Georgia Composite Medical Board

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NOTICE OF INTENT TO AMEND AND ADOPT RULES

TO ALL INTERESTED PARTIES:

Notice is hereby given that pursuant to the authority set forth below, the Georgia Composite Medical Board (hereinafter "Board") proposes amendments to the Georgia Composite Medical Board Rules by amending **Rule Chapter 360-13 "Respiratory Care Professionals."** An exact copy of the proposed rule chapter is attached to this Notice.

This notice, together with an exact copy of the proposed rules and a synopsis of the proposed amendments may be reviewed between 8:00 a.m. and 4:00 p.m., Monday through Friday, except official state holidays, at 2 Peachtree Street, NW., 6th Floor, Atlanta, GA 30303. These documents can also be reviewed online at http://medicalboard.georgia.gov/notice-intent-amendadopt-rules.

A public hearing is scheduled to begin at 8:30 a.m. on October 1, 2020 via TEAMS to provide the public an opportunity to comment upon and provide input into the proposed rules. At the public hearing, any interested person may present data, make a statement or comment, or offer a viewpoint or argument orally or in in writing. Lengthy statements and statements of a considerable technical or economic nature, as well as previously recorded messages, must be submitted for the official record. Oral statements should be concise and will be limited to 5 minutes per person. Additional comments should be presented in writing. To ensure their consideration, submit all written comments by September 24, 2020 to lhughes@dch.ga.gov via mail to the Georgia Composite Medical Board Rules Committee at 2 Peachtree Street, N.W., 6th Floor, Atlanta, Georgia 30303.

The Board voted to adopt this Notice of Intent on August 6, 2020. Upon conclusion of the public hearing on October 1, 2020, the Board will consider whether the formulation and adoption of these proposed rule amendments imposes excessive regulatory costs on any license or entity, and whether any cost to comply with the proposed rule amendments could be reduced by a less expensive alternative that accomplishes the objectives of the statutes which are the basis of the proposed rule. Additionally, the Board will consider whether it is legal or feasible in meeting the objectives of the applicable laws to adopt or implement differing actions for businesses as listed in O.C.G.A. § 50-13-4(3)(A),(B),(C), and (D).

This Notice is adopted and posted in compliance with O.C.G.A. § 50-13-4 of the Georgia Administrative Procedures Act. A synopsis of the proposed rules and an economic impact statement are attached to this Notice. The authority for promulgation of these rules is O.C.G.A. §§43-34-143, 43-34-144, 43-34-146(f), 43-34-147, 43-34-148, 43-34-149, 43-34-150, 43-34-151

Issued this day August 12, 2020.

LaSharn Hughes, MBA

Executive Director

Georgia Composite Medical Board

ECONOMIC IMPACT AND SYNOPSIS FOR

RULE CHAPTER 360-8

ECONOMIC IMPACT:

The attached rules are promulgated under the authority of the Medical Practice Act, Title 43, Chapter 34. The Georgia Composite Medical Board licenses and regulates nine professions. The formulation and adoption of these rules do not impose excessive regulatory cost on any licensee, and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative that fully accomplishes the objectives of Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated. Additionally, it is not legal or feasible to meet the objectives of the Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated to adopt or implement differing actions for businesses listed in O.C.G.A. §50-13-4(a)(3)(A), (B), (C) and (D).

RULE SYNOPSIS:

Chapter 360-13 "Respiratory Care Professionals" (Title of Chapter).

<u>Purpose/Main Feature</u>: The proposal is to remove the words "Technicians" and "Therapists" from the chapter title. Since neither term is found in the relevant parts of Article 6 of the Medical Practice Act ("the Practice Act") addressing respiratory care, the deletions appear to be appropriate.

Rule 360-13-.01 "Requirements for Board Licensure"

<u>Purpose/Main Feature</u>: Defines the requirements to be eligible for certification.

Rule 360-13-.02 "Applications"

<u>Purpose/Main Feature</u>: The proposed amendment defines how long an application is valid from the date of receipt.

Rule 360-13-.03 "Temporary Permits"

Purpose/Main Feature: The proposed amendment eliminates the provision for a temporary license.

Rule 360-13-.04 "Reciprocity"

<u>Purpose/Main Feature:</u> The proposed amendment provides changes to better define the requirements for reciprocity.

Rule 360-13-.05 "Change of Name or Address"

<u>Purpose/Main Feature:</u> The proposed amended provides clearer language on the certification holder.

Rule 360-13-.06 "Duplicate License"

Purpose/Main Feature: The proposed amendment changes certificates to certification.

Rule 360-13-.07"License Renewal"

<u>Purpose/Main Feature</u>: The proposed amendment eliminates the requirement that the respiratory care professional provide evidence that he/she still continues to work under a physician's supervision.

Rule 360-13-.08 "Inactive Status"

<u>Purpose/Main Feature</u>: The proposed amendment defines that an applicant has completed continuing education hours prior to reactivation.

Rule 360-13-.09 "Reinstatement"

<u>Purpose/Main Feature</u>: The proposed amendment deletes the requirement that the reinstatement applicant provide evidence that he/she will work under a physician's supervision.

