

---

**By: Delegates McHale, Cadden, Frush, Hammen, Klausmeier, T. Murphy,  
Nathan-Pulliam, and Stup**

Introduced and read first time: February 5, 1996

Assigned to: Environmental Matters

---

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 12, 1996

---

CHAPTER \_\_\_\_

1 AN ACT concerning

2 **State Board of Physician Quality Assurance - Licensure of Respiratory Care**  
3 **Practitioners**

4 FOR the purpose of requiring the State Board of Physician Quality Assurance (Board) to  
5 adopt regulations for the licensure and practice of respiratory care practitioners;  
6 defining certain terms; providing that this Act does not limit the rights of certain  
7 individuals to practice certain occupations; authorizing the Board to set certain  
8 fees; establishing the Respiratory Care Professional Standards Committee  
9 (Committee) within the Board; specifying the membership, powers, and duties of  
10 the Committee; establishing the terms of and requirements for certain members of  
11 the Committee; requiring an individual to be licensed by the Board before the  
12 individual may practice respiratory care; creating certain exceptions; specifying the  
13 qualifications for certain licenses; specifying application procedures for certain  
14 licenses; authorizing the issuance and renewal of certain licenses; authorizing  
15 certain licensed individuals to perform certain acts; providing for the expiration and  
16 renewal of certain licenses; establishing certain grounds for discipline; requiring the  
17 Board to provide certain hearing procedures before certain individuals may be  
18 disciplined under this Act; prohibiting certain acts; making certain exceptions;  
19 establishing certain penalties; and generally relating to the licensure of individuals  
20 to practice respiratory care in this State.

21 BY repealing

22 Article - Health Occupations

23 Section 14-507

24 Annotated Code of Maryland

25 (1994 Replacement Volume and 1995 Supplement)

1 BY repealing and reenacting, with amendments,  
 2 Article - Health Occupations  
 3 Section 14-405 and 14-408  
 4 Annotated Code of Maryland  
 5 (1994 Replacement Volume and 1995 Supplement)

6 BY adding to  
 7 Article - Health Occupations  
 8 Section 14-5A-01 through 14-5A-24, inclusive, to be under the new subtitle  
 9 "Subtitle 5A. Respiratory Care Practitioners"  
 10 Annotated Code of Maryland  
 11 (1994 Replacement Volume and 1995 Supplement)

12 BY repealing and reenacting, without amendments,  
 13 Article - State Government  
 14 Section 8-403(e)  
 15 Annotated Code of Maryland  
 16 (1995 Replacement Volume)

17 BY adding to  
 18 Article - State Government  
 19 Section 8-403(l)  
 20 Annotated Code of Maryland  
 21 (1995 Replacement Volume)

22 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
 23 MARYLAND, That Section(s) 14-507 of Article - Health Occupations of theAnnotated  
 24 Code of Maryland be repealed.

25 SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland  
 26 read as follows:

27 **Article - Health Occupations**

28 14-405.

29 (a) Except as otherwise provided in the Administrative Procedure Act, before the  
 30 Board takes any action under § 14-404 of this subtitle or § 14-303 [or], § 14-305, OR §  
 31 14-5A-17 of this title, it shall give the individual against whom the action is contemplated  
 32 an opportunity for a hearing before a hearing officer.

33 (b) The hearing officer shall give notice and hold the hearing in accordance with  
 34 the Administrative Procedure Act except that factual findings shall be supported by clear  
 35 and convincing evidence.

36 (c) The individual may be represented at the hearing by counsel.

3

1 (d) If after due notice the individual against whom the action is contemplated fails  
2 or refuses to appear, nevertheless the hearing officer may hear and refer the matter to the  
3 Board for disposition.

4 (e) After performing any necessary hearing under this section, the hearing officer  
5 shall refer proposed factual findings to the Board for the Board's disposition.

6 (f) The Board may adopt regulations to govern the taking of depositions and  
7 discovery in the hearing of charges.

8 (g) The hearing of charges may not be stayed or challenged by any procedural  
9 defects alleged to have occurred prior to the filing of charges.

10 14-408.

11 (a) Except as provided in this section for an action under § 14-404 of this subtitle  
12 OR § 14-5A-17 OF THIS TITLE, any person aggrieved by a final decision of the Board in a  
13 contested case, as defined in the Administrative Procedure Act, may:

14 (1) Appeal that decision to the Board of Review; and

15 (2) Then take any further appeal allowed by the Administrative Procedure  
16 Act.

17 (b) (1) Any person aggrieved by a final decision of the Board under § 14-404 of  
18 this subtitle OR § 14-5A-17 OF THIS TITLE may not appeal to the Secretary or Board of  
19 Review but may take a direct judicial appeal.

20 (2) The appeal shall be made as provided for judicial review of final  
21 decisions in the Administrative Procedure Act.

22 (c) An order of the Board may not be stayed pending review.

23 (d) The Board may appeal from any decision that reverses or modifies its order.

24 SUBTITLE 5A. RESPIRATORY CARE PRACTITIONERS.

25 14-5A-01.

26 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS  
27 INDICATED.

28 (B) "BOARD" MEANS THE STATE BOARD OF PHYSICIAN QUALITY ASSURANCE.

29 (C) "COMMITTEE" MEANS THE RESPIRATORY CARE PROFESSIONAL  
30 STANDARDS COMMITTEE ESTABLISHED UNDER § 14-5A-05 OF THIS SUBTITLE.

31 (D) "LICENSE" MEANS, ~~UNLESS THE CONTEXT REQUIRES OTHERWISE,~~ A  
32 LICENSE ISSUED BY THE BOARD TO PRACTICE RESPIRATORY CARE.

33 (E) "LICENSED RESPIRATORY CARE PRACTITIONER" MEANS, ~~UNLESS THE~~  
34 ~~CONTEXT REQUIRES OTHERWISE,~~ A RESPIRATORY CARE PRACTITIONER WHO IS  
35 LICENSED BY THE BOARD TO PRACTICE RESPIRATORY CARE.

