



104TH GENERAL ASSEMBLY

State of Illinois

2025 and 2026

HB3681

Introduced 2/18/2025, by Rep. Bob Morgan

SYNOPSIS AS INTRODUCED:

See Index

Amends the Regulatory Sunset Act. Changes the repeal date of the Respiratory Care Practice Act from January 1, 2026 to January 1, 2031. Amends the Respiratory Care Practice Act. Adds provisions concerning address of record and email address of record. Removes the requirement that the Department of Financial and Professional Regulation maintain a roster of the names and addresses of all licenses and all persons whose licenses have been suspended, revoked, or denied renewal for cause within the previous calendar year. Changes the membership of the Respiratory Care Board to 5 persons of which 3 members shall be currently engaged in the practice of respiratory care and one member who is a hospital administrator (rather than 7 persons of which 4 members shall be currently engaged in the practice of respiratory care and two members who are hospital administrators). Provides that a majority of the Board members (rather than 4) shall constitute a quorum. Provides that an applicant shall include the applicant's Social Security number or Individual Taxpayer Identification Number in an application to the Department (rather than only the applicant's Social Security Number). Provides that the Department shall provide a certified shorthand reporter to take down the testimony and preserve the record of all proceedings at a formal hearing (rather than the Department preserving the record). Provides that provisions concerning the repeal date of the Act are effective immediately. Makes other changes.

LRB104 09452 AAS 19512 b

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Regulatory Sunset Act is amended by
5 changing Section 4.36 and by adding Section 4.41 as follows:

6 (5 ILCS 80/4.36)

7 Sec. 4.36. Acts repealed on January 1, 2026. The following
8 Acts are repealed on January 1, 2026:

9 The Barber, Cosmetology, Esthetics, Hair Braiding, and
10 Nail Technology Act of 1985.

11 The Collection Agency Act.

12 The Hearing Instrument Consumer Protection Act.

13 The Illinois Athletic Trainers Practice Act.

14 The Illinois Dental Practice Act.

15 The Illinois Roofing Industry Licensing Act.

16 The Illinois Physical Therapy Act.

17 The Professional Geologist Licensing Act.

18 ~~The Respiratory Care Practice Act.~~

19 (Source: P.A. 99-26, eff. 7-10-15; 99-204, eff. 7-30-15;
20 99-227, eff. 8-3-15; 99-229, eff. 8-3-15; 99-230, eff. 8-3-15;
21 99-427, eff. 8-21-15; 99-469, eff. 8-26-15; 99-492, eff.
22 12-31-15; 99-642, eff. 7-28-16.)

1 (5 ILCS 80/4.41 new)

2 Sec. 4.41. Act repealed on January 1, 2031. The following
3 Act is repealed on January 1, 2031:

4 The Respiratory Care Practice Act.

5 Section 15. The Respiratory Care Practice Act is amended
6 by changing Sections 10, 15, 20, 22, 30, 35, 42, 50, 60, 65,
7 70, 80, 85, 90, 95, 100, 105, 110, 135, 155, 160, 170, and 180
8 and by adding Section 12 as follows:

9 (225 ILCS 106/10)

10 (Section scheduled to be repealed on January 1, 2026)

11 Sec. 10. Definitions. In this Act:

12 "Address of record" means the designated address recorded
13 by the Department in the applicant's or licensee's application
14 file or license file as maintained by the Department's
15 licensure maintenance unit. ~~It is the duty of the applicant or~~
16 ~~licensee to inform the Department of any change of address and~~
17 ~~those changes must be made either through the Department's~~
18 ~~website or by contacting the Department.~~

19 "Advanced practice registered nurse" means an advanced
20 practice registered nurse licensed under the Nurse Practice
21 Act.

22 "Board" means the Respiratory Care Board appointed by the
23 Secretary.

24 "Basic respiratory care activities" means and includes all

1 of the following activities:

2 (1) Cleaning, disinfecting, and sterilizing equipment
3 used in the practice of respiratory care as delegated by a
4 licensed health care professional or other authorized
5 licensed personnel.

6 (2) Assembling equipment used in the practice of
7 respiratory care as delegated by a licensed health care
8 professional or other authorized licensed personnel.

9 (3) Collecting and reviewing patient data through
10 non-invasive means, provided that the collection and
11 review does not include the individual's interpretation of
12 the clinical significance of the data. Collecting and
13 reviewing patient data includes the performance of pulse
14 oximetry and non-invasive monitoring procedures in order
15 to obtain vital signs and notification to licensed health
16 care professionals and other authorized licensed personnel
17 in a timely manner.

18 (4) Maintaining a nasal cannula or face mask for
19 oxygen therapy in the proper position on the patient's
20 face.

21 (5) Assembling a nasal cannula or face mask for oxygen
22 therapy at patient bedside in preparation for use.

23 (6) Maintaining a patient's natural airway by
24 physically manipulating the jaw and neck, suctioning the
25 oral cavity, or suctioning the mouth or nose with a bulb
26 syringe.

1 (7) Performing assisted ventilation during emergency
2 resuscitation using a manual resuscitator.

3 (8) Using a manual resuscitator at the direction of a
4 licensed health care professional or other authorized
5 licensed personnel who is present and performing routine
6 airway suctioning. These activities do not include care of
7 a patient's artificial airway or the adjustment of
8 mechanical ventilator settings while a patient is
9 connected to the ventilator.

