

# AANA

American Association of  
**NURSE ANESTHESIOLOGY**

## Hot Topics in Anesthesia

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# Healthcare Cost Increase and Sustainability

- In 2019, the total healthcare expenditure reached ~ \$3.8 trillion (18% of the country's GDP)
- Factors driving the increase:
  - Medical advancements
  - Aging population
  - Administrative burden
- Challenges posed:
  - Financial strain on hospitals
  - Delayed surgeries and patient care
  - Impact on patient safety
- Sustainability Concerns
  - Balancing cost and quality
  - Equity in access to care
  - Long-term financial viability

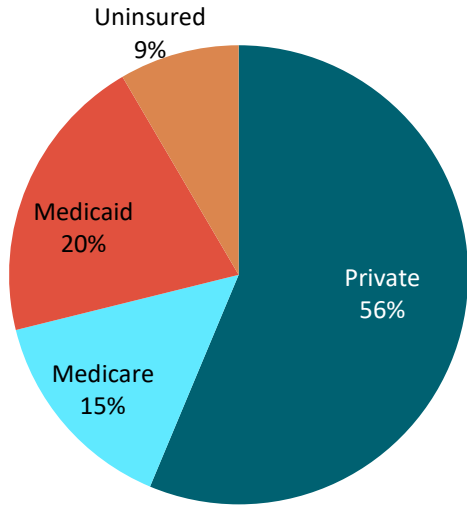


# National Anesthesia Demand

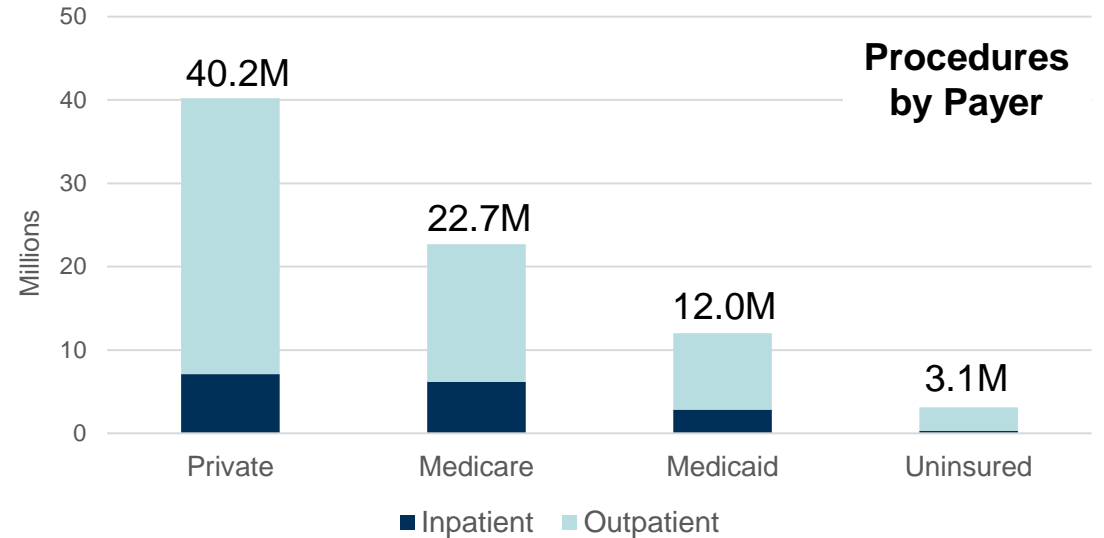
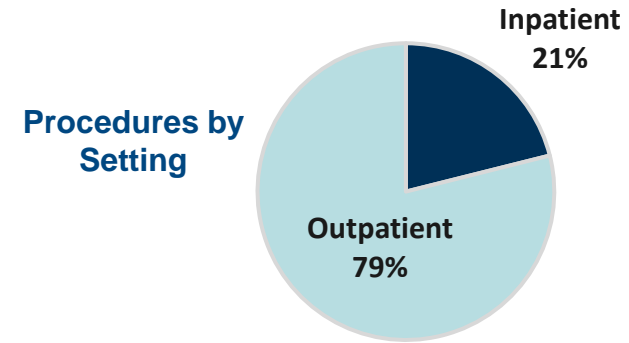
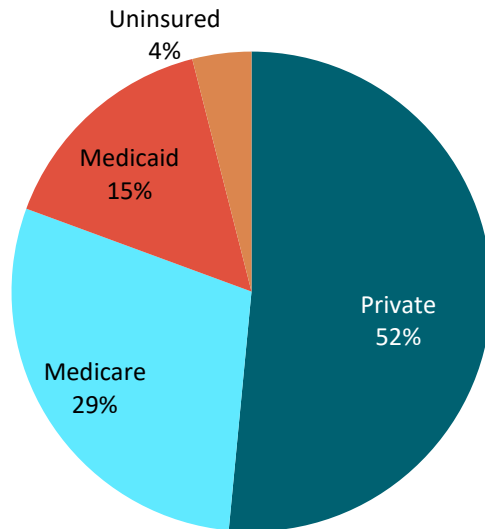
## Estimates by Payer Source and Setting