Rule 360-13-.10 "Continuing Education Requirements"

<u>Purpose/Main Feature</u>: The proposed amendment changes certificates to certification and housekeeping changes removing old dates.

Rule 360-13-.11 "Unlicensed Practice"

Purpose/Main Feature: The proposed amendment eliminates the language regarding temporary permits.

Rule 360-13-.12 "Practice of Respiratory Care without a License Prohibited, Exceptions"

Purpose/Main Feature: The proposed amendment eliminates the language regarding temporary permits.

Rule 360-13-.13 "Composition and Responsibilities of the Respiratory Care Advisory Committee" Purpose/Main Feature: The proposed amendment is to change and modify the requirement that one member of the Committee be a physician who "specializes or is board certified" in pulmonary medicine to requiring that the physician member "specializes or is familiar with" pulmonary medicine.

Rule 360-13-.14 "Notice of Inability to Practice with Reasonable Skill and Safety" Purpose/Main Feature: The proposed amendment changes certificates to certification.

Rule 360-13-.15 "Changes in Medical Directors"

<u>Purpose/Main Feature</u>: The proposed deletion of the requirement that a respiratory care professional affirmatively notify the Board of a change in the medical director/physician under whom the respiratory care professional works.

Rule 360-13-.16 "Consumer Information and Awareness Act. Standards for Respiratory Care Professional"

Purpose/Main Feature: The proposed amendment is to renumber the Rule.

Chapter 360-13 RESPIRATORY CARE PROFESSIONALS, TECHNICIANS, AND THERAPISTS

Rule 360-13-.01 Requirements for Board Certification Certification

- (1) The requirements for Board Certification are as follows: To be eligible for Board Certification Certification, an applicant must must:
 - (a)(1) All applicants must provide Pprovide an affidavit and a secure and verifiable document in accordance with O.C.G.A. 50-36-1(f). An affidavit that the applicant is a United States citizen, a legal permanent resident of the United States, or that he/she is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act. If the applicant is not a U.S. citizen, he/she must submit documentation that will determine his/her qualified alien status. The Board participates in the DHS-USCIS SAVE (Systematic Alien Verification for Entitlements or "SAVE") program for the purpose of verifying citizenship and immigration status information of non-citizens. If the applicant is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, he/she must provide the alien number issued by the Department of Homeland Security or other federal immigration agency;
 - (b)(2) bmust Bbe at least eighteen (18) years of age;
 - (c)(3) hmust Hhave submitted a completed application and the fees as required by the Board;
 - (d)(4) <u>Must submitSsubmit evidence of holding an active Registered Respiratory Therapist (RRT) credential from the National Board for Respiratory Care (NBRC). Or meet the one of the following requirements.</u>
 - (a) Submit evidence of an active Certified Respiratory Therapy Technician (CRTT) credential issued by the NBRC prior to July 1, 1999.
 - Submit evidence of an active Certified Respiratory Therapist (CRT) credential issued by the NBRC prior to March 15, 2020.
 - Effective March 15, 2020, all applicants must submit evidence of receiving a passing score on one of the following examinations given by the National Board of Respiratory Care (NBRC)
 - (a) Certified Respiratory Therapy Technician (CRTT) offered by the (NBRC) prior to July 1, 1999.
 - (b) Entry level Certified Respiratory Therapy (CRT) offered by the NBRC prior to January 1, 2015.
 - (c) Therapist Multiple Choice (TMC) offered by the NBRC prior to March 15, 2020; or
 - (d) Therapist Multiple Choice (TMC) and Clinical Simulation Examination (CSE) offered by the NBRC after March 15, 2020
 - (b) must submit evidence of receiving a passing score on the entry level examination given by the National Board of Respiratory Care:
 - (e) must have three months of experience working under the supervision of a licensed physician; and

- (f) must provide an original letter of recommendation, signed by a physician licensed to practice medicine in Georgia, who serves as a local medical director or advisor under whom the applicant will practice; reference forms shall be valid for sixmonths from the date of signature. If the application is not approved during the sixmonth period, the Board may require a new and more current reference.
 - 1. In order to qualify as a medical director or advisor under whom the applicant will practice, such person must meet the following requirements:
 - (i) shall hold a current Georgia medical license;
 - (ii) must have experience in and knowledge of respiratory care;
 - (iii) designee must be readily available to the applicants in his/her workplace;
- (95) <u>must notNnot be-currently be sanctioned is not otherwise ineligible for licensure</u> certification-under Code Section 43-34-149.

Authority: O.C.G.A. §§ 43-34-143, 43-34-144, 43-34-145, 43-34-148.

