

HOUSE BILL 71: Respiratory Care Modernization Act.

2025-2026 General Assembly

Committee: House Regulatory Reform. If favorable, re- Date: March 18, 2025

refer to Rules, Calendar, and Operations of the

House

Introduced by: Reps. Moss, Huneycutt **Prepared by:** Aaron McGlothlin

Analysis of: Second Edition Committee Counsel

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 statues 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- The statutory provisions requiring a \$200 fee for an exam and a \$50 fee for a provisional license would be repealed.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

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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.

Jason Moran-Bates, staff attorney with the Legislative Analysis Division, substantially contributed to this summary.