### Beneficiaries and procedures by Payer

325 Million Beneficiaries



78 Million Procedures



**Modeling utilization rates by payor, setting, and demographic characteristics produced national estimates of total anesthesia procedures (Demand)**

**Source:** Negrusa, Sebastian, Paul Hogan, Inna Cintina, Jihan Quraishi, Ruby Hoyem, Lorraine Jordan, and Matt Zhou. "Anesthesia Services: A Workforce Model and Projections of Demand and Supply." *Nursing Economic* 39, no. 6 (2021): 275–84.

# Distribution of Practice Models

51.3%

- Anesthesiologist directly involved in the care provided by a small number of CRNAs / AAs (*medical direction of 1 - 4 CRNAs / AAs*)

15.3%

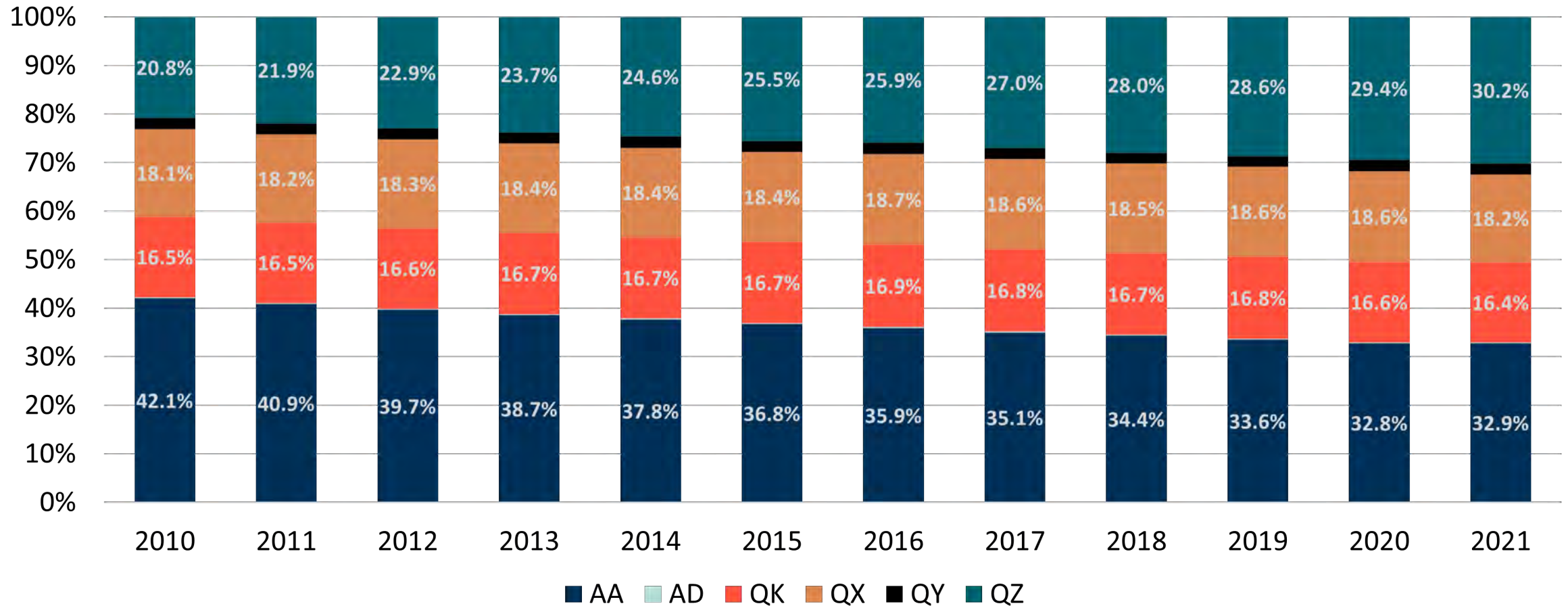
- Anesthesiologist directly overseeing the provision of care and supervising a larger number of CRNAs (*supervision of 5+ CRNAs*)

