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# **Fast-Track Regulation Agency Background Document**

Agency name	Board of Medicine, Department of Health Professions	
Virginia Administrative Code (VAC) citation(s)	18VAC85-40-10 et seq.	
Regulation title(s)	Regulations Governing the Practice of Respiratory Therapists	
Action title	CE credit for volunteer hours and academic courses	
Date this document prepared	10/28/16	

This information is required for executive branch review and the Virginia Registrar of Regulations, pursuant to the Virginia Administrative Process Act (APA), Executive Orders 17 (2014) and 58 (1999), and the *Virginia Register Form, Style, and Procedure Manual.* 

## **Brief summary**

Please provide a brief summary (preferably no more than 2 or 3 paragraphs) of the proposed new regulation, proposed amendments to the existing regulation, or the regulation proposed to be repealed. Alert the reader to all substantive matters or changes. If applicable, generally describe the existing regulation.

Chapter 82 of the 2016 General Assembly requires health regulatory boards to promulgate regulations to allow some volunteer service time to count towards meeting some of a licensee's continuing education requirements. The Board of Medicine has adopted proposed regulations to allow respiratory therapists to count two hours of the 20 hours required for biennial renewal to be satisfied through delivery of professional services, without compensation, to low-income individuals receiving health services through a local health department or a free clinic organized in whole or primarily for the delivery of those services. One hour of continuing education may be credited for three hours of providing such volunteer services, as documented by the health department or free clinic.

Upon recommendation of the Advisory Board, subsection A was also amended to allow CE credit for completion of a post-licensure academic course completed at an accredited college or university.

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#### **Acronyms and Definitions**

Please define all acronyms used in the Agency Background Document. Also, please define any technical terms that are used in the document that are not also defined in the "Definition" section of the regulations.

N/A

# Statement of final agency action

Please provide a statement of the final action taken by the agency including:1) the date the action was taken; 2) the name of the agency taking the action; and 3) the title of the regulation.

On October 20, 2016, the Board of Medicine adopted amendments to 18VAC85-40-10 et seq., Regulations Governing the Practice of Respiratory Therapists.

#### **Legal basis**

Please identify the state and/or federal legal authority to promulgate this proposed regulation, including: 1) the most relevant citations to the Code of Virginia or General Assembly chapter number(s), if applicable; and 2) promulgating entity, i.e., agency, board, or person. Your citation should include a specific provision authorizing the promulgating entity to regulate this specific subject or program, as well as a reference to the agency/board/person's overall regulatory authority.

Regulations are promulgated under the general authority of Chapter 24 of Title 54.1 of the Code of Virginia. Section 54.1-2400, which provides the Board of Medicine the authority to promulgate regulations to administer the regulatory system and a specific mandate of Chapter 82 of the 2016 General Assembly:

#### § 54.1-2400. General powers and duties of health regulatory boards.

The general powers and duties of health regulatory boards shall be:

- 1. To establish the qualifications for registration, certification, licensure or the issuance of a multistate licensure privilege in accordance with the applicable law which are necessary to ensure competence and integrity to engage in the regulated professions.
- 2. To examine or cause to be examined applicants for certification or licensure. Unless otherwise required by law, examinations shall be administered in writing or shall be a demonstration of manual skills.

3. To register, certify, license or issue a multistate licensure privilege to qualified applicants as practitioners of the particular profession or professions regulated by such board.

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- 4. To establish schedules for renewals of registration, certification, licensure, and the issuance of a multistate licensure privilege.
- 5. To levy and collect fees for application processing, examination, registration, certification or licensure or the issuance of a multistate licensure privilege and renewal that are sufficient to cover all expenses for the administration and operation of the Department of Health Professions, the Board of Health Professions and the health regulatory boards.
- 6. To promulgate regulations in accordance with the Administrative Process Act (§ 2.2-4000 et seq.) that are reasonable and necessary to administer effectively the regulatory system, which shall include provisions for the satisfaction of board-required continuing education for individuals registered, certified, licensed, or issued a multistate licensure privilege by a health regulatory board through delivery of health care services, without compensation, to low-income individuals receiving health services through a local health department or a free clinic organized in whole or primarily for the delivery of those health services. Such regulations shall not conflict with the purposes and intent of this chapter or of Chapter 1 (§ 54.1-100 et seq.) and Chapter 25 (§ 54.1-2500 et seq.).

#### **Purpose**

Please explain the need for the new or amended regulation. Describe the rationale or justification of the proposed regulatory action. Describe the specific reasons the regulation is essential to protect the health, safety or welfare of citizens. Discuss the goals of the proposal and the problems the proposal is intended to solve.

