1	SENATE BILL 1051
2	47TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2005
3	INTRODUCED BY
4	Linda M Lopez
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10	AN ACT
11	RELATING TO LICENSING; PROVIDING FOR POLYSOMNOGRAPHY AND A
12	LIMITED EXEMPTION FROM LICENSURE REQUIREMENTS; AMENDING
13	SECTIONS OF THE RESPIRATORY CARE ACT.
14	
15	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
16	Section 1. Section 61-12B-3 NMSA 1978 (being Laws 1984,
17	Chapter 103, Section 3, as amended) is amended to read:
18	"61-12B-3. DEFINITIONSAs used in the Respiratory Care
19	Act:
20	A. "board" means the advisory board of respiratory
21	care practitioners;
22	B. "department" means the regulation and licensing
23	department or that division of the department designated to
24	administer the provisions of the Respiratory Care Act;
25	C. "respiratory care" means a health care
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profession, under medical direction, employed in the therapy, management, rehabilitation, diagnostic evaluation and care of patients with deficiencies and abnormalities that affect the cardiopulmonary system and associated aspects of other system functions, and the terms "respiratory therapy" and "inhalation therapy" where such terms mean respiratory care;

D. "practice of respiratory care" includes:

8 (1) direct and indirect cardiopulmonary care
9 services that are of comfort, safe, aseptic, preventative and
10 restorative to the patient;

(2) cardiopulmonary care services, including the administration of pharmacological, diagnostic and therapeutic agents related to cardiopulmonary care necessary to implement treatment, disease prevention, cardiopulmonary rehabilitation or a diagnostic regimen, including paramedical therapy and baromedical therapy;

(3) specific diagnostic and testing techniques employed in the medical management of patients to assist in diagnosis, monitoring, treatment and research of cardiopulmonary abnormalities, including pulmonary function testing, hemodynamic and physiologic monitoring of cardiac function and collection of arterial and venous blood for analysis;

(4) observation, assessment and monitoring of signs and symptoms, general behavior, general physical response. 155702.2

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to cardiopulmonary care treatment and diagnostic testing, including determination of whether such signs, symptoms, reactions, behavior or general response exhibit abnormal characteristics:

(5) implementation based on observed 6 abnormalities, appropriate reporting, referral, respiratory 7 care protocols or changes in treatment, pursuant to a 8 prescription by a physician authorized to practice medicine or 9 other person authorized by law to prescribe, or the initiation 10 of emergency procedures or as otherwise permitted in the 11 **Respiratory Care Act;**

establishing and maintaining the natural (6) airways, insertion and maintenance of artificial airways, bronchopul monary hygiene and cardiopul monary resuscitation, along with cardiac and ventilatory life support assessment and evaluation: and

the practice performed in a clinic, (7) hospital, skilled nursing facility, private dwelling or other place deemed appropriate or necessary by the department;

Ε. "expanded practice" means the practice of respiratory care by a respiratory care practitioner who has been prepared through a formal training program to function beyond the scope of practice of respiratory care as defined by rule of the department;

"polysomnographic technician" means a person who F. . 155702. 2

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1	has successfully completed a formal polysomnography training
2	program associated with a state-licensed or nationally
3	accredited educational facility or has successfully completed
4	<u>of a minimum of four hundred eighty hours of experience as a</u>
5	polysomnographic trainee with documented proficiency in
6	polysomnography-related respiratory care procedures and who has
7	a limited permit issued by the department;
8	<u>G. "polysomnographic technologist" means a person</u>
9	who has successfully completed the certification examination
10	<u>administered by the board of registered polysomnographic</u>
11	technologists and who has a limited license issued by the
12	<u>department;</u>
13	<u>H. "polysomnographic trainee" means a person who</u>
14	has provided written documentation that either a
15	<u>polysomnographic technologist or a New Mexico licensed</u>
16	physician will directly supervise that person's performance of
17	basic polysomnographic-related procedures and who has a limited
18	permit issued by the department. In this subsection, "directly
19	supervise" means the person supervising the trainee will be on
20	the premises where polysomnographic-related respiratory care is
21	being provided and shall be immediately available for
22	<u>consultation with the trainee;</u>
23	I. "polysomnography" means the process of
24	<u>analyzing, monitoring and recording physiologic data during</u>
25	<u>sleep and wakefulness to assist in the assessment and diagnosis</u>

