1	HOUSE BILL 246
2	48TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2007
3	INTRODUCED BY
4	Debbie A. Rodella
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10	AN ACT
11	RELATING TO LICENSING; GRANTING LIMITED LICENSES AND PERMITS TO
12	PRACTICE POLYSOMNOGRAPHY AND POLYSOMNOGRAPHY-RELATED
13	RESPIRATORY CARE; CHANGING BOARD MEMBERSHIP; PROVIDING CERTAIN
14	WAIVERS; AMENDING SECTIONS OF THE RESPIRATORY CARE ACT.
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16	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
17	Section 1. Section 61-12B-3 NMSA 1978 (being Laws 1984,
18	Chapter 103, Section 3, as amended) is amended to read:
19	"61-12B-3. DEFINITIONSAs used in the Respiratory Care
20	Act:
21	A. "board" means the advisory board of respiratory
22	care practitioners;
23	B. "department" means the regulation and licensing
24	department or that division of the department designated to
25	administer the provisions of the Respiratory Care Act;
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1 C. "respiratory care" means a health care 2 profession, under medical direction, employed in the therapy, management, rehabilitation, diagnostic evaluation and care of 3 4 patients with deficiencies and abnormalities that affect the 5 cardiopulmonary system and associated aspects of other system functions, and the terms "respiratory therapy" and "inhalation 6 7 therapy" where such terms mean respiratory care; 8 "practice of respiratory care" includes: D. 9 direct and indirect cardiopulmonary care (1)10 services that are of comfort, safe, aseptic, preventative and 11 restorative to the patient; 12 (2) cardiopulmonary care services, including 13 the administration of pharmacological, diagnostic and 14 therapeutic agents related to cardiopulmonary care necessary to 15 implement treatment, disease prevention, cardiopulmonary 16 rehabilitation or a diagnostic regimen, including paramedical 17 therapy and baromedical therapy; 18 specific diagnostic and testing techniques (3) 19 employed in the medical management of patients to assist in 20 diagnosis, monitoring, treatment and research of 21 cardiopulmonary abnormalities, including pulmonary function 22 testing, hemodynamic and physiologic monitoring of cardiac 23 function and collection of arterial and venous blood for 24 analysis; 25 (4) observation, assessment and monitoring of

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

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

(6) establishing and maintaining the natural airways, insertion and maintenance of artificial airways, bronchopulmonary hygiene and cardiopulmonary resuscitation, along with cardiac and ventilatory life support assessment and evaluation; and

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

E. "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;

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

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

[F.] K. "respiratory care practitioner" means a person who is licensed to practice respiratory care in New Mexico:

[G.] L. "respiratory care protocols" means a .165058.1 - 5 -

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1 predetermined, written medical care plan, which can include 2 standing orders;

[H.] M. "respiratory therapy training program" means an education course of study as defined by rule of the department; and

[<del>I.</del>] <u>N.</u> "superintendent" means the superintendent of regulation and licensing."

Section 2. Section 61-12B-4 NMSA 1978 (being Laws 1984, Chapter 103, Section 4, as amended) is amended to read: "61-12B-4. LICENSE REQUIRED--EXCEPTIONS.--

A. No person shall practice respiratory care or [represent himself to be] make any representation as being a respiratory care practitioner unless [he] that person is licensed pursuant to the provisions of the Respiratory Care Act, except as otherwise provided by that act.

B. A respiratory care practitioner may transcribe and implement the written or verbal orders of a physician or other person authorized by law to prescribe pertaining to the practice of respiratory care and respiratory care protocols.

C. Nothing in the Respiratory Care Act is intended to limit, preclude or otherwise interfere with:

(1) the practices of other persons and healthproviders licensed by appropriate agencies of New Mexico;

(2) self-care by a patient;

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(3) gratuitous care by a friend or family

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1 member who does not [represent or hold himself out] make any 2 representation as being or claim to be a respiratory care 3 practitioner; or

4 (4) respiratory care services rendered in case5 of 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] the individual 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 .165058.1

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## respiratory care services."

