

TO: Economic Affairs Interim Committee (EAIC)

From: Montana Society for Respiratory Care

RE: Review of the Respiratory Care Licensing Board per HB 525

The Montana society for Respiratory Care (MSRC) respectfully submits the following comments and responses on behalf of the nearly 600 licensed respiratory therapists in Montana.

The MSRC unequivocally supports state licensure of the profession of respiratory therapy and the respiratory therapist professional through mandated requirements for education, competency testing, continuing education and the required disciplinary attestations.

EAIC Information Request

The unregulated practice of the occupation or profession creates a direct, immediate hazard to the public health, safety, or welfare.

MSRC Response

Respiratory therapy is not just life enhancing, it is life sustaining. In the wrong hands, in the hands of those who have not documented education and competency, respiratory therapy can injure or kill. Respiratory therapist licensure requires the applicant and licensee to document their education and competency. Licensure provides scrutiny of individuals who provide the therapy and creates a level of safety and quality for the citizens of Montana.

Please review Attachments #1, #2, and #3, the National Board for Respiratory Care's (NBRC) Examination Content Outline.

As with all the other 48 states, District of Columbia and Puerto Rico that require state licensure for respiratory therapists, Montana has adopted the NBRC's Certified Respiratory Therapist (CRT) competency examination as the state licensure examination. The NBRC's examinations are deemed valid and reliable and are accredited by the National Commission for Certifying Agencies, the accreditation body of the Institute for Credentialing Excellence (ICE).

Attachment #1 is the NBRC's Content Outline for the CRT examination. Simply put, respiratory therapists who have graduated from nationally accredited respiratory therapy education programs with a minimum of an associate degree are expected to know and be proficient in every one of content areas enumerated in the CRT Content Outline. What is outlined *is* respiratory therapy, and every clinical area covered could be asked on the CRT exam.

Moreover, the CRT exam is noted as the entry level examination into the profession of respiratory therapy. Please review Attachments #2 and #3. These are the Content Outlines for the advanced level respiratory therapist, the registered respiratory therapist or RRT. This level of the profession requires an additional written examination that builds from the content of the CRT knowledge basis, as well as an

additional testing requirement, completion of a clinical simulation examination. Passing the CRT examination is required before taking the two part RRT examination. This too *is* respiratory therapy.

At a minimum, respiratory therapy services, those clinical services and procedures enumerated in the NBRC's Content Outlines are today being delivered across the spectrum of care sites: the inpatient hospital, long term care hospitals, physician offices, nursing homes, hospice centers, physician offices, rural clinics and the patient's own home. It is imperative that individuals who provide respiratory therapy services to Montana citizens meet mandated licensure qualifications in order to safely provide these complex clinical services and procedures.

EAIC Information Request

The scope of practice is readily identifiable and distinguishable from the scope of practice of other professions and occupations.

MSRC Response

Respiratory therapists evolved from the physicians' need to have uniquely educated and competency-tested personnel to assess, treat, and advise the physicians on the cardio-pulmonary conditions of the physicians' patients. Respiratory therapists have been accepted by the medical community as unique allied health professionals for over 50 years.

Respiratory therapists are the only allied health professionals who are specifically educated and competency tested in all the aspects of cardio-respiratory care (again please review the attachments 1-3). Respiratory therapy is specifically focused on the assessment, treatment, management, control, diagnostic evaluation, education, and care of patients with deficiencies and abnormalities of the cardiopulmonary system as well as on the prevention of the development of these deficiencies. All respiratory therapists are educated and tested to perform the full scope of practice of respiratory therapy.

Respiratory therapists provide a variety of patient care services 24 hours a day, seven days a week, including areas of oxygenation, ventilation and bronchial hygiene, as well as serving as patient advocates and consultants to nurses, physicians, and other member of the health care team. Respiratory therapists also serve a full range of patients from geriatric to neonate. Other specialized services provided include: administration of specialty gases such as heliox and nitric oxide, hyperbaric therapy, extracorporeal membrane oxygenation (ECMO), high frequency ventilation, hemodynamic monitoring, pulmonary function testing, cardiopulmonary rehabilitation, and emergency transport.

EAIC Information Request

The occupation or profession requires a specialized skill or training for which nationally recognized standards of education and training exist;

MSRC Response

Montana respiratory therapy licensure requires applicants to have successfully passed at a minimum the CRT examination. Applicants cannot qualify to take the CRT examination unless they have first graduated from an accredited respiratory therapy education program.

