

# SENATE BILL REPORT

## HB 1114

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As Reported by Senate Committee On:  
Health & Long-Term Care, March 20, 2025

**Title:** An act relating to the respiratory care interstate compact.

**Brief Description:** Concerning the respiratory care interstate compact.

**Sponsors:** Representatives Leavitt, Ybarra, Schmidt, Ryu, Reed, Macri, Doglio, Simmons, Ormsby and Hill.

**Brief History:** Passed House: 3/4/25, 97-0.

**Committee Activity:** Health & Long-Term Care: 3/18/25, 3/20/25 [DP].

### Brief Summary of Bill

- Enacts the Respiratory Care Interstate Compact.

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### SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

**Majority Report:** Do pass.

Signed by Senators Cleveland, Chair; Orwall, Vice Chair; Muzzall, Ranking Member; Bateman, Chapman, Christian, Harris, Holy, Riccelli, Robinson and Slatter.

**Staff:** Julie Tran (786-7283)

**Background:** Respiratory Care Practitioners. A respiratory care practitioner is a person employed in the treatment, management, diagnostic testing, rehabilitation, disease prevention, and care of patients with deficiencies and abnormalities which affect the cardiopulmonary system, including the lungs and heart.

To be licensed as a respiratory care practitioner, an applicant must meet the following requirements:

- graduate from a school approved by the secretary of health (Secretary) or successful

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- completion of alternate training established by the Secretary;
- for licenses issued prior to July 1, 2022, successful completion of an examination administered by the Secretary;
- for licenses issued on or after July 1, 2022, successful completion of both an examination and a clinical simulation examination administered or approved by the Secretary;
- successful completion of any experience requirement established by the Secretary; and
- good moral character.

Compact History. The Respiratory Care Interstate Compact is the result of a partnership between The Council of State Governments, the American Association for Respiratory Care, and the Department of Defense. No state has enacted the Respiratory Care Interstate Compact legislation.

**Summary of Bill:** The Respiratory Care Practitioner Compact (compact) is established, which allows licensed respiratory care practitioners to practice across state lines in compact states under the compact privilege.

A Respiratory Care Interstate Compact Commission (commission) is created. The commission is a joint government agency whose membership consists of all member states that have enacted the compact. The commission comes into existence on or after the compact's effective date, which is the date when the compact is enacted in the seventh member state.

States that enact the compact before the compact comes into effect are subject to review after the compact's effective date. A state may withdraw from the compact by repealing its enacting statute, but the withdrawal is not effective until 180 days after the statute's repeal.

Commission Duties. The commission has the power to establish and amend the commission's fiscal year, bylaws and policies, and rules, which is binding in all member states. The commission also has the following powers:

- maintain financial records;
- meet and take action consistent to the compact provisions, commission rules, and the commission bylaws;
- initiate and conduct legal proceedings or actions on behalf of the commission;
- maintain and certify records and information provided to a member state as the commission's authenticated business records and designate an agent to do so on the commission's behalf;
- purchase and maintain insurance and bonds;
- accept or contract for services of personnel including, but not limited to, member state employees;
- conduct an annual financial review;
- assess and collect fees;

- hire employees, elect or appoint officers, fix compensation, define duties, grant such individuals appropriate authority to carry out the purposes of the compact, and establish the commission's personnel policies and programs relating to conflicts of interest, personnel qualifications, and other related personnel matters;
- accept any and all appropriate gifts, donations, grants of money, other sources of revenue, equipment, supplies, materials, and services, and receive, utilize, and dispose of the same provided that at all times: the commission shall avoid any appearance of impropriety; and the commission shall avoid any appearance of conflict of interest;
- lease, purchase, retain, own, hold, improve, or use any property, real, personal, or mixed, or any undivided interest therein;
- sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property, real, personal, or mixed;
- establish a budget and make expenditures;
- borrow money in a fiscally responsible manner;
- appoint committees, including standing committees;
- provide and receive information from, and cooperate with, law enforcement agencies;
- establish and elect an executive committee;
- enter into contracts or arrangements for the management of the commission's affairs;
- determine whether a state's adopted language is materially different from the model compact language such that the state would not qualify for participation in the compact; and
- perform such other functions as may be necessary or appropriate to achieve the compact's purpose.

Commission Membership, Voting, and Meetings. Membership of the commission consists of one commissioner selected by each participating state. The commissioner must be an administrator of the member state's respiratory therapy licensing authority or their designated staff. The commission must meet at least once annually and adopt and provide to the member states an annual report.