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1	of sleep-wake disorders and other disorders, syndromes and
2	<u>dysfunctions that are sleep-related, manifest during sleep or</u>
3	that disrupt normal sleep-wake cycles and activities;
4	J. "polysomnography-related respiratory care
5	services" means the limited practice of respiratory care in the
6	<u>provision of polysomnographic services, under the supervision</u>
7	<u>of a New Mexico licensed physician at a sleep disorders center</u>
8	<u>or laboratory, by a registered polysomnographic technologist or</u>
9	polysomnographic technician who holds a limited license issued
10	by the department, or who is otherwise licensed by the
11	<u>department as a respiratory care practitioner.</u>
12	<u>"Polysomnography-related respiratory care services" are limited</u>
13	<u>to the therapeutic and diagnostic use of oxygen, noninvasive</u>
14	ventilatory assistance of patients who spontaneously breathe
15	when awake, the application and monitoring of pulse oximetry
16	and capnography and the education of patients about using and
17	complying with the preceding procedures, as ordered by a New
18	Mexico licensed physician or by written procedures and
19	protocols of the associated sleep disorders center or
20	<u>laboratory as approved by a New Mexico licensed physician and</u>
21	that do not violate regulations adopted by the department in
22	<u>consultation with the board;</u>
23	[F.] <u>K.</u> "respiratory care practitioner" means a

[F.] <u>K.</u> "respiratory care practitioner" means a person who is licensed to practice respiratory care in New Mexico;

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[G.] L. "respiratory care protocols" means a 1 predetermined, written medical care plan, which can include 2 standing orders; 3 "respiratory therapy training program" 4 [II.] M. means an education course of study as defined by rule of the 5 department; and 6 7 [H.] N. "superintendent" means the superintendent 8 of regulation and licensing." 9 Section 2. Section 61-12B-4 NMSA 1978 (being Laws 1984, 10 Chapter 103, Section 4, as amended) is amended to read: 11 "61-12B-4. LICENSE REQUIRED -- EXCEPTIONS. --12 No person shall practice respiratory care or A. 13 represent himself to be a respiratory care practitioner unless 14 he is licensed pursuant to the provisions of the Respiratory 15 Care Act, except as otherwise provided by that act. 16 A respiratory care practitioner may transcribe **B**. 17 and implement the written or verbal orders of a physician or 18 other person authorized by law to prescribe pertaining to the 19 practice of respiratory care and respiratory care protocols. 20 Nothing in the Respiratory Care Act is intended C. 21 to limit, preclude or otherwise interfere with: 22 (1) the practices of other persons and health 23 providers licensed by appropriate agencies of New Mexico; 24 (2) self-care by a patient; 25 (3) gratuitous care by a friend or family . 155702. 2 - 6 -

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(4) respiratory care services rendered in caseof an emergency.

D. An individual who has demonstrated competency in one or more areas covered by the Respiratory Care Act may perform those functions that he is qualified by examination to perform, provided that the examining body or testing entity is recognized nationally for expertise in evaluating the competency of persons performing those functions covered by that act or department rules. The department shall establish by rule those certifying agencies and testing entities that are acceptable to the department.

E. The Respiratory Care Act does not prohibit qualified clinical laboratory personnel who work in facilities licensed pursuant to the provisions of the federal Clinical Laboratories Improvement Act of 1967, as amended, or accredited by the college of American pathologists or the joint commission on accreditation of healthcare organizations from performing recognized functions and duties of medical laboratory personnel for which they are appropriately trained and certified.

F. Only respiratory care practitioners, polysomnographic technologists, polysomnographic technicians or polysomnographic trainees may provide polysomnography-related respiratory care services."

