



To: Senate Public Health and Welfare Committee

Date: February 13, 2025

From: Rachelle Colombo, Executive Director

Re: SB 67; authorizing the independent practice of medicine for nurse anesthetists

The Kansas Medical Society respectfully requests your opposition to SB 67, which allows a certified registered nurse anesthetists (CRNA) to practice medicine without physician oversight or involvement. Specifically, the nurse anesthetist practice act is amended to strike current restrictions and requirements to work as an interdependent member of a physician-led team. The bill eliminates the requirement for a physician or dentist to order anesthesia. Additionally, the bill authorizes CRNAs to prescribe, procure, select, order and administer any drug “consistent with their education and qualifications”. Surgery for the purpose of placing a medical reservoir is the only procedure the bill prohibits, allowing them to otherwise practice medicine without physician direction or oversight from the Board of Healing Arts.

CRNAs are one of four categories of advanced practice registered nurses (APRN) and notably, have asked to be exempted from each of the proposals for independent practice that the broader APRN groups have brought to the legislature over the last dozen years. The CRNAs have a separate practice act that was established through careful deliberation in 2010. They currently serve in most every community, providing anesthesia care in both CRNA clinics and hospitals across the state. They are not required to have direct physician supervision but are limited from ordering anesthesia or initiating treatment and prescribing without physician or dentist direction. This constitutes the independent practice of medicine by a non-physician.

Proponents have said they would like all APRNs to have the same privileges and that SB 67 would allow this category what the legislature granted other APRNs in 2022, and that they are employing APRNs. If true, this is a violation of both the Nurse Practice Act and the CRNA practice act.

SB 67 goes much further than the nurse practice act which allows an APRN to independently prescribe and order durable medical equipment but in no other way expands their scope of practice. Their practice act still prohibits them from practicing the healing arts. The legislature did not authorize APRNs to perform other medical acts such as the ordering of tests, performance of procedures or initiation of medical treatment. Though the CRNAs sought exemption from this in 2022, if they now wish to have the same privileges, they should simply mirror that language in their practice act so that all categories of APRNs have the same statutory authority. This could be achieved by amending KSA 65-1158 with language stating *nothing in this act shall be construed to require a written prescribing protocol or restrict the ordering of durable medical equipment*.

Though the Kansas Medical Society does not support authorizing non-physicians to independently diagnose or prescribe medications for patients, we recognize the desire for CRNAs to have commensurate privileges as other categories of APRNs. If the legislature desires to allow

CRNAs further medical privileges, we respectfully request that SB 67 be amended by adding the mirroring language proposed above rather than enacting the bill as written.

KMS opposes SB 67 and respectfully requests your careful and consistent consideration of this legislation.