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FISCAL IMPACT REPORT

SPONSOR <u>Padilla/Trujillo, L/Hickey/Gallegos</u>	LAST UPDATED _____
	ORIGINAL DATE <u>2/18/2025</u>
SHORT TITLE <u>Certified Nurse Anesthetist Role</u>	BILL NUMBER <u>Senate Bill 78</u>
	ANALYST <u>Hanika-Ortiz</u>

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT* (dollars in thousands)

Agency/Program	FY25	FY26	FY27	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
BON		No fiscal impact	No fiscal impact			

Parentheses () indicate expenditure decreases.
 *Amounts reflect most recent analysis of this legislation.

Sources of Information

LFC Files

Agency Analysis Received From
 New Mexico Medical Board (NMMB)
 Board of Nursing (BON)
 Regulation and Licensing Department (RLD)

SUMMARY

Synopsis of Senate Bill 78

Senate Bill 78 (SB78) amends Section 61-3-23.2 NMSA 1978 as it relates to certification as a registered nurse anesthetist (CRNA) by: (1) changing the standard of anesthesia care in accordance with guidelines for nurse anesthesia practice issued by the national professional association representing CRNAs; and by (2) authorizing a CRNA to function in either an independent role or in collaboration with other health care providers in accordance with policies of the health care facility.

An “independent role” for certified registered nurse anesthetist is “...performing any action, including determining, preparing, administering or monitoring anesthesia care or anesthesia-related services without the supervision of another health care provider.”

This bill does not contain an effective date and, as a result, would go into effect 90 days after the Legislature adjourns if enacted, or June 20, 2025.

FISCAL IMPLICATIONS

This bill carries no appropriation and has no fiscal impact for the BON.

SIGNIFICANT ISSUES

In New Mexico, CRNAs are advanced practice nurses in an interdependent role on a healthcare team in which care is directed by a physician, dentist or podiatrist. They are licensed by the BON, have completed a graduate level nurse anesthesia program, and are certified by an accredited body.

In the early 2000's, New Mexico opted out of the physician collaborative requirement for CRNAs, when offered by the Centers for Medicare & Medicaid Services. In its analysis of Senate Bill 80 for the 2023 legislative session, the Human Services Department pointed to a study showing no difference in outcomes of patients cared for by CRNAs, compared with anesthesiologists.

“A 2010 study compared states that had opted out of the physician requirement for collaboration with CRNAs vs. states that still had that relationship. It looked at 481,440 hospitalizations and compared outcomes between the two sets of states. The researchers controlled a number of factors, including the complexity of the patients. States that opted out of the physician collaborative requirement overall had lower mortality and complication rates for patients. There was also no increase in mortality or complications when states changed their state from requiring physician oversight to waiving that requirement”.

<https://www-healthaffairs-org.libproxy.unm.edu/doi/10.1377/hlthaff.2008.0966>

PERFORMANCE IMPLICATIONS

The NMMB's analysis did not note any performance issues with the bill.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

Nearly identical to 2023 Senate Bill 80 Nurse Anesthetist Role

OTHER SUBSTANTIVE ISSUES

CRNA's play a crucial role especially in rural and underserved areas of the state where anesthesiologists are unavailable.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

The BON suggests that New Mexico may be seen as a less attractive state to practice in compared to other states where CRNAs practice at the highest level of their education and training.

AHO/rl/hj