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House Bill 4359 (as passed by the House)
Sponsor: Representative Mary Whiteford
House Committee: Health Policy
Senate Committee: Health Policy and Human Services

Date Completed: 5-20-21

CONTENT

The bill would amend the Public Health Code to do the following:

- Include in the definition of "prescriber" a registered professional nurse who held a specialty certification as a nurse anesthetist when he or she was engaging in the practice of nursing and providing certain anesthesia and analgesia services.**
- Prescribe the scope of practice for a registered professional nurse who held a specialty certification as a nurse anesthetist.**
- Allow a health care facility to adopt policies relating to the provision of anesthesia and analgesia services.**
- Specify that the bill would not require new or additional third-party reimbursement or mandated worker's compensation benefits for anesthesia and analgesia services provided under the bill by a registered professional nurse who held a specialty certification as a nurse anesthetist.**

The bill would take effect 90 days after its enactment.

Definition of Prescriber

The bill would include in the definition of "prescriber" a registered professional nurse who held a specialty certification as a nurse anesthetist when he or she is engaging in the practice of nursing and providing the anesthesia and analgesia services described below. For purposes of this provision, the authority of a registered professional nurse who held a specialty certification as a nurse anesthetist to prescribe pharmacological agents would be limited to pharmacological agents for administration to patients as described below.

The above provision would not require new or additional third-party reimbursement or mandated worker's compensation benefits for anesthesia and analgesia services provided under the bill by a registered professional nurse who held a specialty certification as a nurse anesthetist.

Scope of Practice

The Code allows the Michigan Board of Nursing to grant a specialty certification to a registered professional nurse who has advanced training beyond that required for initial licensure, who has demonstrated competency through examination or other evaluative processes, and who practices in one of certain health profession specialty fields, including nurse anesthetist.

Under the bill, all of the following would apply to a registered professional nurse who held a specialty certification as a nurse anesthetist:

- In addition to performing duties within the scope of the practice of nursing, his or her 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 during implementation of the plan of care; and selection, ordering, or prescribing and the administration of anesthesia and analgesic agents, including pharmacological agents that are prescription drugs as defined in Section 17708 or controlled substances.
- He or she could provide the anesthesia and analgesia services described above without supervision and as the sole and independent anesthesia provider while he or she was collaboratively participating in a patient-centered care team.
- He or she could provide the anesthesia and analgesia services described above 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 anesthesia and analgesia services described in the bill could be performed for and during the perioperative, periobstetrical, or periprocedural period.

For the purposes described above, the authority of a registered professional nurse who held a specialty certification as a nurse anesthetist to prescribe pharmacological agents would be limited to pharmacological agents for administration to patients as described above, and his or her authority would not include any activity that would permit a patient to self-administer, obtain, or receive pharmacological agents, including prescription drugs or controlled substances, outside of the facility in which the anesthetic or analgesic service was performed or beyond the perioperative, periobstetrical, or periprocedural period.

"Patient-centered care team" would mean a group of health care professionals, which may 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. "Health care professional" would mean an individual who is licensed or registered to perform a health profession under this article.

A health care facility could adopt policies relating to the provision of anesthesia and analgesia services. As used in this provision, "health care facility" would mean a hospital inpatient or outpatient facility, a freestanding surgical outpatient facility, or an office of a physician, podiatrist, or dentist.

The bill would not require new or additional third-party reimbursement or mandated worker's compensation benefits for anesthesia and analgesia services provided by a registered professional nurse who held a specialty certification as a nurse anesthetist under Part 172 (Nursing).

MCL 333.17210 & 333.17708

Legislative Analyst: Stephen Jackson

FISCAL IMPACT

The bill would have no fiscal impact on State or local government.

Fiscal Analyst: Elizabeth Raczkowski

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.