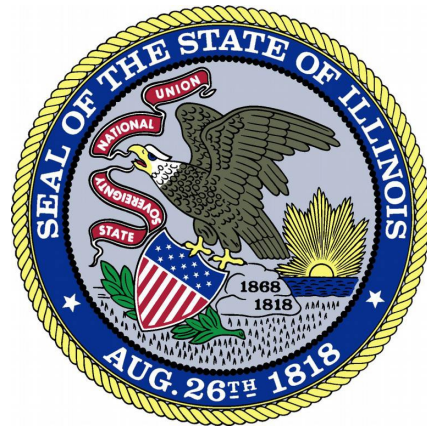


# Governor's Office of Management and Budget

Alexis Sturm

Director



## Regulatory Sunset Act Report on

## The Respiratory Care Practice Act

April 18, 2025

**To the Honorable JB Pritzker  
Governor of Illinois**

Governor Pritzker:

As required by Section 5 of the Regulatory Sunset Act (5 ILCS 80/1 *et seq.*), GOMB facilitated a study with the Illinois Department of Financial and Professional Regulation (IDFPR), the agency responsible for oversight of the Respiratory Care Practice Act (225 ILCS 106/1 *et seq.*) (the Act), which is scheduled to be repealed on January 1, 2026. This report provides justification for the recommendation to continue this Act.

GOMB's examination of this Act was conducted considering the factors set out in Sections 6 and 7 of the Regulatory Sunset Act. The following report outlines the work of GOMB's study and details the criteria and data utilized to arrive at the above recommendation.

Respectfully,

Alexis Sturm  
Director  
Governor's Office of Management and Budget

## GOMB Regulatory Sunset Act Report: Respiratory Care Practice Act

The State of Illinois, acting through the Illinois Department of Financial and Professional Regulation (IDFPR or the Department), licenses the profession of respiratory care practitioners pursuant to the Act. Respiratory care and cardiorespiratory care include direct and indirect services in the implementation of treatment, management, disease prevention, diagnostic testing, monitoring and care of patients with deficiencies and abnormalities associated with the cardiopulmonary system.

The purpose of the Act is “to protect and benefit the public by setting standards of qualifications, education, training, and experience for those who seek to obtain a license and hold the title of respiratory care practitioner, to promote high standards of professional performance for those licensed to practice respiratory care in the State of Illinois, and to protect the public from unprofessional conduct by persons licensed to practice respiratory care.” 225 ILCS 106/5.

### 1. License Count and Fee Structure

As of March 29, 2024, IDFPR states that there are 6,069 currently active licenses for respiratory care practitioners in Illinois. See the following table for the number of respiratory care practitioner licenses issued by IDFPR in the fiscal years indicated:

License Type	FY20	FY21	FY22	FY23	FY24
Respiratory care practitioners	6083	6378	6673	6260	6035

Respiratory care practitioners have the following licensure fee structure:

License Type	Fee Amount	Online Payment
Application fee	\$100	No
License renewal fee	\$60/year	No
Exam fee	\$190	Yes
Exam re-take fee	\$150	Yes
Duplicate license fee	\$20	Yes

### 2. Obtaining Certification as a Respiratory Care Practitioner in Illinois

Currently, IDFPR offers licensing to those holding either an entry-level Certified Respiratory Therapist (CRT) credential or the more advanced Registered Respiratory Therapist (RRT) credential. The American Association for Respiratory Care (AARC) has long advocated for the RRT to be the entry-level credential for licensure, and several states, including Arizona, California, and Ohio, have enacted such legislation. The AARC issued a [Guidance Document](#) updated in July of 2022 for states considering this change.

The Department acknowledges that the review process for supporting documentation required for this licensure is straight forward. However, on average it takes two months from receipt of an application to issuance of a license. Processing time is impacted by backlog, the number of processors assigned to this licensure, and inadequate resources for front-line support and direct interaction with applicants who call, email, or walk in for assistance. Implemented process improvements continue to shorten processing times, and those efforts are continuing within the Department.

### **3. Equity Concerns**

IDFPR states that people who speak English as a second language may find difficulty with licensure into this field. The Department's application materials are very dense and challenging to parse, even for native speakers of English. Much of the contact with applicants during the application or renewal process involves explaining or interpreting the language used in forms and in the Act.

### **4. Agency recommendations to change the statute**

IDFPR has no amendatory recommendations for the Act. In response to the pandemic-related need for respiratory therapists, barriers to licensure were temporarily adjusted. Qualifications under this Act were last updated in 2016.

### **5. Agency efforts to comply with enabling laws**

At the time of this study, GOMB is not aware of any compliance issues by IDFPR related to the provisions of the Act.

### **6. Recent bills introduced by the General Assembly**

SB2494 of the 104<sup>th</sup> General Assembly amends the Act by changing the repeal date of the Act from January 1, 2026, to January 1, 2031. It also amends the Act in several ways, from record keeping to licensure.

### **7. Stakeholder Feedback and Protocols for Respiratory care practitioner Licensure**

Stakeholders may submit witness testimony for General Assembly Health Care Licenses Committee hearings.

### **8. Public Outreach**

IDFPR welcomes comments and suggestions from the public regarding the administration of the professions regulated by the Department. IDFPR offers several channels for the public to offer comments, complaints and suggestions including social media platforms and direct communication with profession liaisons and general counsel. The public is also welcome to attend the semiannual meetings of the Respiratory Care Board.

### **9. Industry Standards**

Currently, qualifications are in line with many other states, such as Arizona, California, and Ohio, but not aligned with the push to require advanced certification for licensure advocated by professional organizations. This is an area for consideration as the Act and rules are reviewed.

### **10. Public Complaint Resolution**

The public may file a complaint with the Complaint Intake Unit of IDFPR through the following link: <https://idfpr.illinois.gov/admin/dpr/dprcomplaint.html>.

On average, it takes IDFPR 175 days to resolve a complaint.

<b>Complaints</b>	<b>FY20</b>	<b>FY21</b>	<b>FY22</b>	<b>FY23</b>	<b>FY24</b>
Respiratory care practitioners	25	16	12	17	19

### **11. Disciplinary Action**

IDFPR's Chief of Health-Related Prosecutions is responsible for resolving complaints.

### **12. Conclusion**

The Act governs the licensure of respiratory care practitioners in the State of Illinois. The absence of licensing criteria for respiratory care practitioners would pose a significant and direct harm to the health, safety and welfare of the public and specifically the State's healthcare system. The lack of regulation would eliminate the professional standards to which individuals who are a significant part of Illinois' healthcare system are held.

Current evidence does not suggest that the imposition of the state's regulatory standards is such a burden as to outweigh the benefits to the health, safety, and welfare of the people of Illinois in continuing the licensure and regulation of this profession. Consequently, the Act is necessary and appropriate to ensure the health, safety, and welfare of the people of Illinois.

The Act should be continued to promote and enhance the safety and welfare of the public, without burdening licensees or commerce.