

261 CMR: BOARD OF RESPIRATORY CARE

261 CMR 2.00: LICENSURE AND PRACTICE

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2.01: Preface

The Board of Respiratory Care is established pursuant to and functions under the authorization and provisions of M.G.L. c. 13, § 11B and M.G.L. c. 112, §§ 23R through 23BB inclusive.

261 CMR "Regulations of the Board of Respiratory Care." The Board adopts 261 CMR under the authority of M.G.L. c. 112, § 23Z, which have been promulgated in conformity with M.G.L. c. 112, §§ 23R through 23BB inclusive and with applicable provisions of M.G.L. c. 30A, known as the State Administrative Procedure Act.

All licensees are charged with having knowledge of the existence of 261 CMR 2.00 and shall be deemed to be familiar with their provisions and required to render respiratory care services in accordance with them.

2.02: Definitions

For the purpose of 261 CMR 2.00, the terms listed below shall have the following meanings:

Actively employed. Compensated for the rendering of respiratory care services for not less than 2100 hours.

AARC. The American Association for Respiratory Care.

Board. The Board of Respiratory Care.

CRTT. Certified Respiratory Therapy Technician credential issued by the NBRC.

He/His. Includes she/her.

License Application: "Applications for a License or a Limited Permit in Respiratory Care" form provided by the Board. The Board considers a License Application to be complete if:

- (a) it is typewritten or handwritten in a legible manner;
- (b) all data, information and signatures requested are supplied as specified;
- (c) a "Verification of Education" form is attached, if applicable;
- (d) the proper fee is submitted; and
- (e) any additional information requested by the Board has been submitted in a timely manner.

Licensee. A person holding or having held any type of license or permit issued pursuant to M.G.L. c. 112, §§ 23R through 23BB.

Licensure examination. As defined in 261 CMR 2.06.

Matriculated. Recognized by an educational institution as pursuing a program of study leading to a degree or certificate.

NBRC. National Board for Respiratory Care.

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Respiratory Care. A health profession that, under direction of a licensed physician, who has special expertise in respiratory care, utilizes the application of scientific principles for the identification, prevention, remediation, research, and rehabilitation of acute or chronic cardiopulmonary dysfunction thereby producing optimum health and function. Respiratory care practice includes, but is not limited to, the therapeutic and diagnostic use of the following as ordered by a physician: medical gases; gas administering devices; humidification and aerosols; administration of aerosol medications; support services for mechanically ventilated patients; postural drainage; bronchopulmonary hygiene; breathing exercises; respiratory rehabilitation, cardiopulmonary resuscitation; maintaining natural and artificial airways; the understanding and reporting of tests as aids to diagnosis or the planning of treatment programs. Respiratory care shall also include the measuring of ventilatory volumes, pressures, and flows; collecting specimens of blood and other materials; pulmonary function testing; hemodynamic and other related physiologic monitoring of the cardiopulmonary system. Respiratory care shall also include teaching both patient and family respiratory care procedures as part of a patient's ongoing program; consultation services for health educational and community agencies. Respiratory care shall also include teaching of the knowledge, skills, and attitudes necessary to perform the above mentioned activities. Respiratory Care is a changing and evolving profession and shall also include procedures described by the Clinical Practice Guidelines of the AARC, and duties consistent with the training and education of respiratory care personnel or related to the practice of respiratory care, as approved by the Board.

Respiratory therapist. A person licensed in accordance with M.G.L. c. 112, §§ 23R through 23BB, who may thereby practice respiratory care and render respiratory care services as defined in M.G.L. c. 112, § 23R.

Respiratory therapy program. A supervised course of study leading to a degree or certificate in respiratory care which is accredited through the Joint Review Committee for Respiratory Therapy Education (JRCRTE) or its successor, and approved by the Board.

RRT. Registered Respiratory Therapist credential issued by the NBRC.

Supervision: The director of the respiratory care department or his designee, provided such director or designee is a respiratory therapist, is on the premises and readily available to give aid, direction, and instruction to a person rendering respiratory care services pursuant to M.G.L. c. 112, §§ 23T and 23V(c) and 261 CMR 2.08.

Work schedules. The document(s) regularly used by the employer which state the date(s), shift(s) and names of individuals assigned to perform respiratory care duties during a certain period of time.

2.03: Licensure Provisions

(1) Methods of Obtaining a License. A person may obtain a license to practice respiratory care by the following methods:

- (a) By examination, as provided in M.G.L. c. 112, § 23S subsection (1) and 261 CMR 2.06;
- (b) By reciprocal licensure, as provided in M.G.L. c. 112, § 23U and 261 CMR 2.03(2); or
- (c) By obtaining a CRTT or RRT credential from the NBRC, as provided in M.G.L. c. 112, § 23U.