1 (F) "NATIONAL CERTIFYING BOARD" MEANS THE NATIONAL BOARD FOR  
 2 RESPIRATORY CARE OR A CERTIFYING ORGANIZATION THAT HAS CERTIFICATION  
 3 REQUIREMENTS EQUIVALENT TO THE NATIONAL BOARD FOR RESPIRATORY CARE  
 4 AND THAT HAS BEEN APPROVED BY THE BOARD.

5 (G) (1) "PRACTICE RESPIRATORY CARE" MEANS TO EVALUATE, CARE FOR,  
 6 AND TREAT, INCLUDING THE DIAGNOSTIC EVALUATION OF, INDIVIDUALS WHO  
 7 HAVE DEFICIENCIES AND ABNORMALITIES THAT AFFECT THE PULMONARY SYSTEM  
 8 AND ASSOCIATED ASPECTS OF THE CARDIOPULMONARY AND OTHER SYSTEMS  
 9 UNDER THE SUPERVISION OF AND IN COLLABORATION WITH A PHYSICIAN.

10 (2) "PRACTICE RESPIRATORY CARE" INCLUDES:

11 (I) PROVIDING DIRECT AND INDIRECT RESPIRATORY CARE  
 12 SERVICES THAT ARE SAFE, ASEPTIC, PREVENTIVE, AND RESTORATIVE;

13 (II) PRACTICING THE PRINCIPLES, TECHNIQUES, AND THEORIES  
 14 DERIVED FROM CARDIOPULMONARY MEDICINE;

15 (III) EVALUATING AND TREATING INDIVIDUALS WHOSE  
 16 CARDIOPULMONARY FUNCTIONS HAVE BEEN THREATENED OR IMPAIRED BY  
 17 DEVELOPMENTAL DEFECTS, THE AGING PROCESS, PHYSICAL INJURY, DISEASE, OR  
 18 ACTUAL OR ANTICIPATED DYSFUNCTION OF THE CARDIOPULMONARY SYSTEM;

19 (IV) OBSERVING AND MONITORING PHYSICAL SIGNS AND  
 20 SYMPTOMS, GENERAL BEHAVIOR, AND GENERAL PHYSICAL RESPONSE TO  
 21 RESPIRATORY CARE PROCEDURES AND DETERMINING IF INITIATION,  
 22 MODIFICATION, OR DISCONTINUATION OF A TREATMENT REGIMEN IS WARRANTED;

23 (V) TRANSCRIBING AND IMPLEMENTING WRITTEN OR ORAL  
 24 ORDERS REGARDING THE PRACTICE OF RESPIRATORY CARE;

25 ~~(V)~~ (VI) USING EVALUATION TECHNIQUES THAT INCLUDE  
 26 CARDIOPULMONARY FUNCTION ASSESSMENTS, GAS EXCHANGE, THE NEED AND  
 27 EFFECTIVENESS OF THERAPEUTIC MODALITIES AND PROCEDURES, AND THE  
 28 ASSESSMENT AND EVALUATION OF THE NEED FOR ~~A LOWER LEVEL OF~~ EXTENDED  
 29 CARE AND HOME CARE PROCEDURES, THERAPY, AND EQUIPMENT; AND

30 ~~(V)~~ (VII) APPLYING THE USE OF TECHNIQUES, EQUIPMENT, AND  
 31 PROCEDURES INVOLVED IN THE ADMINISTRATION OF RESPIRATORY CARE,  
 32 INCLUDING:

33 1. EXCEPT FOR GENERAL ANESTHESIA, THERAPEUTIC AND  
 34 DIAGNOSTIC GASES;

35 2. PRESCRIBED MEDICATION FOR INHALATION OR DIRECT  
 36 TRACHEAL INSTALLATION;

37 3. THE ADMINISTRATION OF ANALGESIC AGENTS BY  
 38 SUBCUTANEOUS INJECTION OR INHALATION FOR THE PERFORMANCE OF  
 39 RESPIRATORY CARE PROCEDURES;

5

1 4. NONSURGICAL INSERTION, MAINTENANCE, AND  
2 REMOVAL OF ARTIFICIAL AIRWAYS;

3 5. ADVANCED CARDIOPULMONARY MEASURES;

4 6. CARDIOPULMONARY REHABILITATION;

5 7. MECHANICAL VENTILATION OR PHYSIOLOGICAL LIFE  
6 SUPPORT SYSTEMS;

7 8. COLLECTION OF BODY FLUIDS AND BLOOD SAMPLES FOR  
8 EVALUATION AND ANALYSIS;

9 9. INSERTION OF DIAGNOSTIC ARTERIAL ACCESS LINES;  
10 AND

11 10. COLLECTION AND ANALYSIS OF EXHALED RESPIRATORY  
12 GASES.

13 (H) "SUPERVISION" MEANS THE RESPONSIBILITY OF A PHYSICIAN TO  
14 EXERCISE ON-SITE OR IMMEDIATELY AVAILABLE DIRECTION FOR A LICENSED  
15 RESPIRATORY CARE PRACTITIONER PERFORMING DELEGATED MEDICAL ACTS.

16 (I) "TEMPORARY LICENSE" MEANS A LICENSE ISSUED BY THE BOARD UNDER  
17 AND AS LIMITED BY § 14-5A-15 OF THIS SUBTITLE TO PRACTICE RESPIRATORY CARE.

18 14-5A-02.

19 THIS SUBTITLE DOES NOT LIMIT:

20 (1) THE RIGHT OF AN INDIVIDUAL TO PRACTICE A HEALTH  
21 OCCUPATION THAT THE INDIVIDUAL IS AUTHORIZED TO PRACTICE UNDER THIS  
22 ARTICLE; OR

23 (2) THE RIGHT OF A LICENSED HOME MEDICAL EQUIPMENT PROVIDER  
24 TO PROVIDE HOME MEDICAL EQUIPMENT SERVICES AS DEFINED UNDER TITLE 19,  
25 SUBTITLE 4A OF THE HEALTH - GENERAL ARTICLE.

