MAINE STATE LEGISLATURE

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	(Nev	v Draft FIRS		. 226, AR SESS		514)		
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Legisla	tive Docum	nent			· ·		No. 1	554
S.P. 591	1				In S	enate, N	May 17,	198:
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			JO	Y J. O'BF	RIEN, Sec	cretary (of the Se	nate
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Be it follow	enacted	by the	People	of the	State	of M	laine	as
	ec. 1. 5 ed to rea		§12004	, sub-§	1, ¶A,	sub-	¶33-A	is
(33-A)	Board o			\$35/I	Day 32	MRSA	§9703	
746, §	c. 2. 1 31 and c. ed in its		1, is	as ame repeale	ended b ed and	y PL the f	1983, ollowi	c. ng
§8001.	Depart	ment; a	gencie	s withi	n depa	rtmen	t	
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1 2 3 4 5	ment," to regulate financial institutions, insurance companies, commercial sports, grantors of consumer credit and to license and regulate professions and occupations. The department shall be composed of the following bureaus, boards and commissions:
6	Banking, Bureau of;
7	Consumer Credit Protection, Bureau of;
8	<pre>Insurance, Bureau of;</pre>
9	Athletic Commission, Maine;
10	Penobscot Bay and River Pilotage Commission;
11	Real Estate Commission;
12	Running Horse Racing Commission, State;
13	Arborist Examining Board;
14	Auctioneers Advisory Board;
15	Commercial Driver Education, Board of;
16	Electricians' Examining Board;
17 18	Foresters, State Board of Registration for Professional;
19	Funeral Service, State Board of;
20 21	Geologists and Soil Scientists, State Board of Certification for;
22	Hearing Aid Dealers and Fitters, Board of;
23	Manufactured Housing Board;
24	Occupational Therapy Practice, Board of;
25	Oil and Solid Fuel Board;
26	Physical Therapy, Board of Examiners in;
27	Plumbers' Examining Board;

4 5	Speech Pathology and Audiology, Board of Examiners on; and
6 7	Substance Abuse Counselors, Board of Registration of.
8	Sec. 3. 32 MRSA c. 97 is enacted to read:
9	CHAPTER 97
10	RESPIRATORY CARE PRACTITIONERS
11	§9701. Declaration of purpose
12 13 14 15 16 17 18 19 20	In order to safeguard the public health, safety and welfare, to protect the public from incompetent and unauthorized persons; to assure the highest degree of professional conduct on the part of respiratory care practitioners; and to assure the availability of respiratory care services of high quality to persons in need of those services, it is the purpose of this chapter to provide for the regulation of persons offering respiratory care services.
21	§9702. Definitions
22 23 24	As used in this chapter, unless the context otherwise indicates, the following terms have the following meanings.
25 26	 Board. "Board" means the Board of Respirato- ry Care Practitioners established under this chapter.
27 28	2. Commissioner. "Commissioner" means the Commissioner of Business, Occupational and Professional

Psychologists, State Board of Examiners of;

Social Worker Registration, State Board of;

Respiratory Care Practitioners, Board of;

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30 31 32 Regulation.

lation.

3. Department. "Department" means the Department of Business, Occupational and Professional Regu-

1 4. Person. "Person" means any individual, part-2 nership, unincorporated organization or corporation.

- 5. Respiratory care. "Respiratory care" means the therapy, management, rehabilitation, diagnostic evaluation and care, administered on the order of a physician or surgeon, of patients with deficiencies and abnormalties affecting the cardiopulmonary system and associated aspects of other bodily systems, including, but not limited to, the following:
- A. Direct and indirect pulmonary care services
 that are of comfort, safe, aseptic, preventative
 and restorative care to the patient;
 - B. Direct and indirect respiratory care services including, but not limited to, the administration of pharmacological, diagnostic and therapeutic agents related to respiratory care procedures necessary to implement a treatment, disease prevention, pulmonary rehabilitative or diagnostic regimen prescribed by a physician;
 - C. Observation and monitoring of signs and symptoms, general behavior, general physical response to respiratory care treatment and diagnostic testing, including determination of whether those signs, symptoms, reactions, behavior or general response exhibit abnormal characteristics;
 - D. Implementation based on observed abnormalities, appropriate reporting, referral, respiratory care protocols or changes in treatment, pursuant to a prescription by a person authorized to prescribe respiratory care or the initiation of emergency procedures; and
 - E. Diagnostic and therapeutic use of the following:
 - (1) Administration of medical gases, aerosols and humidification;
 - (2) Environmental control mechanisms and baromedical therapy;
 - (3) Pharmacological agents related to respiratory care procedures;

