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## CRNAs: Wisconsin's Anesthesia Experts

### VITAL STATS

Certified Registered Nurse Anesthetists (CRNAs) are critical to Wisconsin's healthcare system. As anesthesia experts, these advanced practice registered nurses provide **every** type of anesthesia, to patients in **every** age group, for **every** kind of procedure, and in **every** type of healthcare setting where anesthesia is required. CRNAs ensure patient access to anesthesia care that is both safe and cost-efficient.

#### Access to Care

- Wisconsin's 1,000+ CRNAs deliver more than **850,000 anesthetics** to patients each year.
- Across the state, CRNAs practice independently in more than 60 hospitals plus numerous surgery centers, physician offices, and other facilities that rely on anesthesia for the services they offer.
- As the primary anesthesia professionals in Wisconsin's rural and critical access hospitals, CRNAs enable these facilities to provide surgical, obstetrical, emergency, and chronic pain management services to patients who otherwise would have to travel long distances for needed healthcare.
- So **well respected** are the capabilities of CRNAs that Wisconsin state law does not require them to be supervised by physicians. Further, Wisconsin is one of 19 states that have opted out of the federal Medicare physician supervision requirement for CRNAs (2005).
- The COVID-19 pandemic has also magnified the value of CRNAs. In March 2020, during one of the worst healthcare crises in U.S. history, an executive order by Wisconsin Gov. Tony Evers temporarily waived the requirement for CRNAs to collaborate with physicians, enabling overwhelmed hospitals and other facilities to maximize the capabilities of their CRNA workforce. CRNAs have been **proving themselves on the pandemic's front lines** since day one—managing airways, operating ventilators, and caring for critically ill patients. The executive order remains in place more than a year later, and there's a growing sentiment for permanently doing away with the collaboration requirement.

#### Quality & Safety

- The groundbreaking study by RTI International titled, "No Harm Found When Nurse Anesthetists Work Without Supervision by Physicians" (*Health Affairs*, August 2010), confirmed that anesthesia care is **equally safe** regardless of whether it is provided by a CRNA working alone, an anesthesiologist working alone, or a CRNA working with an anesthesiologist. Other studies in the years since have confirmed this conclusion.
- CRNAs collaborate with all members of the patient care team (which may include surgeons or other proceduralists, nurses, technicians, and anesthesiologists) to ensure their patient's safety and comfort.



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- A hallmark of the care provided by CRNAs is staying with their patients throughout their procedure—***every heartbeat, every breath, every second.***

## Cost-Efficient

- Healthcare systems across the country, including Wisconsin, are stretched to the max financially. As a result, the high-quality yet cost-efficient services CRNAs deliver are in greater demand than ever.
- The Lewin Group’s landmark study “Cost Effectiveness Analysis of Anesthesia Providers” (*Nursing Economic\$,* May-June 2010) confirmed that a CRNA working alone is ***by far*** the most cost-efficient anesthesia delivery model.
- ***When an anesthesiologist supervises CRNAs, it significantly increases the cost of care (Lewin) but not the quality or safety (RTI).***
- Under Medicare Part B, anesthesiologists who seek payment for medically directing CRNAs must strictly adhere to the rules outlined in the Tax Equity and Fiscal Responsibility Act (TEFRA) or risk committing fraudulent billing practices, putting themselves at jeopardy along with any other entity billing for their service, such as the facility. This is not uncommon. A 2012 study in the journal *Anesthesiology* titled “Influence of supervision ratios by anesthesiologists on first-case starts and critical portions of anesthetics” determined that even with a ratio of one anesthesiologist to just two CRNAs, there were lapses in supervision 37 percent of the time.

## Education

- Student registered nurse anesthetists complete up to 8 ½ years of education and training focused on nursing and anesthesiology, leading to a master’s or doctoral degree. By 2025, all new CRNAs will earn a doctorate.
- With 2.9 years of critical care nursing experience on average, CRNAs are the ***only*** anesthesia professionals with this level of experience prior to beginning their formal anesthesia education.
- Wisconsin’s three nurse anesthesia educational programs (UW-La Crosse, UW-Oshkosh, and Marquette) help prepare the ***anesthesia workforce of the future.***
- Program graduates must pass a national certification exam to become a CRNA.
- To maintain their continued professional certification, CRNAs complete a minimum of 200 hours of continuing education and meet other requirements every 8 years.

## History of Excellence

- CRNAs are not the “latest greatest thing.” Nurses first gave anesthesia on the battlefields of the American Civil War and later became the ***first recognized anesthesia professionals.***
- In the Army, Navy, Air Force and Marines, CRNAs are the predominant providers of anesthesia care to soldiers on the front lines of every U.S. Military action around the globe.

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