Rule 360-13-.02 Applications

- (1) The application form shall be completed according to the instructions provided in the application.
- (2) Applications must be complete, including all required documentation, signatures and seals. Application files are not considered completed until all information, including fees, have been received by the Board.
- (3) Applicants shall inform the Board in writing within ten (10) days of a change of address while an application is pending.
- (4) Application fees are nonrefundable.
- (5) No application will be considered by the Board until the application is complete.
- (56) Incomplete applications that have been on file with the Board for more than twelve (12) months or one (1) yearfrom the original date of application one year shall be deemed invalid. No further action will take place on applications that have been incomplete for more than twelve (12) months or one (1)a year until a new application is received in accordance with the provisions of this chapter with the appropriate application fee.
- (67) Any applicant who has not received from the Board a valid temporary permit or valid certification certificate to practice respiratory care shall not engage in the practice of respiratory care or represent himself or herself as a certified certified respiratory care professional until such time as the Board has approved his or her application for certification temporary permit or certification.

<u>Authority: O.C.G.A. Secs. 43-1-2, 43-1-4, 43-1-7, 43-1-25, 43-34-24, 43-34-143, 43-34-145, 43-34-148, 43-34-150.</u>

Rule 360-13-.03 Temporary Permits

- (1) An applicant who is eligible provided below may submit an application for a temporary permit. A temporary permit may be granted to applicants for a period of twelve months to:
 - (a) an applicant for certification under O.C.G.A. § <u>43-34-148</u> who provides the Board with written evidence, verified by oath, that the applicant was certified, licensed or practicing respiratory care in another state, or
 - (b) an applicant who is a graduate of a respiratory therapy program accredited by the Commission on Accreditation of Allied Health Programs, or the equivalent thereof as accepted by the Board, pending the completion of all other requirements for certification under the Respiratory Care Practices Act.
- (2) Any individual applying for a temporary permit must submit a notarized statement of reference either from a physician in the state where the applicant has been practicing or from the medical director of the academic program from which the applicant has graduated, attesting to the fact that the applicant is qualified to practice respiratory care, or
- (3) must submit a notarized statement of reference from the medical director of the academic program from which the applicant has graduated, or is about to graduate, attesting to the fact that the applicant is qualified to practice respiratory care.
- (4) Applications may be submitted 60 days prior to the applicant's graduation date.
- (5) All persons issued a temporary permit under this chapter shall have until the expiration date of such temporary permit to become fully certified under this chapter.
- (6) Temporary permits issued pursuant to this paragraph may not be renewed.
- (7) The holder of a temporary permit shall cease practicing respiratory care upon expiration of the temporary permit, unless such person has been fully certified by the Board to practice respiratory care.
- (8) To upgrade a temporary permit to a permanent license, please see Rule <u>360-13-01</u> "Requirements for Board Certification."

Authority: O.C.G.A. Secs. 43-34-143, 43-34-147.1, 43-34-150.

Rule 360-13-.034 Reciprocity

- (1) Any person who has been granted-certification, registration, licensure or other authorization to practice respiratory care in another state whose requirements for such to practice are substantially equal to or exceed the requirements for certification in this state may petition the Board for reciprocity in Georgia-this State.
- (2) Verification by oath of certification of certification, registration, licensure or other authorization to practice respiratory care must be submitted directly to the Board from the appropriate state attesting to the fact that the applicant seeking certification

- certification by reciprocity is currently certified, licens<u>certifi</u>ed or otherwise authorized to practice respiratory care in that state.
- (3) Any applicant for <u>certification ertification</u> by reciprocity <u>who has been practicing</u> respiratory care in another state for a period of greater than two (2) years, must submit a notarized statement of reference from a physician, currently licensed in the state where the applicant has been practicing attesting to the fact that the applicant is qualified to practice respiratory care.

 <u>verification of completion of continuing education requirements as provided in Rule -360-13-.1009.</u>
- (4) Reciprocity applicants who have not been practicing respiratory care in another state for a period of 12 monthstwo (2) years or more shall be required to The applicant must and provide verification of completion of continuing education requirements as provided in Rule 360-13-.10-360-13-.09 for each biennial period that the applicant was not practicing certified. However, the maximum number of contact hours required may not exceed 60. to establish to the Board's satisfaction that the applicant maintained current knowledge, skill and proficiency in the practice of respiratory care.

Authority: O.C.G.A. Secs. 43-1-2, 43-1-4, 43-1-7, 43-1-25, 43-34-24, 43-34-143, 43-34-145, 43-34-147.1, 43-34-147.2.

Rule 360-13-.045 Change of Name or Address

- (1) A <u>certification holderdholder individual certificate holder</u>-shall notify the Board in writing within <u>thirty (30)</u> days after the <u>individual's holdere licensure certificate holder</u>'s name is legally changed. At the time of notification, the <u>individual holdere</u> certificate holder shall submit a certified copy of the official document evidencing the name change. If the name change occurred during naturalization, the application must also include the naturalization number, the name and address of the court, the date of naturalization, and the name change. After receipt of the required notification and documentation, the Board will issue a duplicate <u>license certificate</u>-in the new name.
- (2) A <u>certification holder holder e certificate holder</u> shall notify the Board in writing within 30 thirty (30) days after a change in the <u>license e's certificate</u> holder's address of record. Failure to so notify the Board of an address change may be deemed to be noncompliance with O.C.G.A. § 43-34-146 and may be grounds for disciplinary action pursuant to O.C.G.A. § 43-34-149.
- (3) A <u>certificatione certificate</u>-holder who <u>uses utilizes</u>-a post office box as the address of record shall also provide a street address where the Board may contact the <u>certified</u> individual-<u>certificate holder</u>.

