

Written Testimony in Support of HB1558

State Board of Physicians Anesthesiologist Assistants Licensing

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House Health Committee

6 Bladen Street

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Dear Chair Bagnall, Vice Chair Cullison, and Members of the House Health Committee,

My name is Parth Kalola. I am a Maryland resident and a Certified Anesthesiologist Assistant living in Frederick since 2021. My wife and I have built our life here and two of our three children were born in Frederick. We plan to raise our family here long term.

I am writing in strong support of House Bill 1558, State Board of Physicians Anesthesiologist Assistants Licensing.

I currently practice anesthesia in Washington, DC because Maryland does not license Certified Anesthesiologist Assistants. While I value the work I do there, the daily commute is significant and takes time away from my family and the community where I live. More importantly, it means Maryland patients cannot benefit from clinicians like me who live here but are not allowed to practice here.

Certified Anesthesiologist Assistants work exclusively within the physician anesthesiologist led Anesthesia Care Team model. We do not practice independently. Anesthesiologist supervision is required, and we operate within the same operating room safety systems used by physician anesthesiologists including monitoring protocols, escalation pathways, and immediate physician involvement when needed.

This legislation does not create independent practice. It simply allows hospitals to add another supervised anesthesia professional to the existing physician led team.

Maryland hospitals and surgical centers are facing anesthesia staffing pressure. In many places facilities rely heavily on locum and traveling clinicians, which can be more expensive

and less stable than having permanent team members. Allowing CAAs to practice in Maryland would help hospitals recruit long term clinicians who are already trained, nationally certified, and ready to work within the existing care team structure.

Many CAAs already live in Maryland but must commute to DC or other states to work. Licensing would allow those clinicians to practice where they live and help expand surgical access for Maryland patients.

CAA training is graduate level and anesthesia focused. We complete extensive clinical training, pass a national certification examination, and maintain certification through continuing education and recertification requirements. Hospitals credential and privilege anesthesia clinicians through rigorous peer review and quality oversight. State licensure would add an additional layer of accountability and transparency.

I would also be willing to pay the full Maryland licensure fee. For many of us who commute out of state, the cost of licensure would easily be offset by the time and expense currently spent commuting.

As a Frederick resident, I would welcome the opportunity to care for patients in my own community rather than traveling out of state to practice.

Maryland patients deserve timely access to safe, physician led anesthesia care. I respectfully urge the committee to support House Bill 1558 and allow Certified Anesthesiologist Assistants to practice in Maryland.

Thank you for your time and consideration.



Parth Kalola, CAA

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