Support:
A4985A (Bichotte Hermelyn)
S5867A (Gournardes)

This bill aligns statute with existing regulations to protect New York's physician-supervised, team-based anesthesia care model, while establishing Certified Registered Nurse Anesthetist (CRNA) title and scope, consistent with training and existing standards.

Ensures Equal Access to Safe Anesthesia Care

Patient safety in anesthesia depends on systems that **ensure continuous monitoring, clear communication, and immediate physician response** when a patient's condition changes, because outcomes are often determined in those critical moments.

This bill preserves safety standards that ensure all New York patients have access to physician-led anesthesia care, with a **physician anesthesiologist physically present and immediately available** to diagnose, intervene, and redirect care as needed in real time.

Despite advances in medicine, every procedure and surgery carries risks. Given the risks associated with the delivery of anesthesia, immediate medical intervention is required when life-threatening emergencies arise. **Physician anesthesiologists have led the way in advancing anesthesia safety** through data-driven quality improvement, standarized processes, and ongoing innovation in monitoring and clinical systems.

Aligns Statute with State Regulations that Require Physician-Led Anesthesia Care

- Since 1989, New York State patients, regardless of a patient's payor status, geographic location, or care setting, have had **equal access to an anesthesia care model that supports rapid escalation and ensures physician-level decision-making when needed.**
- Under current state regulations, all patients are guaranteed that either a **physician anesthesiologist will administer anesthesia**, a **physician anesthesiologist will supervise a nurse anesthetist** in the administration of anesthesia, or the **operative physician will accept responsibility** for the supervision of the nurse anesthetist.
- By aligning statutory language with existing regulatory standards and credentialing processes, this bill **promotes consistency across care settings** and helps ensure that expectations for supervision and physician response are applied uniformly in practice.

Promotes a Coordinated, Team-Based Approach to Anesthesia Care

- New York State's anesthesia care framework reflects a **team-based model** in which physician anesthesiologists, nurse anesthetists, and surgical teams **operate within defined roles**, supported by advances in monitoring, standardized care processes, and ongoing clinical innovation.
- This bill codifies those expectations in statute and applies them directly to the definition of nurse anesthetist title and scope. It **reinforces team-based approach to anesthesia care with clearly defined roles and responsibilities for patient management.** For patient safety, physician responsibility must be maintained when anesthesia is administered by a non-physician anesthestist.
- Without incorporating these standards into statute, anesthesia care may vary based on facility-level decisions rather than uniform safety protocols, creating risk that patients may not have immediate access to advanced medical intervention when complications arise.

Clarifies Nurse Anesthetists' Role on the Patient Care Team

- This bill **grants title and defines the scope of practice for nurse anesthetists,** which includes preoperative assessment and evaluation, administration of anesthesia, intraoperative monitoring and management, and post-operative care across a range of settings, including hospitals, ambulatory surgical centers, and authorized office-based procedures. It recognizes that the administration of anesthesia includes the practice of medicient and **clearly defines supervision standards.**
- **CRNA practice is limited to the extent authorized through credentialing processes** approved by the governing body and medical staff of a health care facility, office-based surgery, or freestanding ambulatory surgical center. Each phase of anesthesia care is defined and aligned with a nurse anesthetist's training.
- This bill further **clarifies that nurse anesthetists may not use any title or representation that would reasonably lead a patient to believe that they are licensed to practice medicine**, supporting transparency and helping patients understand who is providing their care.

Vote YES on A4985A (Bichotte Hermelyn) / S5867A (Gounardes)

To find out more about protecting patient safety and anesthesia care, visit: www.safeanesthesia.com

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