32.0%

- CRNA practicing independently

# Medicare Payment Trends in Anesthesia Modifiers, 2010-2021

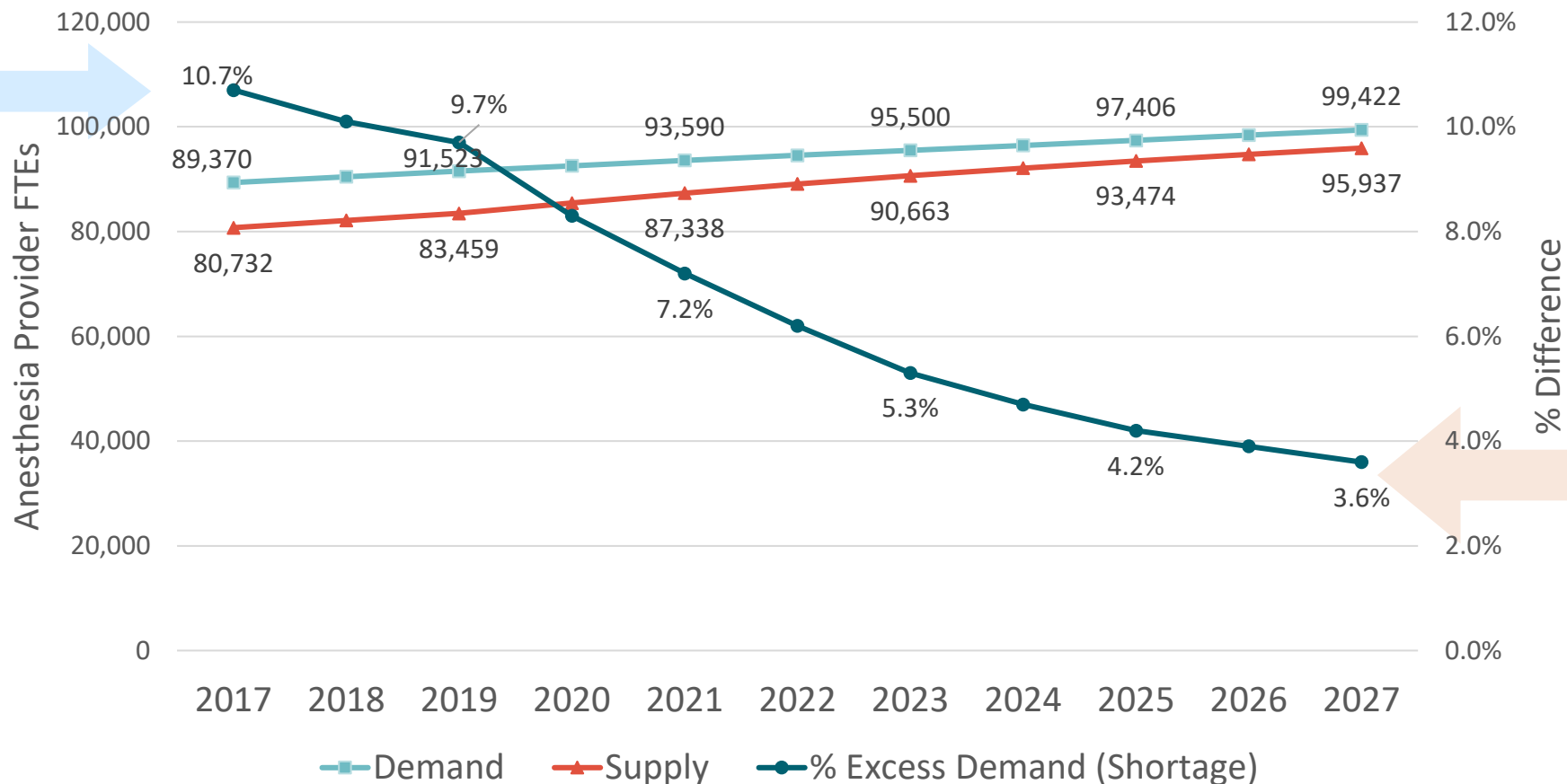
## National



# National Trend in Anesthesia Supply and Demand

## Baseline Projection, 2017-2027

In the base year there is an estimated **10.7%** excess demand for anesthesia services, meaning that the labor market for anesthesia providers is short by over 9k providers.



It is projected that the market for anesthesia providers will remain in shortage, but by 2027 it will decline to **3.6%**.

**Under the baseline scenario, the excess demand seen the current period is likely to be reduced over the next few years, as the supply of providers is expected to grow faster than the demand for procedures (i.e., 1.8% vs 1.1% per year).**

# Solutions



**Efficiency-Driven  
Anesthesia  
Modeling**

# Efficiency-Driven Anesthesia Modeling

- Organizes variables unique to an individual healthcare facility or health system while assessing **requirements for best practices**
- Limits duplication of services, **improves effectiveness, increases access and reduces costs**
- Reevaluates current anesthesia models to improve safe practice, **cost effectiveness** and accessibility

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[www.AnesthesiaFacts.com](http://www.AnesthesiaFacts.com).

## GET TO KNOW

## EFFICIENCY-DRIVEN ANESTHESIA MODELING

American Association of Nurse Anesthesiology (AANA) recently developed Efficiency-driven Anesthesia Modeling, a new way of approaching anesthesia staffing that:

- Organizes variables unique to an individual healthcare facility or health system while assessing requirements for best practices
