
Health Care & Wellness Committee

HB 1383

Brief Description: Concerning respiratory care practitioners.

Sponsors: Representatives Taylor, Stonier, Dolan, Johnson, J., Leavitt, Simmons, Berry, Fitzgibbon, Sells, Ryu, Berg, Ormsby, Macri and Morgan.

<p style="text-align: center;">Brief Summary of Bill</p> <ul style="list-style-type: none">• Makes changes to the licensing, supervision, and scope of practice for respiratory care practitioners.
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Hearing Date: 2/8/21

Staff: 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.

I. Licensing Requirements.

To be licensed as an RCP, an applicant must meet specified requirements, including:

- Education: The applicant must have graduated from a school approved by the Secretary of Health (Secretary) or have completed an alternate training meeting Secretary-approved criteria. The school must offer a two-year respiratory therapy educational program accredited by the Committee On Accreditation for Respiratory Care, the American Medical Association's Committee on Allied Health Education and Accreditation, or the Commission on Accreditation of Allied Health Education Program.
- Examination: The applicant must successfully complete the entry-level examination

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administered by the National Board for Respiratory Care (NBRC). The NBRC also offers a Registered Respiratory Therapist credential, which requires passage of the entry-level examination and a clinical simulation examination. A person may practice as a respiratory care practitioner while awaiting the results of the examination.

- Experience: The applicant must complete any experience requirement established by the Secretary.
- Good Moral Character: The applicant must demonstrate good moral character to the Secretary's satisfaction.

II. Scope of Practice.

An RCP is employed in the treatment, management, diagnostic testing, rehabilitation, and care of patients with deficiencies and abnormalities which affect the cardiopulmonary system and associated aspects of other systems. The practice of respiratory care covers a variety of procedures, including:

- the administration of prescribed medical gases exclusive of general anesthesia;
- the administration, to the extent of training determined by the Secretary, of prescribed pharmacologic agents related to respiratory care; and
- postural drainage, chest percussion, and vibration.

III. Practice Settings.

Settings in which an RCP may provide services to a patient include licensed health facilities, clinics, home care, home health agencies, physician offices, and public or community health services.

IV. Supervision.

An RCP must be under the order and qualified medical direction of a health care practitioner, including physicians, osteopathic physicians, podiatric physicians, advanced registered nurse practitioners, naturopaths, and physician assistants.

Summary of Bill:

I. Licensing Requirements.

For licenses issued on or after January 1, 2022, the examination requirement for a respiratory care practitioner (RCP) is replaced with a requirement that the applicant possess an active credential in good standing as a Registered Respiratory Therapist issued by the National Board of Respiratory Care or successor organization.

The required education program must be at least two years in length, instead of exactly two years in length.

The authorization for a person to practice as a respiratory care practitioner while awaiting the results of the examination is eliminated.

II. Scope of Practice.

The scope of practice for an RCP is altered to specifically include:

- disease prevention;
- the administration of nitrous oxide for analgesia;
- medications administered via nebulizer;
- extracorporeal life support and extracorporeal membrane oxygenation; and
- cardiopulmonary stress testing, including the administration of medications used during such testing.

The type of pharmacologic agents that an RCP may administer is changed to those related to cardiopulmonary care, instead of respiratory care.

III. Practice Settings.

An RCP may provide services through telemedicine.

IV. Supervision.

The orders of the health care practitioner may be written, verbal, or telephonic.

Appropriation: None.

Fiscal Note: Requested on February 5, 2021.

Effective Date: The bill takes effect on January 1, 2022.