Authority: O.C.G.A. Secs. 43-34-3, 43-34-143, 43-34-144, 43-34-146 to 43-34-149.

Rule 360-13-.056 Duplicate Certification Certificates

(1) Duplicate <u>certification certificates</u>—may be issued upon approval by the Board if the original <u>certification certificate</u>—is lost, stolen, or—destroyed, or if the <u>certification dindividual certificate</u>—holder has had a legal change of name.

- (2) To request a duplicate <u>certification-certificate</u>, the <u>certification dindividual certificate</u> holder must submit a notarized application stating the reason the duplicate <u>certification certificate</u> is requested. If the application is based on a name change, the <u>certification individual certificate</u>-holder must provide the documentation required by Rule <u>360-13-.0504</u>.
- (3) All applications must include the duplicate <u>certification</u> certificate—fee. The duplicate <u>certification</u> certificate—fee shall be designated in the fee schedule.

Authority: O.C.G.A. Secs. 43-1-2, 43-1-7, 43-1-25, 43-34-143

Rule 360-13-.067 Certification Renewal and Recertification

- (1) <u>All certification Certificates</u> will expire on the last day of the month in which the applicant's birthday falls.
- (2) Approximately <u>sixty (60)</u> days prior to the expiration date, the Board may, as a courtesy, email a notice for renewal of <u>certification certificate</u> to the <u>certification -d individual's</u> <u>certificate</u>-holder's last email address on file in the Board's records.
- (3) Failure to receive such notification shall not relieve the <u>certification d individual certificate</u> holder of the obligation to renew the <u>certification certificate</u> and pay the required fee prior to the expiration date of the <u>certification certificate</u>. Deposit of the renewal fee by the Board does not indicate acceptance of the renewal application or that any <u>certification licensing</u> requirements have been fulfilled.
- (4) To be eligible for renewal <u>of certification_and recertification</u>, a <u>certification d_individual</u> <u>certificate</u> holder must answer questions on their biennial renewal form, which establish satisfaction of Board approved continuing education requirements, <u>as well as verification of active credentials (RRT, CRT, CRTT) with the National Board for Respiratory Care (NBRC). The Board shall not renew the <u>certification -certificates</u> of applicants who failed to comply with <u>either Board approved continuing education requirements or active credentials</u>.</u>
- (5) To be eligible for renewal and recertification, a certificate holder must also furnish satisfactory evidence that he or she continues to work under the supervision of a physician who meets the requirements of Rule 360-13-.01(d). This evidence must be furnished on a form prescribed by the Board. The Board shall not renew the certificates of applicants who are not working under the supervision of a physician who meets the requirements of Rule 360-13-.01(d).
- (65) Failure to renew a <u>certification</u>—<u>certificate</u> by the designated expiration date shall result in a penalty for late renewal as required by the Board. <u>certifications</u>—<u>Certificates</u>—that are not renewed within <u>ninety (90) days</u> <u>3months</u>—of expiration shall be revoked for failure to renew and may be reinstated only as provided in Rule <u>360-13-.0908</u>.
- (76) A <u>certification dindividual certificate</u> holder with an expired <u>certification certificate</u> shall not engage in the practice of respiratory care or to represent himself or herself as a <u>certified certified</u> respiratory care professional until such time as the Board has approved his or her application for renewal or reinstatement.

- (87) Notwithstanding the provisions of paragraph six (6) of this rule, any service member as defined in O.C.G.A. § 15-12-1 whose certificationlicense to practice medicine expired while on active duty outside the state shall be permitted to practice in accordance with the expired certificationlicense and shall not be charged with a violation relating to such practice on an expired certificationlicense for a period of six (6) months from the date of his or her discharge from active duty or reassignment to a location within the state. Such service member shall be entitled to renew such expired certificationlicense without penalty within six (6) months after the date of his or her discharge from active duty or reassignment to a location within this state. The service member must present to the Board a copy of the official military orders or a written verification signed by the service member's commanding officer to waive any charges.
- (98) All renewal applicants must provide an affidavit and a secure and verifiable document in accordance with O.C.G.A. 50-36-1(f). If the applicant has previously provided a secure and verifiable document and affidavit of United States citizenship, no additional documentation of citizenship is required for renewal. If the applicant for renewal is not a United States citizen, he/she must submit documentation that will determine his/her qualified alien status. The Board participates in the DHS-USCIS SAVE (Systematic Alien Verification for Entitlements or "SAVE") program for purpose of verifying citizenship and immigration status information of non-U.S. citizens. If the applicant for renewal is a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, he/she must provide the alien number issued by the Department of Homeland Security or otheranother federal agency.