Section 3. Section 61-12B-5 NMSA 1978 (being Laws 1984, 2 3 Chapter 103, Section 5, as amended) is amended to read: 4 "61-12B-5. ADVISORY BOARD CREATED.--5 The superintendent shall appoint an "advisory Α.

board of respiratory care practitioners" consisting of [five] six members as follows:

8 (1) one physician licensed in New Mexico who 9 is knowledgeable in respiratory care;

(2) two respiratory care practitioners who are residents of New Mexico, licensed by the department and in good standing. At least one of the respiratory care practitioners shall have been actively engaged in the practice of respiratory care for at least five years immediately preceding appointment or reappointment; [and]

(3) two public members who are residents of New Mexico. A public member shall not have been licensed as a respiratory care practitioner nor shall [he] the public member have any financial interest, direct or indirect, in the occupation to be regulated; and

(4) one polysomnographic technologist registered by the board of registered polysomnographic technologists who holds a valid limited license issued by the department that is in good standing, is a resident of New Mexico and has been actively engaged in the practice of .165058.1

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1 polysomnography for at least the five-year period immediately 2 preceding appointment or reappointment to the board. 3 Β. The board shall be administratively attached to 4 the department. 5 C. A member shall serve no more than two 6 consecutive three-year terms. 7 A member of the board shall receive per diem and D. mileage as provided for nonsalaried public officers in the Per 8 9 Diem and Mileage Act and shall receive no other compensation, 10 perquisite or allowance in connection with the discharge of 11 [his] duties as a board member. 12 A member failing to attend three consecutive Ε. 13 regular and properly noticed meetings of the board without a 14 reasonable excuse shall be automatically removed from the 15 board. 16 F. In the event of a vacancy, the board shall 17 immediately notify the superintendent of the vacancy. Within 18 ninety days of receiving notice of a vacancy, the 19 superintendent shall appoint a qualified person to fill the 20 remainder of the unexpired term. 21 A majority of the board members currently G. 22 serving constitutes a quorum of the board. 23 Η. The board shall meet at least twice a year and 24 at such other times as it deems necessary. 25 I. The board shall annually elect officers as

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deemed necessary to administer its duties."

2 Section 4. Section 61-12B-6 NMSA 1978 (being Laws 1984, 3 Chapter 103, Section 6, as amended) is amended to read: 4 "61-12B-6. DEPARTMENT--DUTIES AND POWERS .--5 The department, in consultation with the board, Α. shall: 6 7 (1) evaluate the qualifications of applicants 8 and review the required examination results of applicants. The 9 department may recognize the entry level examination written by 10 the national board for respiratory care or a successor board; 11 (2) promulgate rules as may be necessary to 12 implement the provisions of the Respiratory Care Act; 13 issue and renew licenses and temporary (3) 14 permits to qualified applicants who meet the requirements of 15 the Respiratory Care Act; and 16 administer, coordinate and enforce the (4) 17 provisions of the Respiratory Care Act and investigate persons 18 engaging in practices that may violate the provisions of that 19 act. 20 The department, in consultation with the board, Β. 21 may: 22 conduct examinations of respiratory care (1)23 practitioner applicants as required by rules of the department; 24 reprimand, fine, deny, suspend or revoke a (2) 25 license or temporary permit to practice respiratory care as .165058.1 - 10 -

1	provided in the Respiratory Care Act in accordance with the
2	provisions of the Uniform Licensing Act;
3	(3) for the purpose of investigating
4	complaints against applicants and licensees, issue
5	investigative subpoenas prior to the issuance of a notice of
6	contemplated action as set forth in the Uniform Licensing Act;
7	(4) enforce and administer the provisions of
8	the Impaired Health Care Provider Act and promulgate rules
9	pursuant to that act;
10	(5) promulgate rules or disciplinary
11	guidelines relating to impaired practitioners;
12	(6) promulgate rules to allow the interstate
13	transport of patients; [ <del>and</del> ]
14	(7) promulgate rules to determine and regulate
15	the scope and qualifications for expanded practice for
16	[ <del>respiratory care practitioners</del> ] <u>licensees or permittees; and</u>
17	(8) promulgate rules to issue and renew
18	limited licenses to polysomnographic technologists and limited
19	permits to polysomnographic technicians and polysomnographic
20	trainees to provide polysomnography-related respiratory care
21	services."
22	Section 5. Section 61-12B-7 NMSA 1978 (being Laws 1984,
23	Chapter 103, Section 7, as amended) is amended to read:
24	"61-12B-7. LICENSING BY TRAINING AND EXAMINATIONA
25	person desiring to become licensed as a respiratory care

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practitioner or desiring to receive a limited license to 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
the department;

10 has passed an entry level examination [as Β. 11 specified by rules of the department] for respiratory care 12 practitioners administered by the national board for 13 respiratory care or [a] its successor board or an entry level 14 examination for polysomnographic technologists or 15 polysomnographic technicians administered by the board for 16 registered polysomnographic technologists or its successor 17 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 .165058.1

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examination requirements for an applicant <u>for a respiratory</u>
 <u>care practitioner license</u> who presents proof that [<del>he</del>] <u>the</u>
 <u>applicant</u> 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.