The purpose of the amended regulation is compliance with the mandate of the General Assembly and to provide an incentive for licensees to volunteer professional services to free clinics or public health centers. While a licensee can satisfy two hours of continuing education with six hours of volunteer service, he or she is still required to have 18 hours of approved continuing education necessary to acquire new knowledge and skills. Therefore, public health is served by a potential increase in badly-needed volunteer service for health care; but public safety is not sacrificed by eliminating most or all of the continuing education hours required for renewal. Inclusion of CE credit for post-licensure academic courses may encourage respiratory therapists to further their education to become more competent in and knowledgeable about new techniques and therapies to benefit the health of patients they treat.

# Rationale for using fast-track process

Please explain the rationale for using the fast-track process in promulgating this regulation. Why do you expect this rulemaking to be noncontroversial?

The allowance of hours for volunteer service to be counted towards the continuing education requirement is a mandate of the General Assembly. A licensee is not required to provide volunteer service but may be credited with continuing education hours for doing so. The provision is permissive and not controversial.

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The inclusion of credit for post-licensure academic courses is also permissive and will expand the opportunities for completion of continuing competency requirements.

#### **Substance**

Please briefly identify and explain the new substantive provisions, the substantive changes to existing sections, or both. A more detailed discussion is provided in the "Detail of changes" section below.

The Board has adopted proposed regulations to allow respiratory therapists to count two hours of the 20 hours required for biennial renewal to be satisfied through delivery of professional services, without compensation, to low-income individuals receiving health services through a local health department or a free clinic organized in whole or primarily for the delivery of those services. One hour of continuing education may be credited for three hours of providing such volunteer services, as documented by the health department or free clinic.

Upon recommendation of the Advisory Board, subsection A was also amended to allow CE credit for completion of a post-licensure academic course completed at an accredited college or university.

#### **Issues**

Please identify the issues associated with the proposed regulatory action, including: 1) the primary advantages and disadvantages to the public, such as individual private citizens or businesses, of implementing the new or amended provisions; 2) the primary advantages and disadvantages to the agency or the Commonwealth; and 3) other pertinent matters of interest to the regulated community, government officials, and the public. If there are no disadvantages to the public or the Commonwealth, please indicate.

- 1) The advantage to the public is the incentive given for respiratory therapists to volunteer their services in exchange for credit towards meeting continuing education requirements. There are no disadvantages.
- 2) There are no advantages or disadvantages to the agency or the Commonwealth.
- 3) The Director of the Department of Health Professions has reviewed the proposal and performed a competitive impact analysis. The Board is authorized under 54.1-2400 to "promulgate regulations in accordance with the Administrative Process Act (§ 2.2-4000 et seq.) which are reasonable and necessary to administer effectively the regulatory system." There is no restraint on competition as a result of promulgating this regulation.

## **Requirements more restrictive than federal**

Please identify and describe any requirement of the proposal which is more restrictive than applicable federal requirements. Include a rationale for the need for the more restrictive requirements. If there are

no applicable federal requirements or no requirements that exceed applicable federal requirements, include a statement to that effect.

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There are no applicable federal requirements.

## Localities particularly affected

Please identify any locality particularly affected by the proposed regulation. Locality particularly affected means any locality which bears any identified disproportionate material impact which would not be experienced by other localities.

There are no localities particularly affected.

## Regulatory flexibility analysis

Pursuant to § 2.2-4007.1B of the Code of Virginia, please describe the agency's analysis of alternative regulatory methods, consistent with health, safety, environmental, and economic welfare, that will accomplish the objectives of applicable law while minimizing the adverse impact on small business. Alternative regulatory methods include, at a minimum: 1) the establishment of less stringent compliance or reporting requirements; 2) the establishment of less stringent schedules or deadlines for compliance or reporting requirements; 3) the consolidation or simplification of compliance or reporting requirements; 4) the establishment of performance standards for small businesses to replace design or operational standards required in the proposed regulation; and 5) the exemption of small businesses from all or any part of the requirements contained in the proposed regulation.

There is no alternative to the adoption of regulations for continuing education credit for volunteer hours; it is a mandate of the General Assembly.

## **Economic impact**

Please identify the anticipated economic impact of the proposed new regulations or amendments to the existing regulation. When describing a particular economic impact, please specify which new requirement or change in requirement creates the anticipated economic impact.