<u>Authority: O.C.G.A. Secs. 43-1-19, 43-34-3, 43-34-143 to 43-34-147, 43-34-150, 43-34-151.</u>

Rule 360-13-.078 Inactive Status

- (1) A person who wishes to maintain his or her <u>certification certificate</u> as a Respiratory Care Professional, but who does not intend to practice respiratory care may apply to the Board for inactive status by submitting an application and the fee. An individual with an inactive <u>certification certificate</u> may not practice respiratory care in <u>Georgia-this State</u>.
- (2) In order to reinstate a <u>certification certificate</u>-to practice respiratory care, an applicant must complete an application and pay a reinstatement fee. The applicant must and pprovide verification of completion of continuing education requirements as provided in Rule 360-13-.10-360-13-.09 for each biennial period that the applicant was not <u>certified</u> certified. However, the maximum number of contact hours required may not exceed 60. be able to demonstrate to the satisfaction of the Board that he or she has maintained current knowledge, skill and proficiency in the practice of respiratory care and that he or she is mentally and physically able to practice respiratory care with reasonable skill and safety.
- (3) Reinstatement of the <u>certification certificate</u> is within the discretion of the Board.

Authority: O.C.G.A. Secs. 43-34-143, 43-34-147, 43-34-147.1

Rule 360-13-.089 Reinstatement

- (1) A minimum of two (2) years shall pass from the date of any revocation of a <u>certification</u> certificate—before the Board will consider an application for reinstatement. This requirement shall only apply to those instances in which the <u>certification</u> certificate—in question was revoked for reasons other than failure to renew. For purposes of this rule, a voluntary surrender shall be considered a revocation for reasons other than failure to renew.
- (2) Applicants for reinstatement who have not practiced within two (2) years prior to making application with the board must obtain the following continuing education hours to be eligible for reinstatement:
 - (a) Thirty hours (or 3 CEUs) of approved continuing education credits are needed in which 15 hours or 1.5 CEUs must come from critical care. Critical care topics are generally considered to be topics that include in the title such words or abbreviations as ICU, NICU, PICU, ventilator, modes of ventilation, ventilator weaning, VAP, PEEP, BiPAP(®), CPAP, ARDS, NAVA, Capnography, ALI, mechanically ventilated patients, Mass casualty care, HFOV, or HFV.
- (32) In order to reinstate a <u>certification eertificate</u> to practice respiratory care, an applicant must complete an application, pay a reinstatement fee as shall be designated in the fee schedule, provide satisfactory evidence that the certificate holder will work under the supervision of a physician who meets the requirements of Rule 360-13-.01(d) and provide verification of completion of continuing education requirements as provided in Rule 360-13-.10-360-13-.09 for each biennial period that the applicant was not <u>certified</u> certified. However, the maximum number of contact hours required may not exceed sixty (60). The applicant must be able to demonstrate to the satisfaction of the Board that he or she has maintained current knowledge, skill and proficiency in the practice of respiratory care with reasonable skill and safety.
- (43) Reinstatement of the certification-certificate is within the discretion of the Board.
- (54) The Board may require the passage of an examination. The Board, in its discretion, may impose any remedial requirements deemed necessary.
- (65) The Board may deny reinstatement for failure to demonstrate current knowledge, skill and proficiency in the practice of respiratory care or for being mentally or physically unable to practice respiratory care with reasonable skill and safety or for any grounds set forth in O.C.G.A. § 43-34-149.
- (76) The denial of reinstatement is not a contested case, but the applicant shall be entitled to an appearance before the Board.

Authority: O.C.G.A. Secs. 43-1-19, 43-34-143, 43-34-145, 43-34-147 to 43-34-151.

Rule 360-13-.0910 Continuing Education Requirements

(1) An-Any applicant for certification renewal of a certificate _certification to practice Respiratory Care who has been initially certifilicensed by the Board_ by examination for less than two (2) years shall not be required to complete the continuing education hours in order to renew the certification_certificate for the first time. However, for the next renewal the applicant or certificationlicense holder must obtain thirty (30) hours of continuing education.

