HR 1932
CRNA

Courtney L Archambo
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5/14/2008

The Honorable Joe Knollenberg
2349 Rayburn House Office Building
Washington, DC 20515-2211

Dear Congressman Knollenberg:

As a Certified Registered Nurse Anesthetist (CRNA) in your district, I hope that you will work in Congress to cosponsor legislation (HR 1932) to reform Medicare anesthesia payment teaching rules equitably for both CRNAs and anesthesiologists.

Under the Medicare program, healthcare providers who deliver the same services with the same level of quality are generally reimbursed the same. Current Medicare anesthesia payment teaching rules discourage anesthesia education, cutting Medicare payments by up to 50% when teaching of nurse anesthetists or anesthesiology residents is involved. The rules need to be reformed ? and they need to be reformed for both CRNAs and anesthesiologists equally. Nurse anesthetists play a vital role in assuring that seniors have access to the surgical, pain management, and other healthcare services they need, with an August 2007 report by the Government Accountability Office (GAO) finding that there are ?more CRNAs in localities with higher concentrations of Medicare beneficiaries.? By contrast, a bill to fix the anesthesia teaching rules for only one provider such as S 2056 would put CRNA education at a disadvantage and increase incentives to teach anesthesiologists, by providing anesthesiologists twice the reimbursement for cases involving medical residents than for similar cases involving student nurse anesthetists.

HR 1932 is an equitable solution to fix a federal Medicare payment issue that affects CRNAs and anesthesiologists alike. It has no impact on any clinician?s scope of practice, which is governed by the states.

I hope that you will contact the office of bill sponsor Rep. Bart Stupak (D-MI) to cosponsor HR 1932.

Thank you and I look forward to hearing back from you.

Sincerely,

Courtney L Archambo
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