26 14-5A-03.

27 THE BOARD SHALL ADOPT REGULATIONS FOR THE LICENSURE AND PRACTICE  
28 OF RESPIRATORY CARE .

29 14-5A-04.

30 (A) (1) THE BOARD SHALL SET REASONABLE FEES FOR THE ISSUANCE OF  
31 AND RENEWAL OF LICENSES AND THE OTHER SERVICES IT PROVIDES TO  
32 RESPIRATORY CARE PRACTITIONERS.

33 (2) THE FEES CHARGED SHALL BE SET SO AS TO PRODUCE FUNDS TO  
34 APPROXIMATE THE COST OF MAINTAINING THE LICENSURE PROGRAM AND THE  
35 OTHER SERVICES PROVIDED TO RESPIRATORY CARE PRACTITIONERS.

36 (B) (1) THE BOARD SHALL PAY ALL FEES COLLECTED UNDER THE  
37 PROVISIONS OF THIS SUBTITLE TO THE COMPTROLLER OF THE STATE.

6

1 (2) THE COMPTROLLER SHALL DISTRIBUTE ALL FEES TO THE STATE  
2 BOARD OF PHYSICIAN QUALITY ASSURANCE ESTABLISHED UNDER § 14-201 OF THIS  
3 TITLE.

4 (C) THE FEES SHALL BE USED TO COVER THE ACTUAL DOCUMENTED DIRECT  
5 AND INDIRECT COSTS OF FULFILLING THE STATUTORY AND REGULATORY DUTIES  
6 OF THE BOARD AS PROVIDED BY THE PROVISIONS OF THIS SUBTITLE.

7 14-5A-05.

8 THERE IS A RESPIRATORY CARE PROFESSIONAL STANDARDS COMMITTEE  
9 WITHIN THE BOARD.

10 14-5A-06.

11 (A) THE COMMITTEE CONSISTS OF SEVEN MEMBERS APPOINTED BY THE  
12 BOARD AS FOLLOWS:

13 (1) THREE RESPIRATORY CARE PRACTITIONERS;

14 (2) THREE PHYSICIANS ~~WHOSE APPROVED SPECIALTY IS THORACIC~~  
15 ~~SURGERY OR PULMONARY MEDICINE;~~

16 (I) ONE OF WHOM IS A SPECIALIST IN THORACIC SURGERY;

17 (II) ONE OF WHOM IS A SPECIALIST IN PULMONARY MEDICINE;

18 AND

19 (III) ONE OF WHOM IS A SPECIALIST IN ANESTHESIOLOGY; AND

20 (3) ONE CONSUMER MEMBER.

21 (B) THE CONSUMER MEMBER OF THE COMMITTEE:

22 (1) SHALL BE A MEMBER OF THE GENERAL PUBLIC;

23 (2) MAY NOT BE OR EVER HAVE BEEN:

24 (I) A RESPIRATORY CARE PRACTITIONER;

25 (II) ANY HEALTH CARE PROFESSIONAL; OR

26 (III) IN TRAINING TO BE A RESPIRATORY CARE PRACTITIONER OR  
27 OTHER HEALTH PROFESSIONAL;

28 (3) MAY NOT HAVE A HOUSEHOLD MEMBER WHO IS A HEALTH  
29 PROFESSIONAL OR IS IN TRAINING TO BE A HEALTH PROFESSIONAL; AND

30 (4) MAY NOT:

31 (I) PARTICIPATE OR EVER HAVE PARTICIPATED IN A  
32 COMMERCIAL OR PROFESSIONAL FIELD RELATED TO RESPIRATORY CARE;

33 (II) HAVE A HOUSEHOLD MEMBER WHO PARTICIPATES IN A  
34 COMMERCIAL OR PROFESSIONAL FIELD RELATED TO RESPIRATORY CARE;

7

1 (III) HAVE HAD WITHIN 2 YEARS BEFORE APPOINTMENT A  
2 FINANCIAL INTEREST IN A PERSON REGULATED BY THE BOARD; OR

3 (IV) HAVE HAD WITHIN 2 YEARS BEFORE APPOINTMENT A  
4 FINANCIAL INTEREST IN THE PROVISION OF GOODS OR SERVICES TO RESPIRATORY  
5 CARE PRACTITIONERS OR TO THE FIELD OF RESPIRATORY CARE.

6 (C) (1) THE TERM OF A MEMBER IS 3 YEARS.

7 (2) THE TERMS OF MEMBERS ARE STAGGERED AS REQUIRED BY THE  
8 TERMS PROVIDED FOR MEMBERS OF THE BOARD ON JULY 1, 1996.

9 (3) AT THE END OF A TERM, A MEMBER CONTINUES TO SERVE UNTIL A  
10 SUCCESSOR IS APPOINTED AND QUALIFIES.

11 (4) A MEMBER WHO IS APPOINTED AFTER A TERM HAS BEGUN SERVES  
12 ONLY FOR THE REST OF THE TERM AND UNTIL A SUCCESSOR IS APPOINTED AND  
13 QUALIFIES.

14 14-5A-07.

