

Legislative Analysis



CERTIFIED NURSE ANESTHETISTS SCOPE OF PRACTICE

Phone: (517) 373-8080
<http://www.house.mi.gov/hfa>

House Bill 4359 as reported from committee
Sponsor: Rep. Mary Whiteford
Committee: Health Policy
Complete to 3-22-21

Analysis available at
<http://www.legislature.mi.gov>

SUMMARY:

House Bill 4359 would amend the Public Health Code to prescribe the scope of practice for a registered professional nurse who holds a specialty certification as a nurse anesthetist, or a certified nurse anesthetist (CRNA).

Scope of practice

Under the bill, in addition to duties within the scope of practice of nursing, a CRNA's scope of practice would include any of the following anesthesia and analgesia services:

- Development of a plan of care.
- Performance of all patient assessments, procedures, and monitoring to implement the plan of care or to address patient emergencies that arise.
- Selection, ordering, or prescribing and the administration of anesthesia and analgesic agents, including prescription drugs or controlled substances. These services could be provided only in certain situations described below. This authority would not extend to situations that would allow the patient to self-administer, obtain, or receive those drugs or controlled substances outside of the facility or outside of the specified time period.

Allowed anesthesia and analgesia services

A CRNA could provide the anesthesia and analgesia services in a hospital inpatient or outpatient facility, a freestanding surgical outpatient facility, an office of a physician, podiatrist, or dentist, or any other office or facility in which diagnostic or therapeutic procedures are provided to a patient, including imaging, endoscopy, or cystoscopy services. The services could be conducted during the preoperative, periobstetrical, or periprocedural period.

If the CRNA were part of a *patient-centered care team*, the CRNA could provide the anesthesia or analgesia services without supervision and as the sole and independent anesthesia provider.

Patient-centered care team would mean a group of health care professionals, which could include a physician, podiatrist, or dentist, who directly or indirectly care for a patient by each contributing his or her specialized knowledge, skill, and experience to the care of the patient.

CRNA a "prescriber"

The bill would amend section 17708 of the Public Health Code to add a CRNA to the list of prescribers, to the extent described above.

The bill states that it does not require new or additional third-party reimbursement or mandated worker's competition benefits for anesthesia and analgesia services provided by a certified nurse anesthetist.

The bill would take effect 90 days after its enactment.

MCL 333.17210 and 333.17708

FISCAL IMPACT:

House Bill 4359 would not have an appreciable fiscal impact on any unit of state or local government.

POSITIONS:

Representatives of the following entities testified in support of the bill:

- Michigan Association of Nurse Anesthetists (3-3-21)
- McKenzie Health System (3-3-21)
- War Memorial Hospital (3-3-21)
- Economic Alliance for Michigan (3-4-21)

The following entities indicated support for the bill:

- Mackinac Center for Public Policy (3-3-21)
- Michigan Health & Hospital Association (3-3-21)
- Michigan Association of Health Plans (3-3-21)
- Michigan Nurses Association (3-4-21)
- Sparrow Health System (3-4-21)
- Michigan Council of Nurse Practitioners (3-4-21)

The Michigan Manufacturers Association indicated a neutral position on the bill. (3-9-21)

Representatives of the following entities testified in opposition to the bill:

- Michigan State Medical Society (3-3-21)
- Michigan Society of Anesthesiologists (3-4-21)
- Michigan Association for Justice (3-3-21)

The following entities indicated opposition to the bill:

- Michigan Academy of Family Physicians (3-3-21)
- Michigan College of Emergency Physicians (3-3-21)
- Kalamazoo Anesthesiology (3-3-21)
- Michigan Osteopathic Association (3-3-21)
- Michigan Radiological Society (3-4-21)
- Northland Anesthesia Associates (3-3-21)

Legislative Analyst: Jenny McInerney
Fiscal Analyst: Marcus Coffin

■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.