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TxA NA Mission Statement

Advancing patient safety and the profession of nurse anesthesia.

TxA NA Newsletter Guidelines:

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Deadlines:

Feb. 1 | May 1 | Aug. 1 | Nov. 1

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The 85th Texas Legislative Session is in full swing! Representative John Zerwas, an MD Anesthesiologist, filed House Bill 2525 (HB2525) on February 28th to license Anesthesiologist Assistants (AAs) under the Physician Assistant (PA) Occupation Code (Title 3, Subtitle C, Chapter 204). I'd like to take this opportunity to inform the CRNA community about how the TxANA Board of Directors plans to proceed. The TxANA lobby team, members of the Government Relations Committee, and constituents of representatives who serve on the Public Health Committee are expressing TxANA's opposition to HB2525.

We cannot stress how important it is for legislators to hear from their constituents about this matter! If you are a constituent of a committee member and have further questions, please reach out to Mrs. Sam Stinnett, TxANA’s Executive Director (sam@txana.org).

This is the sixth session AAs have tried to put forward a licensure bill. This session, with the assistance of two MD Anesthesiologists who are also Texas State Representatives, HB2525 seeks to license AAs under the PA occupation code. A bill licensing AAs was not filed in the Senate.

The stance taken by TxANA and our lobby team is AAs are not PAs and should not be placed under their board as the bill currently directs. TxANA is unable to explain the rationale behind why this legislation places AAs under the PA’s occupational code without requiring similar education and training. Supporters of AA licensure want surgeons and other healthcare providers to believe AAs are interchangeable with CRNAs, even though we are not. AAs do not have nursing experience and are prohibited from practicing autonomously. These assistants cannot serve in the military and they must practice under the direct supervision of an anesthesiologist in every anesthesia practice setting.

TxANA relies on an informed and vigilant membership. Please take action alerts seriously and act in a timely manner. Our professional community must advocate on behalf of our practice with professionalism, courtesy, and honesty. Thank you for your hard work and attention to this greatly important matter.

Session Update: House Bill 2525
Joseph (Joe) Wenszell, MHS, CRNA
President, TxANA (2016-2017)

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FOR IMMEDIATE RELEASE

February 9, 2017

APRN Alliance Applauds Rep. Klick and Sen. Hancock for Championing Legislation to Remove Regulatory Barriers for Health Care Providers and their Patients

Austin, Texas (Feb 9, 2016) Today, Texas State Representative Stephanie Klick held a press conference to announce HB 1415/SB 681, legislation that would remove outdated and costly barriers to Advanced Practice Registered Nurses (APRNs) and allow these health care providers to practice to the full extent of their training and education. Surrounded by the APRN Alliance and a broad-based coalition of over 20 business, consumer, and health care organizations supporting the legislation, Rep. Klick touted the bill as a safe, cost-effective solution that will greatly expand access to care in Texas.

"As President of the Texas Nurses Association, I am proud to be partnering with a broad group of diverse stakeholders to improve health care access by ensuring that APRNs are able to practice to the full extent of their training and education,” said Jeff Watson. “Our state has one of the worst shortages of primary care providers in the nation. Removing barriers to practice for APRNs means that more Texans are receiving the care they need."

“Granting APRNs full practice authority utilizes their extensive education and improves access to health care services while decreasing costs at a time when health care expenditures are on the rise,” added Joseph Wenszell, President of the Texas Association of Nurse Anesthetists.

APRNs have a long record as quality, cost-effective providers, and they play a crucial role in caring for Texans and addressing our state’s growing health care needs. Unfortunately, current Texas regulations are preventing them from practicing freely.

Unlike many states, including our neighbors New Mexico and Arizona, Texas law requires APRNs to sign a delegation agreement with a collaborating physician in order to practice, even though the physician may live hundreds of miles away and never see any of the APRN’s patients. This delegation agreement not only adds to both the physician and the APRN’s paperwork and takes times away from patients, but it also comes at a significant cost. In fact, a 2016 study of Texas APRNs found some were forced to pay their delegating physician up to $120,000 every year.

HB 1415/SB 681 would remove the costly and burdensome requirement for a physician delegation agreement and place APRNs under the exclusive regulatory authority of the Texas Board of Nursing. Full practice authority exists in 21 states and the District of Columbia, the Department of Defense, and the U.S. Department of Veteran Affairs. Meanwhile, lawmakers in neighboring states are spending their tax dollars to recruit Texas-trained APRNS to New Mexico and Arizona, where there are fewer regulatory burdens and lower practice costs.