15 IN ADDITION TO THE POWERS SET FORTH ELSEWHERE IN THIS SUBTITLE, THE  
16 COMMITTEE SHALL:

17 (1) DEVELOP AND RECOMMEND TO THE BOARD REGULATIONS TO  
18 CARRY OUT THE PROVISIONS OF THIS SUBTITLE;

19 (2) DEVELOP AND RECOMMEND TO THE BOARD A CODE OF ETHICS FOR  
20 THE PRACTICE OF RESPIRATORY CARE FOR ADOPTION BY THE BOARD;

21 (3) DEVELOP AND RECOMMEND TO THE BOARD STANDARDS OF CARE  
22 FOR THE PRACTICE OF RESPIRATORY CARE;

23 (4) DEVELOP AND RECOMMEND TO THE BOARD THE REQUIREMENTS  
24 FOR LICENSURE AS A RESPIRATORY CARE PRACTITIONER, INCLUDING:

25 (I) CRITERIA FOR THE EDUCATIONAL AND CLINICAL TRAINING  
26 OF RESPIRATORY CARE PRACTITIONERS; AND

27 (II) CRITERIA FOR A PROFESSIONAL COMPETENCY EXAMINATION  
28 AND TESTING OF APPLICANTS FOR A LICENSE TO PRACTICE RESPIRATORY CARE;

29 (5) DEVELOP AND RECOMMEND TO THE BOARD CRITERIA FOR  
30 RESPIRATORY CARE PRACTITIONERS WHO ARE LICENSED IN OTHER STATES TO  
31 PRACTICE IN THIS STATE;

32 (6) EVALUATE THE ACCREDITATION STATUS OF EDUCATION  
33 PROGRAMS IN RESPIRATORY CARE FOR APPROVAL BY THE BOARD;

34 (7) EVALUATE THE CREDENTIALS OF APPLICANTS AND RECOMMEND  
35 LICENSURE OF APPLICANTS WHO FULFILL THE REQUIREMENTS FOR A LICENSE TO  
36 PRACTICE RESPIRATORY CARE;

37 (8) DEVELOP AND RECOMMEND TO THE BOARD CONTINUING  
38 EDUCATION REQUIREMENTS FOR LICENSE RENEWAL;

8

1 (9) PROVIDE THE BOARD WITH RECOMMENDATIONS CONCERNING THE  
2 PRACTICE OF RESPIRATORY CARE;

3 (10) DEVELOP AND RECOMMEND TO THE BOARD CRITERIA RELATED TO  
4 THE PRACTICE OF RESPIRATORY CARE IN THE HOME SETTING;

5 (11) DEVELOP AND RECOMMEND TO THE BOARD CRITERIA FOR THE  
6 DIRECTION OF STUDENTS IN CLINICAL EDUCATION PROGRAMS BY LICENSED  
7 RESPIRATORY CARE PRACTITIONERS;

8 (12) KEEP A RECORD OF ITS PROCEEDINGS; AND

9 (13) SUBMIT AN ANNUAL REPORT TO THE BOARD.

10 14-5A-08.

11 (A) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE, AN INDIVIDUAL  
12 SHALL BE LICENSED BY THE BOARD BEFORE THE INDIVIDUAL MAY PRACTICE  
13 RESPIRATORY CARE IN THIS STATE.

14 (B) THIS SECTION DOES NOT APPLY TO AN INDIVIDUAL EMPLOYED BY THE  
15 FEDERAL GOVERNMENT AS A RESPIRATORY CARE PRACTITIONER WHILE THE  
16 INDIVIDUAL IS PRACTICING WITHIN THE SCOPE OF THAT EMPLOYMENT.

17 (C) (1) (I) IN THIS SUBSECTION THE FOLLOWING TERMS HAVE THE  
18 MEANINGS INDICATED.

19 (II) "EDUCATIONAL PROGRAM" MEANS A RESPIRATORY CARE  
20 EDUCATIONAL PROGRAM APPROVED BY THE AMERICAN MEDICAL ASSOCIATION.

21 (III) "VETERAN" MEANS AN INDIVIDUAL WHO:

22 1. HAS SERVED ON ACTIVE DUTY IN THE UNITED STATES  
23 ARMED FORCES;

24 2. HAS BEEN HONORABLY DISCHARGED; AND

25 3. MEETS THE REQUIREMENTS OF THIS SECTION.

26 (IV) "VETERANS' PROGRAM" MEANS A VETERANS' INTERNSHIP  
27 PROGRAM IN RESPIRATORY CARE FOR QUALIFIED VETERANS WHO ARE WORKING  
28 IN HOSPITALS.

29 (2) THIS SECTION DOES NOT APPLY TO A VETERAN WHO:

30 (I) APPLIES TO THE BOARD WITHIN 6 MONTHS OF DISCHARGE,  
31 PROVIDES THE BOARD THE INFORMATION REQUIRED UNDER THIS SUBSECTION,  
32 AND IS APPROVED BY THE BOARD;

33 (II) HAS PRACTICED IN THE MILITARY WITH ONE OF THE  
34 FOLLOWING SPECIALTIES:

35 1. NAVY 854 WITH SUCCESSFUL COMPLETION OF THE U. S.  
36 ARMY RESPIRATORY CARE SCHOOL;



9

1 2. ARMY 91V; OR

2 3. UNITED STATES AIR FORCE 90450 OR UNITED STATES AIR  
3 FORCE 90250 WITH ADVANCED EXPERIENCE;

4 (III) HAS PRACTICED RESPIRATORY CARE FOR 2,000 HOURS IN THE  
5 5 YEARS IMMEDIATELY PRECEDING DISCHARGE WITH EXPERIENCE IN AREAS  
6 RECOMMENDED AND APPROVED BY THE BOARD;

7 (IV) HAS DOCUMENTED COMPLETION OF EDUCATIONAL  
8 REQUIREMENTS IN THE MILITARY AS APPROVED BY THE BOARD WITH REFERENCE  
9 TO THE STANDARDS OF THE JOINT REVIEW COMMITTEE FOR RESPIRATORY  
10 THERAPY EDUCATION MODULES; AND

11 (V) HAS APPLIED FOR ADMISSION IN AN APPROVED EDUCATIONAL  
12 PROGRAM WITHIN 6 MONTHS OF DISCHARGE.

13 (3) WITHIN 30 DAYS AFTER THE END OF EACH SEMESTER OR EVERY 6  
14 MONTHS, WHICHEVER IS MORE FREQUENT, A VETERAN SHALL SUBMIT EVIDENCE  
15 OF SUCCESSFUL CONTINUED ENROLLMENT IN A RESPIRATORY CARE EDUCATIONAL  
16 PROGRAM WITH SATISFACTORY ACADEMIC STANDING AS APPROVED BY THE  
17 BOARD.