Projected cost to the state to implement and enforce the proposed regulation, including: a) fund source / fund detail; and b) a delineation of one-time versus on-going expenditures	As a special fund agency, the Board must generate sufficient revenue to cover its expenditures from non-general funds, specifically the renewal and application fees it charges to practitioners or entities for necessary functions of regulation. All notifications will be done electronically. There are no on-going expenditures.
Projected cost of the new regulations or changes to existing regulations on localities.	None
Description of the individuals, businesses, or other entities likely to be affected by the new regulations or changes to existing regulations.	Polysomnographic technologists are potentially affected, but the regulation is permissive.

Agency's best estimate of the number of such entities that will be affected. Please include an estimate of the number of small businesses affected. Small business means a business entity, including its affiliates, that:  a) is independently owned and operated and; b) employs fewer than 500 full-time employees or has gross annual sales of less than \$6 million.  All projected costs of the new regulations or changes to existing regulations for affected individuals, businesses, or other entities. Please be specific and include all costs including: a) the projected reporting, recordkeeping, and other administrative costs required for compliance by small businesses; and b) specify any costs related to the development of real estate for commercial or residential purposes that are a consequence of the proposed regulatory changes or new regulations.	There are 3930 respiratory therapists with current licenses. It is likely that most would be employed by large entities or physician practices.  There are no costs. The allowance for college credits to count as CE would reduce costs for a licensee who would not have to obtain CE hours in addition to coursework taken for professional development.
Beneficial impact the regulation is designed to produce.	The beneficial impact may be an increase in volunteer hours for free clinics and health centers that provide health care services to the poor or uninsured or an increase in the number of respiratory therapists seeking post-licensure education.

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#### **Alternatives**

Please describe any viable alternatives to the proposal considered and the rationale used by the agency to select the least burdensome or intrusive alternative that meets the essential purpose of the action. Also, include discussion of less intrusive or less costly alternatives for small businesses, as defined in § 2.2-4007.1 of the Code of Virginia, of achieving the purpose of the regulation.

Given that the Board has a statutory mandate to promulgate a regulation for CE credit for volunteer hours, it selected the alternative that would achieve the essential purpose of encouraging volunteering while not substantially reducing the amount of continuing education necessary to improve and maintain competency.

# **Public participation notice**

If an objection to the use of the fast-track process is received within the 30-day public comment period from 10 or more persons, any member of the applicable standing committee of either house of the General Assembly or of the Joint Commission on Administrative Rules, the agency shall: 1) file notice of the objections with the Registrar of Regulations for publication in the Virginia Register; and 2) proceed with the normal promulgation process with the initial publication of the fast-track regulation serving as the Notice of Intended Regulatory Action.

### **Family impact**

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Please assess the impact of this regulatory action on the institution of the family and family stability including to what extent the regulatory action will: 1) strengthen or erode the authority and rights of parents in the education, nurturing, and supervision of their children; 2) encourage or discourage economic self-sufficiency, self-pride, and the assumption of responsibility for oneself, one's spouse, and one's children and/or elderly parents; 3) strengthen or erode the marital commitment; and 4) increase or decrease disposable family income.

There is no impact on the institution of the family and family stability.

## **Detail of changes**

Please list all changes that are being proposed and the consequences of the proposed changes; explain the new requirements and what they mean rather than merely quoting the proposed text of the regulation. If the proposed regulation is a new chapter, describe the intent of the language and the expected impact. Please describe the difference between existing regulation(s) and/or agency practice(s) and what is being proposed in this regulatory action. If the proposed regulation is intended to replace an <u>emergency regulation</u>, please follow the instructions in the text following the three chart templates below.

Current section number	Current requirement	Proposed change, intent, rationale, and likely impact of proposed requirements
Current section number 18VAC85-40-66	Set out the requirements for continuing education	impact of proposed requirements  Subsection A in section 100 is amended as follows:  1) Allowance for a licensee to use a credit course of post-license academic education relevant to respiratory care offered by an accredited college or university to satisfy continuing education hours.  2) Allowance to count up to two continuing education hours for delivery of respiratory therapy services, without compensation, to lowincome individuals receiving services through a local health department or a free clinic organized in whole or primarily for the delivery
		of health services. One hour of continuing education may be credited for three hours of providing such volunteer services. For the purpose of continuing education credit for voluntary service, the hours shall be approved and documented by the health department or free clinic.  The intent of the Board was to comply with a statutory mandate to allow credit for volunteer hours. The criteria and settings for such volunteer services are specified in § 54.1-2400 (6). The ratio of one hour for three hours of service was adopted to encourage licensees to donate a block of time to

the clinics or health department. If a licensee
volunteers at a local health department or free
clinic, he or she would be able to satisfy two of the
20 hours of continuing education required for
renewal.
Credit for academic coursework is found in
regulation of other boards, such as Nursing, and is
consistent with the intent of promoting continuing
competency in the profession.

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