10 "Basic respiratory care activities" does not mean
11 activities that involve any of the following:

12 (1) Specialized knowledge that results from a course
13 of education or training in respiratory care.

14 (2) An unreasonable risk of a negative outcome for the
15 patient.

16 (3) The assessment or making of a decision concerning
17 patient care.

18 (4) The administration of aerosol medication or
19 medical gas.

20 (5) The insertion and maintenance of an artificial
21 airway.

22 (6) Mechanical ventilatory support.

23 (7) Patient assessment.

24 (8) Patient education.

25 (9) The transferring of oxygen devices, for purposes
26 of patient transport, with a liter flow greater than 6

1 liters per minute, and the transferring of oxygen devices
2 at any liter flow being delivered to patients less than 12
3 years of age.

4 "Department" means the Department of Financial and
5 Professional Regulation.

6 "Email address of record" means the designated email
7 address recorded by the Department in the applicant's or
8 licensee's application file or license file as maintained by
9 the Department's licensure maintenance unit.

10 "Licensed" means that which is required to hold oneself
11 out as a respiratory care practitioner as defined in this Act.

12 "Licensed health care professional" means a physician
13 licensed to practice medicine in all its branches, a licensed
14 advanced practice registered nurse, or a licensed physician
15 assistant.

16 "Order" means a written, oral, or telecommunicated
17 authorization for respiratory care services for a patient by
18 (i) a licensed health care professional who maintains medical
19 supervision of the patient and makes a diagnosis or verifies
20 that the patient's condition is such that it may be treated by
21 a respiratory care practitioner or (ii) a certified registered
22 nurse anesthetist in a licensed hospital or ambulatory
23 surgical treatment center.

24 "Other authorized licensed personnel" means a licensed
25 respiratory care practitioner, a licensed registered nurse, or
26 a licensed practical nurse whose scope of practice authorizes

1 the professional to supervise an individual who is not
2 licensed, certified, or registered as a health professional.

3 "Proximate supervision" means a situation in which an
4 individual is responsible for directing the actions of another
5 individual in the facility and is physically close enough to
6 be readily available, if needed, by the supervised individual.

7 "Respiratory care" and "cardiorespiratory care" mean
8 preventative services, evaluation and assessment services,
9 therapeutic services, cardiopulmonary disease management, and
10 rehabilitative services under the order of a licensed health
11 care professional for an individual with a disorder, disease,
12 or abnormality of the cardiopulmonary system. These terms
13 include, but are not limited to, measuring, observing,
14 assessing, and monitoring signs and symptoms, reactions,
15 general behavior, and general physical response of individuals
16 to respiratory care services, including the determination of
17 whether those signs, symptoms, reactions, behaviors, or
18 general physical responses exhibit abnormal characteristics;
19 the administration of pharmacological and therapeutic agents
20 and procedures related to respiratory care services; the
21 administration of vaccinations for the prevention of
22 respiratory illness upon completion of training set forth by
23 rule, limited to patients 18 years of age and older pursuant to
24 a valid prescription or standing order by a physician licensed
25 to practice medicine in all its branches who, in the course of
26 professional practice, administers vaccines to patients; the

1 collection of blood specimens and other bodily fluids and
2 tissues for, and the performance of, cardiopulmonary
3 diagnostic testing procedures, including, but not limited to,
4 blood gas analysis; development, implementation, and
5 modification of respiratory care treatment plans and provision
6 of education and skill training to patients and caregivers
7 based on assessed abnormalities of the cardiopulmonary system,
8 respiratory care guidelines, referrals, and orders of a
9 licensed health care professional; application, operation, and
10 management of mechanical ventilatory support and other means
11 of life support, including, but not limited to, hemodynamic
12 cardiovascular support; and the initiation of emergency
13 procedures under the rules promulgated by the Department. The
14 Department shall adopt any rules necessary to implement this
15 Section, including training and education requirements
16 regarding vaccinations, which includes, but is not limited to,
17 how to address contraindications and adverse reactions,
18 appropriate vaccine storage, proper administration, the
19 provision of written notice to the patient's physician, and
20 record retention requirements. A respiratory care practitioner
21 shall refer to a licensed health care professional ~~physician~~
22 ~~licensed to practice medicine in all its branches~~ any patient
23 whose condition, at the time of evaluation or treatment, is
24 determined to be beyond the scope of practice of the
25 respiratory care practitioner.

26 "Respiratory care education program" means a course of

1 academic study leading to eligibility for registry or
2 certification in respiratory care. The training is to be
3 approved by an accrediting agency recognized by the Board and
4 shall include an evaluation of competence through a
5 standardized testing mechanism that is determined by the Board
6 to be both valid and reliable.

7 "Respiratory care practitioner" means a person who is
8 licensed by the Department of Professional Regulation and
9 meets all of the following criteria:

10 (1) The person is engaged in the practice of
11 cardiorespiratory care and has the knowledge and skill
12 necessary to administer respiratory care.

13 (2) The person is capable of serving as a resource to
14 the licensed health care professional in relation to the
15 technical aspects of cardiorespiratory care and the safe
16 and effective methods for administering cardiorespiratory
17 care modalities.