18 (4) IF THE PROVISIONS OF PARAGRAPH (3) OF THIS SUBSECTION ARE  
19 MET, A VETERAN MAY PRACTICE IN A VETERANS' PROGRAM FOR UP TO 30 MONTHS  
20 FROM THE DATE OF THE APPROVAL OF THE VETERAN'S APPLICATION FOR THE  
21 VETERANS' PROGRAM.

22 (5) UPON GRADUATION FROM AN APPROVED EDUCATIONAL  
23 PROGRAM, A VETERAN:

24 (I) CEASES TO QUALIFY TO PRACTICE RESPIRATORY CARE  
25 UNDER THIS SECTION; AND

26 (II) SHALL APPLY FOR A ~~STANDARD GRADUATE INTERNSHIP~~  
27 TEMPORARY LICENSE REQUIRED FOR ALL GRADUATES OF APPROVED  
28 RESPIRATORY CARE PROGRAMS.

29 (6) THE BOARD MAY SET AND CHARGE REASONABLE FEES TO  
30 IMPLEMENT THE PROVISIONS OF THIS SUBSECTION.

31 (7) THE BOARD SHALL APPROVE THE APPLICATION OF EACH VETERAN  
32 WHO MEETS THE REQUIREMENTS OF THIS SUBSECTION.

33 (8) A VETERAN WHO PRACTICES RESPIRATORY CARE UNDER THIS  
34 SUBSECTION IS SUBJECT TO THE SAME DISCIPLINARY PROCEDURES AND IS HELD TO  
35 THE SAME STANDARD OF CARE AS A RESPIRATORY CARE PRACTITIONER LICENSED  
36 UNDER § 14-5A-11 OF THIS SUBTITLE.

37 14-5A-09.

38 (A) TO QUALIFY FOR A LICENSE, AN APPLICANT SHALL BE AN INDIVIDUAL  
39 WHO MEETS THE REQUIREMENTS OF THIS SECTION.

10

1 (B) THE APPLICANT SHALL BE OF GOOD MORAL CHARACTER.

2 (C) THE APPLICANT SHALL BE AT LEAST 18 YEARS OLD.

3 (D) THE APPLICANT SHALL:

4 (1) ~~(1) BE CERTIFIED BY A NATIONAL CERTIFYING BOARD ON OR~~  
5 ~~BEFORE AUGUST 31, 1996; OR~~

6 ~~(1) BE REGISTERED BY A NATIONAL CERTIFYING BOARD;~~

7 (2) HAVE GRADUATED FROM A RESPIRATORY CARE EDUCATIONAL  
8 PROGRAM THAT IS ACCREDITED BY THE COUNCIL ON ACCREDITATION OF ALLIED  
9 HEALTH EDUCATION PROGRAMS; AND

10 ~~(2)~~ (3) MEET THE EDUCATIONAL AND CLINICAL TRAINING  
11 REQUIREMENTS ESTABLISHED BY THE COMMITTEE.

12 14-5A-10.

13 TO APPLY FOR A LICENSE, AN APPLICANT SHALL:

14 (1) SUBMIT AN APPLICATION TO THE BOARD ON THE FORM THAT THE  
15 BOARD REQUIRES; AND

16 (2) PAY TO THE BOARD THE APPLICATION FEE SET BY THE BOARD.

17 14-5A-11.

18 THE BOARD SHALL ISSUE THE APPROPRIATE LICENSE TO AN APPLICANT WHO  
19 MEETS THE REQUIREMENTS OF THIS SUBTITLE FOR THAT LICENSE.

20 14-5A-12.

21 A RESPIRATORY CARE PRACTITIONER LICENSE AUTHORIZES THE LICENSEE  
22 TO PRACTICE RESPIRATORY CARE WHILE THE LICENSE IS EFFECTIVE.

23 14-5A-13.

24 (A) A LICENSE EXPIRES ON A DATE SET BY THE BOARD, UNLESS THE LICENSE  
25 IS RENEWED FOR AN ADDITIONAL TERM AS PROVIDED IN THIS SECTION.

26 (B) AT LEAST 1 MONTH BEFORE THE LICENSE EXPIRES, THE BOARD SHALL  
27 SEND TO THE LICENSEE, BY FIRST CLASS MAIL TO THE LAST KNOWN ADDRESS OF  
28 THE LICENSEE, A RENEWAL NOTICE THAT STATES:

29 (1) THE DATE ON WHICH THE CURRENT LICENSE EXPIRES;

30 (2) THE DATE BY WHICH THE RENEWAL APPLICATION MUST BE  
31 RECEIVED BY THE BOARD FOR THE RENEWAL TO BE ISSUED AND MAILED BEFORE  
32 THE LICENSE EXPIRES; AND

33 (3) THE AMOUNT OF THE RENEWAL FEE.

11

1 (C) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE, BEFORE A LICENSE  
2 EXPIRES, THE LICENSEE PERIODICALLY MAY RENEW IT FOR AN ADDITIONAL TERM,  
3 IF THE LICENSEE:

4 (1) OTHERWISE IS ENTITLED TO BE LICENSED;

5 (2) PAYS TO THE BOARD A RENEWAL FEE SET BY THE BOARD; AND

6 (3) SUBMITS TO THE BOARD:

7 (I) A RENEWAL APPLICATION ON THE FORM THAT THE BOARD  
8 REQUIRES; AND

9 (II) SATISFACTORY EVIDENCE OF COMPLIANCE WITH ANY  
10 CONTINUING EDUCATION OR COMPETENCY REQUIREMENTS AND OTHER  
11 REQUIREMENTS SET UNDER THIS SECTION FOR LICENSE RENEWAL.

12 (D) IN ADDITION TO ANY OTHER QUALIFICATIONS AND REQUIREMENTS  
13 ESTABLISHED BY THE BOARD, THE BOARD MAY ESTABLISH CONTINUING  
14 EDUCATION OR COMPETENCY REQUIREMENTS AS A CONDITION TO THE RENEWAL  
15 OF LICENSES UNDER THIS SECTION.