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1	Section 3. Section 61-12B-5 NMSA 1978 (being Laws 1984,
2	Chapter 103, Section 5, as amended) is amended to read:
3	"61-12B-5. ADVI SORY BOARD CREATED
4	A. The superintendent shall appoint an "advisory
5	board of respiratory care practitioners" consisting of [five]
6	<u>six</u> members as follows:
7	(1) one physician licensed in New Mexico who
8	is knowledgeable in respiratory care;
9	(2) two respiratory care practitioners who are
10	residents of New Mexico, licensed by the department and in good
11	standing. At least one of the respiratory care practitioners
12	shall have been actively engaged in the practice of respiratory
13	care for at least five years immediately preceding appointment
14	or reappointment; [and]
15	(3) two public members who are residents of
16	New Mexico. A public member shall not have been licensed as a
17	respiratory care practitioner nor shall he have any financial
18	interest, direct or indirect, in the occupation to be
19	regulated; <u>and</u>
20	(4) one polysomnographic technologist
21	<u>registered by the board of registered polysomnographic</u>
22	technologists who holds a valid limited license issued by the
23	<u>department that is in good standing, is a resident of New</u>
24	Mexico and has been actively engaged in the practice of
25	polysomnography for at least the five-year period immediately
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preceding appointment or reappointment to the board.

2 **B**. The board shall be administratively attached to the department. 3

A member shall serve no more than two 4 С. consecutive three-year terms. 5

A member of the board shall receive per diem and D. mileage as provided for nonsalaried public officers in the Per Diem and Mileage Act and shall receive no other compensation, perquisite or allowance in connection with the discharge of his duties as a board member.

Ε. A member failing to attend three consecutive regular and properly noticed meetings of the board without a reasonable excuse shall be automatically removed from the board.

In the event of a vacancy, the board shall F. immediately notify the superintendent of the vacancy. Within ninety days of receiving notice of a vacancy, the superintendent shall appoint a qualified person to fill the remainder of the unexpired term.

A majority of the board members currently G. serving constitutes a quorum of the board.

H. The board shall meet at least twice a year and at such other times as it deems necessary.

The board shall annually elect officers as Ι. deemed necessary to administer its duties."

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1	Section 4. Section 61-12B-6 NMSA 1978 (being Laws 1984,
2	Chapter 103, Section 6, as amended) is amended to read:
3	"61-12B-6. DEPARTMENTDUTIES AND POWERS
4	A. The department, in consultation with the board,
5	shall:
6	(1) evaluate the qualifications of applicants
7	and review the required examination results of applicants. The
8	department may recognize the entry level examination written by
9	the national board for respiratory care or a successor board;
10	(2) promulgate rules as may be necessary to
11	implement the provisions of the Respiratory Care Act;
12	(3) issue and renew licenses and temporary
13	permits to qualified applicants who meet the requirements of
14	the Respiratory Care Act; and
15	(4) administer, coordinate and enforce the
16	provisions of the Respiratory Care Act and investigate persons
17	engaging in practices that may violate the provisions of that
18	act.
19	B. The department, in consultation with the board,
20	may:
21	(1) conduct examinations of respiratory care
22	practitioner applicants as required by rules of the department;
23	(2) reprimand, fine, deny, suspend or revoke a
24	license or temporary permit to practice respiratory care as
25	provided in the Respiratory Care Act in accordance with the
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1	provisions of the Uniform Licensing Act;
2	(3) for the purpose of investigating
3	complaints against applicants and licensees, issue
4	investigative subpoenas prior to the issuance of a notice of
5	contemplated action as set forth in the Uniform Licensing Act;
6	(4) enforce and administer the provisions of
7	the Impaired Health Care Provider Act and promulgate rules
8	pursuant to that act;
9	(5) promulgate rules or disciplinary
10	guidelines relating to impaired practitioners;
11	(6) promulgate rules to allow the interstate
12	transport of patients; [and]
13	(7) promulgate rules to determine and regulate
14	the scope and qualifications for expanded practice for
15	[respiratory care practitioners] <u>licensees or permittees; and</u>
16	(8) promulgate rules to issue and renew
17	<u>limited licenses to polysomnographic technologists and limited</u>
18	<u>permits to polysomnographic technicians and polysomnographic</u>
19	<u>trainees to provide polysomnography-related respiratory care</u>
20	<u>servi ces</u> . "
21	Section 5. Section 61-12B-7 NMSA 1978 (being Laws 1984,
22	Chapter 103, Section 7, as amended) is amended to read:
23	"61-12B-7. LICENSING BY TRAINING AND EXAMINATIONA
24	person desiring to become licensed as a respiratory care
25	practitioner <u>or desiring to receive a limited license to</u>
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provide polysomnography-related respiratory care services shall make application to the department on a written form and in such manner as the department prescribes, pay all required application fees and certify and furnish evidence to the department that the applicant:

A. has successfully completed a training program as
defined in the Respiratory Care Act and set forth by rules of
8 the department;

9 **B**. has passed an entry level examination [as 10 specified by rules of the department [] for respiratory care 11 practitioners administered by the national board for 12 respiratory care or [a] its successor board or an entry level 13 examination for polysomnographic technologists or 14 polysomnographic technicians administered by the board for 15 registered polysomnographic technologists or its successor 16 board:

C. is of good moral character; and

D. has successfully completed other training or education programs and passed other examinations as set forth by rules of the department."

Section 6. Section 61-12B-8 NMSA 1978 (being Laws 1984, Chapter 103, Section 8, as amended) is amended to read:

"61-12B-8. LICENSING WITHOUT TRAINING AND EXAMINATION. --

<u>A.</u> The department shall waive the education and examination requirements for an applicant <u>for a respiratory</u> .155702.2 - 12 -

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care practitioner license who presents proof that [he] the applicant is currently licensed in good standing in a jurisdiction that has standards for licensure that are at least equal to those for licensure in New Mexico as required by the Respiratory Care Act.

B. The department shall waive the education and 6 7 examination requirements for an applicant for a limited license 8 to provide polysomnography-related respiratory care services 9 who presents proof that the applicant is currently licensed, 10 registered or holds a permit in good standing in a jurisdiction 11 that has standards for licensure, registration or permits that 12 are at least equal to those in New Mexico as required by the 13 <u>Respiratory Care Act.</u>"

Section 7. Section 61-12B-9 NMSA 1978 (being Laws 1984, Chapter 103, Section 9, as amended) is amended to read: "61-12B-9. OTHER LICENSING PROVISIONS.--

A. The department, in consultation with the board, shall adopt rules for mandatory continuing education requirements that shall be completed as a condition for renewal of a license <u>or permit</u> issued pursuant to the provisions of the Respiratory Care Act.

B. The department, in consultation with the board, may adopt rules for issuance of temporary permits to students and graduates of approved training programs to practice limited respiratory care under the direct supervision of a licensed . 155702.2

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respiratory care practitioner or physician. Rules shall be adopted defining the terms "student" and "direct supervision".

C. A license issued by the department shall
describe the licensed person as a "respiratory care
practitioner licensed by the New Mexico regulation and
licensing department".

D. Unless licensed as a respiratory care practitioner pursuant to the provisions of the Respiratory Care Act, no person shall use the title "respiratory care practitioner", the abbreviation "R.C.P." or any other title or abbreviation to indicate that the person is a licensed respiratory care practitioner.

E. A copy of a valid license, <u>permit</u> or temporary permit <u>to practice respiratory care or a limited license or</u> <u>limited permit to practice polysomnography-related respiratory</u> <u>care services</u> issued pursuant to the Respiratory Care Act shall be kept on file at the [respiratory care practitioner's or <u>temporary</u>] <u>licensee or</u> permittee's place of employment.

F. [A respiratory care practitioner license]
 <u>Licenses issued by the department</u> shall expire on September 30, annually or biennially, as provided by rules of the department.

<u>G. Polysomnographic technologists who have been</u> <u>issued a limited license by the department to perform</u> <u>polysomnography-related respiratory care services pursuant to</u> <u>the provisions of the Respiratory Care Act may use the title</u> .155702.2