The APRN Alliance is a partnership of APRN organizations that seek to advance common interests with a unified voice.
Full Practice Authority (FPA) for Advanced Practice Registered Nurses (APRNs) is on the agenda for Texas’ 85th Legislative Session. On February 9th, Texas State Representative Stephanie Klick (R – North Richland Hills) and Donna Howard (D – Austin) held a press conference on the Capitol grounds to announce House Bill 1415 (Klick/Howard) and Senate Bill 681 (Hancock, (R – North Richland Hills)). The legislative language removes outdated and costly barriers to APRNs and grants practice to the full extent of training and education. TxANA President Wenszell was quoted, “Granting APRNs full practice authority utilizes their extensive education and improves access to health care services while decreasing costs at a time when health care expenditures are on the rise.”

APRNs have a long record as quality, cost-effective providers who play a crucial role in caring for Texans and addressing the state’s growing healthcare needs. Current Texas’ regulation prevents APRNs from practicing freely. Texas Nurse Practitioners (TNP) are required to have a delegation agreement with a physician and pay up to $120,000 per year for this service. Although on the surface it may appear that FPA would have little affect on the practice of CRNAs, passage would eliminate a need for a prescriptive authority agreement with a supervising physician for a CRNA whose practice includes writing prescriptions.

Full practice authority is recognized in 21 states and the District of Columbia, the Department of the Defense, and the Department of Veteran’s Affairs. The Texas APRN Alliance and a broad-based Texas coalition of businesses, consumers, and healthcare organizations are in support of the legislation supporting a safe, cost-effective solution to greatly expand access to care in Texas. TNP are raising a red flag to Texas legislators that neighboring states are spending their tax dollars to recruit Texas trained APRNs where there are fewer regulations and lower practice costs.

The APRN Alliance, a partnership of APRN organization, which includes the Consortium of Texas Certified Nurse-Midwives, Texas Association of Nurse Anesthetists, Texas Clinical Nurse Specialists, Texas Nurse Practitioners and the Texas Nurses Associations, gathered at the State Capitol on February 10th for the 2nd Annual APRN Capitol Day. Supporting Capitol Day were 350 APRN and APRN students who participated in the seminar in preparation to lobbying and educate legislators and staff regarding APRN issues.

TxANA has joined the APRN Alliance to raise awareness and promote a coordinated campaign in support of state legislation affecting APRN and CRNA practice. The APRN Alliance is a steadfast opponent against Anesthesiologist Assistant (AA) licensure in Texas and the expansion of AA practice. The APRN Alliance is one of many indicators, the voice of many through one, and may have reverberating success.

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TXANA BUSINESS OF ANESTHESIA AND GOVERNANCE SUMMIT AND CAPITOL DAY
CRNA DAY AT THE CAPITOL
December 29, 2016

The Honorable Robert A. McDonald
Office of Secretary of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Dear Secretary McDonald,

Upon my hearing the Department of Veteran Affairs final resolution regarding Certified Registered Nurse Anesthetists (CRNAs) and full practice authority as it pertains to Veterans’ access to affordable and readily available anesthesia and pain management (RIN 2900-AP44), I was undeniably disappointed. From a historical perspective, CRNAs have practiced anesthesia in the United States, including all branches of the military and Indian Health Services, for over 150 years.

CRNAs are the primary provider of anesthesia in rural America and deliver over 65 percent of anesthetics in metropolitan areas. Numerous outcome studies, which can be found at aana.com, have revealed there is no difference in quality of care when they are correlated with our physician counterparts. Moreover, anesthesia is 50 times safer now than it was in the 1980s. CRNAs have undoubtedly played a vital role in these care enhancements through practice and research.

With such improvements in anesthesia services over the last 30 years, our own Veterans continue to face interruptions in care. I urge you to revisit our role as Advanced Practice Registered Nurses (APRNs) and our vital function in addressing the shortage of care our veterans face on a daily basis. Including the other three APRN specialties in the same bill that omitted CRNAs is quite difficult to comprehend at a human and professional level. Purportedly, our profession was excluded due to adequate access to anesthesia care.

However in the Veterans Access, Choice and Accountability Act of 2014 Section 201: Independent Assessment of the Health Care Delivery Systems and Management Processes of the Department of Veterans Affairs, multiple mentions are made regarding the “inefficiency” and “inadequacy” of anesthesia personnel.

“Increase availability of out of OR anesthesia; improve OR room and nursing, anesthesia availability.” p. I-301

“Furthermore, by changing the concept from GI physician directed moderate sedation to an anesthesia administered sedation; we would further increase the number of procedures by just decreasing the amount of time spent by the endoscopist in documentation moderate sedation pre, intra and post anesthesia care. It takes >45 minutes documenting all the required notes (i-Med Consent, H & P, pre anesthesia assessment, airway assessment, ASA, post procedure anesthesia assessment, PACU I, PACU II, Medication reconciliation, procedure note, patient instructions, etc.) while the procedure lasts <30 minutes or less. If the sedation is documented by anesthesia then the endoscopist would dedicate this precious time in doing the procedure and writing just the pertinent documentation associated to it.” p. I-314-315

As I have assiduously aforementioned, it is my firm conviction that CRNAs offer a safe, cost-effective, and instant option to remedy the care shortages Veterans face everyday. CRNAs can already practice in 40 states without supervision and continue to provide excellent quality of care for our countries’ citizens and military personnel. If we can function independently in a combat arena, we are most certainly capable of full practice authority in VA medical facilities. Thank you for your consideration in this chief issue. A nation of over 50,000 CRNAs are capable and ready to provide the care that is needed to our Veterans who have served for your and my Freedom(s).