16 (E) THE BOARD SHALL RENEW THE LICENSE OF EACH LICENSEE WHO MEETS  
17 THE REQUIREMENTS OF THIS SECTION.

18 (F) THE BOARD SHALL REINSTATE THE LICENSE OF A RESPIRATORY CARE  
19 PRACTITIONER WHO HAS NOT PLACED THE LICENSE ON AN INACTIVE STATUS AND  
20 WHO HAS FAILED TO RENEW THE LICENSE FOR ANY REASON IF THE RESPIRATORY  
21 CARE PRACTITIONER:

22 (1) APPLIES FOR REINSTATEMENT WITHIN 30 DAYS AFTER THE DATE  
23 THE LICENSE EXPIRES;

24 (2) MEETS THE RENEWAL REQUIREMENTS OF THIS SECTION; AND

25 (3) PAYS TO THE BOARD THE REINSTATEMENT FEE SET BY THE BOARD.

26 14-5A-14.

27 (A) (1) EXCEPT FOR THE HOLDER OF A TEMPORARY LICENSE ISSUED  
28 UNDER § 14-5A-15 OF THIS SUBTITLE, THE BOARD SHALL PLACE A LICENSEE ON  
29 INACTIVE STATUS, IF THE LICENSEE SUBMITS TO THE BOARD:

30 (I) AN APPLICATION FOR INACTIVE STATUS ON THE FORM  
31 REQUIRED BY THE BOARD; AND

32 (II) THE INACTIVE STATUS FEE SET BY THE BOARD.

33 (2) THE BOARD SHALL ISSUE A LICENSE TO AN INDIVIDUAL WHO IS ON  
34 INACTIVE STATUS IF THE INDIVIDUAL COMPLIES WITH THE RENEWAL  
35 REQUIREMENTS THAT EXIST AT THE TIME THE INDIVIDUAL CHANGES FROM  
36 INACTIVE TO ACTIVE STATUS.

37 (B) THE BOARD MAY REINSTATE THE LICENSE OF A RESPIRATORY CARE  
38 PRACTITIONER WHO HAS NOT BEEN PUT ON INACTIVE STATUS, WHO HAS FAILED TO

12

1 RENEW THE LICENSE FOR ANY REASON, AND WHO APPLIES FOR REINSTATEMENT  
2 MORE THAN 30 DAYS AFTER THE LICENSE HAS EXPIRED, IF THE RESPIRATORY CARE  
3 PRACTITIONER:

4 (1) MEETS THE RENEWAL REQUIREMENTS OF § 14-5A-13 OF THIS  
5 SUBTITLE;

6 (2) PAYS TO THE BOARD THE REINSTATEMENT FEE SET BY THE BOARD;  
7 AND

8 (3) MEETS ANY OTHER REQUIREMENTS ESTABLISHED BY REGULATION.

9 14-5A-15.

10 (A) THE BOARD MAY ISSUE A TEMPORARY LICENSE TO AN APPLICANT WHO:

11 (1) HAS MET THE APPROPRIATE REQUIREMENTS FOR LICENSURE OF  
12 ~~THIS SUBTITLE FOR~~ A RESPIRATORY CARE PRACTITIONER UNDER § 14-5A-09 OF  
13 THIS SUBTITLE; OR

14 (2) HAS GRADUATED FROM ~~AN APPROVED~~ A RESPIRATORY CARE  
15 EDUCATIONAL PROGRAM THAT IS ACCREDITED BY THE COUNCIL ON  
16 ACCREDITATION OF ALLIED HEALTH EDUCATION PROGRAMS AND HAS APPLIED  
17 FOR THE FIRST AVAILABLE NATIONAL CERTIFYING EXAMINATION.

18 (B) A TEMPORARY LICENSE ISSUED TO A RESPIRATORY CARE PRACTITIONER  
19 AUTHORIZES THE HOLDER TO PRACTICE RESPIRATORY CARE ONLY IN  
20 ASSOCIATION WITH A LICENSED RESPIRATORY CARE PRACTITIONER.

21 (C) A TEMPORARY LICENSE EXPIRES 45 DAYS AFTER THE DATE WHEN THE  
22 RESULTS OF THE FIRST EXAMINATION THAT THE HOLDER WAS ELIGIBLE TO TAKE  
23 ARE MADE PUBLIC.

24 (D) THE BOARD MAY NOT ISSUE MORE THAN TWO TEMPORARY LICENSES TO  
25 AN INDIVIDUAL.

26 14-5A-16.

27 UNLESS THE BOARD AGREES TO ACCEPT THE SURRENDER OF A LICENSE, A  
28 LICENSED RESPIRATORY CARE PRACTITIONER OR HOLDER OF A TEMPORARY  
29 LICENSE MAY NOT SURRENDER THE LICENSE NOR MAY THE LICENSE LAPSE BY  
30 OPERATION OF LAW WHILE THE LICENSEE IS UNDER INVESTIGATION OR WHILE  
31 CHARGES ARE PENDING AGAINST THE LICENSEE.

32 14-5A-17.