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1 "licensed PSGT" or "licensed polysomnographic technologist" or 2 the abbreviation "LPSGT". 3 H. Polysomnographic technicians who have been issued a limited permit by the department to perform 4 5 polysomnography-related respiratory care services pursuant to the provisions of the Respiratory Care Act may use the title 6 7 "PSG technician permitee". 8 I. Polysomnographic trainees who have been issued a 9 limited permit by the department to perform polysomnography-10 related respiratory care services pursuant to the provisions of 11 the Respiratory Care Act may use the title "PSG trainee 12 permittee"." 13 Section 61-12B-11 NMSA 1978 (being Laws 1984, Section 8. 14 Chapter 103, Section 11, as amended) is amended to read: 15 "61-12B-11. **FEES.** - -16 The superintendent, in consultation with the Α. 17 board, shall by rule establish a schedule of reasonable fees 18 for licenses, [temporary] permits and renewal of licenses [for 19 respiratory care practitioners] and permits. 20 The initial application fee shall be set in an **B**. 21 amount not to exceed one hundred fifty dollars (\$150). 22 C. [A license renewal fee] Renewal fees for

<u>licenses and permits</u> shall be established in an amount not to exceed one hundred fifty dollars (\$150)."

Section 9. Section 61-12B-12 NMSA 1978 (being Laws 1984, .155702.2

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1 Chapter 103, Section 12, as amended) is amended to read: DENIAL, SUSPENSION, REVOCATION AND 2 "61-12B-12. REINSTATEMENT OF LICENSES AND PERMITS. --3 The superintendent in consultation with the 4 A. 5 board and in accordance with the rules set forth by the department and the procedures set forth in the Uniform 6 7 Licensing Act may take disciplinary action against a license or 8 [temporary] permit held or applied for pursuant to the 9 Respiratory Care Act for the following causes: 10 fraud or deceit in the procurement of or (1)11 attempt to procure a license or [temporary] permit; 12 (2)imposition of any disciplinary action for 13 an act that would be grounds for disciplinary action by the 14 department pursuant to the Respiratory Care Act or as set forth 15 by rules of the department upon a person by an agency of 16 another jurisdiction that regulates respiratory care; 17 conviction of a crime that substantially (3) 18 relates to the qualifications, functions or duties of a 19 respiratory care practitioner or the duties of a 20 polysomnographic technologist, polysomnographic technician or 21 polysomnographic trainee in the provision of polysomnography-22 <u>related respiratory care services</u>. The record of conviction or 23 a certified copy thereof shall be conclusive evidence of the conviction: (4) impersonating or acting as a proxy for an

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1 applicant in an examination given pursuant to provisions of the 2 **Respiratory Care Act:** habitual or excessive use of intoxicants 3 (5) or drugs; 4 gross negligence as defined by rules of (6) 5 the department in the practice of respiratory care or in the 6 7 provision of polysomnography-related respiratory care services; 8 violating a provision of the Respiratory (7) 9 Care Act or a rule duly adopted pursuant to that act or aiding 10 or abetting a person to violate a provision of or a rule 11 adopted pursuant to that act; 12 engaging in unprofessional conduct as (8) 13 defined by rules set forth by the department; 14 (9) committing a fraudulent, dishonest or 15 corrupt act that is substantially related to the 16 qualifications, functions or duties of a respiratory care 17 practitioner or of a polysomnographic technologist, 18 polysomnographic technician or polysomnographic trainee in the 19 provision of polysomnography-related respiratory care services; 20 practicing respiratory care without a (10)21 valid license or temporary permit; 22 aiding or abetting the practice of (11) 23 respiratory care by a person who is not licensed or who has not 24 been issued a temporary permit by the department; 25 (12)conviction of a felony. The record of . 155702. 2 - 17 -

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1 conviction or a certified copy thereof shall be conclusive evidence of the conviction: 2 3 violating a provision of the Controlled (13)4 Substances Act: 5 (14)failing to furnish the department or its 6 investigators or representatives with information requested by 7 the department in the course of an official investigation; 8 practicing beyond the scope of (15) 9 respiratory care as defined in the Respiratory Care Act or as 10 set forth by rules of the department; or 11 surrendering a license, certificate or (16) 12 permit to practice respiratory care or a license, certificate 13 or permit to provide polysomnography-related respiratory care 14 services in another jurisdiction while an investigation or 15 disciplinary proceeding is pending for an act or conduct that 16 would constitute grounds for disciplinary action under the 17 Respiratory Care Act. 18 **B**. The department, in consultation with the board, 19 may impose conditions on and promulgate rules relating to the 20 reapplication or reinstatement of applicants, licensees or 21 [temporary] permittees who have been subject to disciplinary 22 action by the department." 23 - 18 -

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