- (2) Except as provided in paragraph (1), to be eligible to renew a <u>certification_certificate</u>, each <u>certification holderd individual certificate holder</u> must complete <u>thirty (30)</u> contact hours, or <u>three (3)</u> continuing education units, of approved continuing education during the two (2) years preceding <u>license certification</u> renewal. One (1) continuing education unit shall be equal to <u>ten (10)</u> contact hours of instruction. <u>Certification holderd individuals Certificate holders</u> shall not receive contact hours or continuing education units for teaching continuing education courses. <u>Certification Each L_certificate</u> must be renewed biennially by the last day of the month in which the applicant's birthday falls. and the <u>licensed individual certificate holder must establish satisfaction of at least thirty (30) contact hours of Board approved continuing education requirements to be eligible for renewal.</u>
- (3) Each <u>certification dindividual certificate</u>-holder shall be required to answer questions on their renewal application form that establish compliance with Board approved continuing education requirements. <u>Certificationd individuals Certificate</u>-holders will not be required to send documentation of compliance with continuing education requirements for renewal, unless requested by the Board pursuant to Rule <u>360-13-.1009(84)</u>. False statements regarding satisfaction of continuing education on the renewal form or any other document connected with the practice of respiratory care may subject the <u>certification dindividual certificate</u>-holder to disciplinary action by the Board.
- (4) Each licensed individual certificate holder who must meet the requirements of this chapter must maintain record of attendance and supporting documents for Board approved continuing education for a period of 5 years from the date of attendance. Each certification holderd individual must maintain a record of attendance and supporting documents of approved continuing education requirements as stated in this Rule for a period of five (5) years. At a minimum, the following information must be kept:
 - (a) name of provider;
 - (b) name of program and sponsoring accreditation;
 - (c) hours of continuing education units completed; and
 - (d) date of completion.
- (5) The Board will audit a fixed percentage of randomly selected renewal applications to monitor compliance with the continuing education requirements. Any <u>certificationd</u> <u>individual certificate</u> holder so audited shall be required to furnish documentation of compliance including name of provider, name of program <u>and accreditation</u>, hours/continuing education units completed and date of completion. Any <u>certification</u> <u>dindividual certificate</u> holder so audited that has been found to be out of compliance with the Board's continuing education requirements may be subject to disciplinary action.
- (6) If the <u>certification dindividual certificate</u> holder has not complied with the continuing education requirement by the expiration of the <u>certification-certificate</u>, his/her <u>certification-certificate</u> shall not be <u>renewed_renewed</u>, and the-<u>certification dindividual</u> <u>certificate</u> holder shall not engage in the practice of respiratory care. A <u>certification dindividual certificate</u> holder may late renew during the <u>ninety (90) daysthree (3) months</u> following the expiration date of his or her <u>certification certificate</u> by presenting satisfactory evidence to the Board of completion of the contact hours or continuing education units of Board approved continuing education required by paragraph <u>two (2)</u> of this Rule and the late renewal fee. <u>Certifications Certificates</u>-not renewed within <u>ninety (90) days three (3) months</u>-following the expiration date of the certification <u>certificate</u>

- shall be revoked for failure to renew. In order to obtain a valid <u>certification</u> <u>certificate</u> after revocation for failure to renew, an applicant must apply for reinstatement in accordance with Rule 360-13-.09360-13-.08.
- (7) Continuing education hours that are used to satisfy a deficiency may not be used for purposes of renewal of the <u>certification dindividual's certificate holder's certificate holder's certificate holder's certificate for the next biennium.</u>
- (8) Any <u>certification individual certificate</u> holder seeking renewal of a <u>certification certificate</u> without having fully complied with the Board's continuing education requirements who wishes to seek a waiver or variance of this rule shall file with the Board.
 - (a) a renewal application and fee and
 - (b) a statement that complies with the provisions of O.C.G.A. § 50-13-9.1 setting forth the specific facts of substantial hardship which would justify a variance or waiver, including the alternative standards which the person seeking a waiver or variance agrees to meet and a showing that such alternative standards will afford adequate protection for the public health, safety and welfare; and the reason why the variance would serve the purpose of the underlying statute.
- (9) The following courses are approved by the Board as meeting the continuing education requirements:
 - (a) Courses approved by the American Association for Respiratory Care or its successor organization.
 - (b) Courses approved by the Georgia Society for Respiratory Care or its successor organization. American Academy of Pediatrics
 - (c) Courses approved by the American Thoracic Society.
 - (d) Courses approved by the American College of Chest Physicians.
 - (e) Effective July 1, 2006, eCourses approved by the American Association of Critical-Care Nurses.
 - (f) Effective July 1, 2006, tThe following programs of the American Heart Association and the American Academy of Pediatrics; however, these programs shall constitute no more than twenty-five25 percent (25%) of the total acceptable continuing education units required.
 - Basic Life Support
 - 2. Basic Life Support Recertification
 - 3. Advanced Cardiac Life Support
 - 4. Advanced Cardiac Life Support Recertification
 - 5. Basic Life Support Instructor
 - 6. Basic Life Support Instructor Trainer

- 7. Basic Life Support Instructor Trainer Recertification
- 8. Advanced Cardiac Life Support Instructor
- 9. Advanced Cardiac Life Support Instructor Update (Certification)
- 10. Basic Trauma Life Support
- 11. Basic Trauma Life Support Recertification
- 12. Pediatric Basic Life Support
- 13. Pediatric Advanced Life Support
- 14. Pediatric Advanced Life Support Recertification
- 15. Neonatal Resuscitation Program
- 16. Neonatal Recertification.
- (g) Effective July 1, 2006, Ceourses approved by the American Society for Anesthesia
- (h) National Board for Respiratory Care Self-Assessment Exams
- (i) National Board for Respiratory Care Credential Exams
- (j) American Medical Association Category I programs
- (k) Effective July 1, 2006, cCourses approved by the College of American Pathologists provided the courses are related to pulmonary pathology or acid base balance and constitute no more than twenty-five percent (25%) of the acceptable continuing education units required.
- (I) Effective July 1, 2006, Respiratory specific courses approved by the Georgia Nursing Association; however, courses approved by the Georgia Nursing Association shall constitute no more than 25%-twenty-five percent (25%) of the total acceptable continuing education units required.

