Unofficial Copy J2

CF 6lr1250

1996 Regular Session 6lr1318

By: Senators Hollinger, Della, Boozer, Kasemeyer, Stoltzfus, and Sfikas Introduced and read first time: February 2, 1996 Assigned to: Economic and Environmental Affairs

## A BILL ENTITLED

1 AN ACT concerning

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

4 FOR the purpose of requiring the State Board of Physician Quality Assurance (Board) to

- adopt regulations for the licensure and practice of respiratory carepractitioners; 5
- defining certain terms; providing that this Act does not limit the rights of certain 6
- 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, andduties of
- 10 the Committee; establishing the terms of and requirements for certain members of
- the Committee; requiring an individual to be licensed by the Board before the 11
- 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
- disciplined under this Act; prohibiting certain acts; making certainexceptions; 18
- 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)

26 BY repealing and reenacting, with amendments,

- 27 Article - Health Occupations
- Section 14-405 and 14-408 28
- 29 Annotated Code of Maryland
- 30 (1994 Replacement Volume and 1995 Supplement)

31 BY adding to

32 Article - Health Occupations

- 1 Section 14-5A-01 through 14-5A-24, inclusive, to be under the new subtitle
- 2 "Subtitle 5A. Respiratory Care Practitioners"
- 3 Annotated Code of Maryland
- 4 (1994 Replacement Volume and 1995 Supplement)

5 BY repealing and reenacting, without amendments,

- 6 Article State Government
- 7 Section 8-403(e)
- 8 Annotated Code of Maryland
- 9 (1995 Replacement Volume)

10 BY adding to

2

- 11 Article State Government
- 12 Section 8-403(l)
- 13
   Annotated Code of Maryland
- 14 (1995 Replacement Volume)

# 15 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF

16 MARYLAND, That Section(s) 14-507 of Article - Health Occupations of theAnnotated

17 Code of Maryland be repealed.

18 SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland19 read as follows:

20 Article - Health Occupations

21 14-405.

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

(b) The hearing officer shall give notice and hold the hearing in accordance withthe Administrative Procedure Act except that factual findings shall be supported by clearand convincing evidence.

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

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

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

(f) The Board may adopt regulations to govern the taking of depositions anddiscovery in the hearing of charges.

37 (g) The hearing of charges may not be stayed or challenged by any procedural38 defects alleged to have occurred prior to the filing of charges.

3

1 14-408.

2 (a) Except as provided in this section for an action under § 14-404 of this subtitle 3 OR § 14-5A-17 OF THIS TITLE, any person aggrieved by a final decision of the Board in a 4 contested case, as defined in the Administrative Procedure Act, may:

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

6 (2) Then take any further appeal allowed by the Administrative Procedure 7 Act.

8 (b) (1) Any person aggrieved by a final decision of the Board under § 14-404 of 9 this subtitle OR § 14-5A-17 OF THIS TITLE may not appeal to the Secretary or Board of 10 Review but may take a direct judicial appeal.

(2) The appeal shall be made as provided for judicial review offinaldecisions in the Administrative Procedure Act.

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

14 (d) The Board may appeal from any decision that reverses or modifiesits order.

15 SUBTITLE 5A. RESPIRATORY CARE PRACTITIONERS.

16 14-5A-01.

17 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS18 INDICATED.

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

20 (C) "COMMITTEE" MEANS THE RESPIRATORY CARE PROFESSIONAL 21 STANDARDS COMMITTEE ESTABLISHED UNDER § 14-5A-05 OF THIS SUBTITLE.

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

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

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

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

36 (2) "PRACTICE RESPIRATORY CARE" INCLUDES:

4 (I) PROVIDING DIRECT AND INDIRECT RESPIRATORY CARE 1 2 SERVICES THAT ARE SAFE, ASEPTIC, PREVENTIVE, AND RESTORATIVE; (II) PRACTICING THE PRINCIPLES, TECHNIQUES, AND THEORIES 3 4 DERIVED FROM CARDIOPULMONARY MEDICINE; (III) EVALUATING AND TREATING INDIVIDUALS WHOSE 5 6 CARDIOPULMONARY FUNCTIONS HAVE BEEN THREATENED OR IMPAIRED BY 7 DEVELOPMENTAL DEFECTS, THE AGING PROCESS, PHYSICAL INJURY, DISEASE, OR 8 ACTUAL OR ANTICIPATED DYSFUNCTION OF THE CARDIOPULMONARY SYSTEM; 9 (IV) OBSERVING AND MONITORING PHYSICAL SIGNS AND 10 SYMPTOMS, GENERAL BEHAVIOR, AND GENERAL PHYSICAL RESPONSE TO 11 RESPIRATORY CARE PROCEDURES AND DETERMINING IF INITIATION, 12 MODIFICATION, OR DISCONTINUATION OF A TREATMENT REGIMEN IS WARRANTED; (V) USING EVALUATION TECHNIQUES THAT INCLUDE 13 14 CARDIOPULMONARY FUNCTION ASSESSMENTS, GAS EXCHANGE, THE NEED AND 15 EFFECTIVENESS OF THERAPEUTIC MODALITIES AND PROCEDURES, AND THE 16 ASSESSMENT AND EVALUATION OF THE NEED FOR A LOWER LEVEL OF CARE AND 17 HOME CARE PROCEDURES, THERAPY, AND EQUIPMENT; AND 18 (VI) APPLYING THE USE OF TECHNIQUES, EQUIPMENT, AND 19 PROCEDURES INVOLVED IN THE ADMINISTRATION OF RESPIRATORY CARE. 20 INCLUDING: 1. EXCEPT FOR GENERAL ANESTHESIA, THERAPEUTIC AND 21 22 DIAGNOSTIC GASES; 23 2. PRESCRIBED MEDICATION FOR INHALATION OR DIRECT 24 TRACHEAL INSTALLATION: 25 3. THE ADMINISTRATION OF ANALGESIC AGENTS BY 26 SUBCUTANEOUS INJECTION OR INHALATION FOR THE PERFORMANCE OF 27 RESPIRATORY CARE PROCEDURES: 28 4. NONSURGICAL INSERTION, MAINTENANCE, AND 29 REMOVAL OF ARTIFICIAL AIRWAYS; 30 5. ADVANCED CARDIOPULMONARY MEASURES; 31 6. CARDIOPULMONARY REHABILITATION: 32 7. MECHANICAL VENTILATION OR PHYSIOLOGICAL LIFE 33 SUPPORT SYSTEMS; 34 8. COLLECTION OF BODY FLUIDS AND BLOOD SAMPLES FOR 35 EVALUATION AND ANALYSIS; 36 9. INSERTION OF DIAGNOSTIC ARTERIAL ACCESS LINES; 37 AND 38 10. COLLECTION AND ANALYSIS OF EXHALED RESPIRATORY

39 GASES.

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

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

6 14-5A-02.

7 THIS SUBTITLE DOES NOT LIMIT THE RIGHT OF AN INDIVIDUAL TO PRACTICE A
8 HEALTH OCCUPATION THAT THE INDIVIDUAL IS AUTHORIZED TO PRACTICE UNDER
9 THIS ARTICLE.

10 14-5A-03.

11 THE BOARD SHALL ADOPT REGULATIONS FOR THE LICENSURE AND PRACTICE 12 OF RESPIRATORY CARE .

13 14-5A-04.

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

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

20 (B) (1) THE BOARD SHALL PAY ALL FEES COLLECTED UNDER THE 21 PROVISIONS OF THIS SUBTITLE TO THE COMPTROLLER OF THE STATE.

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

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

28 14-5A-05.

29 THERE IS A RESPIRATORY CARE PROFESSIONAL STANDARDS COMMITTEE30 WITHIN THE BOARD.

31 14-5A-06.

32 (A) THE COMMITTEE CONSISTS OF SEVEN MEMBERS APPOINTED BY THE33 BOARD AS FOLLOWS:

34 (1) THREE RESPIRATORY CARE PRACTITIONERS;

35 (2) THREE PHYSICIANS WHOSE APPROVED SPECIALTY IS THORACIC36 SURGERY OR PULMONARY MEDICINE; AND

37 (3) ONE CONSUMER MEMBER.

