# 94TH GENERAL ASSEMBLY

#### State of Illinois

# 2005 and 2006

#### SB0139

Introduced 2/1/2005, by Sen. M. Maggie Crotty

### SYNOPSIS AS INTRODUCED:

5 ILCS 80/4.16 5 ILCS 80/4.26 new 225 ILCS 106/10 225 ILCS 106/15 225 ILCS 106/20 225 ILCS 106/50 225 ILCS 106/55

Amends the Regulatory Sunset Act to extend the repeal of the Respiratory Care Practice Act to January 1, 2016. Amends the Respiratory Care Practice Act. Replaces the definition of "respiratory care" and "cardiorespiratory care". Eliminates certain exemptions concerning the activities of unlicensed persons who do not represent themselves as respiratory care practitioners, qualified members of other professional groups, and organizations or institutions that provide respiratory care. exemptions concerning (i) polysomnographic technologists, Adds technicians, and trainees and (ii) family members providing respiratory care services. Provides that no person shall, without a valid license, (i) hold himself or herself out to the public as a respiratory care practitioner; (ii) use the title "respiratory care practitioner"; or (iii) perform the duties of a respiratory care practitioner, except as provided in the Section of the Act concerning exemptions. Provides that beginning 6 months after December 31, 2005, all individuals who provide satisfactory evidence to the Department of 3 years of experience in the practice of respiratory care during the 5 years immediately preceding December 31, 2005 shall be issued a license. Effective December 31, 2005.

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FISCAL NOTE ACT MAY APPLY

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AN ACT concerning professional regulation.

Be it enacted by the People of the State of Illinois, 2 represented in the General Assembly: 3 Section 5. The Regulatory Sunset Act is amended by changing 4 5 Section 4.16 and by adding Section 4.26 as follows: (5 ILCS 80/4.16) 6 7 Sec. 4.16. Acts repealed January 1, 2006. The following Acts are repealed January 1, 2006: 8 The Respiratory Care Practice Act. 9 The Hearing Instrument Consumer Protection Act. 10 The Illinois Dental Practice Act. 11 The Professional Geologist Licensing Act. 12 The Illinois Athletic Trainers Practice Act. 13 14 The Barber, Cosmetology, Esthetics, and Nail Technology 15 Act of 1985. 16 The Collection Agency Act. The Illinois Roofing Industry Licensing Act. 17 18 The Illinois Physical Therapy Act. (Source: P.A. 89-33, eff. 1-1-96; 89-72, eff. 12-31-95; 89-80, 19 eff. 6-30-95; 89-116, eff. 7-7-95; 89-366, eff. 7-1-96; 89-387, 20 eff. 8-20-95; 89-626, eff. 8-9-96.) 21 22 (5 ILCS 80/4.26 new) Sec. 4.26. Act repealed on January 1, 2016. The following 23 Act is repealed on January 1, 2016: 24 25 The Respiratory Care Practice Act. 26 Section 10. The Respiratory Care Practice Act is amended by changing Sections 10, 15, 20, 50, 55, and 90 as follows: 27 (225 ILCS 106/10) 28 (Section scheduled to be repealed on January 1, 2006) 29

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Sec. 10. Definitions. In this Act:

2 "Board" means the Respiratory Care Board appointed by the 3 Director.

4 "Department" means the Department of Professional5 Regulation.

"Director" means the Director of Professional Regulation.

7 "Licensed" means that which is required to hold oneself out8 as a respiratory care practitioner as defined in this Act.

9 "Licensed physician" means a physician licensed to 10 practice medicine in all its branches.

11 "Respiratory care" and "cardiorespiratory care" mean preventative services, diagnostic services, therapeutic 12 services, and rehabilitative services under the written, 13 verbal, or telecommunicated order of a physician to an 14 15 individual with a disorder, disease, or abnormality of the 16 cardiopulmonary system, as diagnosed by a physician. These 17 terms include, but are not limited to, measuring, observing, assessing, and monitoring signs and symptoms, reactions, 18 19 general behavior, and general physical response of individuals 20 to respiratory care services, including the determination of whether those signs, symptoms, reactions, behaviors, or 21 general physical responses exhibit abnormal characteristics; 22 the administration of pharmacological, diagnostic, and 23 therapeutic agents related to respiratory care services; the 24 collection of blood specimens and other bodily fluids and 25 tissues for, and the performance of, cardiopulmonary 26 27 diagnostic testing procedures, including, but not limited to, blood gas analysis; development, implementation, and 28 modification of respiratory care treatment plans based on 29 assessed abnormalities of the cardiopulmonary system, 30 31 respiratory care protocols, clinical pathways, guidelines, referrals, and written, verbal, or telecommunicated orders of a 32 physician; application, operation, and management of 33 mechanical ventilatory support and other means of life support; 34 35 and the initiation of emergency procedures under the rules promulgated by the Department. include, but are not limited to, 36

