FINAL BILL REPORT SHB 1383

C 114 L 21

Synopsis as Enacted

Brief Description: Concerning respiratory care practitioners.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Taylor, Stonier, Dolan, Johnson, J., Leavitt, Simmons, Berry, Fitzgibbon, Sells, Ryu, Berg, Ormsby, Macri and Morgan).

House Committee on Health Care & Wellness Senate Committee on Health & Long Term Care

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 Programs.
- Examination: The applicant must successfully complete the entry-level examination 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

House Bill Report - 1 - SHB 1383

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

- the Secretary.
- <u>Good Moral Character</u>: 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:

I. Licensing Requirements.

For licenses issued on or after January 1, 2022, an applicant for licensure as a respiratory care practitioner (RCP) must complete both an examination and a clinical simulation examination approved by the Secretary of Health (Secretary). The Secretary may deem an applicant in compliance with the examination requirement if the applicant possesses an active credential in good standing as a Registered Respiratory Therapist issued by a national organization, such as the National Board of Respiratory Care, if one of the requirements for possessing the credential is passage of the two examinations.

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. The Secretary may define training requirements and hospital protocols for nitrous oxide administration;
- · medications administered via nebulizer; and
- cardiopulmonary stress testing, including the administration of medications used during such testing.

Additionally, an RCP may act as an extracorporeal membrane oxygenation (ECMO) specialist for purposes of extracorporeal life support (ECLS) and ECMO in all critical areas, including the operating room, only if the RCP has obtained specialized education and training as determined by the Secretary. Programs meeting the ECLS Organization guidelines for training and continuing education of ECMO specialists must be considered sufficient to meet the specialized education requirement. An ECMO specialist's duties do not include the conduct and management of cardiopulmonary bypass, the incorporation of venous reservoirs, or cardiotomy suction during ECMO therapy.

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 a health care practitioner to an RCP may be written, verbal, or telephonic.

An RCP may administer nitrous oxide only under the direct supervision of a health care practitioner, which means the practitioner is physically present in the treatment operatory while the procedures are performed by the RCP.

Votes on Final Passage:

House 98 0 Senate 49 0 (Senate amended) House 98 0 (House concurred)

Effective: July 1, 2022