| 6        |   |
|----------|---|
| 1        | (B) THE CONSUMER MEMBER OF THE COMMITTEE:   |
| 2        | (1) SHALL BE A MEMBER OF THE GENERAL PUBLIC;  |
| 3        | (2) MAY NOT BE OR EVER HAVE BEEN:   |
| 4        | (I) A RESPIRATORY CARE PRACTITIONER;  |
| 5        | (II) ANY HEALTH CARE PROFESSIONAL; OR   |
| 6<br>7   | (III) IN TRAINING TO BE A RESPIRATORY CARE PRACTITIONER OR OTHER HEALTH PROFESSIONAL;   |
| 8<br>9   | (3) MAY NOT HAVE A HOUSEHOLD MEMBER WHO IS A HEALTH<br>PROFESSIONAL OR IS IN TRAINING TO BE A HEALTH PROFESSIONAL; AND  |
| 10       | (4) MAY NOT:  |
| 11<br>12 | (I) PARTICIPATE OR EVER HAVE PARTICIPATED IN A<br>COMMERCIAL OR PROFESSIONAL FIELD RELATED TO RESPIRATORY CARE;   |
| 13<br>14 | (II) HAVE A HOUSEHOLD MEMBER WHO PARTICIPATES IN A COMMERCIAL OR PROFESSIONAL FIELD RELATED TO RESPIRATORY CARE;  |
| 15<br>16 | (III) HAVE HAD WITHIN 2 YEARS BEFORE APPOINTMENT A<br>FINANCIAL INTEREST IN A PERSON REGULATED BY THE BOARD; OR   |
|          | (IV) HAVE HAD WITHIN 2 YEARS BEFORE APPOINTMENT A<br>FINANCIAL INTEREST IN THE PROVISION OF GOODS OR SERVICES TO RESPIRATORY<br>CARE PRACTITIONERS OR TO THE FIELD OF RESPIRATORY CARE. |
| 20       | (C) (1) THE TERM OF A MEMBER IS 3 YEARS.  |
| 21<br>22 | (2) THE TERMS OF MEMBERS ARE STAGGERED AS REQUIRED BY THE TERMS PROVIDED FOR MEMBERS OF THE BOARD ON JULY 1, 1996.  |
| 23<br>24 | (3) AT THE END OF A TERM, A MEMBER CONTINUES TO SERVE UNTIL A SUCCESSOR IS APPOINTED AND QUALIFIES.   |
|          | (4) A MEMBER WHO IS APPOINTED AFTER A TERM HAS BEGUN SERVES<br>ONLY FOR THE REST OF THE TERM AND UNTIL A SUCCESSOR IS APPOINTED AND<br>QUALIFIES.                                       |
| 28       | 14-5A-07.   |
| 29<br>30 | IN ADDITION TO THE POWERS SET FORTH ELSEWHERE IN THIS SUBTITLE, THE COMMITTEE SHALL:  |
| 31<br>32 | (1) DEVELOP AND RECOMMEND TO THE BOARD REGULATIONS TO CARRY OUT THE PROVISIONS OF THIS SUBTITLE;  |
| 33<br>34 | (2) DEVELOP AND RECOMMEND TO THE BOARD A CODE OF ETHICS FOR<br>THE PRACTICE OF RESPIRATORY CARE FOR ADOPTION BY THE BOARD;  |
| 35       | (3) DEVELOP AND RECOMMEND TO THE BOARD STANDARDS OF CARE  |

36 FOR THE PRACTICE OF RESPIRATORY CARE;

1 (4) DEVELOP AND RECOMMEND TO THE BOARD THE REQUIREMENTS 2 FOR LICENSURE AS A RESPIRATORY CARE PRACTITIONER, INCLUDING:

3 (I) CRITERIA FOR THE EDUCATIONAL AND CLINICAL TRAINING 4 OF RESPIRATORY CARE PRACTITIONERS; AND

5 (II) CRITERIA FOR A PROFESSIONAL COMPETENCY EXAMINATION 6 AND TESTING OF APPLICANTS FOR A LICENSE TO PRACTICE RESPIRATORY CARE;

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

10 (6) EVALUATE THE ACCREDITATION STATUS OF EDUCATION 11 PROGRAMS IN RESPIRATORY CARE FOR APPROVAL BY THE BOARD;

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

15 (8) DEVELOP AND RECOMMEND TO THE BOARD CONTINUING16 EDUCATION REQUIREMENTS FOR LICENSE RENEWAL;

17 (9) PROVIDE THE BOARD WITH RECOMMENDATIONS CONCERNING THE18 PRACTICE OF RESPIRATORY CARE;

19 (10) DEVELOP AND RECOMMEND TO THE BOARD CRITERIA RELATED TO20 THE PRACTICE OF RESPIRATORY CARE IN THE HOME SETTING;

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

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

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

26 14-5A-08.

7

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

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

33 (C) (1) (I) IN THIS SUBSECTION THE FOLLOWING TERMS HAVE THE34 MEANINGS INDICATED.