Most respectfully,

Dr. Kenton W. DuBose CRNA, DNP
SRNA Summit Experience

Timothy Brock Different, SRNA
Texas Wesleyan University – Fort Worth

Progression through the nurse anesthesia curriculum has created many questions about the business aspects of anesthesia. The ability of nurse anesthetists to become leaders within the hospital setting and the business realm is fascinating.

Day 1 - The conference included lectures focused on informing the CRNA community about business issues and components of being self-employed. I found the lectures very informative and feel that I now have a better understanding of this facet of my future career. Navigation of obstacles associated with future ventures may be easier, having learned some of the fundamentals.

Day 2 - We were introduced to the importance of membership in the AANA and TxANA. It was illuminating to learn the ways that our membership dues help CRNAs on the state and national level. Discussion of the legislative process allowed a level of understanding that I had previously not realized. It is nice to know that we have a dedicated group of people that are very versed in our specialty and lobbying to secure the practice of nurse anesthesia. Additionally, day two provided the opportunity to visit the Texas State Capitol and talk directly with state senators and representatives. Students had the chance to discuss experiences and provide information about the educational background that all CRNAs achieve. Though we did not advocate or oppose any particular bill, our senators and representatives now know more about who we are and what we do.

The Business of Anesthesia and Governance Summit 2017 was an excellent experience for me. I have a new appreciation for TxANA and all the work they do. I highly recommend this conference to all SRNAs and CRNAs.
I am a first year nurse anesthesia resident at Texas Wesleyan University. In January, I had the privilege of attending the 2017 Business of Anesthesia and Governance Summit. I have always been interested in politics, policy formation, and how the actions of elected officials affect me. Additionally, I recognize the importance of sound business practices that lead to a successful career. When I heard about the TxANA anesthesia summit I jumped at the opportunity to attend. Due to the generosity of TxANA’s student scholarship program, I was fortunate enough to attend the summit.

Day 1 – The summit started with a student session intended to let us know what to expect from the next couple of days. I was both surprised and impressed by the number of fellow students attending the summit. It is encouraging that many of my peers are equally interested in learning how to take an active role in advancing the future of nurse anesthesia.

After the student session, the day continued with lectures about the business of anesthesia. The topics covered were invaluable. Two concepts stood out to me: the value of an LLC, and how malpractice insurance is structured. The knowledge I gained during both of those lectures will give me a head start into the business of anesthesia.

Day 2 – The summit focused on government policy and issues that affect the future of Texas anesthetists. It was extremely informative to hear TxANA lobbyists present information that is important to future anesthetists. Later in the day, nurse anesthesia residents were paired with experienced CRNAs to visit the State Capitol and meet with state representatives and senators. This arrangement made the whole experience more comfortable, informative, and effective. I left that day feeling excited and encouraged about being involved with the advancement of this profession.

Going to the Business of Anesthesia and Governance Summit in Austin, TX was such a positive experience; you can count on me attending next year! ★

Last month, I visited Austin to attend TxANA’s Business of Anesthesia & Government Summit. At the conference, the business aspects of anesthesia were presented on Sunday followed up with the political lay of the land on Monday.

Aside from these two important facets of my future profession, hot topics such as opioid free narcotics, full practice authority, and ‘physician supervision opt-out’ were briefly mentioned. As a student, it is useful to be reminded of current issues affecting the profession.

The seminar began Sunday with a special morning session for students. Dr. Lynn Reede (AANA Professional Practice Director) and Dr. Dru Riddle (current TxANA Vice-President) gave us a brief run-down of the ways we can become involved in affecting government policy. This informal chat was followed by an open Q&A from students.

Information presented at this year’s summit included topics on self-employment advice, reimbursement strategies, tax planning, and malpractice policies.

Monday morning, prior to converging on the capitol to educate staffers and policy-makers about CRNAs, attorneys Trey Blocker and Margo Cardwell provided entertaining key-points to be mindful of during our encounters at the capitol. This guidance was highly useful for first-timers, such as myself.

