for entry level into practice.
- They must pass a national certification examination within two years of graduation. CRNAs cannot practice unless they are board-certified.

Overall, it takes a minimum of seven years of education and experience to become a Certified Registered Nurse Anesthetist: four years of undergraduate education, at least one year of critical care nursing experience, and two years of graduate coursework in nurse anesthesia.

I would also like to address the content and quality of nurse anesthesia education. I serve as a board member for the American Association of Nurse Anesthetists (AANA). I'm currently the AANA board's liaison to the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA) which is dedicated to promoting patient safety by enhancing provider quality in the field of nurse anesthesia. The NBCRNA develops and implements credentialing programs that support lifelong learning among nurse anesthetists. The NBCRNA ensures the standards for nurse anesthesia education are rigorous, specific, and complete to demonstrate that all graduates meet the same level of competency. In order to become a CRNA, the

educational program must ensure that every single student is competent in all aspects of anesthesia care delivery. This includes:

- Preoperative preparation and evaluation;
- Identification of anesthetic risk, and ways to minimize that risk to the patient;
- Development and initiation of patient-specific plans of care which include selecting, ordering, and administering medications;
- Postoperative care management;
- Management of complications or side effects related to anesthesia, and;
- Clinical support functions: E.g. inserting breathing tubes, inserting/removing arterial catheters, artery punctures to obtain blood samples, and resuscitation care such as CPR.

The educational program teaches students how to provide anesthesia care for patients of all ages, from newborns to the elderly. It teaches them how to provide anesthesia care for patients of all states of health, from healthy to critically ill. It teaches them how to provide anesthesia care for all types of surgical procedures, such as complex neurosurgery, open heart surgery, cesarean section births and other obstetric procedures, and organ transplants. In summary, their training is rigorous, thorough, and comprehensive.

CRNAs also undergo a demanding recertification process. After passing the initial board certification exam, CRNAs must recertify every four years. This requires completion of four core educational modules and one hundred education credits. Additionally, every eight years, the CRNA must pass a board recertification exam. This process ensures that CRNAs stay current with new practice techniques and are able to demonstrate competency in their practice.

While our education and national certification provides an alternative path to becoming an independent anesthetist from our physician colleagues, it is not inferior. This is not another pathway to become a physician; it is simply another pathway to become an anesthesia provider. CRNAs and physicians are held to the same high standards of anesthesia care. Anesthesia is given the same way, regardless of whether it is provided by a CRNA or a physician. In fact, study after study has demonstrated no difference in patient outcomes or quality of care based on whether a physician or nurse provides the anesthesia care.

Sub. HB 224 will not expand the scope of a CRNA; it will simply better match state law to our level of education, clinical training, and national certification. With the rapidly increasing cost of delivering healthcare, it is imperative that we strive to be efficient and

effective wherever we can. This is an excellent opportunity to offer a tremendous value to Ohio's patients. By allowing CRNAs to practice closer to the scope to which they were trained, healthcare facilities will have the flexibility to maximize the use of these highly educated and valued practitioners. This is good for patients, and this is good for the strained healthcare facilities in Ohio.

I ask for your support of Sub. HB 224 and I would be happy to answer any questions you may have. Thank you.