7 B. The department shall waive the education and 8 examination requirements for an applicant for a limited license 9 to provide polysomnography-related respiratory care services 10 who presents proof that the applicant is currently licensed, 11 registered or holds a permit in good standing in a jurisdiction 12 that has standards for licensure, registration or permits that 13 are at least equal to those in New Mexico as required by the 14 Respiratory Care Act."

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 .165058.1

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respiratory care under the direct supervision of a licensed 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> .165058.1

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1 the provisions of the Respiratory Care Act may use the title "licensed PSGT" or "licensed polysomnographic technologist" or 2 the abbreviation "LPSGT". 3 4 H. Polysomnographic technicians who have been 5 issued a limited permit by the department to perform 6 polysomnography-related respiratory care services pursuant to 7 the provisions of the Respiratory Care Act may use the title 8 "PSG technician permittee". 9 I. Polysomnographic trainees who have been issued a 10 limited permit by the department to perform polysomnography-11 related respiratory care services pursuant to the provisions of 12 the Respiratory Care Act may use the title "PSG trainee 13 permittee"." 14 Section 8. Section 61-12B-11 NMSA 1978 (being Laws 1984, 15 Chapter 103, Section 11, as amended) is amended to read: 16 "61-12B-11. FEES.--17 The superintendent, in consultation with the Α. 18 board, shall by rule establish a schedule of reasonable fees 19 for licenses, [temporary] permits and renewal of licenses [for 20 respiratory care practitioners] and permits. 21 The initial application fee shall be set in an Β. 22 amount not to exceed one hundred fifty dollars (\$150). 23 C. [A license renewal fee] Renewal fees for 24 licenses and permits shall be established in an amount not to 25 exceed one hundred fifty dollars (\$150)." .165058.1 - 15 -

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1	Section 9. Section 61-12B-12 NMSA 1978 (being Laws 1984,
2	Chapter 103, Section 12, as amended) is amended to read:
3	"61-12B-12. DENIAL, SUSPENSION, REVOCATION AND
4	REINSTATEMENT OF LICENSES AND PERMITS
5	A. The superintendent in consultation with the
6	board and in accordance with the rules set forth by the
7	department and the procedures set forth in the Uniform
8	Licensing Act may take disciplinary action against a license or
9	[ <del>temporary</del> ] permit held or applied for pursuant to the
10	Respiratory Care Act for the following causes:
11	(1) fraud or deceit in the procurement of or
12	attempt to procure a license or [ <del>temporary</del> ] permit;
13	(2) imposition of any disciplinary action for
14	an act that would be grounds for disciplinary action by the
15	department pursuant to the Respiratory Care Act or as set forth
16	by rules of the department upon a person by an agency of
17	another jurisdiction that regulates respiratory care;
18	(3) conviction of a crime that substantially
19	relates to the qualifications, functions or duties of a
20	respiratory care practitioner <u>or the duties of a</u>
21	polysomnographic technologist, polysomnographic technician or
22	polysomnographic trainee in the provision of polysomnography-
23	related respiratory care services. The record of conviction or
24	a certified copy thereof shall be conclusive evidence of the
25	conviction;
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1 (4) impersonating or acting as a proxy for an 2 applicant in an examination given pursuant to provisions of the 3 Respiratory Care Act; 4 (5) habitual or excessive use of intoxicants 5 or drugs; 6 (6) gross negligence as defined by rules of 7 the department in the practice of respiratory care or in the 8 provision of polysomnography-related respiratory care services; 9 (7) violating a provision of the Respiratory 10 Care Act or a rule duly adopted pursuant to that act or aiding 11 or abetting a person to violate a provision of or a rule 12 adopted pursuant to that act; 13 (8) engaging in unprofessional conduct as 14 defined by rules set forth by the department; 15 committing a fraudulent, dishonest or (9) 16 corrupt act that is substantially related to the 17 qualifications, functions or duties of a respiratory care 18 practitioner or of a polysomnographic technologist, 19 polysomnographic technician or polysomnographic trainee in the 20 provision of polysomnography-related respiratory care services; 21 (10) practicing respiratory care without a 22 valid license or [temporary] permit; 23 (11) aiding or abetting the practice of 24 respiratory care by a person who is not licensed or who has not 25 been issued a [temporary] permit by the department; .165058.1 - 17 -

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

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