I enjoyed the opportunity to learn about the issues taking effect now that will likely impact my future practice. The speakers presented by TxANA were knowledgeable and easy to understand. I wish to thank TxANA for hosting my classmates and me. Furthermore, I applaud my Texas Wesleyan University professors and practicing CRNAs, Dr. Dion Gabaldon and Dr. Michelle Ardigo, who not only suggested we attend, but were there with us. I feel certain that it is in any nurse anesthesia student’s best interest to become active within his or her state association in order to strengthen their own practice as well as that of the overall profession. ★
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- My money is better spent in TEXAS, on issues that impact me.
- I have the resources to give and I value the protection this money provides.
- It gives me a voice on issues that affect me.
- I don’t want my fellow CRNAs to shoulder the burden of protecting our practice alone.
- I want to ensure the future of our practice is safe.
- I don’t have the time to volunteer but I still want to do my part.
- It can only benefit my practice.

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President-Elect Candidate:

Dru Riddle, PhD, DNP, CRNA
Fort Worth, TX

TxANA Offices Held:
• Board Director 2013-2015
• Vice President 2015-present

Committee Chair Positions Held:
• Chair, Education and Programs Committee 2016-2017

Committee Positions Held:
• Practice Committee 2006-2010
• Education Committee 2010-2012
• Finance Committee 2014-2016

Place of Employment:
• Texas Christian University School of Nurse Anesthesia

Education:
• BSN Virginia Commonwealth University
• MSN Old Dominion University; DNP Texas Christian University
• PhD Medical University of South Carolina

Statement of Platform:
This is an exciting time to be a CRNA. New drugs, technology, and diagnostics tools are helping to change anesthesia care. It’s also an exciting time to be involved in your professional association. I have had the honor of serving you on the TxANA Board of Directors for the past 3 years. During this time, I have witnessed the entire Board working together with our Executive Director and lobby team to advocate for you, our member, for the safe, timely, and accessible anesthesia care for all Texans. Having an intimate knowledge of the current challenges and opportunities facing TxANA and CRNAs in Texas positions me well to serve as your President-Elect. It is my vision that TxANA will continue its long-standing history of service to our membership and our patients; advocating fiercely for patient safety and access to anesthesia care throughout the state. Serving as your President-Elect would be an honor and privilege and I humbly ask for your vote in the coming election. ★
Vice-President Candidate:

Matthew J Mitchell, CRNA
Southlake, TX

TxANA Offices Held:
• Board Director 2015-2017

Committee Chair Positions Held:
• Co-Chair, Government Relations 2015-2016
• Chair, Bylaws and Resolutions 2016-2017

Committee Positions Held:
• Government Relations 2014-present

Place of Employment:
• Texas Anesthesia Partners, PLLC Southlake, Texas

Education:
• MSNA Texas Christian University 2011

Statement of Platform:
A number of challenges face CRNAs in Texas. For the better part of a decade the legislative session has brought with it, the relative certainty that we would be on the defense. Defending who we are, what we do, the safety of our practice, and the cost-effectiveness of our excellent product has become routine. We have defended CRNAs and patients of this state from the dangers of Anesthesiologist Assistants.

Perhaps the greatest challenge we face as CRNAs in Texas is from within. Disengagement has impacted associations across this nation for as long as we can remember. This disconnection is quite evident. Attendance at meetings is a fraction of what we would like. Voting in TxANA elections is even lower. Only 6.73% of TxANA members voted in the past election despite moving the voting to a more convenient online format. TxANA PAC contributions remain much lower than an association of this size should have. Only 79 of our 3066 active CRNA members (2.57%) are contributors to the PAC. Many of those also give of their time on a committee or in leadership of this association.

I am not one to retreat from a challenge so I made the decision to sacrifice and continue serving you, my fellow CRNAs, in the upcoming term. As Vice President, I want to hear from all CRNAs in the membership about what we can do to engage or re-engage you. I want to see the next generation of leaders engaged, involved, and taking this association into the future. ★
TxANA Offices Held:
• Board Director 2015-2017

Committee Chair Positions Held:
• Government Relations 2016-present
• Bylaws and Resolutions 2016-present
• Practice 2015-2016

Committee Positions Held:
• NorthStar Anesthesia

Place of Employment:
• Department of Defense Employer Award 2016

Education:
• DNP- Baylor College of Medicine
• MS- Baylor College of Medicine
• BS- Texas Woman’s University

Statement of Platform:
Healthcare continues to evolve and the challenge continues: How do anesthesia leaders combine evidence-based care with fiscal constraints of payors and patients? The answer hasn’t changed: Nurse Anesthetists. CRNAs continue to demonstrate high-quality anesthesia delivery in a variety of anesthesia models, while remaining the most cost-effective option for hospital systems nationwide. This success isn’t automatic, it’s only possible through the hard work of dedicated clinicians who recognize the importance of volunteering their time and money for our profession.