- Limits duplication of services, improves effectiveness, increases access and reduces costs
- Reevaluates current anesthesia models to improve safe practice, cost effectiveness and accessibility

### ADDRESSING CONCERNS OF HEALTHCARE SYSTEMS

#### Effectiveness

Studies show that increasing CRNA involvement and reducing restrictions on CRNA-provided services results in care as safe and equitable to that delivered by physician anesthesiologists or in more restrictive models.

#### Efficiency

Because Efficiency-driven Anesthesia Modeling uses CRNA providers, it may reduce (or even eliminate) the financial burden placed on facilities, help reduce unnecessary healthcare spending and reflect appropriate anesthesia staffing to meet a facility's patient and surgical needs.

#### Equity

CRNAs provide most anesthesia services in rural America and often work in areas with vulnerable populations. CRNA care may result in cost savings and reallocation of budget dollars to additional coverage for anesthesia services and/or other crucial healthcare areas.

### ACTION NEEDED

CRNAs are ready to provide effective, more efficient, and equitable anesthesia care. Stakeholders are strongly encouraged to take the additional steps toward making anesthesia care delivery more cost-effective and accessible.



Understand your state's practice laws for the anesthesia department and CRNAs.



Review your facility's medical or professional bylaws, rules and regulations, and anesthesia policies that may restrict efficiency. Work to eliminate restrictions that exceed Federal and State laws and that create practice barriers for CRNAs.



Understand community interest and stakeholders' concerns.



Know how to evaluate your anesthesia business and take back control.

