December 5, 2003

The Honorable Thomas A. Scully
Administrator
Centers for Medicare and Medicaid Services
314G Huber Humphrey Building
200 Independence Avenue SW
Washington, D.C. 20201

Dear Mr. Scully:

Pursuant to the final rule published in the November 13, 2001 Federal Register, Volume 66, Number 219, I write to request exemption for the state of Oregon from the physician supervision requirements for Certified Registered Nurse Anesthetists (CRNAs) in the following regulations:

- Hospitals – 42 CFR 482.52 Condition of Participation: Anesthesia Services
- Critical Access Hospitals – 42 CFR 485.639 Condition of Participation: Surgical Services
- Ambulatory Surgical Centers – 42 CFR 416.42 Condition of Participation: Surgical Services

After consulting with the State’s Boards of Medical Examiners and Nursing on issues related to access to, and the quality of, anesthesia services, and consistent with state law, I have determined that it is in the best interest of Oregon citizens to exercise this exemption.

It is no secret that access to health care services is a significant challenge facing Oregon’s rural communities. In many of Oregon’s small rural hospitals, CRNAs are the only, or primary, anesthesia providers. It is estimated that CRNAs deliver nearly 75% of anesthesia services in rural areas.

In my view, the Oregon Nurse Anesthetist Act (“the Act”) codified in 1997 meets rural Oregon’s need for CRNA services without compromising patient care or safety. The Act (notably a collaborative effort which the Oregon Association of Hospitals and Health Systems, the Oregon Society of Anesthesiologists, and the Oregon Association of Nurse Anesthetists each supported) requires the Board of Nursing to regulate CRNA licensure and scope of practice. The Act also authorizes hospitals and ambulatory surgical centers to determine what services CRNAs can provide in their facilities—with or without supervision—consistent with the scope of practice established by the Board.
In short, Oregon law assures that those closest to, and who know the most about, health care delivery are the primary decision-makers accountable for the outcomes of patient care.

CRNAs have for years provided safe, high quality anesthesia services to Oregon citizens. Exercise of the of the federal “opt out” should provide clarity and consistency between Oregon and federal law, ameliorate confusion regarding supervision and liability issues for physicians and surgeons, and ensure access to anesthesia care for rural Oregonians.

Sincerely,

[Signature]

Theodore R. Kulongoski
Governor

TRK:EKS:ejb

c: Oregon Congressional Delegation
   Senate President Peter Courtney
   House Speaker Karen Minnis
   Jean Thorne, Director, Oregon Department of Human Services
   Oregon Board of Medical Examiners
   Oregon Board of Nursing
   Oregon Association of Hospitals and Health Systems
   Oregon Medical Association
   Oregon Association of Nurse Anesthetists
   Oregon Society of Anesthesiology
   Oregon Rural Health Association
   Oregon Nurses Association