I’m grateful for the 17 years of Nurse Anesthesia experience and the mentors that have surrounded me, taught me, and challenged me in this industry. I’m grateful for the members who believed in me to represent them as I served on the TxANA Board of Directors. I would now like to take this experience and volunteer to serve as TxANA Secretary/Treasurer. And I would be most grateful for your support, and more important...your VOTE.
Board Director Candidates

Gregory Collins, MSNA, CRNA
Amarillo, TX

Committee Positions Held:
• PAC Committee – Regional Representative 2012/2015-Present
• Government Relations Committee 2008/2016-Present

Place of Employment:
• Anesthetic Solutions, LLP

Education:
• BSN – West Texas A&M University 2002
• MSNA – Texas Christian University 2006
• Will complete DNP from Texas Christian University in May 2018

Other:
• Clinical Coordinator – TCU

Statement of Platform:
Protecting the rights and abilities of the CRNA in the state of Texas to work independently, to the full extent of our scope of practice, is the absolute duty of the TxANA Board of Directors. As a partner in all CRNA practice, I fully understand the professional and political climate of anesthesia and will work tirelessly to maintain and promote the proper place of the CRNA in this setting. I would appreciate strong consideration to serve on your Board of Directors for the TxANA.

Holly Pham, MSN, CRNA
Temple, TX

TxANA Offices Held:
• Board Director 2015-2017

Committee Positions Held:
• Communications Committee 2015-2017

Place of Employment:
• Baylor Scott & White Memorial Hospital, Temple, TX
• United States Army Reserve

Awards:
• Outstanding CRNA of the Year, B/S&W Memorial Hospital, 2016
• Outstanding Student Award, Louisiana Association of Nurse Anesthetists, 2012
• Maria Roach Scholarship, AANA, 2010
• St. Catherine of Siena New-to-Nursing Award, Via Christi Hospital, 2009
• Gamma Pi Mu
• Sigma Theta Tau
• Cum Laude

Education:
• Our Lady of the Lake College, MSN
• Newman University, BSN

Statement of Platform:
By the time you read this, I will be wrapping up my first term as a Board of Director for an amazing association, Texas Association of Nurse Anesthetists. What makes it amazing? Everyone working/volunteering for TxANA have one goal in common: protecting our profession. This past term, I’ve learned more than I could imagine and I would love to take that and continue to grow, while serving you, my fellow TX CRNAs. It has truly been an honor to serve you and I’m asking for your vote and support again.
Bonnie Titre, DNAP-c, MS, BSN, CRNA
Terrell, TX

Committee Positions Held:
• Government Relations Committee 2015-Present
• Practice Committee 2016

Place of Employment:
• UTSW Zale Lipshy Hospital

Awards:
• 2000 Sigma Theta Tau
• 2008 Team Spirit Award MTSA
• 2008 Summa cum Laude

Education:
• Doctorate Nurse Anesthesia Program graduate May 2017 (Missouri State University Springfield, MO)
• Master Science with Focus in Anesthesia 2008 (Middle Tennessee School of Anesthesia Nashville, TN)
• Bachelor of Science in Nursing 2000 (Olivet Nazarene University Kankakee, IL)
• Associate Degree in Nursing 1994 (Joliet Junior College Joliet, IL)

Statement of Platform:
After entering my ninth year in anesthesia, I’m still passionate about the CRNA profession. I was an active member in Tennessee AANA. I have always been a PAC member and advocate at the both national and state levels. I have three position statements to make that I feel passionate about. First, I plan to remain active and in the trenches to fight against Anesthesia Assistants licensure in this state. Second, I am adamant that every CRNA in this state should be able to practice to the full extent of their license and practice.

Masson D. Farmer, DNP, CRNA
Iowa Colony, TX

Committee Chair Positions Held:
• Practice Committee 2013-Present

Committee Positions Held:
• Education Committee – Student Representative 2010, 2011
• Government Relations Committee – 2012
• Pain Management Ad Hoc Committee – 2014;
• Nominations Committee – Secretary – 2014

Place of Employment:
• EmCare – University of Texas Medical Branch Angleton Danbury Campus
• Masson D. Farmer CRNA, PLLC – Independent Contractor

Awards:
• Sigma Theta Tau International Honor Society of Nursing – Delta Theta Chapter-2006
• Phi Theta Kappa International Honorary Association – Iota Alpha Chapter-2003

Education:
• TCU – Doctor of Nursing Practice – Anesthesia – 2011
• TCU – Master of Science – Nurse Anesthesia – 2011
• The University of Texas at Arlington – Bachelor of Science in Nursing-2006
• Trinity Valley Community College – Associate of Applied Science in Nursing-2005

Other:
• AANA Federal Political Director for Texas Fall 2015-Present
• TxANA PAC Board of Directors 2015 – Present

Statement of Platform:
I would be honored to serve as Director. If elected, my experience navigating Texas laws, rules, and regulations while serving on the Practice Committee will be a valuable asset to the board as it addresses issues impacting CRNAs in Texas. As an independent CRNA, I have a passion for protecting and advancing the practice of Nurse Anesthesia. I will represent the interests of CRNAs and will advocate for increased scope of practice and full utilization of CRNAs. I will defend our right to practice against opponents who seek to diminish our vital role in healthcare in the great State of Texas.
Board Director Candidates