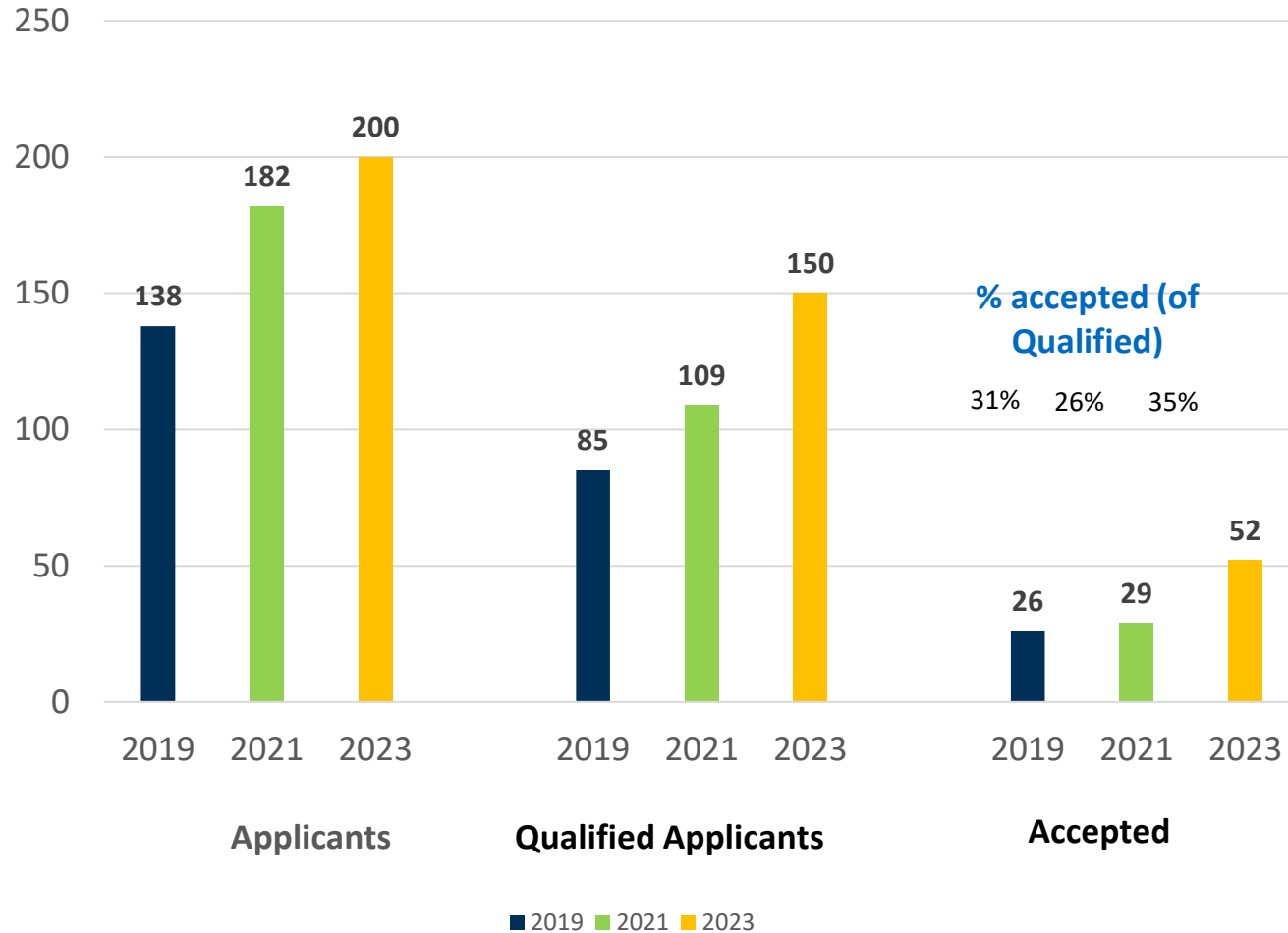


# CRNA Supply



# Student Applications

Numbers of applicants and qualified applicants have increased



Acceptance rates remain relatively low even though more and more students apply to programs

The most common reported limitation to expansion is limited specialty opportunities in clinical sites.

In 2019, 2021 and 2023, shortage of faculty was also reported as a limitation.

# Key Takeaways

## Implications for the Future Anesthesia Workforce

1

The baseline projection suggests the current state of shortage in the anesthesia provider market will lessen over time as the rate of increase in new entrants to the profession outpaces estimates for growth in the utilization of anesthesia procedures.