33 (A) SUBJECT TO THE HEARING PROVISIONS OF § 14-405 OF THIS TITLE, THE  
34 BOARD MAY DENY A LICENSE OR TEMPORARY LICENSE TO ANY APPLICANT,  
35 REPRIMAND ANY LICENSEE OR HOLDER OF A TEMPORARY LICENSE, PLACE ANY  
36 LICENSEE OR HOLDER OF A TEMPORARY LICENSE ON PROBATION, OR SUSPEND OR  
37 REVOKE A LICENSE OR TEMPORARY LICENSE IF THE APPLICANT, LICENSEE, OR  
38 HOLDER:

13

1 (1) FRAUDULENTLY OR DECEPTIVELY OBTAINS OR ATTEMPTS TO  
2 OBTAIN A LICENSE OR TEMPORARY LICENSE FOR THE APPLICANT, LICENSEE, OR  
3 HOLDER OR FOR ANOTHER;

4 (2) FRAUDULENTLY OR DECEPTIVELY USES A LICENSE OR TEMPORARY  
5 LICENSE;

6 (3) IS GUILTY OF UNPROFESSIONAL OR IMMORAL CONDUCT IN THE  
7 PRACTICE OF RESPIRATORY CARE;

8 (4) IS PROFESSIONALLY, PHYSICALLY, OR MENTALLY INCOMPETENT;

9 (5) ABANDONS A PATIENT;

10 (6) IS HABITUALLY INTOXICATED;

11 (7) IS ADDICTED TO OR HABITUALLY ABUSES ANY NARCOTIC OR  
12 CONTROLLED DANGEROUS SUBSTANCE AS DEFINED IN ARTICLE 27 OF THE CODE;

13 (8) PROVIDES PROFESSIONAL SERVICES WHILE:

14 (I) UNDER THE INFLUENCE OF ALCOHOL; OR

15 (II) USING ANY NARCOTIC OR CONTROLLED DANGEROUS  
16 SUBSTANCE AS DEFINED IN ARTICLE 27 OF THE CODE OR ANY OTHER DRUG THAT IS  
17 IN EXCESS OF THERAPEUTIC AMOUNTS OR WITHOUT VALID MEDICAL INDICATION;

18 (9) PROMOTES THE SALE OF SERVICES, DRUGS, DEVICES, APPLIANCES,  
19 OR GOODS TO A PATIENT SO AS TO EXPLOIT THE PATIENT FOR FINANCIAL GAIN;

20 (10) WILLFULLY MAKES OR FILES A FALSE REPORT OR RECORD IN THE  
21 PRACTICE OF RESPIRATORY CARE;

22 (11) WILLFULLY FAILS TO FILE OR RECORD ANY REPORT AS REQUIRED  
23 UNDER LAW, WILLFULLY IMPEDES OR OBSTRUCTS THE FILING OR RECORDING OF A  
24 REPORT, OR INDUCES ANOTHER TO FAIL TO FILE OR RECORD A REPORT;

25 (12) BREACHES PATIENT CONFIDENTIALITY;

26 (13) PAYS OR AGREES TO PAY ANY SUM OR PROVIDE ANY FORM OF  
27 REMUNERATION OR MATERIAL BENEFIT TO ANY PERSON FOR BRINGING OR  
28 REFERRING A PATIENT OR ACCEPTS OR AGREES TO ACCEPT ANY SUM OR ANY  
29 FORM OF REMUNERATION OR MATERIAL BENEFIT FROM AN INDIVIDUAL FOR  
30 BRINGING OR REFERRING A PATIENT;

31 (14) KNOWINGLY MAKES A MISREPRESENTATION WHILE PRACTICING  
32 RESPIRATORY CARE;

33 (15) KNOWINGLY PRACTICES RESPIRATORY CARE WITH AN  
34 UNAUTHORIZED INDIVIDUAL OR AIDS AN UNAUTHORIZED INDIVIDUAL IN THE  
35 PRACTICE OF RESPIRATORY CARE;

36 (16) OFFERS, UNDERTAKES, OR AGREES TO CURE OR TREAT DISEASE BY  
37 A SECRET METHOD, TREATMENT, OR MEDICINE;

14

1 (17) IS DISCIPLINED BY A LICENSING OR DISCIPLINARY AUTHORITY OR  
2 IS CONVICTED OR DISCIPLINED BY A COURT OF ANY STATE OR COUNTRY OR IS  
3 DISCIPLINED BY ANY BRANCH OF THE UNITED STATES UNIFORMED SERVICES OR  
4 THE VETERANS' ADMINISTRATION FOR AN ACT THAT WOULD BE GROUNDS FOR  
5 DISCIPLINARY ACTION UNDER THE BOARD'S DISCIPLINARY STATUTES;

6 (18) FAILS TO MEET APPROPRIATE STANDARDS FOR THE DELIVERY OF  
7 RESPIRATORY CARE PERFORMED IN ANY INPATIENT OR OUTPATIENT FACILITY,  
8 OFFICE, HOSPITAL OR RELATED INSTITUTION, DOMICILIARY CARE FACILITY,  
9 PATIENT'S HOME, OR ANY OTHER LOCATION IN THIS STATE;

10 (19) KNOWINGLY SUBMITS FALSE STATEMENTS TO COLLECT FEES FOR  
11 WHICH SERVICES ARE NOT PROVIDED;

12 (20) (I) HAS BEEN SUBJECT TO INVESTIGATION OR DISCIPLINARY  
13 ACTION BY A LICENSING OR DISCIPLINARY AUTHORITY OR BY A COURT OF ANY  
14 STATE OR COUNTRY FOR AN ACT THAT WOULD BE GROUNDS FOR DISCIPLINARY  
15 ACTION UNDER THE BOARD'S DISCIPLINARY STATUTES; AND

16 (II) THE LICENSED INDIVIDUAL:

17 1. SURRENDERED THE LICENSE ISSUED BY THE STATE OR  
18 COUNTRY; OR

19 2. ALLOWED THE LICENSE ISSUED BY THE STATE OR  
20 COUNTRY TO EXPIRE OR LAPSE;

21 (21) KNOWINGLY FAILS TO REPORT SUSPECTED CHILD ABUSE IN  
22 VIOLATION OF § 5-704 OF THE FAMILY LAW ARTICLE;

23 (22) SELLS, PRESCRIBES, GIVES AWAY, OR ADMINISTERS DRUGS FOR  
24 ILLEGAL OR ILLEGITIMATE MEDICAL PURPOSES;

25 (23) PRACTICES OR ATTEMPTS TO PRACTICE BEYOND THE AUTHORIZED  
26 SCOPE OF PRACTICE;

