



December 27, 2016

The Honorable Robert A. McDonald
Secretary of Veterans Affairs
Department of Veterans Affairs
801 Vermont Ave NW
Washington, DC 20420-0001

Dear Secretary McDonald:

The Texas Association of Nurse Anesthetists (TxANA) would like to express our disappointment with the Department of Veterans Affairs' decision not to grant CRNAs full practice authority in the final rule on Advanced Practice Registered Nurses (RIN 2900-AP44). To help expand Veteran access to quality anesthesia care, I urge you to place Veterans' first and scientific evidence over politics. Full practice authority for CRNAs ensures Veterans will receive the full scope of high-quality anesthesia and pain management healthcare they rightfully deserve.

As highly educated and trained anesthesia professionals, CRNAs provide exceptional patient care to our Veterans and independently to all branches of our active duty members. CRNAs have a proven track record in the safe and effective delivery of anesthesia care and pain management across all settings and patient populations and were the first professional Advanced Practice Registered Nurses. Peer-reviewed research and policy documents consistently show CRNAs deliver safe, high-quality, cost-effective anesthesia care. Permitting CRNAs to practice to the full extent of their education and training, as stated in a Lewin Group peer reviewed economic analysis, "both ensure patient safety and result in substantial cost savings, allowing the VHA to allocate scarce resources toward other Veteran healthcare needs." Recently, the Commission on Care and an Independent Assessment of the VA supported full practice authority for CRNAs as a means of improving access to safe, cost-effective care for the nation's Veterans.

When the VHA is seeing an increase in the number of Veterans suffering from chronic pain, CRNAs are uniquely poised to share in the solution. CRNAs deliver chronic pain treatment in a

compassionate and holistic manner, utilizing a variety of therapeutic, physiological, pharmacological, interventional, and psychological modalities in the management and treatment of pain with the goal of reducing patients' usage and dependence on opioid medication. These skills and treatment modalities translate into clinical practice with the goal of improving VHA patient access to care.

Full practice authority for CRNAs is supported by evidence-based recommendations advanced by the National Academy of Medicine, the congressionally mandated Independent Assessment of the VA, and the blue-ribbon Commission on Care. It has remained policy for greater than 15 years in the Army, Navy, Air Force, Combat Support Hospitals, and Forward Surgical Teams, and supported by the AARP, American Hospital Association, and many Veterans Service Organizations, including the Iraq and Afghanistan Veterans of America, AMVETS, Military Officers Association of America, Air Force Sergeants Association, Reserve Officers Association, and the Naval Enlisted Reserve Association.

Thank you for your consideration of this vital matter. Many Veterans' facilities are in locations our physician colleagues chose not to locate, limiting access to care without qualified, professional CRNAs stepping forward with a desire to provide quality anesthesia care to our Veterans'. Granting CRNAs recognition as full practice providers is a step toward achieving shared goals of improving access to the highest quality healthcare within the VHA. Maintaining the status quo remains a detriment to Veterans who have served this country.

Sincerely,

A handwritten signature in black ink, appearing to read 'Joseph A. Wenzell', with a stylized, cursive script.

Joseph A Wenzell, MHS, CRNA
President (2016-2017)
Texas Association of Nurse Anesthetists