



February 25, 2000

**ENGROSSED
HOUSE BILL No. 1387**

DIGEST OF HB 1387 (Updated February 23, 2000 10:40 AM - DI 88)

Citations Affected: IC 25-34.5; IC 34-6; noncode.

Synopsis: Respiratory care practitioners. Requires a respiratory care practitioner to be licensed. (Current law requires these practitioners to be certified.) Requires that rules governing respiratory care practitioners include a designation of all tasks. Provides which respiratory care practices are or are not tasks. Allows certain courses to be accepted toward continuing education requirements. Allows an individual who is not a licensed, registered, or certified health care professional to perform respiratory care practices after passage of an examination. Establishes requirements for student permits. Allows an individual who is not a licensed or certified health care professional to perform respiratory care tasks if certain conditions are met. Provides that an individual who holds a valid respiratory care certificate on June 30, 2001, is considered to hold a valid respiratory care license after that date until the certificate's expiration date. Requires that the respiratory care committee propose rules and the medical licensing board adopt rules that designate all respiratory care tasks before July 1, 2001, after receiving feedback from affected health care providers and consulting with certain organizations.

Effective: July 1, 2000; July 1, 2001.

**Klinker, Ayres, Scholer, Frizzell,
Welch, Tincher**

(SENATE SPONSORS — ALTING, ROGERS, SIMPSON, GARD)

January 11, 2000, read first time and referred to Committee on Public Health.
January 27, 2000, amended, reported — Do Pass.
January 31, 2000, read second time, ordered engrossed. Engrossed.
February 7, 2000, read third time, passed. Yeas 90, nays 5.

SENATE ACTION

February 8, 2000, read first time and referred to Committee on Health and Provider Services.
February 24, 2000, amended, reported favorably — Do Pass.

EH 1387—LS 6825/DI 77+



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February 25, 2000

Second Regular Session 111th General Assembly (2000)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 1999 General Assembly.

ENGROSSED HOUSE BILL No. 1387

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A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 25-34.5-1-2 IS AMENDED TO READ AS
- 2 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 2. "Applicant" means
- 3 a person who applies for ~~certification~~ **licensure** as a respiratory care
- 4 practitioner under this article. The term does not include a practitioner
- 5 who applies for renewal of the practitioner's ~~certificate~~. **license**.
- 6 SECTION 2. IC 25-34.5-1-2.5 IS ADDED TO THE INDIANA
- 7 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
- 8 [EFFECTIVE JULY 1, 2001]: **Sec. 2.5. (a) "Assessment" means the**
- 9 **evaluation and interpretation of patient data that is the basis for**
- 10 **and a prerequisite for making a decision concerning patient care.**
- 11 **(b) The term does not include making a medical diagnosis.**
- 12 SECTION 3. IC 25-34.5-1-4.7 IS ADDED TO THE INDIANA
- 13 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
- 14 [EFFECTIVE JULY 1, 2001]: **Sec. 4.7. "Other authorized health**
- 15 **care professional" means a licensed health care professional whose**
- 16 **scope of practice:**
- 17 **(1) includes the respiratory care practice being supervised;**

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1 **and**

2 **(2) authorizes the professional to supervise an individual who**
 3 **is not licensed, certified, or registered as a health care**
 4 **professional.**

5 SECTION 4. IC 25-34.5-1-6 IS AMENDED TO READ AS
 6 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 6. "Practice of
 7 respiratory care" means the allied health specialty designed to aid the
 8 supervising physician or osteopath in the treatment, management,
 9 diagnostic testing, control, and care of patients with deficiencies and
 10 abnormalities associated with the cardiopulmonary system. The term
 11 is ~~limited to~~ **includes** the following:

12 (1) Administration of pharmacological, diagnostic, and
 13 therapeutic aids related to the implementation of a treatment,
 14 disease prevention, pulmonary rehabilitation, or diagnostic
 15 regimen prescribed by and under the direct supervision of a
 16 physician licensed under IC 25-22.5 as follows:

17 (A) Administration of medical gases (except for the purpose
 18 of anesthesia), aerosols, and humidification.

19 (B) Environmental control mechanisms and hyperbaric
 20 therapy.

21 (C) Mechanical or physiological ventilatory support.

22 (D) Bronchopulmonary hygiene.

23 (E) Cardiopulmonary resuscitation.

24 (F) Maintenance of the natural airway.

25 (G) Insertion and maintenance of artificial airways.

26 (H) Specific diagnostic and testing techniques employed in the
 27 medical management of patients to assist in diagnosis,
 28 monitoring, treatment, and research of pulmonary
 29 abnormalities, including measurements of ventilatory volumes,
 30 pressures, and flows, collection of specimens of blood and
 31 blood gases, expired and inspired gas samples, respiratory
 32 secretions, and pulmonary function testing.