18 (3) The person is able to function in situations of
19 unsupervised patient contact requiring great individual
20 judgment.

21 "Secretary" means the Secretary of Financial and
22 Professional Regulation.

23 (Source: P.A. 99-173, eff. 7-29-15; 99-230, eff. 8-3-15;
24 99-642, eff. 7-28-16; 100-513, eff. 1-1-18.)

25 (225 ILCS 106/12 new)

1 Sec. 12. Address of record; email address of record. All
2 applicants and licensees shall:

3 (1) provide a valid address and email address to the
4 Department, which shall serve as the address of record and
5 email address of record, respectively, at the time of
6 application for licensure or renewal of a license; and

7 (2) inform the Department of any change of address of
8 record or email address of record within 14 days after the
9 change either through the Department's website or by
10 contacting the Department's licensure maintenance unit.

11 (225 ILCS 106/15)

12 (Section scheduled to be repealed on January 1, 2026)

13 Sec. 15. Exemptions.

14 (a) This Act does not prohibit a person legally regulated
15 in this State by any other Act from engaging in any practice
16 for which that person ~~he or she~~ is authorized.

17 (b) Nothing in this Act shall prohibit the practice of
18 respiratory care by a person who is employed by the United
19 States government or any bureau, division, or agency thereof
20 while in the discharge of the employee's official duties.

21 (c) Nothing in this Act shall be construed to limit the
22 activities and services of a person enrolled in an approved
23 course of study leading to a degree or certificate of registry
24 or certification eligibility in respiratory care if these
25 activities and services constitute a part of a supervised

1 course of study and if the person is designated by a title
2 which clearly indicates the person's ~~his or her~~ status as a
3 student or trainee. Status as a student or trainee shall not
4 exceed 3 years from the date of enrollment in an approved
5 course for an approved associate's degree program or 5 years
6 for an approved bachelor's degree program.

7 (d) Nothing in this Act shall prohibit a person from
8 treating ailments by spiritual means through prayer alone in
9 accordance with the tenets and practices of a recognized
10 church or religious denomination.

11 (e) Nothing in this Act shall be construed to prevent a
12 person who is a registered nurse, an advanced practice
13 registered nurse, a licensed practical nurse, a physician
14 assistant, or a physician licensed to practice medicine in all
15 its branches from providing respiratory care.

16 (f) Nothing in this Act shall limit a person who is
17 credentialed by the National Society for Cardiopulmonary
18 Technology or the National Board for Respiratory Care from
19 performing pulmonary function tests and respiratory care
20 procedures related to the pulmonary function test. Individuals
21 who do not possess a license to practice respiratory care or a
22 license in another health care field may perform basic
23 screening spirometry limited to peak flow, forced vital
24 capacity, slow vital capacity, and maximum voluntary
25 ventilation if they possess spirometry certification from the
26 National Institute for Occupational Safety and Health, an

1 Office Spirometry Certificate from the American Association
2 for Respiratory Care, or other similarly accepted
3 certification training.

4 (g) Nothing in this Act shall prohibit the collection and
5 analysis of blood by clinical laboratory personnel meeting the
6 personnel standards of the Illinois Clinical Laboratory Act.

7 (h) Nothing in this Act shall prohibit a polysomnographic
8 technologist, technician, or trainee, as defined in the job
9 descriptions jointly accepted by the American Academy of Sleep
10 Medicine, the Association of Polysomnographic Technologists,
11 the Board of Registered Polysomnographic Technologists, and
12 the American Society of Electroneurodiagnostic Technologists,
13 from performing activities within the scope of practice of
14 polysomnographic technology while under the direction of a
15 physician licensed in this State.

16 (i) Nothing in this Act shall prohibit a family member
17 from providing respiratory care services to an ill person.

18 (j) Nothing in this Act shall be construed to limit an
19 unlicensed practitioner in a licensed hospital who is working
20 under the proximate supervision of a licensed health care
21 professional or other authorized licensed personnel and
22 providing direct patient care services from performing basic
23 respiratory care activities if the unlicensed practitioner (i)
24 has been trained to perform the basic respiratory care
25 activities at the facility that employs or contracts with the
26 individual and (ii) at a minimum, has annually received an

1 evaluation of the unlicensed practitioner's performance of
2 basic respiratory care activities documented by the facility.

3 (k) Nothing in this Act shall be construed to prohibit a
4 person enrolled in a respiratory care education program or an
5 approved course of study leading to a degree or certification
6 in a health care-related discipline that provides respiratory
7 care activities within the person's ~~his or her~~ scope of
8 practice and employed in a licensed hospital in order to
9 provide direct patient care services under the proximate
10 supervision ~~direction~~ of other authorized licensed personnel
11 from providing respiratory care activities.

12 (l) Nothing in this Act prohibits a person licensed as a
13 respiratory care practitioner in another jurisdiction from
14 providing respiratory care: (i) in a declared emergency in
15 this State; (ii) as a member of an organ procurement team; or
16 (iii) as part of a medical transport team that is transporting
17 a patient into or out of this State.

18 (Source: P.A. 99-230, eff. 8-3-15; 100-513, eff. 1-1-18.)

