



Anesthesiologist Assistants: A New Profession Coming to Washington State! Karen Domino, MD, MPH

The WMC will assist in the development and implementation of this profession, who work under the medical direction of an anesthesiologist or group of anesthesiologists. Rulemaking on this profession will begin this autumn and the profession should be operational by January 1, 2026. Importantly, this law grandfathers physician assistants who are currently practicing in anesthesiology to continue their practice according to the physician assistant requirements. The WMC will also be responsible for licensing, discipline and oversight of CAAs

While CAAs are new to WA State, the profession has been around for over 40 years. Three chairs of academic anesthesiology departments formed the master's level program after analysis of anesthesia workforce needs. The first CAA training programs started in 1969 at Emory University and Case Western Reserve University. The CAA program requires a premedical college background, in contrast to a nursing background that is required for certified nurse anesthetists (CRNAs).

Anesthesiology assistant training programs are 24–28-month graduate programs within a medical school resulting in a Master of Science in Anesthesia or Medical Science degree. Currently, there are 20 programs in the U.S., clustered within Medical Schools in the South and Midwest. At present, the University of New Mexico is the only Western CAA program. These programs are highly competitive and demanding. Upon graduation, CAA students have completed over 2000 of clinical training in anesthesia, including arterial and central venous access; airway management; general and regional anesthesia; management of medications, fluid, and blood advanced life support; and preoperative/postoperative anesthesia care, including subspecialty training. After graduation, the students must pass a certification exam offered by the National Commission for Certification

of Anesthesiologist Assistants (NCCAA), with recertification every six years.

CAAs can only work under the direct in-person medical supervision of a physician anesthesiologist, who must be immediately available if needed, as required by the Center for Medicaid and Medicare Services (CMS). The need for direct physician anesthesiologist medical supervision of CAAs is unique. This need contrasts with the practice of Certified Registered Nurse Anesthetist (CRNAs), who are granted independent practice and billing for anesthesia service in many states, including WA. While there are differences in the background, education, and training requirements of CAAs and CRNAs, evidence suggests that these differences do not result in disparity of knowledge base, technical skills, or quality of care when supervised directly by a physician anesthesiologist. CAAs are recognized by CMS, Tricare and VA hospital system, all major national and regional insurers, the Anesthesia Patient Safety Foundation, the American Society of Anesthesiologists, The American Medical Association, and the American College of Surgeons.

Certified Anesthesiologist Assistants Practice Authorization