33 (I) Utilization of hemodynamic and other related physiologic
 34 measurements to assess the status of the cardiopulmonary
 35 system.

36 (2) Transcription and implementation of the written or verbal
 37 orders of a physician.

38 (3) Observing and monitoring signs and symptoms, general
 39 behavior, general physical response to respiratory care treatment
 40 and diagnostic testing, including determination of whether the
 41 signs, symptoms, reactions, behavior, or general response exhibit
 42 abnormal characteristics.



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1 (4) Observing and referring based on abnormalities, protocols, or
2 changes in treatment.

3 (5) Repairing equipment used in the practice of respiratory care.
4 SECTION 5. IC 25-34.5-1-7 IS AMENDED TO READ AS
5 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 7. "Practitioner" means
6 a person ~~certified~~ **licensed** under this article to engage in the practice
7 of respiratory care.

8 SECTION 6. IC 25-34.5-1-8 IS ADDED TO THE INDIANA CODE
9 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
10 1, 2001]: **Sec. 8. "Proximate supervision" means a situation in
11 which an individual is:**

- 12 (1) **responsible for directing the actions of another individual;**
13 **and**
14 (2) **in the facility and is physically close enough to be readily**
15 **available if needed by the supervised individual.**

16 SECTION 7. IC 25-34.5-1-9 IS ADDED TO THE INDIANA CODE
17 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
18 1, 2001]: **Sec. 9. "Task" means a respiratory care practice that does
19 not:**

- 20 (1) **require specialized knowledge that results from a course**
21 **of education or training in respiratory care;**
22 (2) **pose an unreasonable risk of a negative outcome for the**
23 **patient; and**
24 (3) **involve assessment or making a decision concerning**
25 **patient care.**

26 SECTION 8. IC 25-34.5-2-6 IS AMENDED TO READ AS
27 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 6. The committee shall:

- 28 (1) pass upon the qualifications of persons who apply for
29 ~~certification~~ **licensure** as respiratory care practitioners;
30 (2) provide all examinations;
31 (3) ~~certify~~ **license** qualified applicants; and
32 (4) propose rules concerning the competent practice of respiratory
33 care to the board.

34 SECTION 9. IC 25-34.5-2-6.1 IS ADDED TO THE INDIANA
35 CODE AS A NEW SECTION TO READ AS FOLLOWS
36 [EFFECTIVE JULY 1, 2001]: **Sec. 6.1. The rules proposed under
37 section 6(4) of this chapter and adopted under section 7(1) of this
38 chapter must include, to the extent reasonably ascertainable, a
39 designation of all tasks. The designation of tasks must:**

- 40 (1) **exclude the practices described in section 6.2 of this**
41 **chapter; and**
42 (2) **include the tasks described in section 6.3 of this chapter.**



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1 SECTION 10. IC 25-34.5-2-6.2 IS ADDED TO THE INDIANA
2 CODE AS A NEW SECTION TO READ AS FOLLOWS
3 [EFFECTIVE JULY 1, 2001]: **Sec. 6.2. The following respiratory**
4 **care practices are not tasks:**

- 5 (1) **Administration of aerosol medication.**
- 6 (2) **Insertion and maintenance of an artificial airway.**
- 7 (3) **Mechanical ventilatory support.**
- 8 (4) **Patient assessment.**
- 9 (5) **Patient education.**

10 SECTION 11. IC 25-34.5-2-6.3 IS ADDED TO THE INDIANA
11 CODE AS A NEW SECTION TO READ AS FOLLOWS
12 [EFFECTIVE JULY 1, 2001]: **Sec. 6.3. (a) The following respiratory**
13 **care practices are tasks:**

- 14 (1) **Cleaning, disinfecting, sterilizing, and assembling**
15 **equipment used in the practice of respiratory care as**
16 **delegated by a practitioner or other authorized health care**
17 **professional.**
- 18 (2) **Collecting and reviewing patient data through noninvasive**
19 **means if the collection and review does not include the**
20 **individual's interpretation of the clinical significance of the**
21 **data. Collecting and reviewing patient data includes the**
22 **following:**
 - 23 (A) **Setting up and obtaining an electrocardiogram.**
 - 24 (B) **Performing pulse oximetry and reporting to a**
25 **practitioner or other authorized health care professional**
26 **in a timely manner.**
- 27 (3) **Setting up a nasal cannula for oxygen therapy and**
28 **reporting to a practitioner or other authorized health care**
29 **professional in a timely manner.**
- 30 (4) **Performing incentive spirometry, excluding a patient's**
31 **initial treatment and education.**
- 32 (5) **Performing cough and deep breath maneuvers.**
- 33 (6) **Maintaining a patient's natural airway by physically**
34 **manipulating the jaw and neck.**

