



## **Proponent Testimony for APRT Bill**

**June 6, 2023**

Chairman Cutrona, Vice-Chair Gross, Ranking Member Somani, and esteemed members of the House Health Provider Services Committee, the Ohio Society for Respiratory Care appreciates the opportunity to testify today in support of HB 102 “License Advanced Practice Respiratory Therapists.” My name is Courtney Kallergis, and I serve as the current Chair of the Ohio Society for Respiratory Care Legislative Committee. Our committee goals include formally commenting on all laws and rules that impact the profession of respiratory therapy, and licensing the APRT most definitely falls within the scope of our committee.

Research published in CHEST May 2020<sup>1</sup> demonstrated that gaps exist between the availability of providers and the needs of persons with cardiopulmonary disease across all clinical settings: ambulatory, critical care, and post-acute (chronic care) in the US. A frequently cited solution in the literature was the use of advanced practice providers to fill these gaps. Most current advanced practice providers (APRNs and PAs) are trained to provide care and education for general care patients; this article concluded that specially trained providers, such as APRTs, can lessen the gap in cardiopulmonary providers.

A recent white paper cited on the American Academy of Sleep Medicine’s website “Physician Supply Considerations: The Emerging Shortage of Medical Specialists” (2017)<sup>2</sup>, authored by the physician recruiting firm Merritt Hawkins Associates, indicates pulmonologists are by far, the most in-demand medical specialists with the most job openings. A shortage of pulmonologists (who practice in pulmonary care, critical care, and sleep) is likely to become particularly acute given that in 2017, 73% of pulmonologists were 55 or older. This alarming prediction becomes more concerning with the fact that the Institute of Health Metrics and Evaluation<sup>3</sup> cites Ischemic Heart Disease, Lung Cancer, COPD and Stroke as the top four leading causes of death in the US. (<http://www.healthdata.org/united-states>) and four of the top seven causes of disability in the US.

The use of non-physician advanced practice providers has become a common solution for expanding access to medical care in Ohio. There are currently 28,622 APNs and 5,227 PAs licensed in Ohio, per the 2022 annual reports of the Ohio Board of Nursing and the State Medical Board of Ohio.

The Ohio Society for Respiratory Care developed this law with the American Association for Respiratory Care’s (AARC’s) scope of practice and qualifications, CoARC’s APRT curriculum standards and the Ohio Respiratory Care Law ORC 4761 and pertinent sections of the Physician Assistant Law, ORC 4730. The law’s first 189 pages insert the “APRT” and/or ORC “4761” into all existing laws defining health care providers, prescribers and prescribing requirements or liabilities. The Respiratory Care Law was expanded to include the definition of APRT practice, qualifications, licensing and renewal, and additional disciplinary circumstances. Current Physician Assistant law language was used for physician supervision agreements, prescriptive authority, quality assurance expectations, continuing education and special practice circumstances, including disaster and emergency response.

The OSRC took a multidisciplinary approach in the development and rollout of this bill. We involved all stakeholders in a series of forums to discuss our plans and the background for this effort. We had state agencies and numerous statewide organizations in attendance. There were also 25 physicians attending these forums from across the state. We shared national studies, our curriculum requirements and our legislative language and asked for input. The State Medical Board of Ohio has been kept apprised of this effort since July 2019.

On behalf of the OSRC legislative committee, I am strongly encouraging the House Health Services Provider Committee to pass this measure to address the current and future cardiopulmonary healthcare needs of Ohioans.

Thank you Chair Cutrona and members of the committee for the opportunity to provide testimony.

#### References:

<sup>1</sup>Joyner RL, Strickland SL, et. al. Adequacy of the Provider Workforce for Persons with Cardiopulmonary Disease. CHEST (2019); 157(5): 1221-1229.

<sup>2</sup>Merritt Hawkins White Paper Series: Physician Supply Considerations: The Emerging Shortage of Medical Specialists” (2017)

<sup>3</sup>IHS Markit, The Complexities of Physician Supply and Demand 2020: Projections from 2018 to 2033. Prepared for the Association of American Medical Colleges, Washington, DC.

<sup>4</sup>Strickland SL, Varekojis SM, et.al. Physician Support for Non-Physician Advanced Practice Providers for Persons with Cardiopulmonary Disease. Resp Care (2020); 65(11) 1702-1711.

<sup>5</sup> VA Reference: <https://www.aarc.org/an23-the-advanced-practice-respiratory-therapist-gets-a-big-boost-from-the-va-in-maryland/>