35 (II) "EDUCATIONAL PROGRAM" MEANS A RESPIRATORY CARE36 EDUCATIONAL PROGRAM APPROVED BY THE AMERICAN MEDICAL ASSOCIATION.

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

| 8   |  |
|---|--|
| 11. HAS SERVED ON ACTIVE DUTY IN THE UNITED STATES2 ARMED FORCES;   |  |
| 3 2. HAS BEEN HONORABLY DISCHARGED; AND   |  |
| 4 3. MEETS THE REQUIREMENTS OF THIS SECTION.  |  |
| 5 (IV) "VETERANS' PROGRAM" MEANS A VETERANS' INTERNSHIP<br>6 PROGRAM IN RESPIRATORY CARE FOR QUALIFIED VETERANS WHO ARE WORKING<br>7 IN HOSPITALS.  |  |
| 8 (2) THIS SECTION DOES NOT APPLY TO A VETERAN WHO:   |  |
| 9 (I) APPLIES TO THE BOARD WITHIN 6 MONTHS OF DISCHARGE,<br>10 PROVIDES THE BOARD THE INFORMATION REQUIRED UNDER THIS SUBSECTION,<br>11 AND IS APPROVED BY THE BOARD;   |  |
| 12 (II) HAS PRACTICED IN THE MILITARY WITH ONE OF THE<br>13 FOLLOWING SPECIALTIES:  |  |
| <ol> <li>1. NAVY 854 WITH SUCCESSFUL COMPLETION OF THE U.S.</li> <li>ARMY RESPIRATORY CARE SCHOOL;</li> </ol>   |  |
| 16 2. ARMY 91V; OR  |  |
| 173. UNITED STATES AIR FORCE 90450 OR UNITED STATES AIR18 FORCE 90250 WITH ADVANCED EXPERIENCE;   |  |
| <ol> <li>(III) HAS PRACTICED RESPIRATORY CARE FOR 2,000 HOURS IN THE</li> <li>5 YEARS IMMEDIATELY PRECEDING DISCHARGE WITH EXPERIENCE IN AREAS</li> <li>RECOMMENDED AND APPROVED BY THE BOARD;</li> </ol>   |  |
| <ul> <li>(IV) HAS DOCUMENTED COMPLETION OF EDUCATIONAL</li> <li>REQUIREMENTS IN THE MILITARY AS APPROVED BY THE BOARD WITH REFERENCE</li> <li>TO THE STANDARDS OF THE JOINT REVIEW COMMITTEE RESPIRATORY THERAPY</li> <li>EDUCATION MODULES; AND</li> </ul>   |  |
| <ul> <li>26 (V) HAS APPLIED FOR ADMISSION IN AN APPROVED EDUCATIONAL</li> <li>27 PROGRAM WITHIN 6 MONTHS OF DISCHARGE.</li> </ul>   |  |
| <ul> <li>(3) WITHIN 30 DAYS AFTER THE END OF EACH SEMESTER OR EVERY 6</li> <li>MONTHS, WHICHEVER IS MORE FREQUENT, A VETERAN SHALL SUBMIT EVIDENCE</li> <li>OF SUCCESSFUL CONTINUED ENROLLMENT IN A RESPIRATORY CARE EDUCATIONAL</li> <li>PROGRAM WITH SATISFACTORY ACADEMIC STANDING AS APPROVED BY THE</li> <li>BOARD.</li> </ul> |  |
| <ul> <li>(4) IF THE PROVISIONS OF PARAGRAPH (3) OF THIS SUBSECTION ARE</li> <li>MET, A VETERAN MAY PRACTICE IN A VETERANS' PROGRAM FOR UP TO 30 MONTHS</li> <li>FROM THE DATE OF THE APPROVAL OF THE VETERAN'S APPLICATION FOR THE</li> <li>VETERANS' PROGRAM.</li> </ul>   |  |
| 37 (5) UPON GRADUATION FROM AN APPROVED EDUCATIONAL   |  |

38 PROGRAM, A VETERAN:

1 (I) CEASES TO QUALIFY TO PRACTICE RESPIRATORY CARE 2 UNDER THIS SECTION; AND

3 (II) SHALL APPLY FOR A STANDARD GRADUATE INTERNSHIP4 REQUIRED FOR ALL GRADUATES OF APPROVED RESPIRATORY CARE PROGRAMS.

5 (6) THE BOARD MAY SET AND CHARGE REASONABLE FEES TO6 IMPLEMENT THE PROVISIONS OF THIS SUBSECTION.