James Stockman Jr. MSNA, CRNA
Nacogdoches, TX

Committee Positions Held:
• Practice Committee 2013-2014
• Government Relations Committee 2016-2017

Place of Employment:
• Nacogdoches, Texas

Education:
• Stephen F. Austin State University, Nacogdoches, TX – Bachelor of Science in Nursing 2004
• Texas Wesleyan University, Fort Worth, TX – Master of Science in Nurse Anesthesia 2010

Statement of Platform:
The Texas healthcare landscape is changing. As CRNAS of Texas, we must adapt to meet these new challenges. For years we have faced many assaults on our practice, and we are sure to face many more in the future. However, our struggle does not have to be one of perpetuity. I believe this is a fight we can win! Winning, will require a strategy in which we embrace a more direct and proactive approach in dealing with issues that affect our practice. It would be an honor to assist in this endeavor as a member of the Board of Directors. ★

Linda Williams MHS, CRNA
Ft. Worth, TX

Committee Positions Held:
• Bylaws & Resolutions 2014-2015
• Communication 2014-2015
• Practice 2015-2016
• Education and Programs 2015-2016

Place of Employment:
• Self Employed

Education:
• Texas Wesleyan University, Fort Worth, TX – Master of Health Science

Statement of Platform:
It is an honor to be a Director candidate for the 2017/2018 TxANA Board of Directors. I have been a member of TxANA and AANA since my residency in Nurse Anesthesia beginning in 1998. In recent years, I have sought to serve this organization on the state level. I have been dedicated to this great organization since the beginning of my career and want nothing more than the opportunity to continue to serve TxANA and our members.

I was born and raised in rural Arkansas. I moved to Texas in 1996, attending Texas Wesleyan University in Fort Worth. ★
Instead of focusing a lot of effort on making many changes to your spending habits, focus on these six areas of your financial life to yield big savings and earnings with just a few small tweaks.

**Insurance:** Many insurance carriers offer a bundle discount if you purchase multiple insurance plans through them. If you have two cars, insure both with the same firm, and consider using that firm for your rental or homeowner’s insurance, too. Ask your insurance agent for other discounts you may be eligible for. Another great way to save on auto insurance is to increase your deductible to lower your monthly premiums. If you have an older car, you may consider purchasing the minimum liability insurance required by Texas law, with no insurance to repair the car in case of accident. The savings in premiums may be more than the car is worth.

**Your home:** If you’re currently looking for a new home, try to purchase one that costs less than what you think you can afford, and don’t forget to factor in association fees, taxes, homeowner’s insurance and other costs that come with owning a home. If you already own a home, consider refinancing your home for a shorter term to potentially save significant interest costs and build equity in your home faster. Finally, making your home safer (such as by installing a smoke detector) can decrease your homeowner’s insurance premiums.

**Debt payment:** If you can, pay off your credit card bills in full each month so you won’t ever have to pay interest. To prevent having to put large amounts of money on a credit card with a high interest rate, save up an emergency fund for unexpected expenses. If you’ve already charged a sizeable debt, develop a debt repayment plan and work it into your budget so you can pay off your cards as soon as possible and pay less interest in the long run. If you’re in good standing, it’s worth it to contact your credit card company to request a lower interest rate.

**Spending plan:** Think of your budget as a way to organize your spending, not necessarily limit it. You can automate your finances to make sure your savings and investing goals are always met and your bills are always paid on time. This will save you money by avoiding late fees and penalties. By having a budget, you’re less likely to waste money on purchases you’ll later regret.

**Taxes:** Make sure you’re taking advantage of all applicable deductions and credits on your income tax return. To lower your taxable income, contribute to a 401(k), IRA, or other tax-deferred retirement account. Self-employed CRNAs have many retirement plan options that allow for retirement savings of up to $60,000 per year or more. In non-retirement accounts, you can minimize your taxes through tax-loss harvesting, which is selling investments that have a loss. Just make sure you’re not using taxes as your main motivation for selling. Also, you cannot repurchase the same investment for 30 days or the loss cannot be deducted on your tax return. Another easy way to get a tax deduction is to make a charitable contribution. Finally, a Health Savings Account is a tax-free way to save money for health expenses. The money goes into the account tax-free and is exempt from taxes when you use it for medical expenses.

**Investing:** The best way to get a return on your investment is to start early. Open a retirement plan and begin contributing as soon as possible so your money can experience the “magic of compounding” that only happens over time. Even a regular small contribution can grow to a significant amount over time.

Sometimes the smartest financial moves (such as investing or buying insurance) can quickly eat away at your budget. By making small changes in these six areas, you can save significant amounts of money without significant effort.

