October 31, 2017

The Hon. David Shulkin  
Office of the Secretary of Veterans Affairs  
810 Vermont Avenue, NW  
Room 1068  
Washington, DC 20420

Dear Secretary Shulkin,

On behalf of the undersigned organizations, we are writing to express our concerns with a recent story about the lack of access to anesthesia care at a Veterans Health Administration facility in Denver, and to recommend the implementation of full practice authority for Certified Registered Nurse Anesthetists (CRNAs) as part of the solution.

On October 11, 2017, KDVR news in Denver reported about a VHA facility where dozens of veterans’ surgeries had been cancelled or postponed specifically due to a lack of access to anesthesia services. This story directly challenges the VA’s final rule on full practice authority for Advanced Practice Registered Nurses (APRNs) in December of 2016 that did not include CRNAs. The final rule stated that, “VA’s position to not include the CRNAs in this final rule does not stem from the CRNAs’ inability to practice to the full extent of their professional competence, but rather from VA’s lack of access problems in the area of anesthesiology.” The KDVR report makes clear that there are significant problems with access to anesthesia care in the VHA.

Both the Commission on Care’s Final Report and the VA Independent Assessment advised providing full practice authority to CRNAs as way to improve access to quality care in the VHA system. The story has brought to light the need for full practice authority for CRNAs as a way to increase access to anesthesia care, while at the same time reducing costs and undue regulatory burdens. As part of the final rule, the VA stated that, “comment is requested on whether there are access issues or other unconsidered circumstances that might warrant their inclusion in a future rulemaking”. We believe the time has come for the VA to reconsider their final rule and adopt full practice authority for CRNAs as they did for all other APRNs.

We know that our veterans deserve better, and that the care provided by CRNAs and all nurses is of the highest quality. This incident is simply the latest fallout from an erroneous decision that needs to be revisited with all due speed. Should you have any questions regarding these matters, please feel free to contact the AANA Senior Director of Federal Government Affairs, Ralph Kohl, at 202.484.8400, or rkohl@aanadc.com.

Sincerely,

American Association of Nurse Anesthetists (AANA)  
Association of Veterans Affairs Nurse Anesthetists (AVANA)  
American Academy of Nursing (AAN)  
American Association of Colleges of Nursing  
American Association of Critical-Care Nurses (AACN)  
American Association of Nurse Practitioners (AANP)  
American Association of Neuroscience Nurses  
American College of Nurse-Midwives  
American Nurses Association (ANA)  
American Nursing Informatics Association
American Organization of Nurse Executives
American Society of PeriAnesthesia Nurses (ASPA)
Gerontological Advanced Practice Nurses Association
National Association of Clinical Nurse Specialists
National Association of Pediatric Nurse Practitioners
National Council of State Boards of Nursing (NCSBN)
National Forum of State Nursing Workforce Centers
National League for Nursing (NLN)
National Organization of Nurse Practitioner Faculties (NONPF)
Nurses Organization of Veterans Affairs (NOVA)
Organization for Associates Degree Nursing (OADN)
Oncology Nursing Society (ONS)
Preventive Cardiovascular Nurses Association