- *Can this increase continue?*

2

The estimated shortage is a national estimate meaning local or regional markets could vary substantially in either direction based on current provider distribution and availability of new entrants.

3

Projections under various scenarios suggest that the shortage is highly sensitive to practice model efficiency – i.e., greater use of CRNA only models will reduce shortage.

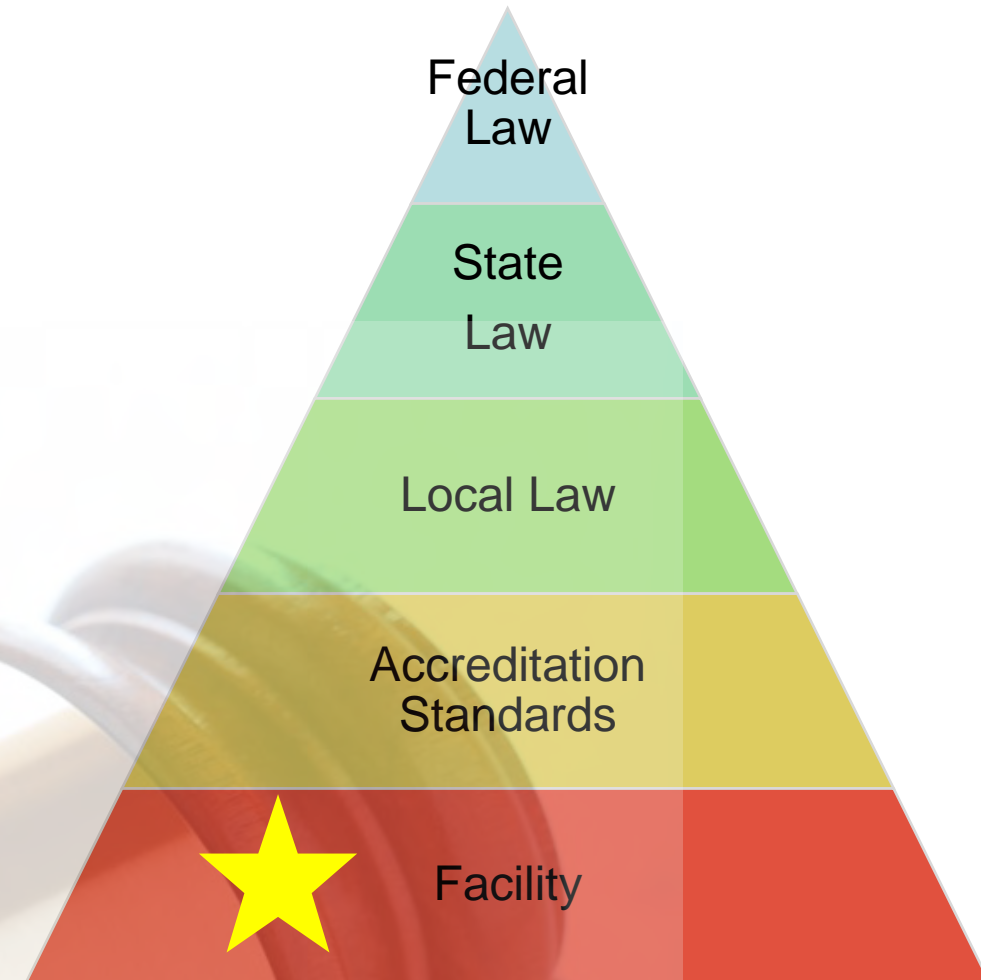
4

Hours worked, retirement, and attrition rates are important. Longer hours would be necessary for current provider workforce if not enough FTEs to fulfill demand.

- *Is this sustainable?*

# Bylaws and the Law

- Bylaws must comply with federal, state, and local law and accreditation requirements.
- Bylaws may be more restrictive than federal, state, and local law or accreditation requirements.
  - For example, bylaws may require anesthesiologist medical direction even though federal and state law have no such requirement.