19 (225 ILCS 106/20)

20 (Section scheduled to be repealed on January 1, 2026)

21 Sec. 20. Restrictions and limitations.

22 (a) No person shall, without a valid license as a
23 respiratory care practitioner (i) hold oneself ~~himself or~~
24 ~~herself~~ out to the public as a respiratory care practitioner;
25 (ii) use the title "respiratory care practitioner"; or (iii)

1 perform or offer to perform the duties of a respiratory care
2 practitioner, except as provided in Section 15 of this Act.

3 (b) Nothing in the Act shall be construed to permit a
4 person licensed as a respiratory care practitioner to engage
5 in any manner in the practice of medicine in all its branches
6 as defined by State law.

7 (Source: P.A. 99-230, eff. 8-3-15.)

8 (225 ILCS 106/22)

9 (Section scheduled to be repealed on January 1, 2026)

10 Sec. 22. Durable medical equipment use and training.

11 (a) Notwithstanding any other provision of this Act,
12 unlicensed or non-credentialed individuals who deliver
13 prescribed respiratory care equipment, including, but not
14 limited to, oxygen, oxygen concentrators, pulmonary hygiene
15 devices, aerosol compressors and generators, suction machines,
16 and positive airway pressure devices, may deliver, set up,
17 calibrate, and demonstrate the mechanical operation of a
18 specific piece of equipment to the patient, family, and
19 caregivers, with the exception of mechanical ventilators,
20 which only a licensed respiratory care practitioner or other
21 authorized licensed personnel operating within the licensed
22 respiratory care practitioner's or other authorized licensed
23 personnel's ~~the scope of his or her scope~~ of practice may
24 deliver and set up. Demonstration of the mechanical operation
25 of a specific piece of equipment includes demonstration of the

1 on-off switches, emergency buttons, and alarm silence and
2 reset buttons, as appropriate. In order for unlicensed or
3 non-credentialed personnel to deliver, set up, calibrate, and
4 demonstrate a specific piece of equipment as allowed in this
5 subsection (a), the employer must document that the employee
6 has both received training and demonstrated competency using
7 the specific piece of equipment under the supervision of a
8 respiratory care practitioner licensed by this State or some
9 other licensed practitioner operating within the licensed
10 practitioner's ~~his or her~~ scope of practice.

11 Equipment demonstration is not to be interpreted as
12 teaching, administration, or performance of respiratory care.
13 Unlicensed or non-credentialed individuals may not attach the
14 equipment to the patient or instruct the patient, family, or
15 caregiver on the use of the equipment beyond the mechanical
16 functions of the device.

17 (b) Patients, family, and caregivers must be taught to use
18 the equipment for the intended clinical application by a
19 licensed respiratory care practitioner or other licensed
20 health care professional operating within the licensed
21 practitioner's ~~his or her~~ scope of practice. This instruction
22 may occur through follow-up after delivery, with an identical
23 model in the health care facility prior to discharge or with an
24 identical model at the medical supply office. Instructions to
25 the patient regarding the clinical use of equipment, patient
26 monitoring, patient assessment, or any other procedure used

1 with the intent of evaluating the effectiveness of the
2 treatment must be performed by a respiratory care practitioner
3 licensed by this State or any other licensed practitioner
4 operating within the licensed practitioner's ~~his or her~~ scope
5 of practice.

6 (Source: P.A. 99-230, eff. 8-3-15.)

7 (225 ILCS 106/30)

8 (Section scheduled to be repealed on January 1, 2026)

9 Sec. 30. Powers and duties of the Department. Subject to
10 the provision of this Act, the Department may:

11 (a) Authorize examinations to ascertain the
12 qualifications and fitness of an applicant for licensure
13 as a respiratory care practitioner.

14 (b) Pass upon the qualifications of an applicant for
15 licensure by endorsement.

16 (c) Conduct hearings on proceedings to refuse to
17 issue, renew, or revoke a license or to suspend, place on
18 probation, or reprimand a license issued or applied for
19 under this Act.

20 (d) Formulate rules required for the administration of
21 this Act. Notice of proposed rulemaking shall be
22 transmitted to the Board, and the Department shall review
23 the Board's response and any recommendations made in the
24 response.

25 (e) Solicit the advice and expert knowledge of the

1 Board on any matter relating to the administration and
2 enforcement of this Act.

3 (f) (Blank).

4 (g) (Blank). ~~Maintain a roster of the names and~~
5 ~~addresses of all licenses and all persons whose licenses~~
6 ~~have been suspended, revoked, or denied renewal for cause~~
7 ~~within the previous calendar year. The roster shall be~~
8 ~~available upon written request and payment of the required~~
9 ~~fee.~~

10 (Source: P.A. 99-230, eff. 8-3-15.)

11 (225 ILCS 106/35)

12 (Section scheduled to be repealed on January 1, 2026)

13 Sec. 35. Respiratory Care Board.

14 (a) The Secretary shall appoint a Respiratory Care Board
15 which shall serve in an advisory capacity to the Secretary.
16 The Board shall consist of 5 ~~7~~ persons of which 3 ~~4~~ members
17 shall be currently engaged in the practice of respiratory care
18 with a minimum of 3 years practice in the State of Illinois,
19 one member shall be a qualified medical director, and one
20 member ~~2 members~~ shall be a hospital administrator
21 ~~administrators.~~

22 (b) Members shall be appointed to a 4-year term. A member
23 whose term has expired shall continue to serve until his or her
24 successor is appointed and qualified. No member shall be
25 reappointed to the Board for a term that would cause his or her

1 continuous service on the Board to be longer than 10 years.
2 Appointments to fill vacancies shall be made in the same
3 manner as original appointments for the unexpired portion of
4 the vacated term.