7 (7) THE BOARD SHALL APPROVE THE APPLICATION OF EACH VETERAN8 WHO MEETS THE REQUIREMENTS OF THIS SUBSECTION.

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

13 14-5A-09.

14 (A) TO QUALIFY FOR A LICENSE, AN APPLICANT SHALL BE AN INDIVIDUAL15 WHO MEETS THE REQUIREMENTS OF THIS SECTION.

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

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

18 (D) THE APPLICANT SHALL:

19 (1) (I) BE CERTIFIED BY A NATIONAL CERTIFYING BOARD ON OR20 BEFORE AUGUST 31, 1996; OR

21 (II) BE REGISTERED BY A NATIONAL CERTIFYING BOARD; AND

22 (2) MEET THE EDUCATIONAL AND CLINICAL TRAINING REQUIREMENTS23 ESTABLISHED BY THE COMMITTEE.

24 14-5A-10.

25 TO APPLY FOR A LICENSE, AN APPLICANT SHALL:

26 (1) SUBMIT AN APPLICATION TO THE BOARD ON THE FORM THAT THE27 BOARD REQUIRES; AND

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

29 14-5A-11.

30THE BOARD SHALL ISSUE THE APPROPRIATE LICENSE TO AN APPLICANT WHO31MEETS THE REQUIREMENTS OF THIS SUBTITLE FOR THAT LICENSE.

32 14-5A-12.

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

1 14-5A-13.

2 (A) A LICENSE EXPIRES ON A DATE SET BY THE BOARD, UNLESS THE LICENSE3 IS RENEWED FOR AN ADDITIONAL TERM AS PROVIDED IN THIS SECTION.

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

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

8 (2) THE DATE BY WHICH THE RENEWAL APPLICATION MUST BE
9 RECEIVED BY THE BOARD FOR THE RENEWAL TO BE ISSUED AND MAILED BEFORE
10 THE LICENSE EXPIRES; AND

11 (3) THE AMOUNT OF THE RENEWAL FEE.

12 (C) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBTITLE, BEFORE A LICENSE 13 EXPIRES, THE LICENSEE PERIODICALLY MAY RENEW IT FOR AN ADDITIONAL TERM, 14 IF THE LICENSEE:

15 (1) OTHERWISE IS ENTITLED TO BE LICENSED;

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

17 (3) SUBMITS TO THE BOARD:

18 (I) A RENEWAL APPLICATION ON THE FORM THAT THE BOARD19 REQUIRES; AND

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

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

27 (E) THE BOARD SHALL RENEW THE LICENSE OF EACH LICENSEE WHO MEETS28 THE REQUIREMENTS OF THIS SECTION.

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

33 (1) APPLIES FOR REINSTATEMENT WITHIN 30 DAYS AFTER THE DATE34 THE LICENSE EXPIRES;

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

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

11

1 14-5A-14.

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

5 (I) AN APPLICATION FOR INACTIVE STATUS ON THE FORM6 REQUIRED BY THE BOARD; AND

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

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

(B) THE BOARD MAY REINSTATE THE LICENSE OF A RESPIRATORY CARE
PRACTITIONER WHO HAS NOT BEEN PUT ON INACTIVE STATUS, WHO HAS FAILED TO
RENEW THE LICENSE FOR ANY REASON, AND WHO APPLIES FOR REINSTATEMENT
MORE THAN 30 DAYS AFTER THE LICENSE HAS EXPIRED, IF THE RESPIRATORY CARE
PRACTITIONER:

17 (1) MEETS THE RENEWAL REQUIREMENTS OF § 14-5A-13 OF THIS18 SUBTITLE;

19 (2) PAYS TO THE BOARD THE REINSTATEMENT FEE SET BY THE BOARD;20 AND

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

22 14-5A-15.

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

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

27 (2) HAS GRADUATED FROM AN APPROVED RESPIRATORY CARE
28 EDUCATIONAL PROGRAM AND HAS APPLIED FOR THE FIRST AVAILABLE NATIONAL
29 CERTIFYING EXAMINATION.

30 (B) A TEMPORARY LICENSE ISSUED TO A RESPIRATORY CARE PRACTITIONER
31 AUTHORIZES THE HOLDER TO PRACTICE RESPIRATORY CARE ONLY IN
32 ASSOCIATION WITH A LICENSED RESPIRATORY CARE PRACTITIONER.

