



Board of Health Professions Regulatory Research Committee Meeting

August 10, 2017 10:00 a.m. - Board Room 3 9960 Mayland Dr, Henrico, VA 23233

In Attendance Barbara Allison-Bryan, MD, Board of Medicine

Yvonne Haynes, LCSW, Board of Social Work

Jacquelyn M. Tyler, RN, Citizen Member

James Wells, RPH, Citizen Member

Absent Martha S. Perry, MS, Citizen Member

DHP Staff Elizabeth A. Carter, Ph.D., Executive Director BHP

Laura L. Jackson, Operations Manager BHP

Lisa Hahn, Chief Deputy, DHP

David Brown, DC, Director DHP

Observers Jan Setnor, VANA-CRNA

Louise Hershkowitz

Adrienne Hartgerink, VANA-CRNA

Cathy Farreinier, VANA-CRNA

Janille R. Carrisomy, VANA-CRNA

Tressie Turner, VANA-SRNA

Amanda Acuff, VANA-SRNA

Tim Honeycutt, VANA-SRNA

Stephen Sizle, VANA-SRNA

Michelle Jump, VANA-SRNA

Rachel Gilman, VANA-SRNA

Joel Tobin Gill, VANA-SRNA

Kyu Kim, VANA-SRNA

April Ritter, VANA-SRNA

Melissa Mitchell, VANA-SRNA

Melanie Tuckes, VANA-SRNA

Daniel Jearg, VANA-SRNA





Observers continued Emilyn Blakey, VANA-SRNA

Kajer Katt, VANA-SRNA

Nadia Sefton, VANA-SRNA

W. Scott Johnson, Medical Society of Virginia

Katie Payne, VANA-MWC

R. Brent Rawlings, VHHA

Speakers Katie Payne, Virginia Society of Anesthesiologists (VSA)

Michele Satterlund, VANA

Emergency Egress Dr. Carter

Call to Order

Chair Mr. Wells Time 10:00 a.m.

Quorum Quorum established

Approval of Previous Meeting Minutes

Discussion

Mr. Wells allowed public comment on the June 27, 2017 minutes. Ms. Satterlund representing the VANA, stated that the minutes did not reflect the complete intent and content of her comments and those of Dr. DeForest.

Mr. Wells called for amendment's and corrections to same minutes. Dr. Allison-Bryan proposed the following:

Page 4, Speaker #8, Mr. DeForest should be changed as follows: Dr. DeForest with VANA relayed that the organization is per se not opposed to certified anesthesiology assistants, however licensure of CAAs might negatively impact CRNAs training and the availability of training positions for CNRAs and anesthesia residents.

Page 4, Speaker #10, Dr. Fallacaro of VCU opined that adding the CAA profession would create issues with already finite resources for training. However, Virginia Commonwealth University (VCU) as an institution takes no position on the Board's review of the feasibility of licensing certified anesthesiologist assistants (CAAs).

Page 4, Speaker #12, Ms. Satterlund also is with VANA and stated that VANA is not opposed to CAAs but asks BHP to consider the full impact of licensure and how it could negatively impact CRNAs.

Motion

A motion was made by Dr. Allison-Bryan to approve the meeting minutes with the changes noted. The motion was properly seconded by Ms. Haynes. All members were in favor, none opposed.





Review of Criteria for Evaluating the Need for Regulation – Certified Anesthesiologist Assistants

Presenter

Mr. Wells

Criteria One: Risk for Harm to the Consumer

Dr. Allison-Bryan stated that CAAs do good work and has seen no documentation that there is an issue for risk of harm.

Mr. Wells stated that there is a need to regulate the profession.

Ms. Haynes stated that there is a difference between practicing with an anesthesiologist and practicing solo.

Ms. Tyler stated that there may be a problem with safety if there is no direct supervision.

Criteria Two: Specialized Skills and Training

Dr. Allison-Bryan stated that while it appeared that the CAA training is well structured that clinical training positions are limited and she is concerned that opening this profession would create additional competition for clinical training opportunities in Virginia. Noting that one third of current AA students did not get into medical school, she is also concerned that those individuals that did not get into medical school will take available slots for medical students and residents.

Mr. Wells stated that from a pharmacology aspect he does not want to see the profession compartmentalized into just anesthesia. Mr. Wells also stated that some states require a physician assistant (PA).

Ms. Haynes stated that she is concerned with the lack of clinical training and that CAAs have basic medical school information to which clinical training needs to be added, in the event of a medical emergency.

Ms. Tyler stated that the skill sets need to match the medical needs.

Criteria Three: Autonomous Practice

Dr. Allison-Bryan stated that CAAs in Virginia would need to be regulated and wonders how much autonomous practice they actually have. An anesthesiologist must also be present at all times. Underserved areas would have to afford two practitioners, an anesthesiologist and a CAA.

Mr. Wells stated that regulating CAAs would not create CRNAs to move to rural/underserved areas.

Ms. Haynes agreed with Dr. Allison Bryan.

Criteria Four: Scope of Practice

Dr. Allison-Bryan stated that CAAs practicing in Virginia must be licensed and regulated. She wonders if this scope of practice adds to underserved areas.

Mr. Wells stated that CAAs coming into Virginia will not see CRNAs moving to underserved areas.

Criteria Five: Economic Impact

Dr. Allison-Bryan stated that there appears to be a good supply of anesthesiologists and CRNAs. She does not believe that costs would result in a restriction of the supply of practitioners. She stated that the Board





of Medicine has been asked to add five (5) more professions in the four and a half years that she has been on the Board. Board of Medicine staff is not growing, therefore, the addition of this profession will create more work for the Board. She wants to know if CAAs would be solving a problem that exists. Would it serve the Commonwealth to license CAAs?

Mr. Wells stated that an overlap in professions does not allow for an overlap in regulations.

Criteria Six: Alternatives to Regulation

Dr. Allison-Bryan stated that if we are to have practicing CAAs in Virginia that they must be regulated. She further asked if we have a need for CAAs in Virginia.

Mr. Wells stated that he and Dr. Carter discussed that a review of a profession is normally done when the profession is already working in Virginia, CAAs are not.

Criteria Seven: Least Restrictive Regulation

Dr. Allison-Bryan stated that the Board of Medicine does its best to make good regulations, but is there actually a need for CAAs in Virginia? She added that there are cons to licensing CAAs: training slots are already tight; there has been no proof provided that there is a shortage of anesthesiology providers in Virginia; and that CAAs only provide care under direct supervision.

Ms. Haynes noted that there has been no proof provided that there is a shortage of anesthesiology providers or CRNAs. She believes that we must provide public protection.

Motion

A motion was made by Dr. Allison-Bryan for the Board of Health Professions to not adopt a separate license for CAAs to practice in Virginia. The motion was properly seconded by Ms. Haynes. All members were in favor, none opposed.

Mr. Wells stated that the Full Board will be meeting August 31, 2017 and the Regulatory Research Committee will be making the recommendation to not license CAAs.

Adjourned					
Adjourned	10:32 a.m.				
Chair	James Wells, RPh				
Signature:		 Date: _	/	/	
Board Executive Director	Elizabeth A. Carter, Ph.D.				
Signature:		 Date: _		/	