5 (c) The membership of the Board shall reasonably represent
6 all the geographic areas in this State. The Secretary shall
7 consider the recommendations of the organization representing
8 the largest number of respiratory care practitioners for
9 appointment of the respiratory care practitioner members of
10 the Board and the organization representing the largest number
11 of physicians licensed to practice medicine in all its
12 branches for the appointment of the medical director to the
13 Board.

14 (d) The Secretary has the authority to remove any member
15 of the Board for cause at any time before the expiration of his
16 or her term. The Secretary shall be the sole arbiter of cause.

17 (e) The Secretary shall consider the recommendations of
18 the Board on questions involving standards of professional
19 conduct, discipline, and qualifications of candidates for
20 licensure under this Act.

21 (f) The members of the Board shall be reimbursed for all
22 legitimate and necessary expenses incurred in attending
23 meetings of the Board.

24 (g) A majority of the current members of ~~Four members of~~
25 the Board shall constitute a quorum. A vacancy in the
26 membership of the Board shall not impair the right of a quorum

1 to exercise all of the rights and perform all of the duties of
2 the Board.

3 (h) Members of the Board shall be immune from suit in any
4 action based upon any disciplinary proceedings or other
5 activities performed as members of the Board, except for
6 willful and wanton misconduct.

7 (Source: P.A. 99-230, eff. 8-3-15.)

8 (225 ILCS 106/42)

9 (Section scheduled to be repealed on January 1, 2026)

10 Sec. 42. Social Security Number or Individual Taxpayer
11 Identification Number on license application. In addition to
12 any other information required to be contained in the
13 application, every application for an original license under
14 this Act shall include the applicant's Social Security Number
15 or Individual Taxpayer Identification Number, which shall be
16 retained in the agency's records pertaining to the license. As
17 soon as practical, the Department shall assign a customer's
18 identification number to each applicant for a license.

19 Every application for a renewal or restored license shall
20 require the applicant's customer identification number.

21 (Source: P.A. 97-400, eff. 1-1-12.)

22 (225 ILCS 106/50)

23 (Section scheduled to be repealed on January 1, 2026)

24 Sec. 50. Qualifications for a license.

1 (a) A person is qualified to be licensed as a licensed
2 respiratory care practitioner, and the Department may issue a
3 license authorizing the practice of respiratory care to an
4 applicant who:

5 (1) has applied in writing or electronically on the
6 prescribed form and has paid the required fee;

7 (2) has successfully completed a respiratory care
8 training program approved by the Department;

9 (3) has successfully passed an examination for the
10 practice of respiratory care authorized by the Department,
11 within 5 years of making application; and

12 (4) has paid the fees required by this Act.

13 Any person who has received certification by any state or
14 national organization whose standards are accepted by the
15 Department as being substantially similar to the standards in
16 this Act may apply for a respiratory care practitioner license
17 without examination.

18 (b) Beginning 6 months after December 31, 2005, all
19 individuals who provide satisfactory evidence to the
20 Department of 3 years of experience, with a minimum of 400
21 hours per year, in the practice of respiratory care during the
22 5 years immediately preceding December 31, 2005 shall be
23 issued a license, unless the license may be denied under
24 Section 95 of this Act. This experience must have been
25 obtained while under the supervision of a certified
26 respiratory therapist, a registered respiratory therapist, or

1 a licensed registered nurse or under the supervision or
2 direction of a licensed health care professional. All
3 applications for a license under this subsection (b) shall be
4 postmarked within 12 months after December 31, 2005.

5 (c) A person may practice as a respiratory care
6 practitioner if he or she has applied in writing to the
7 Department in form and substance satisfactory to the
8 Department for a license as a licensed respiratory care
9 practitioner and has complied with all the provisions under
10 this Section except for the passing of an examination to be
11 eligible to receive such license, until the Department has
12 made the decision that the applicant has failed to pass the
13 next available examination authorized by the Department or has
14 failed, without an approved excuse, to take the next available
15 examination authorized by the Department or until the
16 withdrawal of the application, but not to exceed 6 months. An
17 applicant practicing professional ~~registered~~ respiratory care
18 under this subsection (c) who passes the examination, however,
19 may continue to practice under this subsection (c) until such
20 time as he or she receives his or her license to practice or
21 until the Department notifies him or her that the license has
22 been denied. No applicant for licensure practicing under the
23 provisions of this subsection (c) shall practice professional
24 respiratory care except under the proximate ~~direct~~ supervision
25 of a licensed health care professional or authorized licensed
26 personnel. In no instance shall any such applicant practice or

1 be employed in any supervisory capacity.

2 (Source: P.A. 94-523, eff. 1-1-06.)

3 (225 ILCS 106/60)

4 (Section scheduled to be repealed on January 1, 2026)

5 Sec. 60. Professional identification; advertising.

6 (a) A person who is licensed pursuant to this Act with the
7 Department ~~of Professional Regulation in this State~~ may use
8 the title "respiratory care practitioner" and the abbreviation
9 "RCP".