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direct and indirect services in the implementation of 1 2 treatment, management, disease prevention, diagnostic testing, monitoring, and care of patients with deficiencies and 3 abnormalities associated with the cardiopulmonary system, 4 5 including (i) a determination of whether such signs and 6 symptoms, reactions, behavior, and general response exhibit abnormal characteristics and (ii) implementation of treatment 7 based on the observed abnormalities, of appropriate reporting, 8 9 referral, respiratory care protocols, or changes in treatment 10 pursuant to the written, oral, or telephone transmitted orders of a licensed physician. "Respiratory care" includes the 11 transcription and implementation of written, oral, and 12 transmitted orders by a licensed physician 13 telephone pertaining to the practice of respiratory care and the 14 15 initiation of emergency procedures under rules promulgated by 16 the Board or as otherwise permitted in this Act. The practice 17 of respiratory care may be performed in any clinic, hospital, skilled nursing facility, private dwelling, or other place 18 considered appropriate by the Board in accordance with the 19 written, oral, or telephone transmitted order of a physician 20 and shall be performed under the direction of a licensed 21 physician. "Respiratory care" includes inhalation and 22 respiratory therapy. 23

"Respiratory care education program" means a course of 24 25 academic study leading to eligibility for registry or 26 certification in respiratory care. The training is to be 27 approved by an accrediting agency recognized by the Board and 28 shall include an evaluation of competence through а standardized testing mechanism that is determined by the Board 29 30 to be both valid and reliable.

31 "Respiratory care practitioner" means a person who is 32 licensed by the Department of Professional Regulation and meets 33 all of the following criteria:

34 (1) The person is engaged in the practice of
 35 cardiorespiratory care and has the knowledge and skill
 36 necessary to administer respiratory care.

1 (2) The person is capable of serving as a resource to 2 the licensed physician in relation to the technical aspects 3 of cardiorespiratory care and the safe and effective 4 methods for administering cardiorespiratory care 5 modalities.

6 (3) The person is able to function in situations of 7 unsupervised patient contact requiring great individual 8 judgment.

9 (4) The person is capable of supervising, directing, or 10 teaching less skilled personnel in the provision of 11 respiratory care services.

12 (Source: P.A. 89-33, eff. 1-1-96.)

13 (225 ILCS 106/15)

14 (Section scheduled to be repealed on January 1, 2006)

15 Sec. 15. Exemptions.

16 (a) This Act does not prohibit a person legally regulated in this State by any other Act from engaging in any practice 17 18 for which he or she is authorized. as long as he or she does not represent himself or herself by the title of respiratory care 19 practitioner. This Act does not prohibit the practice of 20 nonregulated professions whose practitioners are engaged in 21 22 the delivery of respiratory care as long as these practitioners not represent themselves as or use the title 23 do 24 respiratory care practitioner.

(b) Nothing in this Act shall prohibit the practice of respiratory care by a person who is employed by the United States government or any bureau, division, or agency thereof while in the discharge of the employee's official duties.

(c) Nothing in this Act shall be construed to limit the activities and services of a person enrolled in an approved course of study leading to a degree or certificate of registry or certification eligibility in respiratory care if these activities and services constitute a part of a supervised course of study and if the person is designated by a title which clearly indicates his or her status as a student or - 5 - LRB094 06676 RAS 36770 b

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trainee. Status as a student or trainee shall not exceed 3
 years from the date of enrollment in an approved course.

3 (d) Nothing in this Act shall prohibit a person from 4 treating ailments by spiritual means through prayer alone in 5 accordance with the tenets and practices of a recognized church 6 or religious denomination.

7 (e) Nothing in this Act shall be construed to prevent a 8 person who is a registered nurse or a certified registered 9 nurse anesthetist or a licensed practical nurse from providing 10 respiratory care procedures for which appropriate competencies 11 <u>have been demonstrated</u>.

(f) Nothing in this Act shall limit a person who is credentialed by the National Society for Cardiopulmonary Technology or the National Board for Respiratory Care from performing pulmonary function tests and related respiratory care procedures for which appropriate competencies have been demonstrated.

(g) Nothing in this Act shall prohibit the collection and
 analysis of blood by clinical laboratory personnel meeting the
 personnel standards of the Illinois Clinical Laboratory Act.