In turn respiratory therapy education programs must meet specific and detailed programmatic standards and be successfully reviewed by trained personnel in order to be accredited by a nationally recognized education accrediting entity the Commission on Accreditation of Respiratory Care (CoARC). The CoARC establishes, maintains, and promotes educational standards of quality to prepare individuals for respiratory care practice. CoARC's mission is to provide consumer protection, advance and enhance the respiratory profession, and protects against compromise of educational quality.

Nationwide there are 439 CoARC accredited education programs. Great Falls College Montana State University and the University of Montana – Missoula are the two CoARC accredited programs in our state.

EAIC Information Request

Qualifications for licensure are justified;

MSRC Response

Montana licensure of the respiratory therapist professional assures the patient and employer that the respiratory therapists rendering the care are graduates of accredited and degree conferring respiratory therapy education program, and the individual has passed a valid competency exam. Moreover, Montana also requires the applicant to meet additional application requirements (Attachment #4). Please note the extensive mandatory questions that the applicant must answer in detail including past employment and licensing in other states, and most importantly specific questions regarding previous legal or disciplinary actions or sanctions.

Moreover, licensure renewal requires the licensee to complete and document twenty hours of approved continuing education for every renewal cycle. This requirement helps assure that the practitioner is maintaining clinical skills and knowledge.

All of these Montana licensure requirements establish a standard that must be met for individuals who will provide the full range of the respiratory therapy scope of practice. The Montana licensure requirements are fully in line with the respiratory therapy licensure requirements of the other states, thus defacto establishing a nationwide standard for respiratory therapy licensure qualifications.

EAIC Information Request

A public benefit is provided by licensure;

MSRC Response

Respiratory therapy licensure was enacted in 1991, and included the statement of purpose that still holds true to this day..

“ 37-28-101. Findings -- purpose. The legislature finds and declares that the practice of respiratory care in the state affects the public health, safety, and welfare. To protect the public from the unqualified practice of respiratory care or unprofessional conduct by qualified practitioners, respiratory care is subject to regulation and control”

This 1991 finding by the legislature resonates more so 23 years after enactment as the provision of respiratory therapy services have become greatly more complex and the sites of care where respiratory therapy is provided has become more diverse.

If the EAIC were to recommend repeal of the respiratory care practitioner licensing statute, Montana would become a refuge as the only state in the contiguous United States without respiratory therapy licensure. Montana would become a magnet for individuals who either did not meet the qualifications of education or have documented competency required for licensure in the other states. Montana would become a haven for those who have had their license rescinded or attract those who had committed an act that would render them ineligible for licensure in other states.

And these very real possibilities describe what could happen with those individuals who *are* respiratory therapists and decide to come to Montana to work. Consider the individuals who are *not* respiratory therapists. The consequences of how a repeal of Montana's respiratory therapist licensure will impact the actual patients must be taken into consideration beyond the direct effect on professional respiratory therapist.

EAIC Information Request

Licensure significantly increases the cost of service to the public.

MSRC Response

The Montana Annotated Code 2013 states the following:

37-1-134. Fees commensurate with costs. *Each board allocated to the department shall set board fees related to the respective program area that are commensurate with costs for licensing, including fees for initial licensing, reciprocity, renewals, applications, inspections, and audits."*

By statute, the costs incurred by the Montana Respiratory Care Licensure Board in administering and executing the statutory requirements of respiratory therapist licensure is borne by the practitioners themselves through the licensing fees assessed on the profession. General revenues and the Montana taxpayers do not have to assume this cost.

Moreover, in the 30 years during which the profession of respiratory therapy has, state by state, gained licensure there has never been any documented studies, valid research in Montana or nationwide that can support, conclude or in any way verify that licensing respiratory therapists increases the cost to employers or the public.

EAIC Information Request

Public support exists for licensure.

MSRC Response

The Montana Society for Respiratory Care which represents the interests of the profession unequivocally supports the continuation of respiratory therapy licensure.

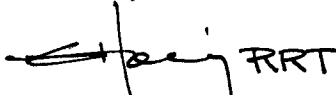
The American Association for Respiratory Care (AARC) the national professional association unequivocally supports the continuation of Montana respiratory therapy licensure (Attachment #5).

The respiratory therapists of Montana want their profession licensed and are willing to meet licensure criteria.

Conclusion:

The complexities of respiratory therapy are such that the public is at risk of injury, and health care institutions are at risk of liability when respiratory therapy is provided by inadequately educated and unqualified health care providers rather than by licensed practitioners appropriately educated, competency tested and licensed in the specialty of respiratory therapy.

Sincerely,

A handwritten signature in black ink, appearing to read "Gia Holiway", followed by the letters "RRT" in a bold, sans-serif font.

Gia Holiway, RRT
President
Montana Society for Respiratory Care