

Proponent Testimony HB 253

Chair Schmidt, Vice-Chair Deeter, Ranking Member Somani, and esteemed members of the House Health Committee, I appreciate the opportunity to submit testimony in support of HB 253 "License Advanced Practice Respiratory Therapists."

My name is Mindy Conklin. I am the very first practicing Advanced Practice Respiratory Therapist in the United States. I was one of the first graduates from The Ohio State University Masters of Respiratory Therapy in 2021. I am currently practicing as an APRT at the VA Maryland Healthcare Systems in Baltimore, Maryland. I have been working as an APRT since May 2023 within pulmonary and sleep medicine. I work daily under with collaborating physicians. I can attest that having an APRT working with our veterans has not only benefited the veterans but the healthcare system. One of the things I am most proud of is the success I have getting veterans to stop smoking. Over 60% of my patients have stopped smoking. This will help in the reduction of veterans developing COPD, lung cancer, worsening COPD and most importantly, decrease readmission rates for COPD exacerbations. I have recently been asked to move into the Thoracic surgery clinic because of my strong background in cardiopulmonary .

Why APRT Licensing Legislation is Needed in Ohio? The APRT is a new professional who is a non-physician advanced practice provider with at least a master's degree completion of a curriculum equivalent to other advanced practice providers in Ohio, such as Advanced Practice Nurses (APNs) or Physician Assistants (PAs). A white paper authored in 2017 by the physician recruiting firm Merritt Hawkins Associates, "Physician Supply Considerations: The Emerging Shortage of Medical Specialists" 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 73% of pulmonologists are 55 or older, and a March 2025 report by AMN notes that 66% of pulmonologists are 65 years or older. This alarming prediction becomes more concerning with the fact that the Institute of Health Metrics and Evaluation 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. This bill's passage will address the current and future healthcare needs of Ohioans who will continue to require access to specialized care to treat the following conditions which will only increase with our aging population: COPD, Asthma, Occupational Lung Disease, Lung Cancer, Pulmonary Fibrosis, Pulmonary Hypertension, Sleep-related disorders, Pneumonia, Respiratory Failure and Post-acute lung damage.

This bill does not create "independent practice" for Advanced Practice Respiratory Therapists. APRTs will practice only under the supervision, control and direction of a physician who specializes in cardiopulmonary disease management. HB 253 requires on-site supervision of the APRT by a supervising physician.

This bill does not seek to infringe upon the practice of other advanced practice providers, such as advanced practice nurses, certified nurse anesthetists, certified nurse mid-wives, or physician assistants. The APRT has a niche in pulmonary medicine, critical care, and sleep. The APRT will not be able to work in general practice, as in family practice, urgent care, minute clinics, etc., as a general physician could not supervise or delegate the APRT's specialty skill set. Only 1.5% of PAs work in critical care. Their AAPA does not report pulmonary as a specialty in their listings. APRTs can work alongside other advanced practice providers, using their specialty expertise to assist their supervising physician in pulmonary diagnostics and treatment.

The use of non-physician advanced practice providers has become a common solution for expanding access to medical care in Ohio. There are currently 31,532 APNs and PAs 6,090 licensed in Ohio, according to the annual reports of the Ohio Board of Nursing (2024) and the State Medical Board of Ohio (2024). Many current advanced practice providers work in general care, emergency departments, urgent cares, surgical care as their training is more global in scope. The APRT offers a niche expertise that would support pulmonary, critical care and sleep physicians in adult and pediatric settings. We believe APRTs can enhance the care of physicians specifically trained to care for cardiopulmonary patients, providing them with a specialized advanced practice provider to assist them in caring for their patients

I strongly support HB 253, the Licensed Practicing APRT.

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

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