27 (24) IS CONVICTED OF OR PLEADS GUILTY OR NOLO CONTENDERE TO A  
28 FELONY OR TO A CRIME INVOLVING MORAL TURPITUDE WHETHER OR NOT ANY  
29 APPEAL OR OTHER PROCEEDING IS PENDING TO HAVE THE CONVICTION OR PLEA  
30 SET ASIDE;

31 (25) REFUSES, WITHHOLDS FROM, DENIES, OR DISCRIMINATES AGAINST  
32 AN INDIVIDUAL WITH REGARD TO THE PROVISION OF PROFESSIONAL SERVICES  
33 FOR WHICH THE LICENSEE IS LICENSED AND QUALIFIED TO RENDER BECAUSE THE  
34 INDIVIDUAL IS HIV POSITIVE; OR

35 (26) PRACTICES OR ATTEMPTS TO PRACTICE A RESPIRATORY CARE  
36 PROCEDURE OR USES OR ATTEMPTS TO USE RESPIRATORY CARE EQUIPMENT IF  
37 THE APPLICANT, LICENSEE, OR HOLDER HAS NOT RECEIVED EDUCATION AND  
38 TRAINING IN THE PERFORMANCE OF THE PROCEDURE OR THE USE OF THE  
39 EQUIPMENT.

15

1 (B) EXCEPT AS OTHERWISE PROVIDED IN THE ADMINISTRATIVE PROCEDURE  
2 ACT, BEFORE THE BOARD TAKES ANY ACTION UNDER THIS SECTION, IT SHALL GIVE  
3 THE INDIVIDUAL AGAINST WHOM THE ACTION IS CONTEMPLATED AN  
4 OPPORTUNITY FOR A HEARING BEFORE THE BOARD IN ACCORDANCE WITH THE  
5 HEARING REQUIREMENTS OF § 14-405 OF THIS TITLE.

6 14-5A-18.

7 ON THE APPLICATION OF AN INDIVIDUAL WHOSE LICENSE HAS BEEN  
8 REVOKED, THE BOARD, ON THE AFFIRMATIVE VOTE OF A MAJORITY OF ITS FULL  
9 AUTHORIZED MEMBERSHIP, MAY REINSTATE A REVOKED LICENSE.

10 14-5A-19.

11 EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE, A PERSON MAY NOT  
12 PRACTICE, ATTEMPT TO PRACTICE, OR OFFER TO PRACTICE RESPIRATORY CARE IN  
13 THIS STATE UNLESS LICENSED TO PRACTICE RESPIRATORY CARE BY THE BOARD.

14 14-5A-20.

15 (A) UNLESS AUTHORIZED TO PRACTICE RESPIRATORY CARE UNDER THIS  
16 SUBTITLE, A PERSON MAY NOT REPRESENT TO THE PUBLIC BY TITLE, BY  
17 DESCRIPTION OF SERVICES, METHODS, OR PROCEDURES, OR OTHERWISE, THAT THE  
18 PERSON IS AUTHORIZED TO PRACTICE RESPIRATORY CARE IN THIS STATE.

19 (B) UNLESS AUTHORIZED TO PRACTICE RESPIRATORY CARE UNDER THIS  
20 SUBTITLE, A PERSON MAY NOT USE THE ABBREVIATION "R.C.P." OR ANY OTHER  
21 WORDS, LETTERS, OR SYMBOLS WITH THE INTENT TO REPRESENT THAT THE  
22 PERSON PRACTICES RESPIRATORY CARE.

23 14-5A-21.

24 A PERSON MAY NOT PROVIDE, ATTEMPT TO PROVIDE, OFFER TO PROVIDE, OR  
25 REPRESENT THAT THE PERSON PROVIDES RESPIRATORY CARE UNLESS THE  
26 RESPIRATORY CARE IS PROVIDED BY AN INDIVIDUAL WHO IS AUTHORIZED TO  
27 PRACTICE RESPIRATORY CARE UNDER THIS SUBTITLE.

28 14-5A-22.

29 A PERSON WHO VIOLATES ANY PROVISION OF THIS SUBTITLE IS GUILTY OF A  
30 MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE NOT EXCEEDING \$1,000  
31 OR IMPRISONMENT NOT EXCEEDING 1 YEAR OR BOTH.

32 14-5A-23.

33 THIS SUBTITLE MAY BE CITED AS THE "MARYLAND RESPIRATORY CARE  
34 PRACTITIONERS ACT".

35 14-5A-24.

36 SUBJECT TO THE EVALUATION AND REESTABLISHMENT PROVISIONS OF THE  
37 MARYLAND PROGRAM EVALUATION ACT, THIS SUBTITLE AND ALL RULES AND  
38 REGULATIONS ADOPTED UNDER THIS SUBTITLE SHALL TERMINATE AND BE OF NO  
39 EFFECT AFTER JULY 1, 2006.

16

1           **Article - State Government**

2 8-403.

3           (e) On or before November 30 of the 2nd year before the evaluation date of a  
4 governmental activity or unit, the Legislative Policy Committee may waive as unnecessary  
5 the evaluation required under this section.

6           (L) EXCEPT AS OTHERWISE PROVIDED IN SUBSECTION (E) OF THIS SECTION,  
7 ON OR BEFORE JULY 1, 2005, AN EVALUATION SHALL BE MADE OF THE STATE  
8 RESPIRATORY CARE PROFESSIONAL STANDARDS COMMITTEE AND THE  
9 REGULATIONS THAT RELATE TO THE STATE RESPIRATORY CARE PROFESSIONAL  
10 STANDARDS COMMITTEE.

11           ~~SECTION 3. AND BE IT FURTHER ENACTED, That nothing in this Act may~~  
12 ~~be construed to require an insurer, nonprofit health service plan, health maintenance~~  
13 ~~organization, or person acting as a third party administrator to reimburse a licensed~~  
14 ~~respiratory care practitioner for any services rendered.~~

15           ~~SECTION 3.~~ 4. AND BE IT FURTHER ENACTED, That this Act shall take effect  
16 July 1, 1996.