The commission shall establish, by rule or in their bylaws, a term of office and term limits for commissioners. The commission may recommend to a member state the removal or suspension of any commissioner from office. A member state's respiratory therapy licensing authority shall file any vacancy of its commissioner occurring on the commission within 60 days of the vacancy.

Each commissioner is entitled to one vote on all matters before the commission requiring the commissioners' vote. The commissioner shall vote in person or by such other means as provided in the bylaws, which may provide for commissioners to meet by telecommunication, videoconference, or other means of communication.

All commission meetings must be open to the public unless under certain circumstances. Notice of public meetings must be posted on the commission's website at least 30 days prior

to the public meeting and it must include the meeting's time, date, and location, and if the meeting is to be held or accessible via telecommunication, videoconference, or other electronic means. The notice must also include the mechanism for accessing the meeting.

The commission may convene an emergency public meeting by providing at least 24 hours prior notice on the commission's website, and any other means as provided in the commission's rules. The commission's legal counsel must certify that one of the reasons justifying an emergency public meeting has been met.

The commission or the executive committee may convene in a closed, nonpublic meeting for the commission or executive committee to receive or solicit legal advice or to discuss:

- noncompliance of a member state with its obligations under the compact;
- the employment, compensation, discipline, or other matters, practices, or procedures related to specific employees;
- current or threatened discipline of a licensee or compact privilege holder by the commission or by a member state's respiratory therapy licensing authority;
- current, threatened, or reasonably anticipated litigation;
- negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;
- accusing any person of a crime or formally censuring any person;
- trade secrets or commercial or financial information that is privileged or confidential;
- information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;
- investigative records compiled for law enforcement purposes;
- information related to any investigative reports prepared by or on behalf of or for use of the commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to the compact;
- legal advice;
- matters specifically exempted from disclosure by federal or member state law; or
- other matters as promulgated by the commission by rule.

If a meeting, or portion of a meeting, is closed, the presiding officer shall state the meeting will be closed and reference each relevant exempting provision, and such reference shall be recorded in the minutes.

The commission must keep minutes in accordance with commission rules and bylaws. All documents considered in connection with an action shall be identified in such minutes. All minutes and closed meeting documents must remain under seal, subject to release only by the commission's majority vote or order of a court of competent jurisdiction.

Commission Financing. The commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities. The commission may accept any and all appropriate revenue. The commission may levy on and collect an annual assessment from each member state and impose fees on licensees of

member states to whom it grants a compact privilege to cover the cost of the commission's operations and activities and its staff.

The commission shall not incur obligations of any kind prior to securing the funds or a loan adequate to meet the same; nor shall the commission pledge the credit of any of the member states, except by and with the member state's authority.

The commission shall keep accurate accounts of all receipts and disbursements, which are subject to the financial review and accounting procedures established under the commission's bylaws.

Executive Committee. The executive committee's powers, duties, and responsibilities include:

- overseeing the day-to-day activities of the administration of the compact;
- recommending changes to the rules or by laws, changes to this compact legislation, fees charged to compact member states, fees charged to licensees, and other fees;
- ensuring compact administration services are appropriately provided, including by contract;
- preparing and recommending the budget;
- maintain financial records on the commission's behalf;
- monitoring compact compliance of member states and providing compliance reports to the commission;
- establishing additional committees as necessary;
- exercising the commission's powers and duties during the interim between commission meetings, except for adopting or amending rules and bylaws, and exercising any other powers and duties expressly reserved to the commission by rule or bylaw; and
- performing other duties as provided in the commission's rules or bylaws.

The executive committee is composed of up to nine members that includes seven voting members who are elected by the commission from the current commission' membership and two ex officio, nonvoting members. The commission may remove any of the executive committee members.

The executive committee must meet at least annually and the meetings must be open to the public, except that the executive committee may meet in a closed nonpublic meeting under certain circumstances.

Compact Membership. To be eligible for compact membership, a state must:

- enact the compact;
- license respiratory care practitioners;
- participate in the commission's data system;
- have a mechanism in place for receiving and investigating complaints against licensees and compact privilege holders;

- notify the commission of any significant investigative information or any adverse action against a licensee, a compact privilege holder, or license applicants;
- comply with the rules of the commission;
- grant the compact privilege to a holder of an active home state license and meets requirements outlined for a member state; and
- complete a criminal background check for each new licensee at the time of initial licensure.