1	(4) Mechanical or physiological ventilatory
2	<pre>support;</pre>
3	(5) Bronchopulmonary hygiene;
4	(6) Cardiopulmonary resuscitation;
5	(7) Maintenance of natural airways;
6 7	(8) Insertion and maintenance of artificial airways;
8 9 10 11 12 13 14 15	(9) Specific diagnostic and testing techniques employed in the medical management of patients to assist in diagnosis, monitoring, treatment and research of pulmonary abnormalities, including measurement of ventilatory volumes, pressures and flows, collection of specimens of blood and collection of specimens from the respiratory tract;
17 18 19	(10) Analysis of blood gases and respiratory secretions and pulmonary function testing; and
20 21 22 23	(11) Hemodynamic and physiologic measurement and monitoring of cardiac functions as it relates to cardiopulmonary pathophysiology.
24 25 26 27	F. Initial and follow-up instruction and patient evaluation in a nonhospital setting for the diagnostic and therapeutic uses described in paragraph E.
28 29	"Respiratory care" includes the terms "respiratory therapy" or "inhalation therapy."
30 31 32 33	6. Respiratory care practitioner. "Respiratory care practitioner" means a person licensed as a respiratory therapist or as a respiratory care technician under this chapter.
34 35	§9703. Board of respiratory care practitioners; establishment; compensation

1 l. Establishment and membership. There is established within the Department of Business, Occupational and Professional Regulation, in accordance with Title 5, section 12004, subsection 1, a Board of Respiratory Care Practitioners. The board shall consist of 5 members appointed by the Governor as follows:

- A. Three respiratory care practitioners who have been engaged in the practice of respiratory care for at least 2 years immediately preceding their appointments and who shall be at all times holders of valid licenses for the practice of respiratory care in the State, except for the members of the first board, each of whom shall fulfill the requirements for licensure of this chapter; and
- B. Two public members who are residents of the State, who do not hold a license to practice respiratory care, and who have no direct or indirect financial interest in the practice or delivery of respiratory care.
- 2. Terms of appointment. To the first board established under this chapter, the Governor shall appoint 2 board members for a term of one year, 2 for a term of 2 years and one for a term of 3 years. Appointments made thereafter shall be for 3-year terms, but no person may be appointed to serve more than 3 consecutive terms, provided that, for this purpose only, a period actually served which exceeds 1/2 of a 3-year term shall be deemed a full term. Any member of the board may be removed from office for cause by the Governor.
- 3. Meetings. The board shall meet at least once a year to conduct its business and to elect a chairman. Additional meetings shall be held as necessary to conduct the business of the board and may be convened at the call of the chairman or a majority of the board members. Three members of the board shall constitute a quorum for all purposes.
- 4. Compensation. Members of the board shall receive compensation and expenses as provided in Title 5, section 12004, subsection 1, paragraph A.

§9704. Board of Respiratory Care Practitioners; powers and duties

- 1. Powers. The board shall administer and enforce this chapter and evaluate the qualifications of applicants for licensure. The board may issue subpoenas, examine witnesses, administer oaths and may investigate or cause to be investigated any complaints made to it or any cases of noncompliance with or violation of this chapter.
- 2. Rules. The board may, in accordance with the Maine Administrative Procedure Act, Title 5, chapter 375, adopt rules to carry out the policy of this chapter, including, but not limited to, rules relating to professional licensure, professional conduct, continuing education and to the establishment of ethical standards of practice for persons holding a license to practice respiratory care in this State.
 - 3. Hearings. Hearings may be conducted by the board to assist with investigations, to determine whether grounds exist for suspension, revocation or denial of a license, or as otherwise deemed necessary to the fulfillment of its responsibilities under this chapter. Hearings shall be conducted in accordance with the Maine Administrative Procedure Act, Title 5, chapter 375, subchapter IV, to the extent applicable.
- 4. Records. The board shall keep such records and minutes as are necessary to the ordinary dispatch of its functions.
- 29 <u>5. Contracts. The board may enter into con-</u> 30 <u>tracts to carry out its responsibilities under this</u> 31 chapter.
 - 6. Reports. No later than August 1st of each year, the board shall submit to the commissioner, for the preceding fiscal year, its annual report of its operations, together with such comments and recommendations as the commissioner deems essential.
 - 7. Employees. With the advice of the board, the commissioner may appoint, subject to the Personnel Law, such employees as may be necessary to carry out this chapter. Any person so employed shall be lo-