(h) Nothing in this Act shall prohibit a polysomnographic 21 technologist, technician, or trainee, as defined by the 22 23 Association of Polysomnographic Technologists (APT), from performing activities within the scope of practice adopted by 24 the APT, while under the direction of a physician licensed in 25 26 this State limit the activities of a person who is not licensed 27 under this Act from performing respiratory care if he or she 28 does not represent himself or herself as a respiratory 29 practitioner.

30 (i) Nothing in this Act shall prohibit <u>a family member from</u> 31 providing respiratory care services to an ill person qualified members of other professional groups, including but not limited 32 to nurses, from performing or advertising that he or she 33 performs the work of a respiratory care practitioner in a 34 consistent with his or her training, 35 code of or anv ethics of his or her respective professions, but only if he 36

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she does not represent himself or herself by any title or
 description as a respiratory care practitioner.

3 (j) (Blank). This Act does not prohibit a hospital, nursing care facility, home health agency, health 4 home. longterm 5 system or network, or any other organization or institution 6 health or illness care that provides for individuals 7 communities from <del>providing</del> - respiratory care through practitioners that the organization considers competent. These 8 entities shall not be required to utilize licensed respiratory 9 10 care practitioners to practice respiratory care when providing 11 respiratory care for their patients -customers. 12 Organizations providing respiratory care may decide who is competent to deliver that respiratory care. Nothing in this Act 13 shall be construed to limit the ability of an employer to 14 15 utilize a respiratory care practitioner within the employment 16 setting consistent with the individual's skill and training. 17 (Source: P.A. 91-259, eff. 1-1-00.)

18 (225 ILCS 106/20)

19 (Section scheduled to be repealed on January 1, 2006)
20 Sec. 20. Restrictions and limitations.

(a) No person shall, without a valid license as a
respiratory care practitioner (i) hold himself or herself out
to the public as a respiratory care practitioner; or (ii) use
the title "respiratory care practitioner"; or (iii) perform the
<u>duties of a respiratory care practitioner</u>, except as provided
in Section 15 of this Act.

27 (b) Nothing in the Act shall be construed to permit a 28 person licensed as <u>a</u> respiratory care practitioner to engage in 29 any manner in the practice of medicine in all its branches as 30 defined by State law.

31 (Source: P.A. 89-33, eff. 1-1-96.)

32 (225 ILCS 106/50)

33 (Section scheduled to be repealed on January 1, 2006)

34 Sec. 50. Qualifications for a license.

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1 (a) A person is qualified to be licensed as a licensed 2 respiratory care practitioner, and the Department may issue a 3 license authorizing the practice of respiratory care to an 4 applicant who:

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(1) has applied in writing on the prescribed form and has paid the required fee;

7 (2) has successfully completed a respiratory care
8 training program approved by the Department;

9 (3) has successfully passed an examination for the 10 practice of respiratory care authorized by the Department; 11 and

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(4) has paid the fees required by this Act.

Any person who has received certification by any state or national organization whose standards are accepted by the Department as being substantially similar to the standards in this Act may apply for a respiratory care practitioner license without examination.

Beginning 6 months after December 31, 2005, 18 (b) all individuals who provide satisfactory evidence to 19 the 20 Department of 3 years of experience in the practice of respiratory care during the 5 years immediately preceding 21 December 31, 2005 shall be issued a license. This experience 22 23 must have been obtained while under the supervision of a certified respiratory therapist or a registered respiratory 24 practitioner. All applications for a license under this 25 subsection (b) shall be filed within 12 months after December 26 <u>31, 200</u>5. 27

28 All individuals who, on the effective date of this 29 Act, provide satisfactory evidence to the Department of 3 30 years experience in the practice of respiratory care during 31 the 5 years immediately preceding the effective date of this Act shall be issued a license. To qualify for a 32 license under subsection (b), all applications for a 33 license under this subsection (b) shall be filed within 24 34 months after the effective date of this Act. 35

36 (Source: P.A. 89-33, eff. 1-1-96.)

1 (225 ILCS 106/55) 2 (Section scheduled to be repealed on January 1, 2006) 3 Sec. 55. Licensure required. Beginning 6 months after January 1, 1996, and except as provided in Section 15 of this 4 Act, no individual shall practice hold himself or herself out 5 as a respiratory care practitioner, unless he or she is 6 licensed under this Act. Individuals who have been licensed 7 respiratory care practitioners in any jurisdiction and who are 8 seeking to practice respiratory care in this State must apply 9 for licensure within 45 days after beginning employment within 10 the State. 11 (Source: P.A. 91-259, eff. 1-1-00.) 12

13 Section 99. Effective date. This Act takes effect December 14 1, 2005.