10 (b) A licensee shall include in every advertisement for
11 services regulated under this Act the licensee's ~~his or her~~
12 title as it appears on the license or the initials authorized
13 under this Act.

14 (Source: P.A. 91-310, eff. 1-1-00; 91-357, eff. 7-29-99.)

15 (225 ILCS 106/65)

16 (Section scheduled to be repealed on January 1, 2026)

17 Sec. 65. Licenses; renewal; restoration; inactive status.

18 (a) The expiration date and renewal period for each
19 license issued under this Act shall be set by rule. The
20 licensee may renew a license during the 30 day period
21 preceding its expiration date by paying the required fee and
22 demonstrating compliance with any continuing education
23 requirements.

24 (b) A person who has permitted a license to expire or who

1 has a license on inactive status may have it restored by
2 submitting an application to the Department and filing proof
3 of fitness, as defined by rule, to have the license restored,
4 including, if appropriate, evidence that is satisfactory to
5 the Department certifying the active practice of respiratory
6 care in another jurisdiction and by paying the required fee.

7 A person practicing on an expired license is considered to
8 be practicing without a license.

9 (c) If the person has not maintained an active practice
10 that is satisfactory to the Department in another
11 jurisdiction, the Department shall determine the person's
12 fitness to resume active status. The Department may require
13 the person to complete a specified period of evaluated
14 respiratory care and may require successful completion of an
15 examination.

16 (d) A person whose license expired while that person ~~he or~~
17 ~~she~~ was (1) in federal service on active duty with the Armed
18 Forces of the United States or called into service or training
19 with the State Militia, or (2) in training or education under
20 the supervision of the United States government preliminary to
21 induction into military service may have the ~~his or her~~
22 license restored without paying any lapsed renewal fees if,
23 within 2 years after the termination of the person's ~~his or her~~
24 service, training, or education, except under conditions other
25 than honorable, the Department is furnished with satisfactory
26 evidence that the person has been so engaged and that the

1 service, training, or education has been terminated.

2 (e) A license to practice shall not be denied any
3 applicant because of the applicant's race, religion, creed,
4 national origin, political beliefs, or activities, age, sex,
5 sexual orientation, or physical impairment.

6 (Source: P.A. 99-230, eff. 8-3-15.)

7 (225 ILCS 106/70)

8 (Section scheduled to be repealed on January 1, 2026)

9 Sec. 70. Inactive status. A person who notifies the
10 Department in writing on forms prescribed by the Department
11 may elect to place the person's ~~his or her~~ license on an
12 inactive status and shall, subject to rules of the Department,
13 be excused from payment of renewal fees until that person ~~he or~~
14 ~~she~~ notifies the Department in writing of a desire to resume
15 active status.

16 A person requesting restoration from inactive status shall
17 be required to pay the current renewal fee and shall be
18 required to restore the ~~his or her~~ license as provided in
19 Section 65 of this Act.

20 Practice by a respiratory care practitioner whose license
21 is in an inactive status shall be considered to be the
22 unlicensed practice of respiratory care and shall be grounds
23 for discipline under this Act.

24 (Source: P.A. 89-33, eff. 1-1-96.)

1 (225 ILCS 106/80)

2 (Section scheduled to be repealed on January 1, 2026)

3 Sec. 80. Returned checks; fines. Any person who delivers a
4 check or other payment to the Department that is returned to
5 the Department unpaid by the financial institution upon which
6 it is drawn shall pay to the Department, in addition to the
7 amount already owed to the Department, a fine of \$50. The fines
8 imposed by this Section are in addition to any other
9 discipline provided under this Act for unlicensed practice or
10 practice on a nonrenewed license. The Department shall notify
11 the person that payment of fees and fines shall be paid to the
12 Department by certified check or money order within 30
13 calendar days of the notification. If, after the expiration of
14 30 days from the date of the notification, the person has
15 failed to submit the necessary remittance, the Department
16 shall automatically terminate the license or certificate or
17 deny the application, without hearing. If, after termination
18 or denial, the person seeks a license or certificate, that
19 person ~~he or she~~ shall apply to the Department for restoration
20 or issuance of the license or certificate and pay all fees and
21 fines due to the Department. The Department may establish a
22 fee for the processing of an application for restoration of a
23 license or certificate to pay all expenses of processing this
24 application. The Secretary may waive the fines due under this
25 Section in individual cases where the Secretary finds that the
26 fines would be unreasonable or unnecessarily burdensome.

1 (Source: P.A. 99-230, eff. 8-3-15.)

2 (225 ILCS 106/85)

3 (Section scheduled to be repealed on January 1, 2026)

4 Sec. 85. Endorsement.

5 (a) The Department may issue a license as a respiratory
6 care practitioner without the required examination, to an
7 applicant licensed under the laws of another state or United
8 States jurisdiction whose standards in the opinion of the
9 Department, are substantially equivalent at the date of the
10 ~~his or her~~ licensure in the other jurisdiction to the
11 requirements of this Act or the applicant, at the time of
12 licensure, possessed individual qualifications which were
13 substantially equivalent to the requirements of this Act. The
14 applicant shall pay all of the required fees.