Authority: O.C.G.A. Secs. 43-34-3, 43-34-143, 43-34-145, 43-34-147, 43-34-150

Rule 360-13-.101 Unlicensed Practice

Any person practicing respiratory care, or representing himself or herself as a <u>certified certified</u> respiratory care professional, who does not possess a valid <u>certification certificate or temporary permit-from</u> the Board, and who is not exempt under O.C.G.A. 43-34-151(b), shall be guilty of a misdemeanor and subject to other injunctive relief by the Board pursuant to O.C.G.A. §§ <u>43-1-20.1</u> and <u>43-34-39</u>.

Rule 360-13-.112 Practice of Respiratory Care Without a License Certification Prohibited; Exceptions

- (1) Unless <u>certified</u> pursuant to O.C.G.A. Title 43, Chapter 34, Article 6, no person shall:
 - (a) Practice respiratory care; or
 - (b) Represent himself or herself to be a respiratory care professional who is <u>certified</u> pursuant to O.C.G.A. § <u>43-34-151</u>.
- (2) The prohibition in subsection one (1) does not apply to:
 - (a) The delivery of respiratory care by health care personnel who have been formally trained in these modalities and who are duly licensed to provide that care under any other provision of Title 43;
 - (b) The practice of respiratory care which is an integral part of the program of study by students enrolled in a respiratory care education program recognized by the Committee Commission on Accreditation for Respiratory Care (COARC) and the American Medical Association Committee on Allied Health Education and Accreditation (CAHEA) Commission on Accreditation of Allied Health Education Programs (CAAHEP) or the equivalent thereof as accepted by the Board. Students enrolled in respiratory therapy education programs shall be identified as "Student-RCP" and shall only provide respiratory care under direct clinical supervision;
 - (c) Self-care by a patient or gratuitous care by a friend or family member who does not represent or hold himself or herself out to be a respiratory care professional;
 - (d) Respiratory care services rendered in the course of an emergency disaster;
 - (e) Persons in the military services or working in Federal facilities when functioning in the course of their assigned duties;
 - (f) The performance of respiratory care diagnostic testing by individuals who are certified or registered as pulmonary function technologists by the National Board for Respiratory Care, or equivalent certifying agency, as recognized by the Board;
 - (g) The delivery, assembly, setup, testing, and demonstration of oxygen and aerosol equipment upon the order of a physician licensed under Art. 2 of Chapter 34, Title 43. Provided, however, that no person providing such services shall be authorized to assess patients, develop care plans, instruct patients in taking treatment, or discuss the hazards, administration, or side effects of medications with patients.
 - (h) Persons who perform limited respiratory care procedures under the supervision of a <u>certified</u>-respiratory care professional in a hospital or nursing home when the Board has defined the competencies required to perform such limited respiratory care procedures.

- 1. The Board has defined the following class of persons as having the competencies required to perform such limited respiratory care procedures:
- (i) Students of an accredited Respiratory Care Program who perform limited respiratory care procedures under the supervision of a <u>licensed</u> certified respiratory care professional in a hospital or nursing home, if the student's competency has been validated through an accredited education program and by the hospital or nursing home for whom he or she is employed.
 - (i) (I) Students of an accredited Respiratory Care Program who perform limited respiratory care procedures under the supervision of a licensed respiratory care professional in a hospital or nursing home, if the student's competency has been validated through an accredited education program and by the hospital or nursing home for whom he or she is employed. Upon completion of the educational program, the student must then apply for a temporary permit as specified in Chapter 34. In addition, pending the granting or denial of a certificate or permit, graduates of an accredited respiratory care program who have applied for certification or a permit shall only perform limited respiratory care procedures where their competency has been validated in writing to the Board through the accredited program and by the hospital or nursing home for whom they are employed.
 - (III) Any student who performs limited respiratory care procedures without complying with the requirements listed in the above paragraphs of Rule 360-13-.102(2)(b) is engaging in the practice of respiratory care without certification, which is prohibited by O.C.G.A. § 43-34-151. Any certified respiratory care professional who supervises a student prior to compliance with the above listed paragraphs of Rule 360-13-.10 Students of an accredited Respiratory Care Program who perform limited respiratory care procedures under the supervision of a licensed respiratory care professional in a hospital or nursing home, if the student's competency has been validated through an accredited education program and by the hospital or nursing home for whom he or she is employed.2(b) is aiding and assisting an uncertified person engage in the practice of respiratory care and may be subject to disciplinary action.

Authority: O.C.G.A. Secs. 43-34-143, 43-34-150, 43-34-151

Rule 360-13-.123 Composition and Responsibilities of the Respiratory Care Advisory Committee

- (1) The Respiratory Care Advisory Committee shall be comprised as follows:
 - (a) At least four (4) individuals who are <u>certified</u> in <u>Georgia this State</u> to engage in the practice of respiratory care and such other individuals as the Board, in its discretion, may determine.