(2) Reciprocal Licensure. The Board may, at its discretion, license without examination an applicant currently registered or licensed in another state or territory of the United States, the District of Columbia, or the Commonwealth of Puerto Rico, if the Board determines that such applicant has met or exceeded the requirements for licensure in this commonwealth.

(3) Term of License. A license is valid from the date it is approved by the Board to May 31 of the next even numbered year.

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2.04: Denial Of License

The Board may deny a license to a person:

- (1) applying for a license who has not achieved a passing score on the licensure examination;
- (2) applying for a license utilizing the results of a licensure examination for which the applicant was not eligible as determined by the Board according to the respiratory therapy program completion date on file with the Board for such applicant;
- (3) applying for reciprocal licensure pursuant to M.G.L. c. 112, § 23U and 261 CMR 2.03(2), if the Board determines that the standards of the authority issuing such person's license were not substantially equivalent to the requirements for licensure in this commonwealth; or
- (4) applying for a license who has not furnished satisfactory proof that he is of good moral character and has met the educational and clinical requirements for licensure set forth in M.G.L. c. 112, §§ 23S through 23X inclusive.

2.05: Respiratory Care Services Not Requiring a License

A respiratory care license is not required for performance of the following:

- (1) private care in a home environment by a family member or friend so long as the provider does not hold himself out as a respiratory therapist or as being able to practice respiratory care or as being able to render respiratory services; provided that the services referred to in 261 CMR 2.05(1) are not rendered by any individual or entity incorporated or otherwise organized, or any employee thereof, to provide home medical services or durable medical equipment (DME);
- (2) services performed by a person who holds a Certified Pulmonary Function Technician (CPFT) or Registered Pulmonary Function Technician (RPFT) credential from the NBRC; provided such services are included in the scope of practice of the profession or occupation for which such person is credentialed;
- (3) pulmonary function testing, performed by a person deemed qualified by his employer and so authorized by such employer;
- (4) arterial blood gas sampling and/or arterial blood gas analysis performed in conjunction with pulmonary function testing by an individual deemed qualified by his employer and so authorized by such employer.
- (5) cleaning, sterilizing, disinfecting, assembling, and disassembling of respiratory care equipment;
- (6) services performed in association with a respiratory therapist in the course of the interstate transport of a patient requiring respiratory care services by any person employed in the rendering of respiratory care services outside of this commonwealth; provided such services may not be rendered for more than two calendar days in any calendar year;
- (7) emergency cardiopulmonary resuscitation (CPR) provided to a victim who requires such emergency measures;
- (8) the transportation or delivery of compressed gas cylinders and other respiratory care equipment to a home, hospital, or other location;
- (9) services performed by a person employed by the federal government or any agency of it, provided such person renders respiratory care services solely under the direction and control of the employing federal organization;

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(10) services performed by a person who is enrolled and participating in the clinical portion of a respiratory therapy program; provided such person is designated by a title which clearly indicates his status as a student and functions under the supervision of a respiratory therapist; and

(11) services performed by a person licensed in this Commonwealth by any other statute or credentialed by an organization which is a member of the National Commission for Health Certifying Agencies or its successor; provided such services are included in scope of practice of the profession or occupation for which such person is licensed or credentialed.

2.06: Licensure Examination and Eligibility

(1) Licensure Examination. The examination for licensure as provided in M.G.L. c. 112, § 23S, shall be the NBRC "Certification Examination for Entry-Level Respiratory Therapy Practitioners (CRTT)." Such examination is administered at least twice a year in the Commonwealth by the NBRC. All examination and administrative procedures are arranged by the NBRC. For information on sites, dates of administration and fees, contact the NBRC.

(2) Eligibility To Take Licensure Examination. An applicant for licensure must have achieved a passing score on a licensure examination for which the applicant was eligible as determined by the Board according to the respiratory therapy program completion date on file with the Board for such applicant. An applicant is not considered to be eligible for a licensure examination if the applicant's respiratory therapy program completion date on file with the Board is later than the last day of the month preceding the date of administration of that licensure examination. Results from a licensure examination for which the applicant was not eligible as determined by the Board may not be utilized to obtain a license from the Board.

2.07: Provisions Regarding Current Practitioners Of Respiratory Care

No person may render respiratory care services other than those services listed in 261 CMR 2.05 unless he has been notified that his license application has been accepted by the Board or he has been issued a license or Limited Permit by the Board.