15 (b) An applicant shall have 3 years from the date of
16 application to complete the application process. If the
17 process has not been completed within 3 years, the application
18 shall be denied, the fee forfeited, and the applicant must
19 reapply and meet the requirements in effect at the time of
20 reapplication.

21 (Source: P.A. 89-33, eff. 1-1-96.)

22 (225 ILCS 106/90)

23 (Section scheduled to be repealed on January 1, 2026)

24 Sec. 90. Continuing education. Proof or certification of

1 having met the minimum requirement of continuing education as
2 determined by the Department shall be required of all license
3 and certificate renewals. Pursuant to rule, the continuing
4 education requirement may upon petition be waived in whole or
5 in part if the respiratory care practitioner can demonstrate
6 that the practitioner ~~he or she~~ had served in the Coast Guard
7 or Armed Forces, had an extreme hardship as defined by rule, or
8 obtained the license or certification by examination or
9 endorsement within the preceding renewal period.

10 The Department shall establish by rule a means for the
11 verification of completion of the continuing education
12 required by this Section. This verification may be
13 accomplished through audits of records maintained by
14 licensees; by requiring the filing of continuing education
15 certificates with the Department; or by other means
16 established by the Department.

17 (Source: P.A. 89-33, eff. 1-1-96.)

18 (225 ILCS 106/95)

19 (Section scheduled to be repealed on January 1, 2026)

20 Sec. 95. Grounds for discipline.

21 (a) The Department may refuse to issue, renew, or may
22 revoke, suspend, place on probation, reprimand, or take other
23 disciplinary or non-disciplinary action as the Department
24 considers appropriate, including the issuance of fines not to
25 exceed \$10,000 for each violation, with regard to any license

1 for any one or combination of the following:

2 (1) Material misstatement in furnishing information to
3 the Department or to any other State or federal agency.

4 (2) Violations of this Act, or any of the rules
5 adopted under this Act.

6 (3) Conviction by plea of guilty or nolo contendere,
7 finding of guilt, jury verdict, or entry of judgment or by
8 sentencing of any crime, including, but not limited to,
9 convictions preceding sentences of supervision,
10 conditional discharge, or first offender probation, under
11 the laws of any jurisdiction of the United States or any
12 state or territory thereof: (i) that is a felony or (ii)
13 that is a misdemeanor, an essential element of which is
14 dishonesty, or that is directly related to the practice of
15 the profession.

16 (4) Making any misrepresentation for the purpose of
17 obtaining a license.

18 (5) Professional incompetence or negligence in the
19 rendering of respiratory care services.

20 (6) Malpractice.

21 (7) Aiding or assisting another person in violating
22 any rules or provisions of this Act.

23 (8) Failing to provide information within 60 days in
24 response to a written request made by the Department.

25 (9) Engaging in dishonorable, unethical, or
26 unprofessional conduct of a character likely to deceive,

1 defraud, or harm the public.

2 (10) Violating the rules of professional conduct
3 adopted by the Department.

4 (11) Discipline by another jurisdiction, if at least
5 one of the grounds for the discipline is the same or
6 substantially equivalent to those set forth in this Act.

7 (12) Directly or indirectly giving to or receiving
8 from any person, firm, corporation, partnership, or
9 association any fee, commission, rebate, or other form of
10 compensation for any professional services not actually
11 rendered. Nothing in this paragraph (12) affects any bona
12 fide independent contractor or employment arrangements
13 among health care professionals, health facilities, health
14 care providers, or other entities, except as otherwise
15 prohibited by law. Any employment arrangements may include
16 provisions for compensation, health insurance, pension, or
17 other employment benefits for the provision of services
18 within the scope of the licensee's practice under this
19 Act. Nothing in this paragraph (12) shall be construed to
20 require an employment arrangement to receive professional
21 fees for services rendered.

22 (13) A finding that the licensee, after having the ~~her~~
23 ~~or his~~ license placed on probationary status or subject to
24 conditions or restrictions, has violated the terms of
25 probation or failed to comply with such terms or
26 conditions.

1 (14) Abandonment of a patient.

2 (15) Willfully filing false records or reports
3 relating to a licensee's practice including, but not
4 limited to, false records filed with a federal or State
5 agency or department.

6 (16) Willfully failing to report an instance of
7 suspected child abuse or neglect as required by the Abused
8 and Neglected Child Reporting Act.

9 (17) Providing respiratory care, other than pursuant
10 to an order.

11 (18) Physical or mental disability including, but not
12 limited to, deterioration through the aging process or
13 loss of motor skills that results in the inability to
14 practice the profession with reasonable judgment, skill,
15 or safety.

16 (19) Solicitation of professional services by using
17 false or misleading advertising.

18 (20) Failure to file a tax return, or to pay the tax,
19 penalty, or interest shown in a filed return, or to pay any
20 final assessment of tax penalty, or interest, as required
21 by any tax Act administered by the Illinois Department of
22 Revenue or any successor agency or the Internal Revenue
23 Service or any successor agency.

24 (21) Irregularities in billing a third party for
25 services rendered or in reporting charges for services not
26 rendered.

1 (22) Being named as a perpetrator in an indicated
2 report by the Department of Children and Family Services
3 under the Abused and Neglected Child Reporting Act, and
4 upon proof by clear and convincing evidence that the
5 licensee has caused a child to be an abused child or
6 neglected child as defined in the Abused and Neglected
7 Child Reporting Act.