- 1. All appointees to the Advisory Committee shall have on file with the Executive Director of the Board, or his/her designee, a resume and three letters of recommendation, (one of which may be from a physician familiar with the appointee's practice of respiratory care).
- 2. In order to preserve continuity on the Advisory Committee, two (2) appointees shall serve a four-year term and two (2) appointees shall serve a two-year term which will be considered a partial term. At the time of the appointment, each appointee will be notified in writing by the Executive Director of the Board as to the beginning and ending dates of their respective appointment terms. Each may reapply to the full Board to serve an additional term, butterm but may not serve more than two (2) consecutive two-year terms.
- 3. In the event an Advisory Committee member is replaced during a term, the replacement member will serve the remaining time of that term as a partial term. An Advisory Committee member who serves a partial term will, after the completion of the partial term, be eligible to serve two (2) consecutive two-year terms.
- 4. Appointees shall serve without compensation from the State of Georgia for their time and expenses.
- (b) One individual who is a physician licensed to practice medicine in the State of Georgia who:
 - 1. Specializes or <u>is board certified inis board certified within</u> pulmonary medicine;
 - 2. Shall serve a two (2) year term and may be reappointed for an additional two yeartwo-year term by a majority vote of the Board, but Board but may not serve more than two (2) consecutive terms.
- (2) The Advisory Committee shall advise the Board on matters pertaining to the appointment of the Advisory Committee members and on all matters within the purview of the Respiratory Care Practices Act. The Board, in consultation with the Advisory Committee, shall:
 - (a) Determine the qualifications and fitness of applicants for <u>certification</u>, renewal of the <u>certification</u> and reciprocal <u>certification</u> renewal of the <u>certification</u> and reciprocal <u>certification</u> and reciprocal <u>certification</u>.
 - (b) Adopt and revise rules consistent with the laws of the State of Georgia that are necessary to conduct its duties and administer the Act;
 - (c) Examine, approve, issue, deny, revoke, suspend and renew the <u>certificationlicense</u> of applicants and certificate holders-and conduct hearings in connection with all duties to be performed pursuant to the Act.
- (3) Advisory Committee members, who are not members of the Board, must be available to meet on as an needed basis and may not miss more than three (3) consecutive meetings

of the Advisory Committee, or four (4) meetings in a calendar year, without an excused absence from either the Executive Director of the Board or the Board President.

- (a) The Advisory committee may recommend to the Board the removal of a member for violation of the attendance rule. Such a recommendation shall be by majority vote of the Advisory Committee.
- (b) Upon receipt of a recommendation for removal, the Board may remove a member of the Advisory Committee by a majority vote.
- (4) Advisory Committee vacancies may be filled by the Board upon recommendation from the Advisory Committee. All applicants must meet any deadline set by the Board and shall have on file with the Executive Director of the Board, or with his/her designee, a resume and three (3) letters of recommendation, (one of which may be from a physician familiar with the applicant's practice of respiratory care).

Authority: O.C.G.A. Secs. 43-34-143, 43-34-149

Rule 360-13-.134 Notice of Inability to Practice with Reasonable Skill and Safety

Any <u>certified individual certificate or temporary permit holder</u> shall notify the Board within 30 days of becoming unable to practice respiratory care with reasonable skill and safety by reason of illness or the use of alcohol, drugs, narcotics, chemicals or any other type of material.

Authority: O.C.G.A. Secs. 43-1-19, 43-1-25, 43-34-143, 43-34-148.

Rule 360-13-.15 Changes in Medical Directors

- (1) In order to maintain certification, a respiratory care professional must continue to work under the supervision or direction of a person holding a Georgia medical license who has experience in and knowledge of respiratory care and who is readily available to the certificate holder in his/her workplace to provide personal supervision.
- (2) Immediately upon termination of the medical director/respiratory care professional relationship, the Respiratory Care professional is required to give notice and the date of termination to the Board by certified mail. Failure to notify the Board immediately may result in disciplinary action against the respiratory care professional. The respiratory care professional shall not engage in the practice of respiratory care unless he/she is working under the supervision or direction of person holding a Georgia medical license who meets the requirements of paragraph (1).
- (3) The respiratory care professional shall immediately notify the Board by certified mail, on a form approved by the Board of a change in the medical directors.
- (4) Failure to comply with the requirements of this rule may result in disciplinary action against the respiratory care professional's certificate.

Authority: O.C.G.A. Secs. 43-1-19, 43-34-143, 43-34-145, 43-34-148.

<u>Rule 360-13-.145 6 Consumer Information and Awareness Act.</u> <u>Standards for Respiratory Care Professional</u>

All respiratory care professionals <u>certified eertified</u> to practice in the State of Georgia shall comply with the Consumer Information and Awareness Act, O.C.G.A. Section <u>43-1-33</u>, in all advertisements and interactions with patients. For purposes of this rule and the Consumer Information and Awareness Act, the approved identifier shall be "Respiratory Care Professional" or "RCP."

Authority: O.C.G.A. § 43-1-33.