



# HOUSE BILL 71: Respiratory Care Modernization Act.

2025-2026 General Assembly

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<b>Committee:</b>	House Health. If favorable, re-refer to Regulatory Reform. If favorable, re-refer to Rules, Calendar, and Operations of the House	<b>Date:</b>	March 11, 2025
<b>Introduced by:</b>	Reps. Moss, Huneycutt	<b>Prepared by:</b>	Jason Moran-Bates
<b>Analysis of:</b>	First Edition		Committee Staff

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**OVERVIEW:** *House Bill 71 would create regulations for advance respiratory care practitioners, update names for entities required to sit on the North Carolina Respiratory Care Board (Board), update names of entities permitted to accredit respiratory care licensure exams, and establish that Board investigations are not public records.*

**BILL ANALYSIS:** House Bill 71 would amend the Respiratory Care Act (Article 38 of Chapter 90) in the following ways:

- Definitions would be added for "advanced respiratory care practitioner," "advanced respiratory care procedures," "endorsement," "practice of advanced practice respiratory therapy," "serious injury," and "supervising physician."
- The scope of practice for Advanced Respiratory Care Practitioners would be determined by a supervising physician and the Board, but could not include diagnosis, prescribing, interpreting diagnostic tests, surgery, delivery of anesthesia, or performing procedures that are more than minimally invasive in most circumstances.
- The statutes governing the membership of the North Carolina Respiratory Care Board would be amended to reflect the North Carolina Association of Medical Equipment Services changing its name to the Atlantic Coast Medical Equipment Services Association.
- Applicants for respiratory care licensure would be required to direct their educational institutions to submit transcripts to the Board.
- The Board would be able to adopt rules for examination requirements for entry-level respiratory care practitioners.
- Requirements for licensure as an advanced respiratory care practitioner would be established. These requirements would include submission of a completed application, required fees, proof of education, compliance with the requirements of a Basic Cardiac Life Support program, and proof of a passing score on an exam.
- The statutory provisions requiring a \$200 fee for an exam and a \$50 fee for a provisional license would be repealed.
- Investigative records of the Board would not be public records under Chapter 132, but notices of statement of charges and notices of hearing would be public records. The Board would be required to turn all evidence it wishes to use in a disciplinary hearing over to the licensee or applicant who is the subject of the hearing. The Board could release confidential disciplinary information to law

Kara McCraw  
Director



Legislative Analysis  
Division  
919-733-2578

# House Bill 71

*Page 2*

enforcement in other jurisdictions, and licensees would be required to report arrests on felony, DUI, or controlled substance possession, use, or sale charges.

- Technical and conforming changes would be made throughout Article 38.
- The Board would be directed to adopt rules to administer the new statutory provisions.

**EFFECTIVE DATE:** The rule-making provisions would be effective when the bill becomes law. The remainder of the bill would become effective October 1, 2025.