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February 25, 2015

The Honorable Mitch Greenlick Chair, House Committee on Health Care Oregon State Capitol 900 Court Street NE, Room 453, Salem, Oregon 97301

Dear Representative Greenlick,

On behalf of the more than 52,000 members of the American Society of Anesthesiologists (ASA), I am writing in strong support of House Bill 2295 (HB 2295) and request your support in voting this measure out of the Oregon House Committee on Health Care. This bill would authorize licensing and regulation of anesthesiologist assistants. Enactment of this measure would offer Oregon patients the benefits of these health professionals – benefits which patients in 17 jurisdictions, the Medicare Program, and the Veterans Affairs system receive from anesthesiologist assistants today.

Anesthesiologist assistants are highly skilled health professionals who work under the medical direction of physician anesthesiologists to implement anesthesia care plans. Anesthesiologist assistants work exclusively within the Anesthesia Care Team environment as described by the ASA.¹ All anesthesiologist assistants possess a premedical undergraduate background and complete a comprehensive didactic and clinical program at the graduate school master's degree level. Anesthesiologist assistants are trained extensively in the delivery and maintenance of quality anesthesia care as well as advanced patient monitoring techniques.

Anesthesiologist assistants undergo rigorous and advanced graduate education focusing on the Anesthesia Care Team approach to anesthesia practice. The typical anesthesiologist assistant master's program is 24 to 28 months. As a pre-requisite for admissions, applicants must hold a bachelor's degree, complete the same pre-medical course work that physicians complete, and pass the MCAT (Medical College Admission Test) in upper percentiles. Anesthesiologist assistant master's degree programs are accredited by the Commission for the Accreditation of Allied Health Educational Programs (CAAHEP), a national accrediting body certifying 2000 educational programs in 23 different allied health professions. Anesthesiologist assistants must pass a certification examination administered by the NCCAA (National Commission for Certification of Anesthesiologist Assistants) in collaboration with the National Board of Medical Examiners. Finally, they must complete 40 hours of continuing medical education every two years and complete a re-certification exam every six years.

<sup>&</sup>lt;sup>1</sup> ASA Standards, Guidelines and Statements: Statement on the Anesthesia Care Team *available at* <a href="http://www.asahq.org/~/media/Sites/ASAHO/Files/Public/Resources/standards-guidelines/statement-on-the-anesthesia-care-team.pdf">http://www.asahq.org/~/media/Sites/ASAHO/Files/Public/Resources/standards-guidelines/statement-on-the-anesthesia-care-team.pdf</a>

Throughout the decade's physician anesthesiologist and anesthesiologist assistants have worked together, patients have enjoyed increased access to care with a demonstrated and impeccable safety record. More than 80 percent of all anesthetics throughout the United States are delivered in the Anesthesia Care Team model of care. Anesthesia Care Teams consist of a supervising physician anesthesiologist and non-physician anesthesia providers (i.e., anesthesiologist assistants or nurse anesthetists, or anesthesia physician residents/fellows). Members of the Anesthesia Care Team work together to provide the optimal safety and anesthesia experience for all patients. Supervising physician anesthesiologists may not independently perform their own cases while supervising Anesthesia Care Team members and remain immediately available at all times. Anesthesia Care Teams operate in every state of the county and this type of practice is a long established and safe model for providing anesthesia care.

It is the position of ASA that both anesthesiologist assistants and nurse anesthetists have identical patient care responsibilities and technical capabilities – a view in harmony with their equivalent treatment under the Medicare Program. The proven safety of the Anesthesia Care Team approach to anesthesia with either anesthesiologist assistants or nurse anesthetists as the non-physician anesthetists confirms the wisdom of this view.

On behalf of the ASA, I strongly encourage your support in voting this measure out of the Oregon House Committee on Health Care so that more Oregon patients can benefit from the highly trained care that anesthesiologist assistants provide. Thank you for your consideration of this important legislation. Should you have any questions, please feel free to contact Jason Hansen, M.S., J.D., Director of State Affairs, at j.hansen@asahq.org.

Sincerely,

J.P. Abenstein, M.S.E.E., M.D.

John Stewart

President