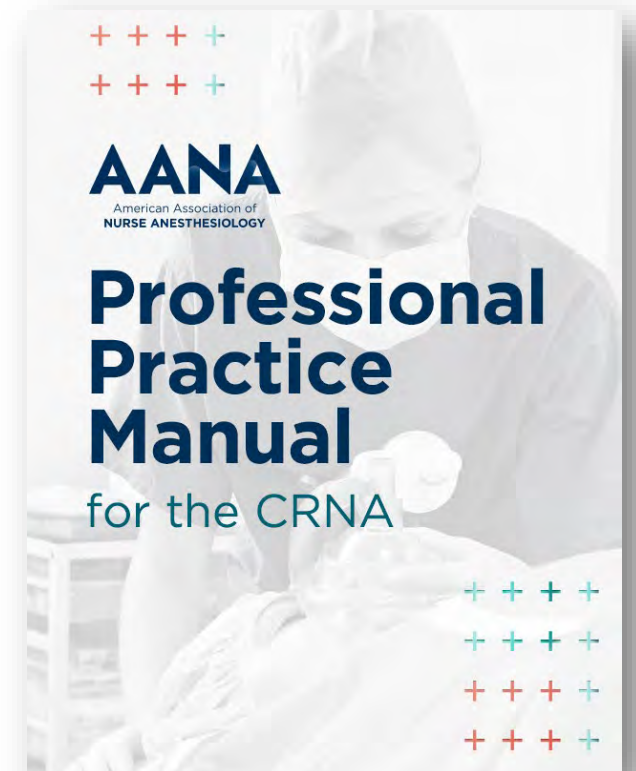
**VA**

U.S. Department  
of Veterans Affairs

# New and Updated Clinical Practice Resources

Based on CRNA clinical needs and emerging trends, the AANA develops and updates existing resource documents. Updated documents include:

- Non-anesthesia Provider Procedural Sedation and Analgesia
- Safe Injection Guidelines for Needle and Syringe Use
- Considerations for Adding New Activities to Individual CRNA Scope of Practice
- Chronic Pain Management Guidelines
- Topic specific resources, such as dental anesthesia:  
*[www.aana.com/Dental](http://www.aana.com/Dental)*
  - Dental Office Sedation and Anesthesia Care
  - Shared Airway During Dental Procedures
  - CRNAs Providing Solutions to Dental Anesthesia Care
  - Introduction to Dental Anesthesia Business
  - State resources for working with dentists and dental office requirements



# Diversity, Equity, & Inclusion

- Implementing a DEI strategy
- Increase awareness of value of DEI
- Increased DEI training for volunteer leadership
- Ongoing annual DEI campaigns
- Nurse anesthesiology viewed as attainable career for all qualified nurses
- Integration of DEI and health disparities within clinical resources

[www.aana.com/diversity](http://www.aana.com/diversity)  
[diversity@aana.com](mailto:diversity@aana.com)



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## The CRNA's Role in Addressing Racial and Ethnic Disparities in Anesthesia Care *Position Statement, Policy and Practice Considerations*

### **Purpose**

The American Association of Nurse Anesthesiology (AANA) believes that it is imperative for Certified Registered Nurse Anesthetists (CRNAs) to provide compassionate, holistic, patient-centered anesthesia, pain management, and related care regardless of the patient's race or ethnicity.

**AANA**

The logo for EducatorEdge, featuring the word "Educator" in a dark blue, bold, sans-serif font and "Edge" in a lighter blue, bold, sans-serif font.

# EducatorEdge

*Curated content from the CRNA Knowledge Network*



Showcased at ADCE 2022, the Educator Edge is a one-stop resource for CRNA academics or those aspiring to enter academia who want high-quality continuing education and training on demand.

Visit the CRNA Knowledge Network to access these complimentary modules.



# CRNA Knowledge Network



- + Mobile device-based micro learning activities to improve patient care
- + Guaranteed 15 Class A credits over one year with offerings released monthly

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## CPC Core Modules

- + 13 hours of online learning, compatible with all devices
- + Scenario based learning and interactive modules
- + Recognized by the NBCRNA





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# **AANA Foundation Priorities**



**Thank You**



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