

HOUSE BILL 358: Modernize Respiratory Care Practice Act.

2017-2018 General Assembly

Committee:	House Finance	Date:	April 20, 2017
Introduced by:	Reps. Burr, Goodman, Boles	Prepared by:	Trina Griffin
Analysis of:	PCS to First Edition		Staff Attorney
	H358-CSSVf-14		

OVERVIEW: House Bill 358 would amend the Respiratory Care Practice Act by authorizing the Board to establish requirements for persons seeking an endorsement to their license and to charge a \$50 fee for the endorsement, by making changes to appointment authority for one of the Board members, by modifying some licensure requirements, and by repealing the Board's authority to issue temporary and provisional licenses.

CURRENT LAW: Under current law, the North Carolina Respiratory Care Board administers the Respiratory Care Act. It is a 10-member Board composed as follows:

- (1) Two members shall be respiratory care practitioners, one whom is appointed by the Speaker of the House of Representatives and one of whom is appointed by the President Pro Tempore of the Senate.
- (2) Four members shall be physicians licensed to practice in North Carolina, and whose primary practice is Pulmonology, Anesthesiology, Critical Care Medicine, or whose specialty is Cardiothoracic Disorders. These four members are appointed as follows: One by the Speaker of the House of Representatives, one by the President Pro Tempore of the Senate, one by the North Carolina Medical Society, and one by the Old North State Medical Society.
- (3) One member shall represent, and is appointed by, the North Carolina Hospital Association.
- (4) One member shall represent, and is appointed by, the North Carolina Association of Medical Equipment Services.
- (5) Two members shall represent the public at large and are appointed by the Governor.

BILL ANALYSIS:

Section 1 of the bill would make technical corrections to definitions in G.S. 90-648 and would add definitions for "Advanced practice" and "Endorsement."

Sections 2 and 3 would replace the Board member appointed by and representing the North Carolina Association of Medical Equipment Services (NCAMES) with a member appointed by the Atlantic Coast Medical Equipment Services Association (ACMESA). This change is necessary because NCAMES voted to expand its membership to provide regional coverage in November 2016. As a result of that expansion, the association's name was changed to ACMESA.

Section 4 would grant the Board the authority to establish and adopt rules defining educational and credential requirements for persons seeking an endorsement to their license. Section 6 authorizes the Board to charge a fee of up to \$50 for a license with an endorsement.

Karen Cochrane-Brown Director



Legislative Analysis Division 919-733-2578

This bill analysis was prepared by the nonpartisan legislative staff for the use of legislators in their deliberations and does not constitute an official statement of legislative intent.

House PCS 358

Page 2

Section 5 would do the following:

- Require an applicant to submit proof of an associate's degree in respiratory care education approved by the Commission on Accreditation for Respiratory Health Care¹ as well as proof they passed the Therapist Multiple-Choice exam given by the National Board for Respiratory Care.² Currently, there is no requirement that applicants have a specific degree.
- Require the Board to state the terms and conditions of use of a license to licensees.
- Provide that an applicant must include a signed consent form with his or her application consenting to a criminal background check and use of their fingerprints for that purpose. This is a conforming change to existing law, which already requires the Board to provide the form to the Department of Public Safety for purposes of conducting the background check.

Section 7 would repeal the statutes allowing for temporary and provisional licenses and remove the fees for those licenses.

EFFECTIVE DATE: This act would be effective October 1, 2017.

Jason Moran-Bates, counsel to House Health, substantially contributed to this summary.

¹ The Board has required an associate's degree since 2002 when the last one-year programs in respiratory care education were phased out. This change merely codifies the existing practice.

² In January 2015, the National Board for Respiratory Care changed the name and modified the format of the exam administered to applicants seeking the Registered Respiratory Therapist credential. The new name is the Therapist-Multiple Choice Exam, and its content is substantially similar to the old entry level exam.