

HOUSE BILL REPORT

HB 2989

As Passed House:
February 16, 2010

Title: An act relating to respiratory care practitioners.

Brief Description: Concerning respiratory care practitioners.

Sponsors: Representatives Moeller and Cody.

Brief History:

Committee Activity:

Health Care & Wellness: 1/26/10, 1/29/10 [DP].

Floor Activity:

Passed House: 2/16/10, 98-0.

Brief Summary of Bill

- Expands the types of practitioners under whose order and direction a respiratory care practitioner may practice.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 13 members: Representatives Cody, Chair; Driscoll, Vice Chair; Ericksen, Ranking Minority Member; Bailey, Campbell, Clibborn, Green, Herrera, Hinkle, Kelley, Moeller, Morrell and Pedersen.

Staff: Rebecca Jones (786-5793) and Jim Morishima (786-7191).

Background:

A respiratory care practitioner (RCP) works with patients who have deficiencies and abnormalities affecting the cardiopulmonary system and associated systems. A RCP must be licensed and registered in order to practice, unless exempted, and must be under the order and qualified medical direction of a physician.

The practice of respiratory care covers an array of procedures, including: (1) the administration of prescribed medical gases; (2) postural drainage, chest percussion, and

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vibration; and (3) the insertion of devices to draw, analyze, infuse, or monitor pressure in blood as prescribed by a physician or an advanced registered nurse practitioner (ARNP).

Summary of Bill:

The types of practitioners under whose order and direction a RCP may practice are expanded to "health care practitioners" instead of "physicians." "Health care practitioner" is defined to include physicians, osteopathic physicians, physician assistants, osteopathic physician assistants, and ARNPs.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) There has been some confusion over scope of practice issues regarding the types of practitioners from whom respiratory therapists can accept orders and this bill clears that up. The bill adds nurse practitioners and physician assistants to the list of those who can already give orders to respiratory therapists and is similar to technical clean ups that have been done for other practice areas under the Department of Health. The list of practitioners under whose order and direction a respiratory therapist may practice could be expanded further to include other independent prescribing practitioners like naturopaths. The statute regulating respiratory therapists was written 15 years ago when nurse practitioners and physician assistants were not prevalent in the hospital setting. This bill is about keeping up with modern practice, as ARNPs and physician assistants are heavily relied upon today. This is a patient access and patient safety issue.

(Opposed) None.

Persons Testifying: Nick Federici, Respiratory Care Society of Washington; and Gary Wickman, Respiratory Care Society of Washington.

Persons Signed In To Testify But Not Testifying: None.