David L. Stull, CRNA, CFP® is a CERTIFIED FINANCIAL PLANNER™ professional with Storehouse Financial LLC. Information in this article is general in nature and not necessarily applicable to each individual. Please consult your investment advisor and/or tax professional prior to making financial decisions. Please direct comments or questions regarding this article to david@storehousefinancial.com.
As a nurse, you’ve dedicated your life to caring for others in one of the world’s most important and challenging professions. We know, because we’re nurses too.

The Texas Nurses Association advocates for Texas nurses on all fronts, in all settings, in all specialties. From staying on top of evolving policies to developing legislative initiatives that effect positive change, we actively support and represent you each and every day. You Take Care of Texas – TNA Takes Care of You.

JOIN TODAY AT WWW.TEXASNURSES.ORG!
By definition:

**1099 employment**: an individual that is self-employed and paid to provide a specific service to a client.

Working 1099, means that you:
- Market and solicit services from multiple clients
- Provide services per a contract
- Pay all of your own taxes and provide all your own benefits
- Decide when, where, and how you work

Working 1099, means that you do not:
- Get benefits from your client
- Receive extensive supervision or instruction from your client
- Have taxes withheld from your pay

**W-2 employment**: an individual that is paid regularly, an hourly wage or salary and performs services as directed by their employer.

Working as a W-2 employee, means that you:
- Get employee benefits
- Get a regular paycheck
- Are supervised and trained by your employer
- Have taxes withheld from your paycheck
- Are told when, where, and how to work by your employer

Working as a W-2 employee, means that you do not:
- Have to reapply for your job each year
- Have to pay all payroll taxes, as your employer pays a portion
- Have to find a replacement when you are sick or go on vacation

Employees appreciate the many benefits that they get, either at no cost, or at a reduced cost from their employer. These benefits include health insurance, disability insurance, life insurance, vacation and sick pay, malpractice insurance, etc.

In addition to benefits, the pay is regular, increases are periodic, and the employer may fund a portion of the employee’s retirement account. Promotions may also be available.

Self-employed individuals must provide all of their benefits from the pay they receive from their clients. They also have to worry about their contract being cancelled, and finding an acceptable replacement if they get sick or want to take time off for vacation. Costs for business expenses such as accounting/bookkeeping services, funding of their own retirement accounts, and paying both employee and employer portions of social security taxes comes out of their pocket. Once the work day is over, they get to go home and spend time managing the business aspects of their company. Christmas parties also tend to be much smaller.

Working as a W-2 employee however, comes with disadvantages as well. They can’t freely set their own work schedules, they have limited control of workplace practices, and promotions and pay increases are at the sole discretion of their employer. In addition, retirement plan contributions are more limited and the investment options are directed by the employer.

Continued on page 22
Being self-employed offers many great benefits and opportunities. This includes setting your own workday schedules, choosing to take or not take call or weekend shifts, working at multiple facilities with different providers, and deducting business expenses from your taxable income. They get to create their own retirement plans, and best of all, they keep all of the company profits, for themselves.

Many CRNAs that are employees often take advantage of the benefits of being self-employed by moonlighting. When moonlighting, it is essential to follow the rules of being self-employed by keeping very good records, paying taxes as required, and maintaining the proper licenses, certifications and insurances.

Making the decision to work as an employee or being self-employed should come after careful consideration. There are many advantages and disadvantages to both, so the decision should be carefully analyzed. When comparing contract pay to a paycheck, make certain to take into account all of the costs associated with being self-employed. Consulting with your spouse or significant other, financial advisor, attorney and CPA / tax advisor are strongly recommended, especially when pursing self-employment contracts.

If you enjoy going home after work, kicking back and not worrying about tomorrow until tomorrow comes, working W-2 may be the solution. If you are someone that enjoys the challenges and excitement of the unknown, perhaps self-employment is your best option. Choosing which is best for you should come from much thought and careful consideration. ★

Larry B. Welder, Financial Consultant and Owner of GFS Financial Solutions, LLC. Information in this article is general in nature and not necessarily applicable to each individual. Please consult your financial advisor and tax consultant prior to making financial decisions. Please direct comments or questions regarding this article to lwelder@gfsinvest.com.
As a nurse anesthetist with the U.S. Army Reserve, you’ll work at the forefront of your specialty, and take on roles and responsibilities that showcase your leadership potential. We also provide the type of educational advantages that can make a difference in your work and position you to advance.

See how the time you spend with us can enhance everything you do from Monday through Friday — and throughout your professional career.

To learn more about the U.S. Army Reserve health care team, call 877-574-7031 or visit healthcare.goarmy.com/tana.
In Memoriam

Inez James, CRNA

Inez Grace Overcash James, 100 years old, entered into Heaven’s gates on Tuesday, Nov. 22, 2016. She was born March 27, 1916, in Dardanelle to the late Christopher Columbus Grace and Effie Cleo Moore Grace. Inez was the third-oldest child of 15 children in the Grace family.

