

- SUBJECT:** Regulation of certain local anesthesia services
- COMMITTEE:** Public Health — favorable, without amendment
- VOTE:** 9 ayes — Kolkhorst, Naishtat, Collier, Cortez, S. Davis, Guerra, S. King, J.D. Sheffield, Zedler
- 0 nays
- 2 absent — Coleman, Laubenberg
- SENATE VOTE:** On final passage, April 18 — 31-0, on Local and Uncontested Calendar
- WITNESSES:** For — (*Registered, but did not testify:* Jaime Capelo, Texas Society of Anesthesiologists; Dan Finch, Texas Medical Association; Marisa Finley, Scott & White Center for Healthcare Policy; Lisa Hollier, American Congress of OBGYNs; Jay Propes, Texas Ophthalmological Association; Rachael Reed, Texas Ophthalmological Association; Crystal Wright, Texas Medical Association/Texas Society of Anesthesiologists)
- Against — None
- On — (*Registered, but did not testify:* Mari Robinson, Texas Medical Board and Texas Physician Assistant Board)
- BACKGROUND:** Occupations Code, ch. 162, subch. C requires the Texas Medical Board to establish minimum standards for anesthesia services provided in an outpatient setting. Sec. 162.103 lists conditions under which the rules established under Subch. C do not apply, including an outpatient setting in which only local anesthesia, peripheral nerve blocks, or both are used.
- DIGEST:** SB 978 would allow the Texas Medical Board to establish minimum standards for anesthesia services provided in an outpatient setting in which local anesthesia, peripheral nerve blocks, or both were used if the total dosage amount exceeded 50 percent of the recommended maximum safe dosage per outpatient visit.
- This bill would take effect September 1, 2013.

**SUPPORTERS
SAY:**

SB 978 would enhance patient safety by giving the Texas Medical Board the authority to establish minimum standards and best practices for the use of local anesthesia in an outpatient setting. When the law that exempted local anesthesia from the Texas Medical Board rules was passed, local anesthesia provided in an outpatient setting was only used for minor procedures. However, local anesthesia is now being used for more significant procedures, such as cosmetic surgery and liposuction. These more significant procedures can use more dangerous levels of anesthesia and are dangerous if not administered correctly. Allowing the Texas Medical Board to establish rules when local anesthesia is used in higher dosages in outpatient settings would ensure sensible safety standards and weed out bad actors, helping protect patient safety.

**OPPONENTS
SAY:**

While the bill may be well intended, it would increase the regulatory burden on physicians. New regulations for outpatient anesthesia services could increase the cost of services and discourage certain providers from performing them.