

2015 & Beyond FAQ

1. Is the AARC supportive of advanced credentials such as the RRT?

The AARC is supportive of respiratory therapists obtaining advanced credentials. In 2013, the AARC released the Exam Prep course to assist respiratory therapists in their studies for both the entry level (CRT) and advanced level (RRT) written examinations. In addition, President George Gaebler has tasked a workgroup with exploring career ladder education options to improve attempt and pass rates for the RRT examination.

The NBRC will be implementing a new testing structure in January 2015. This new testing structure combines the CRT and written RRT examinations into one written examination (“Therapist Multiple-Choice Examination”) and will continue to require the clinical simulation examination. The new testing structure has the potential to reduce the number of examinations required to earn an RRT credential. The AARC Board of Directors will re-evaluate the attempt and pass rates of these examinations after the 2015 implementation and reassess the need and strategies to improve participation in the RRT examination process.

Details about the development of the new therapist multiple-choice examination can be found at the NBRC’s website (www.nbrc.org) and in the 3rd quarter 2013 NBRC Horizons newsletter (volume 39, number 3, pages 1-4).

2. Should the minimum credential for state licensure be RRT?

While the AARC supports the RRT credential, there is a lack of objective evidence that the CRT credential no longer adequately documents entry-level respiratory care competency required to prevent patient harm. However, some states have moved in this direction and other states have enacted dual licensure. The impact of these changes are not yet known; however, the AARC is dedicated to supporting the scope of practice and licensure status in each state and remains diligent in the monitoring of various actions that may pose negative effects to practicing respiratory therapists or to patient care.

3. Is the CRT going away in 2015?

No. The NBRC has restructured the written examination and that new test will be released in 2015. Instead of requiring the current testing structure of two written tests (CRT and written RRT) plus one clinical simulation examination to earn the RRT credential, the NBRC will merge the CRT and written RRT into one written examination. Details about the development of the new therapist multiple-choice examination can be found at the NBRC’s website (www.nbrc.org) and in the 3rd quarter 2013 NBRC Horizons newsletter (volume 39, number 3, pages 1-4).

4. I am a CRT. Will I be out of a job if I don't achieve the RRT credential by 2015?

No. Most states currently recognize the CRT as the examination for licensing at this time. Should those standards change in any state, existing CRT's could be grandfathered into licensure status for the current state they practice. This may be variable from state to state depending on practice acts. One state that has enacted changes in the practice act is Ohio. [Ohio's practice act](#) changes state that, effective January 1, 2015, applicants for respiratory care license must prove successful completion of the RRT examination.

5. Will CRTs be "grandfathered" in if/when the RRT is deemed the entry level credential?

Each state has the right to regulate their practice act. Licensure changes up to this point in time have grandfathered CRTs within that state. In future changes, this may be variable from state to state depending on practice acts.

6. Will I need a bachelor's degree to practice respiratory therapy in 2015?

No. At this time, the completion of an associate's degree is the entry-level minimum requirement. You can access the [Commission on Accreditation for Respiratory Care educational standards](#) for more information.

7. If we advocate for higher educational levels and higher credentials, will we be able to meet the patient care demands of the future?

At this time, there is no evidence that an adequate supply of entry-level respiratory therapists could be maintained without associate degree programs. Therefore, the AARC Board of Directors has not supported the termination of associate degree respiratory care programs. However, the AARC is dedicated to working with educational programs in an effort to increase the number of baccalaureate degree programs for respiratory care education. President Gaebler has charged the 2015 & Beyond committee with developing models of consortia and cooperative agreements to accomplish this goal.

8. What does it mean to allow the "market" to drive educational degrees and credentialing? Won't the market choose the cheaper alternative; especially when our healthcare system is known to be too expensive?

As the hiring markets become more competitive, employers will look for the most qualified practitioner that will most positively impact their respiratory care departments. Rather than hiring respiratory therapists with minimal credentials and educational degrees, employers may opt to hire those with higher educational degrees and more advanced credentials as they may have the most potential to contribute to the organization.