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

36 (D) THE BOARD MAY NOT ISSUE MORE THAN TWO TEMPORARY LICENSES TO37 AN INDIVIDUAL.

1 14-5A-16.

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

7 14-5A-17.

8 (A) SUBJECT TO THE HEARING PROVISIONS OF § 14-405 OF THIS TITLE, THE
9 BOARD MAY DENY A LICENSE OR TEMPORARY LICENSE TO ANY APPLICANT,
10 REPRIMAND ANY LICENSEE OR HOLDER OF A TEMPORARY LICENSE, PLACE ANY
11 LICENSEE OR HOLDER OF A TEMPORARY LICENSE ON PROBATION, OR SUSPEND OR
12 REVOKE A LICENSE OR TEMPORARY LICENSE IF THE APPLICANT, LICENSEE, OR
13 HOLDER:

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

17 (2) FRAUDULENTLY OR DECEPTIVELY USES A LICENSE OR TEMPORARY18 LICENSE;

19 (3) IS GUILTY OF UNPROFESSIONAL OR IMMORAL CONDUCT IN THE20 PRACTICE OF RESPIRATORY CARE;

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

22 (5) ABANDONS A PATIENT;

23 (6) IS HABITUALLY INTOXICATED;

24 (7) IS ADDICTED TO OR HABITUALLY ABUSES ANY NARCOTIC OR25 CONTROLLED DANGEROUS SUBSTANCE AS DEFINED IN ARTICLE 27 OF THE CODE;

26 (8) PROVIDES PROFESSIONAL SERVICES WHILE:

27 (I) UNDER THE INFLUENCE OF ALCOHOL; OR

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

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

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

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

38 (12) BREACHES PATIENT CONFIDENTIALITY;

13

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

6 (14) KNOWINGLY MAKES A MISREPRESENTATION WHILE PRACTICING 7 RESPIRATORY CARE;

8 (15) KNOWINGLY PRACTICES RESPIRATORY CARE WITH AN
9 UNAUTHORIZED INDIVIDUAL OR AIDS AN UNAUTHORIZED INDIVIDUAL IN THE
10 PRACTICE OF RESPIRATORY CARE;

(16) OFFERS, UNDERTAKES, OR AGREES TO CURE OR TREAT DISEASE BYA SECRET METHOD, TREATMENT, OR MEDICINE;

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

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

22 (19) KNOWINGLY SUBMITS FALSE STATEMENTS TO COLLECT FEES FOR23 WHICH SERVICES ARE NOT PROVIDED;

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

28 (II) THE LICENSED INDIVIDUAL:

291. SURRENDERED THE LICENSE ISSUED BY THE STATE OR30 COUNTRY; OR

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

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

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

37 (23) PRACTICES OR ATTEMPTS TO PRACTICE BEYOND THE AUTHORIZED38 SCOPE OF PRACTICE;

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

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

9 (26) PRACTICES OR ATTEMPTS TO PRACTICE A RESPIRATORY CARE
10 PROCEDURE OR USES OR ATTEMPTS TO USE RESPIRATORY CARE EQUIPMENT IF
11 THE APPLICANT, LICENSEE, OR HOLDER HAS NOT RECEIVED EDUCATION AND
12 TRAINING IN THE PERFORMANCE OF THE PROCEDURE OR THE USE OF THE
13 EQUIPMENT.

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

19 14-5A-18.

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

23 14-5A-19.

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

27 14-5A-20.

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

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

36 14-5A-21.

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

1 14-5A-22.

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

5 14-5A-23.

6 THIS SUBTITLE MAY BE CITED AS THE "MARYLAND RESPIRATORY CARE 7 PRACTITIONERS ACT".

8 14-5A-24.

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

13 Article - State Government

14 8-403.

15 (e) On or before November 30 of the 2nd year before the evaluation date of a

16 governmental activity or unit, the Legislative Policy Committee may waive as unnecessary

17 the evaluation required under this section.

18 (L) EXCEPT AS OTHERWISE PROVIDED IN SUBSECTION (E) OF THIS SECTION,

19 ON OR BEFORE JULY 1, 2005, AN EVALUATION SHALL BE MADE OF THE STATE

20 RESPIRATORY CARE PROFESSIONAL STANDARDS COMMITTEE AND THE

21 REGULATIONS THAT RELATE TO THE STATE RESPIRATORY CARE PROFESSIONAL

22 STANDARDS COMMITTEE.

23 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect 24 July 1, 1996.