35 (b) **An individual who is not a licensed, registered, or certified**
36 **health care professional may perform a task only:**

- 37 (1) **under the proximate supervision of a practitioner or other**
38 **authorized health care professional; and**
- 39 (2) **if the individual has demonstrated to the facility that**
40 **employs or contracts with the individual competency to**
41 **perform the task.**

42 **The facility shall document competency in accordance with**

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1 **licensure, certification, and accreditation standards applicable to**
 2 **the facility.**

3 **(c) A practitioner may do the following:**

4 **(1) Delegate tasks.**

5 **(2) Supervise the performance of tasks.**

6 SECTION 12. IC 25-34.5-2-7 IS AMENDED TO READ AS
 7 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 7. The board shall
 8 adopt rules under IC 4-22-2 establishing:

9 (1) standards for the competent practice of respiratory care under
 10 the direct supervision of a physician licensed under IC 25-22.5,
 11 **including a designation of tasks;**

12 (2) fees for the administration of this article; and

13 (3) standards for the administration of this article;

14 after considering rules proposed by the committee.

15 SECTION 13. IC 25-34.5-2-8 IS AMENDED TO READ AS
 16 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 8. (a) Each applicant
 17 for ~~certification~~ **licensure** as a respiratory care practitioner must
 18 present satisfactory evidence that the applicant:

19 (1) does not have a conviction for:

20 (A) an act that would constitute a ground for disciplinary
 21 sanction under IC 25-1-9; or

22 (B) a crime that has a direct bearing on the practitioner's
 23 ability to practice competently;

24 (2) has not been the subject of a disciplinary action initiated by
 25 the licensing or certification agency of another state or
 26 jurisdiction on the grounds that the applicant was unable to
 27 practice as a respiratory care practitioner without endangering the
 28 public; and

29 (3) has passed a respiratory care practitioner licensing or
 30 certification examination approved by the board.

31 (b) Each applicant for ~~certification~~ **licensure** as a respiratory care
 32 practitioner must submit proof to the committee of the applicant's:

33 (1) graduation from a school or program of respiratory care that
 34 meets standards set by the board;

35 (2) completion of a United States military training program in
 36 respiratory care; or

37 (3) completion of sufficient postsecondary education to be
 38 ~~certified~~ **credentialed** by a national respiratory care practitioner
 39 organization approved by the committee.

40 (c) At the time of making application, each applicant must pay a fee
 41 determined by the board after consideration of a recommendation of
 42 the committee.



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1 SECTION 14. IC 25-34.5-2-9 IS AMENDED TO READ AS
 2 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 9. (a) Except as
 3 provided in section 11 of this chapter, the committee shall issue a
 4 **certificate license** to each applicant who:

5 (1) successfully passes the examination provided in section 12 of
 6 this chapter; and

7 (2) meets the requirements of section 8 of this chapter.

8 (b) A **certificate license** issued under this section expires on the last
 9 day of the regular renewal cycle established under IC 25-1-5-4.

10 SECTION 15. IC 25-34.5-2-10 IS AMENDED TO READ AS
 11 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 10. (a) The committee
 12 shall, under IC 25-1-2, renew every two (2) years the **certificate license**
 13 of a practitioner who:

14 (1) meets the continuing education requirements established by
 15 rule by the board; and

16 (2) pays the fee set by the board.

17 (b) If a practitioner does not renew the practitioner's **certificate**
 18 **license** before its expiration, the practitioner's **certificate license**
 19 becomes invalid without action taken by the committee. A **certificate**
 20 **license** that becomes invalid under this subsection may be reinstated by
 21 the committee up to three (3) years after its invalidation if the
 22 practitioner who holds an invalid **certificate license** pays the following:

23 (1) A penalty set by the board.

24 (2) The renewal fee for the biennium.

25 (c) If a **certificate license** that becomes invalid under subsection (b)
 26 is not reinstated by the committee within three (3) years of its
 27 invalidation, the holder of the invalid **certificate license** may be
 28 required by the committee to take an examination for competence
 29 before the committee will reinstate the **certificate license**.

30 (d) The board may adopt rules under IC 4-22-2 establishing
 31 requirements for reinstatement of an invalid **certificate license** after
 32 consideration of a recommendation of the committee.