- cated in the department and under the administrative
 and supervisory direction of the commissioner.
- 8. Budget. The board shall submit to the commissioner its budgetary requirements in the same manner as is provided in Title 5, section 1665.

§9705. License required

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- 1. License required. After January 1, 1987, no person may practice, or hold himself out as authorized to practice, as a respiratory care practitioner in this State or use the words "respiratory care practitioner" or other words or letters to indicate that the person is a licensed respiratory care practitioner, unless he is licensed in accordance with this chapter.
- 2. Individual license. Only an individual may
 be licensed under this chapter.
- 3. Penalty; injunction. A person who violates
 this section is guilty of a Class E crime.
- The State may bring an action in Superior Court to enjoin any person from violating this chapter, regardless of whether proceedings have been or may be instituted in the Administrative Court or whether criminal proceedings have been or may be instituted.
- 24 §9706. Persons and practices exempt
- Nothing in this chapter may be construed as preventing or restricting the practice, services or activities of:
 - 1. Licensed persons. Any person licensed or registered in this State by any other law from engaging in the profession or occupation for which he is licensed or registered;
 - 2. Students or trainees. Any person pursuing a supervised course of study leading to a degree or certificate as a respiratory care practitioner at an educational institution accredited by the American Medical Association's Committee on Allied Health Educational Accreditation, if the person is designated

- by a title which clearly indicates his status as a
 student or trainee;
- 3. Associates. Any person performing respiratory care services in the State, if these services are performed for no more than 30 days in a calendar year and are rendered in association with a respiratory care practitioner licensed under this chapter, if:
- A. The associate is licensed under the law of another state which has licensure requirements equivalent to the requirements of this chapter; or
- B. The associate is certified as a respiratory
 therapist or a respiratory therapy technician by
 the Joint Review Committee for Respiratory
 Therapy Education, in collaboration with the
 American Medical Association's Committee on Allied Health Education and Accreditation, and resides in a nonlicensure state;
- 4. Gratuitous care. Family members, friends and others who give gratuitous care to a patient and do not hold themselves out as respiratory care practitioners;
- 23 <u>5. Self care. Persons who administer respirato-</u> 24 <u>ry care to themselves; or</u>
- 25 6. Emergency. Persons who administer respirato-26 ry assistance in case of an emergency.
- §9707. Temporary license
- A temporary license may be granted to a person who has completed the education requirements of this chapter. This license allows the holder to practice respiratory care under the direct supervision of a licensed respiratory care practitioner. This license shall be issued for a term of one year and may not be renewed.
- 35 §9708. Requirements for licensure; levels of licen-36 sure

1	An applicant applying for a license as a respira-
2	tory care practitioner shall file a written applica-
3	tion provided by the board, showing to the satisfac-
4	tion of the board that he meets the following re-
5	quirements.
6	1. Residence. An applicant need not be a resi-
7	dent of this State.
8	2. Ethical practice. An applicant shall exhibit
9	adherence to established ethical professional stan-
10	dards.
11	3. Education and qualifications. An applicant
12	shall present evidence satisfactory to the board
13	that:
14	A. For a license as a respiratory therapist:
15	(1) The applicant is presently credentialed
16	by the National Board for Respiratory Care
17	as a registered respiratory therapist; or
18	(2) The applicant:
19	(a) Is a graduate of an educational
20	program for respiratory therapists
21	which is recognized by the board and
22	accredited by the American Medical As-
23	sociation in collaboration with the
24	Joint Review Committee for Respiratory
25	Therapy Education; and
26	(b) Has passed an examination as pro-
27	vided for in section 9709; or
2,	vided for in seection 57057 or
20	D. For a linear of a manning town come to what
28	B. For a license as a respiratory care techni-
29	<u>cian:</u>
30	(1) The applicant is presently credentialed
31	by the National Board for Respiratory Care
32	as a certified respiratory therapy techni-
33	cian; or
34	(2) The applicant:

