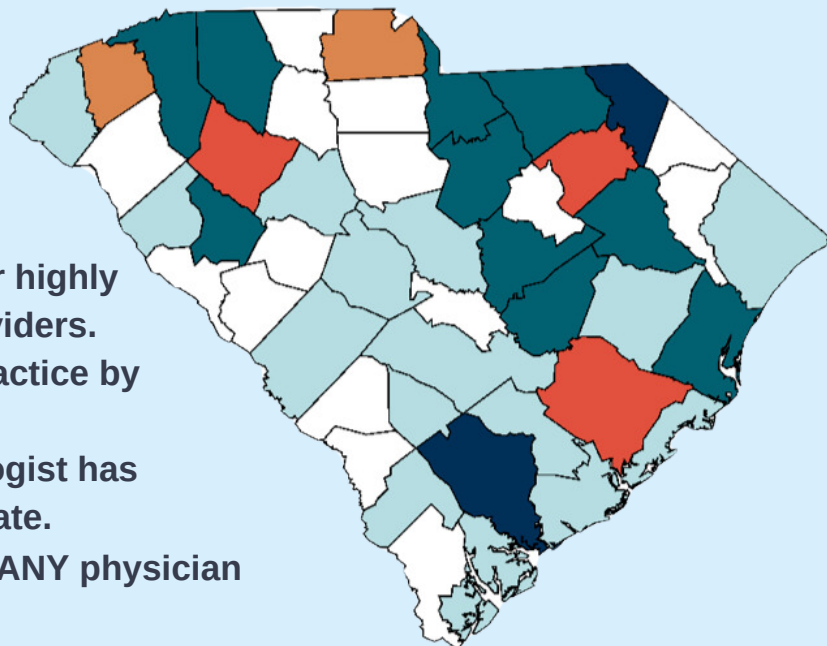# CRNA WORKFORCE

H 3785 - SOLUTION TO SOUTH CAROLINA'S ANESTHESIA STAFFING NEEDS

CRNAS AND ANESTHESIA DELIVERY

70.2% of Anesthesia Providers in South Carolina are CRNAs

Legend:
- CRNA Only
- 75%+ CRNA
- 50-<75% CRNA
- 50<-<75% MDA
- 75%+ MDA
- No Anesthesia Providers

- *Support H 3785* and let's utilize all of our highly skilled and credentialed anesthesia providers.
- CRNA's ALREADY have full scope of practice by training, certification, and licensure.
- Supervision by a physician anesthesiologist has never been required by statute in any state.
- CRNAs currently can be supervised by ANY physician or dentist in SC.

- South Carolina is ranked 41st [1] for overall healthcare performance, with 23 rural hospitals, [2] three of those critical access hospitals, to serve over 730,000 residents. [3]
- Nearly 1.4 million South Carolina residents live in rural area, facing more challenges in access to healthcare that their urban counterparts. [4]

- Because Efficiency-driven Anesthesia Modeling uses CRNA providers, it may reduce (or even eliminate) the financial burden placed on facilities, help reduce unnecessary healthcare spending and reflect appropriate anesthesia staffing to meet a facility's patient and surgical needs.
- Removing the state-mandated supervision requirement does not mean that an individual facility cannot impose such a requirement, affording South Carolina facilities the flexibility to utilize CRNAs in ways that best enable each facility to meet the needs of the patients and communities they serve.

[1] United Health Foundation. America's Health Rankings 2022 Annual Report. https://assets.americashealthrankings.org/app/uploads/southcarolina-ahr22.pdf

[2] Becker's Hospital CFO Report. States with the most rural hospital closures. https://www.beckershospitalreview.com/finance/states-with-the-most-rural-hospital-closures.html

[3] Rural Health Information Hub. https://www.ruralhealthinfo.org/states/south-carolina#overview

[4] South Carolina Office of Rural Health. https://scorh.net/ruraloutcomes/