33 (e) **The board shall accept continuing education courses in the**
 34 **following areas toward fulfillment of the requirements of**
 35 **subsection (a):**

36 (1) **Management of the practice of respiratory care.**

37 (2) **Courses concerning the practice of respiratory care that**
 38 **enable individuals to teach continuing education courses for**
 39 **respiratory care practitioners.**

40 (3) **The practice of respiratory care.**

41 SECTION 16. IC 25-34.5-2-10.1 IS AMENDED TO READ AS
 42 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 10.1. (a) The

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1 committee may issue a temporary permit to a person to **practice**
 2 **respiratory care or to** profess to be a respiratory care practitioner if
 3 the person pays a fee and:

4 (1) has:

5 (A) a valid license or certificate to practice from another state;
 6 and

7 (B) applied for a ~~certificate~~ **license** from the committee;

8 (2) is practicing in a state that does not license or certify
 9 respiratory care practitioners but is ~~certified~~ **credentialed** by a
 10 national respiratory care practitioner association approved by the
 11 committee, and the person has applied for a ~~certificate~~ **license**
 12 from the committee; or

13 (3) has:

14 (A) been approved by the committee to take the next
 15 examination; and

16 (B) graduated from a school or program approved by the
 17 committee.

18 (b) A temporary permit expires the earlier of:

19 (1) the date the person holding the permit is issued a ~~certificate~~
 20 **license** under this article; or

21 (2) the date the committee disapproves the person's ~~certificate~~
 22 **license** application.

23 (c) The committee may renew a temporary permit if the person
 24 holding the permit was scheduled to take the next examination and:

25 (1) did not take the examination; and

26 (2) shows good cause for not taking the examination.

27 (d) A permit renewed under subsection (c) expires on the date the
 28 person holding the permit receives the results from the next
 29 examination given after the permit was issued.

30 SECTION 17. IC 25-34.5-2-11 IS AMENDED TO READ AS
 31 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 11. (a) The committee
 32 may issue a ~~certificate~~ **license** by endorsement to a person who:

33 (1) presents satisfactory evidence to the committee that the person
 34 holds:

35 (A) a license or certification to practice respiratory care in:

36 (i) another state; or

37 (ii) a jurisdiction of Canada; or

38 (B) a ~~certification~~ **credentials issued** by a national respiratory
 39 care practitioner organization approved by the committee;

40 (2) meets the requirements of section 8 of this chapter; and

41 (3) pays a fee determined by the board after consideration of a
 42 recommendation of the committee.

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1 (b) If the applicant presents satisfactory evidence that the applicant
 2 has actively engaged in the practice of respiratory care that included
 3 actual patient care:

4 (1) in another jurisdiction;

5 (2) under the supervision of a physician licensed in that
 6 jurisdiction; and

7 (3) for at least ten (10) of the previous fifteen (15) years
 8 preceding the date of application;

9 the committee may waive the education requirements under subsection
 10 (a)(2) and section 8(b) of this chapter if the committee determines that
 11 the applicant has sufficient knowledge and experience.

12 SECTION 18. IC 25-34.5-2-12 IS AMENDED TO READ AS
 13 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 12. (a) Examinations
 14 of applicants for ~~certification~~ **licensure** under this article shall be held
 15 at least semiannually on dates set by the board.

16 (b) An examination under this section must include a written
 17 examination that tests the following:

18 (1) The applicant's knowledge of the basic and clinical sciences
 19 as they relate to the practice of respiratory care.

20 (2) Other subjects that the committee considers useful to test an
 21 applicant's fitness to practice respiratory care.

22 (c) An otherwise qualified applicant who fails an examination and
 23 is refused ~~certification~~ **licensure** may take another scheduled
 24 examination upon payment of an additional fee set by the board under
 25 rules adopted under section 7 of this chapter.

26 SECTION 19. IC 25-34.5-2-14 IS ADDED TO THE INDIANA
 27 CODE AS A NEW SECTION TO READ AS FOLLOWS
 28 [EFFECTIVE JULY 1, 2001]: Sec. 14. (a) **The committee may issue
 29 a student permit to an individual if the individual does the
 30 following:**

31 **(1) Submits the appropriate application to the committee.**

32 **(2) Pays the fee established by the board.**

33 **(3) Submits proof to the committee that the individual is a
 34 student in good standing in a respiratory care program
 35 approved by the committee.**

36 **(b) An individual who holds a student permit may only perform
 37 respiratory care procedures that have been part of a course:**

38 **(1) the individual has successfully completed in the
 39 respiratory care program designated under subsection (a)(3);
 40 and**

41 **(2) for which the successful completion has been documented
 42 and that is available upon request to the committee.**



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1 (c) The procedures permitted by subsection (b) may be
2 performed only:

- 3 (1) on adult patients who are not critical care patients; and
4 (2) under the proximate supervision of a practitioner.

5 (d) A student permit expires on the earliest of the following:

6 (1) The date the permit holder is issued a license under this
7 article.

8 (2) The date the committee disapproves the permit holder's
9 application for a license under this article.

10 (3) The date the permit holder ceases to be a student in good
11 standing in a respiratory care program approved by the
12 committee. The graduation of a student permit holder from a
13 respiratory care program approved by the committee does
14 not cause the student permit to expire under this subdivision.