Inez was lovingly known to her family and close friends as Gran-O, a name she created for herself when her first grandchild was born.

While her mother helped her husband in the fields farming at home, Inez would take care of her brothers and sisters who were too young to help in the fields. After graduating from Dardanelle High School, she went to nursing school in Russellville.

She joined the Army after nursing school and was assigned to go to nurse anesthesia school at Washington University School of Medicine in St. Louis, Mo. When she graduated in 1945, WWII had ended so she started practicing nurse anesthesia at St. Joseph’s Hospital in Memphis, Tenn.

She met Clarence Overcash in Little Rock and shortly thereafter they were married and moved to Corpus Christi, Texas, where she practiced anesthesia at Spohn Hospital.

The Overcash family moved to Houston, Texas, in 1962, and there Inez practiced anesthesia at several hospitals including Hermann Hospital, Sharpstown General Hospital and St. Joseph’s Hospital.

After retiring from St. Joseph’s Hospital when she was 72 years old, she volunteered at Texas Orthopedic Hospital for over five years and also at the Women’s Center of Houston. She was a member of the Houston Day Lily Society and Southside Place Garden Club. ★
TxANA congratulates Ms. Carla Cox, JD on her retirement. Ms. Cox served in her role as counsel to TxANA for over 20 years!
SUPPORT YOUR FELLOW CRNA!!

100% of proceeds benefit Adrenal Cortical Carcinoma research at The University of Texas MD Anderson Cancer Center by Mohammed Habra, MD

$30 Early Registration (by 5/6/17 for a guaranteed t-shirt)
$35 Late Registration (after 5/18/17)
Registration, supporters/spirit runners, and donations per www.runsignup.com/outrunrarecancer5k

Thank you for your Support and Generosity

For additional information or to sponsor: outrunrarecancer@sbcglobal.net
The 2017 TxANA Annual Convention is rapidly approaching and the TxANA Education Committee is looking for YOUR poster presentations! Do you have an area of interest that you would like to educate fellow CRNA’s and RRNA’s on? Would you love to disseminate new research but are nervous about public speaking? Would you enjoy sharing the results of a recent capstone project? A poster presentation might be just for you!

Applications are being accepted for poster presentations on-line at the TxANA website. The completed poster is NOT required for the application process; just a simple description of the topic and a few short objectives. Applications are due by May 5, 2017. The authors of accepted posters will have registration fees for the fall meeting waived.

It's easy and fun.....give it a try! ★

LOOKING FOR POSTER PRESENTATIONS!
Terri Kane DNAP, CRNA
Assistant Professor, Texas Wesleyan University
TxANA 2016/2017 Calendar of Events

April 4th
TxANA Board of Directors Conference Call*

APRIL 5-9, 2017
AANA Mid-Year Assembly
Washington, D.C.

JUNE 3, 2017
TxANA Board of Directors Meeting
TxANA Headquarters
Austin, TX

AUGUST 3, 2017
TxANA Board of Directors Meeting
Westin Hotel Riverwalk
San Antonio, TX

AUGUST 3-6, 2017
TxANA Annual Business Meeting
Westin Hotel Riverwalk
San Antonio, TX

AUGUST 6, 2017
TxANA New Board of Directors Meeting
Westin Hotel Riverwalk
San Antonio, TX

SEPTEMBER 8-12, 2017
AANA Annual Congress
Washington State Convention Center
Seattle, WA

SEPTEMBER 29-OCTOBER 1, 2017
TxANA Leadership Meeting
TxANA Headquarters
Austin, TX

DECEMBER 2, 2017
TxANA Board of Directors Meeting
TxANA Headquarters
Austin, TX

JANUARY 21-22, 2018 (tentative)
TxANA Governance Summit
Austin, TX (Hotel TBD)

FEBRUARY 15-17, 2018
AANA Assembly of School Faculty
The Scottsdale Resort at McCormick Ranch
Scottsdale, AZ

MARCH 3, 2018
TxANA Board of Directors Meeting
TxANA Headquarters
Austin, TX

APRIL 21-25, 2018
AANA Mid-Year Assembly
Grand Hyatt
Washington DC

JUNE 2, 2018
TxANA Board of Directors Meeting
TxANA Headquarters
Austin, TX

SEPTEMBER 21-25, 2018
AANA Nurse Anesthesia Congress
Hynes Convention Center
Boston, MA

OCTOBER 11-14, 2018
TxANA Annual Convention
Moody Gardens
Galveston, TX

OCTOBER 13, 2018
TxANA Annual Business Meeting
Moody Gardens
Galveston, TX

OCTOBER 14, 2018
TxANA New Board of Directors Meeting
Moody Gardens
Galveston, TX

OCTOBER 19-21, 2018
TxANA Leadership Meeting
TxANA Headquarters
Austin, TX

*All calls are open to members. Please contact Sam Stinnett (sam@txana.org) if you wish to participate.