Compact Privilege. To exercise the compact privilege, a licensee must:

- hold and maintain an active home state license as a respiratory care practitioner;
- hold and maintain an active credential from the National Board for Respiratory Care;
- have not had an adverse action against a license within the previous two years;
- notify the commission that the licensee is seeking the compact privilege within a remote state;
- pay any applicable fees;
- meet any jurisprudence requirements established by the remote state in which the licensee is seeking a compact privilege;
- report to the commission adverse action taken by any nonmember state within 30 days from the date the adverse action was taken;
- report to the commission the address of the licensee's home residence;
- consent to accept service of process by mail at the licensee's home residence with respect to any action brought against the licensee by the commission or a member state; and
- consent to accept service of a subpoena by mail at the licensee's home residence with respect to any action brought or investigation conducted by the commission or a member state.

Compact privilege is valid until the expiration date or revocation of the home state license unless terminated pursuant to adverse action.

A licensee providing respiratory therapy in a remote state under the compact privilege must function within the scope of practice authorized by the remote state for the type of respiratory therapy licensure the licensee holds.

If a licensee's compact privilege in a remote state is removed by the remote state, the individual shall lose or be ineligible for the compact privilege in that remote state until the compact privilege is no longer limited or restricted by that state.

If a home state license is encumbered, the licensee shall lose the compact privilege in all remote states until: (1) the home state license is no longer encumbered, and (2) two years have elapsed from the date on which the license is no longer encumbered due to the adverse action.

Adverse Action. A member state in which a licensee is licensed has authority to impose

adverse action against a license issued by that member state. A member state may take adverse action based on significant investigative information of a remote state or the home state, provided that the member state follows its own procedures for imposing adverse action.

A remote state may take adverse action against a licensee's compact privilege in that state. States may participate in joint investigations.

Oversight, Dispute Resolution, and Enforcement. The executive and judicial branches of the participating states must enforce the compact. If the commission determines a state is in default, it must provide written notice to that state and provide it with remedial training and specific technical assistance regarding the default. If a state fails to cure the default, and after all other means of securing compliance have been exhausted, a defaulting state may be terminated from the compact through a vote of the majority of commission members.

Active Military Member or Their Spouse. An active military member or their spouse must designate a home state where the individual has a current license in good standing. An active military member and their spouse must not be required to pay any fee to the commission for compact privilege. A remote state may choose to charge a reduced fee or no fee to an active military member and their spouse if the remote state charges a fee for a compact privilege.

Data System. The commission must establish a coordinated data and reporting system containing licensure, adverse action, and the presence of significant investigative information. Participating states must submit a uniform data set to the data system. Participating states may designate information that may not be shared without the states' permission. Any information subsequently required to be expunged by the laws of a participating state must be removed from the system.

Other Compact Provisions. There are other compact provisions about the commission related to rulemaking, qualified immunity, defense, and indemnification. There are provisions in the bill related to severability as well as consistent effect and conflict with other state laws.

**Appropriation:** None.

**Fiscal Note:** Available.

**Creates Committee/Commission/Task Force that includes Legislative members:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony:** PRO: The demand for respiratory care services has surged in recent years and these practitioners are needed to serve more people in the

community. The profession faces troubling workforce shortages which highlights the urgent need for innovative solutions like this compact that allows licensed respiratory therapists in participating states to obtain compact privileges and practice across state lines without the administrative delays and the cost of applying for multiple state licensures. This bill will also help benefit our professionals in the armed forces and their spouses with the mobility to practice in multiple states and help with affordability. This compact ensures timely patient care and expand patient access to qualified respiratory therapists with diverse knowledge and skills.

OTHER: This compact works like many other compacts that currently have been adopted by the state and someone who is qualified to use the compact has the ability to use their license in a compact member state. This process is facilitated by a data system that is administered by the compact, which allows for that facilitation of privileges to practice. This is the first year the compact has been available for consideration and it has been introduced in five states so far this year.

**Persons Testifying:** PRO: Representative Mari Leavitt, Prime Sponsor; Miriam O'Day, American Association for Respiratory Care; Carl Hinkson, PRMCE; Gary Wickman, RCSW.

OTHER: Carl Sims, The Council of State Governments.

**Persons Signed In To Testify But Not Testifying:** No one.