15 (4) Two (2) years after the date of issuance.

16 SECTION 20. IC 25-34.5-3-1 IS AMENDED TO READ AS
17 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 1. A person may not:

- 18 (1) practice respiratory care;
19 (2) profess to be a respiratory care practitioner;
20 (3) use the title "respiratory care practitioner"; or
21 (4) use any initials, words, letters, abbreviations, or insignia
22 indicating or implying that the person is a respiratory care
23 practitioner ~~certified~~ **licensed** under this article;

24 unless the person is ~~certified~~ **licensed** under this article.

25 SECTION 21. IC 25-34.5-3-2 IS AMENDED TO READ AS
26 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 2. A person who
27 violates this chapter commits a Class B misdemeanor. **In addition to
28 any other penalty imposed for a violation of this chapter, the board
29 may, in the name of the state of Indiana through the attorney
30 general, petition a circuit or superior court to enjoin the person
31 who is violating this chapter from practicing respiratory care in
32 violation of this chapter.**

33 SECTION 22. IC 25-34.5-3-3 IS ADDED TO THE INDIANA
34 CODE AS A NEW SECTION TO READ AS FOLLOWS
35 [EFFECTIVE JULY 1, 2001]: Sec. 3. (a) **This article does not
36 prohibit a licensed, registered, or certified health care professional
37 from practicing within the scope of the health care professional's
38 license, registration, or certification.**

39 (b) **A licensed, certified, or registered health care professional
40 may be cross-trained in respiratory care related practices as long
41 as the practices are included within the professional's scope of
42 practice. The competency of the professional must be documented**



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1 **in each area of activity in which cross training occurs.**

2 SECTION 23. IC 25-34.5-3-4 IS ADDED TO THE INDIANA
3 CODE AS A NEW SECTION TO READ AS FOLLOWS
4 [EFFECTIVE JULY 1, 2001]: **Sec. 4. Except as provided in**
5 **IC 25-34.5-2-6.3(b), an individual who is not licensed, registered,**
6 **or certified as a health care professional may perform a**
7 **respiratory care practice only when the individual passes an**
8 **examination covering the practice that is offered by a testing body**
9 **approved by the committee.**

10 SECTION 24. IC 25-34.5-3-5 IS ADDED TO THE INDIANA
11 CODE AS A NEW SECTION TO READ AS FOLLOWS
12 [EFFECTIVE JULY 1, 2001]: **Sec. 5. An individual who is not**
13 **licensed, registered, or certified as a health care professional may**
14 **deliver, set up, calibrate, and demonstrate the mechanical**
15 **operation of respiratory care equipment in a residential setting**
16 **only when the following conditions are met:**

17 (1) **The individual's employer documents that the individual**
18 **has obtained adequate training and demonstrated competence**
19 **under the supervision of a practitioner or other licensed,**
20 **registered, or certified health care professional.**

21 (2) **The individual does not teach, administer, or practice**
22 **respiratory care.**

23 (3) **The individual does not attach the respiratory care**
24 **equipment to the patient or instruct the patient, the patient's**
25 **family, or the patient's caregiver on the equipment's clinical**
26 **use as a treatment device.**

27 (4) **All instructions to the patient, family, or caregiver**
28 **regarding the clinical use of the equipment, patient**
29 **monitoring, patient assessment, or other procedures designed**
30 **to evaluate the effectiveness of the treatment are performed**
31 **by a practitioner or other licensed, registered, or certified**
32 **health care professional.**

33 SECTION 25. IC 25-34.5-3-6 IS ADDED TO THE INDIANA
34 CODE AS A NEW SECTION TO READ AS FOLLOWS
35 [EFFECTIVE JULY 1, 2001]: **Sec. 6. This article does not prohibit**
36 **an individual who is not licensed as a respiratory care practitioner**
37 **from doing any of the following:**

38 (1) **Performing cardiopulmonary resuscitation.**

39 (2) **Repairing equipment used in the practice of respiratory**
40 **care.**

41 SECTION 26. IC 25-34.5-3-7 IS ADDED TO THE INDIANA
42 CODE AS A NEW SECTION TO READ AS FOLLOWS



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1 [EFFECTIVE JULY 1, 2001]: **Sec. 7. This article does not affect the**
 2 **applicability of IC 25-22.5-1-2(a)(19).**

3 SECTION 27. IC 25-34.5-3-8 IS ADDED TO THE INDIANA
 4 CODE AS A NEW SECTION TO READ AS FOLLOWS
 5 [EFFECTIVE JULY 1, 2001]: **Sec. 8. This article does not prohibit**
 6 **an individual who is not a practitioner from performing laboratory**
 7 **tests in a clinical laboratory holding a federal Clinical Laboratory**
 8 **Improvement Act (CLIA) certificate or a CLIA certificate of**
 9 **accreditation if the individual satisfies the specified federal**
 10 **qualification standards.**

