From:	
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Subject:	Testimony for Oregon HB 4108 (House Health Care Committee (Friday, Feb 5th 1pm)
Date:	Thursday, February 04, 2016 7:19:26 AM

Thank you for allowing me to provide my written testimony on this issue. As a concerned resident of Oregon, I am writing in support of HB 4108. As an anesthesiologist who has administered anesthesia as both as a solo practitioner and in a care team, I know we could advance the quality and effectiveness of service delivery if we added the services of anesthesiologist assistants to the rest of the team. I have included a few bullet points below outlining the key points that support your adoption of this proposed legislation. Please vote for passage of HB 4108.

Please join the American Society of Anesthesiologists (ASA), Oregon Society of Anesthesiologists, Oregon Medical Association, and many other health care professionals from across the state in support of HB 4108 to allow Certified Anesthesiologist Assistants (CAAs) to practice in our great state.

- Anesthesiologist assistants are fully credentialed professionals who have a proven track record of delivering quality health care services for over 40 years. A 2007 study by the Kentucky legislature shows that anesthesiology assistants are just as safe as nurse anesthetists. A study of over 50,000 anesthesia cases by the University Hospital Health System of Ohio found no difference in patient outcomes between nurse anesthetists and anesthesiologist assistants.
- 2. Why should employers be limited to only hiring nurse anesthetists as extenders? Anesthesiologist assistants, who by virtue of their premedical focused curriculum are equally qualified to work in a care team setting, will add another dimension of training, experience and quality to anesthesiology care delivery.
- Recognizing this, CMS (Medicare and Medicaid) reimburse anesthesiologist assistants at the same rate as nurse anesthetists. The reimbursement for anesthesia service is the same regardless of the number and type of Anesthesia Care Team members participating in a patient's care.
- Anesthesiologist assistants are authorized to practice in seventeen (17) jurisdictions. Additionally, anesthesiologist assistants can practice throughout the country by working for the federal

government. The Department of Veterans Affairs and the Department of Defense hire or contract with anesthesiology assistants to practice under TRICARE programs.

- 5. An anesthesiologist assistants' training hours and instruction based at university medical centers spans an average of 600 hours of classroom/laboratory education, 2600 hours of clinical anesthesia education, and more than 600 anesthetics administered. Their certification exam (NCCAA) is administered by the National Board of Medical Examiners, which also certifies physicians.
- 6. Medical malpractice insurance carriers rate anesthesiology assistants and nurse anesthetists at the same risk. MAG Mutual has been insuring anesthesiology assistants for over 20 years, and has concluded "there is no difference in risk when insuring an anesthesiologist assistant versus a nurse anesthetist."
- 7. When a patient is cared for by an anesthesiologist assistant they know that a physician anesthesiologist is always involved in supervising, which is not always the case with nurse anesthetists.
- There are qualified anesthesiologist assistants' from Oregon who want to come home, but cannot because their license is not accepted in their home state. By passing HB 4108, we can bring them back.

Thank you for your consideration and support of a bill that helps address issues of access to high quality, physician led healthcare and jobs in our state. The link to the non-partisan Commission on Accreditation of Allied Health Education Programs (www.caahep.org) provides a detailed description of the training, education and abilities of these important members of the anesthesiology care team outlined above.

Sincerely,

Mark Gilbert, MD

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references:

http://www.lrc.ky.gov/lrcpubs/RR337.pdf. Amburgey, Fordham, Payne, Trebelhorn "A Study of Anesthesiologist Assistants." Research Report No. 337, Kentucky Legislative Research Commission. February 2007. Pages 11-12.