2.08: Limited Permit

(1) The Board may issue a Limited Permit to a person who is matriculated in or a graduate of a respiratory therapy program, provided such person has filed a completed license application with the Board. Notwithstanding the expiration date stated on a Limited Permit, the privilege of practicing respiratory care pursuant to a Limited Permit shall automatically cease on the date a Limited Permit holder is no longer matriculated in and is not a graduate of a respiratory therapy program.

(2) The respiratory care services which may be performed by the holder of a Limited Permit are limited to only those services which have been successfully completed by such person as part of the curriculum of his respiratory therapy program, as certified by the director of his respiratory therapy program on the Verification of Education form filed with the Board, provided the holder of the Limited Permit meets the employer's standards for those procedures in specified patient care situations.

(3) (a) The holder of a Limited Permit may be authorized by the Board to perform additional respiratory care duties by filing an updated Verification of Education form with the Board.

(b) The expiration date of a Limited Permit may be extended by the Board, as set forth in 261 CMR 2.08(5), when the holder of a Limited Permit has filed an updated Verification of Education form with the Board.

(4) The respiratory care services provided by the holder of a Limited Permit must be performed under the supervision of a respiratory therapist, as required by M.G.L. c. 112, § 23V(c).

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(5) A Limited Permit shall expire on the date stated on the Limited Permit. Except as provided in 261 CMR 2.08(1), 2.08(7) and 2.08(8), the expiration date of each Limited Permit shall be determined by the Board according to the date on which any one of the conditions listed below first occurs:

(a) The date as set forth below, based upon the applicant's respiratory therapy program matriculation date:

Respiratory Therapy Program Matriculation Date	Limited Permit Expiration Date
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February 1 through May 31	May 31
June 1 through September 30	September 30
Oct. 1 through January 31	January 31

for the period of time after said matriculation, such period being approximately: (i) nine years if pursuing a bachelor degree; (ii) five years if pursuing an associate degree; and (iii) four years if pursuing a certificate only, except as provided in 261 CMR 2.08(8); or

(b) the date as set forth below, based upon the applicant's respiratory therapy program completion date:

Respiratory Therapy Program Completion Date	Limited Permit Expiration Date
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March 1 through June 30	January 31 next
July 1 through Oct 31	May 31 next
November 1 through Feb 29	September 30 next

(6) Limited Permits may not be renewed.

(7) The expiration date of a Limited Permit issued to a graduate of a respiratory therapy program and who has a respiratory therapy program completion date on or before December 31, 1988, shall be determined by the Board so as to allow the applicant to attempt the next two scheduled licensure examinations following the date of the applicant's license application.

(8) If an individual was matriculated in a respiratory therapy program prior to November 25, 1988 and has interrupted his education for at least one semester/quarter and has re-enrolled in that same respiratory therapy program after November 25, 1988, the date of the first re-enrollment after November 25, 1988 may be used as the matriculation date. The Limited Permit may be valid for approximately one-half the period of time listed in 261 CMR 2.08(5)(a).

2.09: Procedures for Renewal or Reinstatement of a License

(1) Requirements for Renewal of a License. A licensee must renew his license every two years on the even numbered years.

(a) A licensee must submit to the Board a completed renewal application and the required fees prior to the expiration date of the license; and

(b) A license must fulfill and/or document the continuing education requirements set forth in 261 CMR 5.00.

(2) Procedures for Renewal of a Lapsed/Expired License.

(a) If a licensee fails to meet the requirements for renewal of his license as set forth in 261 CMR 2.09(1), the license of such person is considered expired, and is not in good standing. A licensee with an expired license is not authorized to render respiratory care services nor to use the title "respiratory therapist" during the period in which the license is expired.

(b) If within two succeeding licensure periods, an individual requests that his expired license be reinstated, that individual must pay the renewal fee for the current licensure period, pay one late fee, and document completion of all continuing education contact hours required by the Board since the date that license was last issued/renewed. The Board may require additional activities in accordance with M.G.L. c. 112, § 23S(2).

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(c) If an individual fails to renew his license within two licensure periods, he must do all of the following: submit a completed renewal form, pay the application fee, pay the current renewal fee, pay a late fee, and document completion of the continuing education contact hours required by the Board for the current renewal period. The Board may require additional activities in accordance with M.G.L. c. 112, § 23S subsection (2).

REGULATORY AUTHORITY

261 CMR 2.00: M.G.L. c. 112, §§ 23R through 23BB; c. 13, § 11B.