11 SECTION 28. IC 34-6-2-117 IS AMENDED TO READ AS
 12 FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 117. "Professional
 13 health care provider", for purposes of IC 34-30-15, means:

- 14 (1) a physician licensed under IC 25-22.5;
 15 (2) a dentist licensed under IC 25-14;
 16 (3) a hospital licensed under IC 16-21;
 17 (4) a podiatrist licensed under IC 25-29;
 18 (5) a chiropractor licensed under IC 25-10;
 19 (6) an optometrist licensed under IC 25-24;
 20 (7) a psychologist licensed under IC 25-33;
 21 (8) a pharmacist licensed under IC 25-26;
 22 (9) a health facility licensed under IC 16-28-2;
 23 (10) a registered or licensed practical nurse licensed under
 24 IC 25-23;
 25 (11) a physical therapist licensed under IC 25-27;
 26 (12) a home health agency licensed under IC 16-27-1;
 27 (13) a community mental health center (as defined in
 28 IC 12-7-2-38);
 29 (14) a health care organization whose members, shareholders, or
 30 partners are:
 31 (A) professional health care providers described in
 32 subdivisions (1) through (13);
 33 (B) professional corporations comprised of health care
 34 professionals (as defined in IC 23-1.5-1-8); or
 35 (C) professional health care providers described in
 36 subdivisions (1) through (13) and professional corporations
 37 comprised of persons described in subdivisions (1) through
 38 (13);
 39 (15) a private psychiatric hospital licensed under IC 12-25;
 40 (16) a preferred provider organization (including a preferred
 41 provider arrangement or reimbursement agreement under
 42 IC 27-8-11);



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- 1 (17) a health maintenance organization (as defined in
 2 IC 27-13-1-19) or a limited service health maintenance
 3 organization (as defined in IC 27-13-34-4);
 4 (18) a respiratory care practitioner ~~certified~~ **licensed** under
 5 IC 25-34.5;
 6 (19) an occupational therapist certified under IC 25-23.5;
 7 (20) a state institution (as defined in IC 12-7-2-184);
 8 (21) a clinical social worker who is licensed under
 9 IC 25-23.6-5-2;
 10 (22) a managed care provider (as defined in IC 12-7-2-127(b)); or
 11 (23) a nonprofit health care organization affiliated with a hospital
 12 that is owned or operated by a religious order, whose members are
 13 members of that religious order.

14 **SECTION 29. [EFFECTIVE JULY 1, 2001] (a) Notwithstanding**
 15 **IC 25-34.5, as amended by this act, an individual who holds a valid**
 16 **respiratory care certificate on June 30, 2001, is considered to hold**
 17 **a valid respiratory care license under IC 25-34.5, as amended by**
 18 **this act, after June 30, 2001. The individual need not apply for a**
 19 **replacement license under IC 25-34.5, as amended by this act, until**
 20 **the certificate's expiration date, and the certificate shall be treated**
 21 **as a valid license under IC 25-34.5, as amended by this act, until**
 22 **the certificate's expiration date.**

23 (b) A respiratory care practitioner's license described in
 24 subsection (a) expires on the date the respiratory care
 25 practitioner's license would have expired if the amendments to
 26 IC 25-34.5 by this act had not been enacted.

27 (c) This SECTION expires July 1, 2003.

28 **SECTION 30. [EFFECTIVE JULY 1, 2000] (a) 844 IAC 11-5-3(c)**
 29 **is void. The publisher of the Indiana Administrative Code and the**
 30 **Indiana Register shall remove this rule from the Indiana**
 31 **Administrative Code.**

32 (b) Notwithstanding IC 25-34.5-2-10, the medical licensing
 33 board shall accept continuing education courses in the following
 34 areas toward fulfillment of the requirements under
 35 IC 25-34.5-2-10(a):

- 36 (1) Management of the practice of respiratory care.
 37 (2) Courses concerning the practice of respiratory care that
 38 enable individuals to teach continuing education courses for
 39 respiratory care practitioners.
 40 (3) The practice of respiratory care.

41 (c) This SECTION expires July 1, 2001.

42 **SECTION 31. [EFFECTIVE UPON PASSAGE] (a) Before July 1,**

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(1) the respiratory care committee shall propose rules under IC 4-22-2 to implement IC 25-34.5-2-6.1, as added by this act; and

(2) the medical licensing board shall adopt rules under IC 4-22-2 to implement IC 25-34.5-2-7(1), as amended by this act;

that designate, to the extent reasonably ascertainable, all respiratory care tasks (as defined in IC 25-34.5-1-9, as added by this act).

