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# FISCAL IMPACT REPORT

SPONSOR	Cha	sey	ORIGINAL DATE LAST UPDATED	02/17/13	HB	416
SHORT TITI	LE	Anesthesiologist A	ssistant Supervision		SB	

SHORT TITLE Anesthesiologist Assistant Supervision

ANALYST Roberts

#### **ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)**

	FY13	FY14	FY15	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total	NFI	NFI	NFI	NFI	N/A	N/A

(Parenthesis () Indicate Expenditure Decreases)

# SOURCES OF INFORMATION

LFC Files

**Response Received From** Medical Board

No Responses Received From: University of New Mexico Health Sciences Center (UNM HSC) Regulation and Licensing Department (RLD)

#### **SUMMARY**

#### Synopsis of Bill

House Bill 416 changes language in the Professional and Occupational Licenses Code (Section 61-6-10.7) by removing the requirement for an anesthesiologist assistant student to be exempt from licensure when supervised on a one-to-one basis by an anesthesiologist who is continuously present in the operating room. The new language would allow an anesthesiologist assistant student to be exempt from licensure provided that the student is supervised by an anesthesiologist, a licensed anesthesiologist assistant or a second-year, third year or fourth year resident anesthesiologist.

#### **FISCAL IMPLICATIONS**

No fiscal impact.

### SIGNIFICANT ISSUES

The Medical Board cites that this proposed amendment is a practical and safe change. Currently, there is no change in the supervision except for the introduction of an additional layer of supervision. This is very helpful in a busy operating room suite, since the newly specified supervisors (a licensed anesthesiologist assistant {AA} or a second-year, third-year or fourth-year resident anesthesiologist) are also supervised by the Board-Certified Anesthesiologist in charge of the AAs and the cases with which they are working. This proposed setup is an exact analog of the way in which medical and surgical post-graduate training is organized. In New Mexico (not in all States) residents and interns are licensed as physicians in training by the Medical Board.

The proposed change in HB 416 could significantly and safely improve the efficiency and effectiveness of the handling of anesthesia in the operating room.

## WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

The supervision of the AA would still be one-to-one by the Board Certified Anesthesiologist, thus requiring the Anesthesiologist to remain with the student instead of being present for induction and emergence and then allowing a licensed AA or a Resident Anesthesiologist to supervise the more stable and routine parts of the operated patient's anesthesia.

MIR/blm