1 2 3 4 5 6 7 8	(a) Is a graduate of an educational program for respiratory therapists or respiratory care technicians which is recognized by the board and accredited by the American Medical Association in collaboration with the Joint Review Committee for Respiratory Therapy Education; and
9 10	(b) Has passed an examination as provided for in section 9709.
11	§9709. Examination for licensure
12 13 14	1. Requirements. Only a person satisfying the requirements of this chapter may apply for examination in such a manner as the board prescribes.
15 16 17 18 19 20 21	2. Content. Written examinations shall be designed or adopted by the board and shall test the applicant's knowledge of the basic and clinical sciences relating to respiratory care, respiratory care techniques and methods and such other subjects as the board may include to determine the applicant's fitness to practice.
22 23 24 25 26	3. Time and place. Examinations shall be given at least twice each year at such places as the board determines. The board shall give reasonable public notice of these examinations in accordance with its rules.
27 28	§9710. Fees 1. Amount. Application and examination fees may
29 30 31	be established by the board in amounts which are reasonable and necessary for their respective purposes. License fees may not exceed the following amounts:
32 33	A. For an original respiratory care practitioner's license, \$80;
34 35	B. For a renewal respiratory care practitioner's license, \$40; and

C. For a temporary license, \$40.

- 2. Deposit of fees. All fees received by the board shall be paid to the Treasurer of State to be used for carrying out this chapter. Any balance of fees shall not lapse, but shall be carried forward as a continuing account to be expended for the same purposes in the following fiscal years.
 - §9711. Issuance of license
- The board shall issue a license to any person who meets the requirements of this chapter upon payment of the prescribed license fee.
- 11 §9712. Term of licenses

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- 1. Annual renewal. Licenses shall expire annually on December 31st or on such other date as the commissioner determines. Notice of expiration shall be mailed to each licensee's last known address at least 30 days in advance of the expiration of his license. The notice shall include any requests for information necessary for renewal.
- 19 Licenses may be renewed up to 90 days after the date 20 of expiration upon payment of a late fee of \$10 in addition to the renewal fee. Any person who submits 21 22 an application for renewal more than 90 days after the license renewal date shall be subject to all re-23 24 quirements governing new applicants under this chap-25 ter, except that the board may, giving due considera-26 tion to the protection of the public, waive examination if that renewal application is made within 2 27 28 years from the date of that expiration.
- 29 2. Continuing education. Each license renewal shall be accompanied by evidence of continuing education or other requirements as determined by the board.
- 33 §9713. Disciplinary actions
 - 1. Complaints. The board may order an investigation of a complaint on its own motion or on written complaint filed with the board regarding noncompliance with or violation of any section of this chapter or of any rules adopted by the board.

1	2. Disciplinary actions; grounds. The board may
2	2. Disciplinary actions; grounds. The board may suspend or revoke a license pursuant to Title 5, sec-
3	tion 10004. The board may refuse to issue or renew or the Administrative Court may revoke, suspend or
4	or the Administrative Court may revoke, suspend or
5	refuse to renew any license issued under this chapter
6	on any of the following grounds:
7	A. The practice of any fraud or deceit in ob-
8	taining a license under this chapter or in con-
9	nection with service rendered within the scope of
10	the license issued;
11	B. Unprofessional conduct. A licensee shall be
12	deemed to have engaged in unprofessional conduct
13	if he violates any standard of professional be-
14	havior which has been established in the practice
15	of respiratory care;
16	C. Subject to the limitations of Title 5, chap-
17	ter 341, conviction of a crime which involves
18	ter 341, conviction of a crime which involves dishonesty or false statement or which relates
19	directly to the practice for which the licensee
20	is licensed or conviction of any crime for which
21	imprisonment for one year or more may be imposed;
22	<u>or</u>
23	D. Any violation of this chapter or rules
24	adopted by the board.
	<u> </u>
25	STATEMENT OF FACT
20	STATEMENT OF TACE
26	This new draft provides for licencing of respira-
27	tory care practitioners. The new draft establishes
28	licensing categories for respiratory therapists and
29	respiratory care technicians, the 2 levels now recog-
30	nized in the profession.