Oppose:
A5375-A (Weprin) / S7918-A (Skoufis)

This bill would **allow insurers to impose arbitrary time limits on anesthesia care** for surgeries and procedures, similar to those proposed by Anthem BCBS in 2024. Insurers want to limit payment amounts for anesthesia services, change the reimbursement formula, and impact medical decisions about anesthesia care. These actions **jeopardize patient safety in the pursuit of insurance company profits**.

Undermines Bill's Original Intent

- Anesthesia is a discipline within the practice of medicine that **involves the safeguarding and medical management of patients** who are rendered unconscious and/or insensible to pain and emotional distress during surgical, obstetrical and other medical procedures.
- NYSSA supported the provisions of the original bill, however, **the amendments** which added the "notwithstanding provisions" **would allow time limits on anesthesia care** imposed by Anthem BCBS in 2024, thereby **negating the intent of the original bill.**
- Giving an insurer or an independent organization the right to determine medical necessity for anesthesia services is unjustified and **jeopardizes patient safety**.
- The bill's **amendments also inaccurately reference Medicare,** which does not establish a time limit for anesthesia. The Centers for Medicare and Medicaid Services (CMS) recognizes that the time of anesthesia care is a direct result of the length of surgery.

Ignores High Complexity of Anesthesia Care

- The **length of time** a patient needs anesthesia care **varies greatly depending on the specific procedure** being performed; complex surgeries often require longer anesthesia times.
- Individual patient needs and health conditions can affect how long anesthesia is needed.
- Individuals with pre-existing medical conditions **may require longer anesthesia or different types of anesthesia.**
- **Anesthesia care must be maintained for as long as is necessary to ensure the patient's safety** and well-being throughout the procedure.

Negatively Impacts Hospitals

- This bill will have **negative financial consequences** on the already financially distressed hospitals in urban and rural areas of the state.
- In this year's New York State Budget, the state provided funding to assist these hospitals, however the **language in this bill would allow insurers to limit payments for anesthesia care** and impose significant new financial burdens on these hospitals. These hospitals must remain able to serve vulnerable populations across the state.

Disregards Federal Anesthesia Reimbursement Parameters

- Anesthesia reimbursement is based on a formula that considers base units plus time units, and modifier units, which are totaled and multiplied by a conversion factor.
- The conversion factor for Medicare or Medicaid patient beneficiaries is determined annually by CMS and is adjusted for various factors, including geographic location and procedure complexity.
- The conversion factor for private commercial insurance beneficiaries is determined by executed contracts following fair market negotiations between payer and practice/provider. **This system of units for anesthesia services recognizes that the length of the surgery is dependent on the individual patient and the surgeon.**

Factors that Influence Duration & Type of Anesthesia:

- Patient-specific needs and overall health
- Safety and well-being considerations throughout the procedure
- Potential complications that arise
- Complexity and specific type of procedure
- Pre-existing medical conditions

Vote NO on A5375-A (Weprin) / S7918-A (Skoufis) as insurance profit considerations should not dictate the health and safety of our patients.

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

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