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FISCAL IMPACT REPORT

SPONSOR: Altamirano DATE TYPED: 02/21/01 HB _____
 SHORT TITLE: Respiratory Care Providers SB 231
 ANALYST: Valdes

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY01	FY02	FY01	FY02		
	NFI				

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

Regulation and Licensing Department

SUMMARY

Synopsis of Bill

Senate Bill 231 amends the Respiratory Care Act to add grounds for disciplinary action against its licensees which are standard in other respiratory care licensing jurisdictions. The bill adds authority to enforce and administer the provisions of the Impaired Health Care Provider Act and references the Criminal Offender Employment Act. The bill also updates medical terms and practice references to correspond with technical and health care advancements; updates and clarifies licensure and renewal requirements; and updates the section specifying the national accrediting body for respiratory care programs because the one named currently no longer exists. Included are technical cleanup and new provisions related to board member appointment, standard for other licensing boards.

Significant Issues

According to the Regulation and Licensing Department, present statutes only allow denial, suspension or revocation of applications or licenses. This bill will allow the department to discipline a licensee by requiring monitoring of practice, setting restrictions or limitations or conditions on the license, issuing reprimands, fines, or requiring remedial education.

This bill deletes current language in statutes which specifies an accrediting body which no longer exists. It authorizes the Respiratory Care Board to implement by rule, educational criteria qualifying as “respiratory therapy training program.”

ADMINISTRATIVE IMPLICATIONS

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This bill will allow the department and the Respiratory Care Board to protect the health, safety and welfare of the public as mandated by the Respiratory Care Act.

OTHER SUBSTANTIVE ISSUES

This bill will allow the Board of Respiratory Care to improve monitoring and regulation of its applicants and licensees. The Board will also be authorized to specify by rule, an accrediting body for the respiratory care training program and enforce educational qualification requirements for licensure.

The bill updates medical terms and practice references to correspond with technical and health care advancements.

The five-member Respiratory Care Board requires every member's active participation for successful monitoring and regulation of the profession. The changes proposed by the bill regarding board member appointment will allow the board to carry out its regulatory and administrative function more efficiently.

MV/ar