

## PUBLIC TESTIMONY

Name: Andrea Pee

Organization: Texas Association Nurse Anesthetists

Agenda Item # & Subject Matter

X. N. 6. Consideration and possible action to approve the request from The University of Texas Health Science Center at Houston for a Master of Science in Anesthesia degree with a major in Anesthesia

For or Against or Neutral: Against

Oral/Written Testimony: Written

Written Testimony

To whom it may concern,

The Texas Association of Nurse Anesthetists (TxANA) represents the voices of over 5,000 Certified Registered Nurse Anesthetists (CRNAs) across the state. We are writing today to express our concern with a proposed Anesthesiologist Assistant (AA) education program within the UT Health system. The proposed program would unnecessarily duplicate existing programs serving the same regional population, in violation of 19 TAC §5.45.

AAs are unlicensed anesthesia providers who work directly under the supervision of a physician anesthesiologist. AAs must have a master's degree, but otherwise are required to have very little training before beginning to practice. CRNAs, on the other hand, must have a Bachelor of Science in Nursing, one to two years of full-time nursing experience in intensive care, and a master's degree. Because of their advanced training, CRNAs may practice independent of an anesthesiologist.

UT Health-Houston currently has a CRNA program in place. The CRNA program is the highest-ranking program within the UT health system and has consistently maintained a first-time pass rate of 100% on the national certifying exam. Houston also has an additional CRNA program at Baylor College of Medicine. More importantly, there is a far greater demand for CRNAs. A search on the most popular anesthesia job posting board,

gaswork.com, shows a total of 16 open positions for AAs in Texas, compared to 578 open positions for CRNAs.

Nevertheless, if the proposed UT Health AA program is approved by the THECB, clinical sites in Houston will be taken from CRNA students. Given the multiple CRNA programs in Houston, as well as the numerous anesthesiologist residents in the area, this program is unnecessarily duplicative, and would likely harm, existing programs. We hope that this agency will seriously consider whether this proposed program violates state rules.

## PUBLIC TESTIMONY

Name: Angela Mund, DNP, CRNA

Organization: American Association of Nurse Anesthesiology (aana)

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The American Association of Nurse Anesthesiology (AANA), which represents more than 59,000 nurse anesthetists (including Certified Registered Nurse Anesthetists (CRNAs) and student nurse anesthetists) nationwide, submits their comments in opposition to the proposed Anesthesiologist Assistant Program at UT-Health Houston. AANA supports the opposition statement that the Texas Association of Nurse Anesthetists (TxANA) has provided you on this same issue.

Anesthesiologist Assistants are not the solution to the Texas anesthesia provider workforce shortage, but independent providers such as CRNAs can be.

Adding another anesthesiologist assistant (AA) program in Texas would not be a sufficient solution to the anesthesia provider workforce shortage in Texas. AAs are educated and trained to be dependent anesthesia providers whose work depends entirely on the availability of physician anesthesiologists. AAs can only work in the same physical locations as physician anesthesiologists, which are usually in urban areas.

AA training and education are not equivalent to that of a CRNA. Compared to CRNAs, AAs are not required to have any healthcare background prior to starting their AA program. AA programs are approximately 24-27

months total, which is much shorter than the length of CRNA programs. Moreover, there is a program at Texas Christian University that allows AAs to transition into CRNAs during an additional 29-36 months of education. The intent of this program is to provide an AA with the training and education needed for them to become a CRNA who can practice as an independent anesthesia provider.

Another anesthesiologist assistant program would hinder educational opportunities for independent anesthesia providers such as CRNAs.

If the Texas Higher Education Coordinating Board were to approve the proposed AA program at UT-Health Houston, it would be at the cost of CRNA educational opportunities. For clinical experience, a student registered nurse anesthetist cannot be trained in a room that is staffed by an AA under the Council on Accreditation of Nurse Anesthesia Programs' standards. The reason for this is because CRNAs can only be trained by a provider who can practice as an autonomous anesthesia provider, and AAs cannot practice without anesthesiologist supervision. Physician anesthesiologists control access to the clinical experiences needed by our students in many urban hospitals, and they can block nurse anesthesia training programs from obtaining necessary clinical experiences, thereby reducing the number of CRNAs trained in the state. This situation would be further exacerbated by having AAs in rooms, thereby lowering the number of CRNAs who can be educated to be independent anesthesia providers in the state.

For the above-mentioned reasons and those referenced in the Texas Association of Nurse Anesthetist's letter, we respectfully request that you reject the proposal for an anesthesiologist assistant program at UT Health-Houston.