(b) In proposing rules under subsection (a)(1), the respiratory care committee shall receive and consider information provided by all affected health care providers, including joint consultation with the following:

(1) The Indiana Hospital and Health Association.

(2) The Indiana Society for Respiratory Care.

(c) In adopting rules under subsection (a)(2), the medical licensing board shall receive and consider information provided by all affected health care providers, including joint consultation with the following:

(1) The Indiana Hospital and Health Association.

(2) The Indiana Society for Respiratory Care.

(d) This SECTION expires July 1, 2001.

SECTION 32. An emergency is declared for this act.

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COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1387, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Replace the effective dates in SECTIONS 1 through 20 with "[EFFECTIVE JULY 1, 2001]".

Page 2, between lines 29 and 30, begin a new line block indented and insert:

"(6) All respiratory care practices that require the exercise of independent clinical judgment."

Page 2, line 35, after "6." insert "(a)".

Page 2, between lines 41 and 42, begin a new paragraph and insert:

"(b) The rules proposed under subsection (a)(4) must include a designation of the tasks that do not require the exercise of independent clinical judgment.

(c) Unlicensed individuals may only perform tasks that do not require the exercise of independent clinical judgment when under the direct supervision of a licensed respiratory care practitioner.

SECTION 5. IC 25-34.5-2-7 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 7. The board shall adopt rules under IC 4-22-2 establishing:

(1) standards for the competent practice of respiratory care under the direct supervision of a physician licensed under IC 25-22.5, **including a designation of the tasks that do not require the exercise of independent clinical judgment;**

(2) fees for the administration of this article; and

(3) standards for the administration of this article;

after considering rules proposed by the committee."

Page 9, line 32, delete "2000" and insert "**2001**".

Page 9, line 34, delete "2000" and insert "**2001**".

Page 10, line 1, delete "2002" and insert "**2003**".

Page 10, line 2, after "2000]" insert "(a)".

Page 10, after line 5, begin a new paragraph and insert:

"(b) Notwithstanding IC 25-34.5-2-10, the medical licensing board shall accept continuing education courses in the following areas toward fulfillment of the requirements under IC 25-34.5-2-10(a):

(1) Management of the practice of respiratory care.

(2) Courses concerning the practice of respiratory care that enable individuals to teach continuing education courses for respiratory care practitioners.



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(c) This SECTION expires July 1, 2001."

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to HB 1387 as introduced.)

BROWN C, Chair

Committee Vote: yeas 10, nays 0.

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COMMITTEE REPORT

Mr. President: The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1387, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 1, between lines 5 and 6, begin a new paragraph and insert:

"SECTION 2. IC 25-34.5-1-2.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: **Sec. 2.5. (a) "Assessment" means the evaluation and interpretation of patient data that is the basis for and a prerequisite for making a decision concerning patient care.**

(b) The term does not include making a medical diagnosis.

SECTION 3. IC 25-34.5-1-4.7 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: **Sec. 4.7. "Other authorized health care professional" means a licensed health care professional whose scope of practice:**

- (1) includes the respiratory care practice being supervised; and**
- (2) authorizes the professional to supervise an individual who is not licensed, certified, or registered as a health care professional."**

Page 2, delete lines 30 through 31.

Page 2, between lines 35 and 36, begin a new paragraph and insert:

"SECTION 6. IC 25-34.5-1-8 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: **Sec. 8. "Proximate supervision" means a situation in which an individual is:**

- (1) responsible for directing the actions of another individual; and**
- (2) in the facility and is physically close enough to be readily available if needed by the supervised individual.**

SECTION 7. IC 25-34.5-1-9 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: **Sec. 9. "Task" means a respiratory care practice that does not:**

- (1) require specialized knowledge that results from a course of education or training in respiratory care;**
- (2) pose an unreasonable risk of a negative outcome for the patient; and**
- (3) involve assessment or making a decision concerning**



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patient care."

Page 2, line 37, delete "(a)".

Page 3, delete lines 3 through 8, begin a new paragraph and insert:

"SECTION 9. IC 25-34.5-2-6.1 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: **Sec. 6.1. The rules proposed under section 6(4) of this chapter and adopted under section 7(l) of this chapter must include, to the extent reasonably ascertainable, a designation of all tasks. The designation of tasks must:**

- (1) exclude the practices described in section 6.2 of this chapter; and**
- (2) include the tasks described in section 6.3 of this chapter.**

SECTION 10. IC 25-34.5-2-6.2 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: **Sec. 6.2. The following respiratory care practices are not tasks:**

- (1) Administration of aerosol medication.**
- (2) Insertion and maintenance of an artificial airway.**
- (3) Mechanical ventilatory support.**
- (4) Patient assessment.**
- (5) Patient education.**

SECTION 11. IC 25-34.5-2-6.3 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: **Sec. 6.3. (a) The following respiratory care practices are tasks:**

- (1) Cleaning, disinfecting, sterilizing, and assembling equipment used in the practice of respiratory care as delegated by a practitioner or other authorized health care professional.**
- (2) Collecting and reviewing patient data through noninvasive means if the collection and review does not include the individual's interpretation of the clinical significance of the data. Collecting and reviewing patient data includes the following:**
 - (A) Setting up and obtaining an electrocardiogram.**
 - (B) Performing pulse oximetry and reporting to a practitioner or other authorized health care professional in a timely manner.**
- (3) Setting up a nasal cannula for oxygen therapy and reporting to a practitioner or other authorized health care professional in a timely manner.**
- (4) Performing incentive spirometry, excluding a patient's**



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initial treatment and education.

(5) Performing cough and deep breath maneuvers.

(6) Maintaining a patient's natural airway by physically manipulating the jaw and neck.

(b) An individual who is not a licensed, registered, or certified health care professional may perform a task only:

(1) under the proximate supervision of a practitioner or other authorized health care professional; and

(2) if the individual has demonstrated to the facility that employs or contracts with the individual competency to perform the task.

The facility shall document competency in accordance with licensure, certification, and accreditation standards applicable to the facility.

(c) A practitioner may do the following:

(1) Delegate tasks.

(2) Supervise the performance of tasks."

Page 3, line 14, delete "the tasks that do not require the" and insert "tasks ;".

Page 3, delete line 15.

Page 5, between lines 1 and 2, begin a new line block indented and insert:

"(3) The practice of respiratory care."

Page 7, line 2, after "documented" insert "**and that is available upon request**".

Page 7, line 7, delete "direct" and insert "**proximate**".

Page 7, line 15, after "." insert "**The graduation of a student permit holder from a respiratory care program approved by the committee does not cause the student permit to expire under this subdivision.**".

Page 7, line 41, delete "cross trained" and insert "**cross-trained**".

Page 7, line 41, delete "activities" and insert "**practices**".

Page 7, line 42, delete "activities" and insert "**practices**".

Page 8, line 5, delete "An" and insert "**Except as provided in IC 25-34.5-2-6.3(b), an**".

Page 8, line 7, delete "procedure that is included in the practice of".

Page 8, line 8, after "care" insert "**practice**".

Page 8, line 9, delete "procedure" and insert "**practice**".

Page 8, line 20, delete "licensed respiratory care".

Page 8, line 21, after "licensed" insert ", **registered, or certified**".

Page 8, line 21, after "case" delete "practitioner" and insert "**professional**".

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Page 8, line 22, delete "perform" and insert "**practice**".

Page 8, line 23, delete "procedures".

Page 8, line 32, delete "licensed respiratory care".

Page 9, between lines 3 and 4, begin a new paragraph and insert:

"SECTION 27. IC 25-34.5-3-8 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: **Sec. 8. This article does not prohibit an individual who is not a practitioner from performing laboratory tests in a clinical laboratory holding a federal Clinical Laboratory Improvement Act (CLIA) certificate or a CLIA certificate of accreditation if the individual satisfies the specified federal qualification standards.**"

Page 10, between lines 32 and 33, begin a new line block indented and insert:

"(3) The practice of respiratory care."

Page 10, after line 33, begin a new paragraph and insert:

"SECTION 31. [EFFECTIVE UPON PASSAGE] (a) Before July 1, 2001:

(1) the respiratory care committee shall propose rules under IC 4-22-2 to implement IC 25-34.5-2-6.1, as added by this act; and

(2) the medical licensing board shall adopt rules under IC 4-22-2 to implement IC 25-34.5-2-7(1), as amended by this act;

that designate, to the extent reasonably ascertainable, all respiratory care tasks (as defined in IC 25-34.5-1-9, as added by this act).

(b) In proposing rules under subsection (a)(1), the respiratory care committee shall receive and consider information provided by all affected health care providers, including joint consultation with the following:

- (1) The Indiana Hospital and Health Association.**
- (2) The Indiana Society for Respiratory Care.**

(c) In adopting rules under subsection (a)(2), the medical licensing board shall receive and consider information provided by all affected health care providers, including joint consultation with the following:

- (1) The Indiana Hospital and Health Association.**
- (2) The Indiana Society for Respiratory Care.**

(d) This SECTION expires July 1, 2001.

SECTION 32. An emergency is declared for this act."

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Renumber all SECTIONS consecutively.
and when so amended that said bill do pass.

(Reference is to HB 1387 as printed January 28, 2000.)

MILLER, Chairperson

Committee Vote: Yeas 6, Nays 0.

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