8 (23) Habitual or excessive use or addiction to
9 alcohol, narcotics, stimulants, or any other chemical
10 agent or drug that results in an inability to practice
11 with reasonable skill, judgment, or safety.

12 (24) Being named as a perpetrator in an indicated
13 report by the Department on Aging under the Adult
14 Protective Services Act, and upon proof by clear and
15 convincing evidence that the licensee has caused an adult
16 with disabilities or an older adult to be abused or
17 neglected as defined in the Adult Protective Services Act.

18 (25) Willfully failing to report an instance of
19 suspected abuse, neglect, financial exploitation, or
20 self-neglect of an adult with disabilities or an older
21 adult as required by the Adult Protective Services Act.

22 (26) Willful omission to file or record, or willfully
23 impeding the filing or recording, or inducing another
24 person to omit to file or record medical reports as
25 required by law or willfully failing to report an instance
26 of suspected child abuse or neglect as required by the

1 Abused and Neglected Child Reporting Act.

2 (27) Practicing under a false or assumed name, except
3 as provided by law.

4 (28) Willfully or negligently violating the
5 confidentiality between licensee and patient, except as
6 required by law.

7 (29) The use of any false, fraudulent, or deceptive
8 statement in any document connected with the licensee's
9 practice.

10 (b) The determination by a court that a licensee is
11 subject to involuntary admission or judicial admission as
12 provided in the Mental Health and Developmental Disabilities
13 Code will result in an automatic suspension of the licensee's
14 ~~his or her~~ license. The suspension will end upon a finding by a
15 court that the licensee is no longer subject to involuntary
16 admission or judicial admission, the issuance of an order so
17 finding and discharging the patient, and the recommendation of
18 the Board to the Secretary that the licensee be allowed to
19 resume the licensee's ~~his or her~~ practice.

20 All fines imposed under this Section shall be paid within
21 60 days after the effective date of the order imposing the fine
22 or in accordance with the terms set forth in the order imposing
23 the fine.

24 (Source: P.A. 98-49, eff. 7-1-13; 99-230, eff. 8-3-15.)

25 (225 ILCS 106/100)

1 (Section scheduled to be repealed on January 1, 2026)

2 Sec. 100. Violations; injunctions; cease and desist order.

3 (a) If a person violates any provision of this Act, the
4 Secretary may, in the name of the People of the State of
5 Illinois, through the Attorney General, petition for an order
6 enjoining the violation or an order enforcing compliance with
7 this Act. Upon the filling of a verified petition, the court
8 with appropriate jurisdiction may issue a temporary
9 restraining order without notice or bond and may preliminarily
10 and permanently enjoin the violation. If it is established
11 that the person has violated or is violating the injunction,
12 the court may punish the offender for contempt of court.
13 Proceedings under this Section are in addition to all other
14 remedies and penalties provided by this Act.

15 (b) If a person holds oneself ~~himself or herself~~ out as
16 being a respiratory care practitioner under this Act and is
17 not licensed to do so, then any licensed respiratory care
18 practitioner, interested party, or injured person may petition
19 for relief as provided in subsection (a) of this Section.

20 (c) Whenever, in the opinion of the Department, a person
21 violates any provision of this Act, the Department may issue a
22 rule to show cause why an order to cease and desist should not
23 be entered against that person. The rule shall clearly set
24 forth the grounds relied upon by the Department and shall
25 allow at least 7 days from the date of the rule to file an
26 answer satisfactory to the Department. Failure to answer to

1 the satisfaction of the Department shall cause an order to
2 cease and desist to be issued.

3 (Source: P.A. 99-230, eff. 8-3-15.)

4 (225 ILCS 106/105)

5 (Section scheduled to be repealed on January 1, 2026)

6 Sec. 105. Investigations; notice; hearing. The Department
7 may investigate the actions of an applicant, a licensee, or a
8 person claiming to hold a license. The Department shall,
9 before revoking, suspending, placing on probation,
10 reprimanding, or taking any other disciplinary action under
11 Section 95 of this Act, at least 30 days before the date set
12 for the hearing (i) notify the accused, in writing, of any
13 charges made and the time and place for the hearing on the
14 charges, (ii) direct the accused ~~him or her~~ to file a written
15 answer to the charges with the Board under oath within 20 days
16 after the service upon the accused ~~him or her~~ of the notice,
17 and (iii) inform the accused that, if the accused fails ~~he or~~
18 ~~she fails~~ to answer, default will be taken against the accused
19 ~~him or her~~ and the accused's ~~his or her~~ license may be
20 suspended, revoked, placed on probationary status, or other
21 disciplinary action taken with regard to the license,
22 including limiting the scope, nature, or extent of the
23 accused's ~~his or her~~ practice, without a hearing, as the
24 Department may consider proper. In case the person, after
25 receiving notice, fails to file an answer, the person's ~~his or~~

1 ~~her~~ license may, in the discretion of the Department, be
2 suspended, revoked, placed on probationary status, or the
3 Department may take whatever disciplinary action is considered
4 proper, including, limiting the scope, nature, or extent of
5 the person's practice or the imposition of a fine, without a
6 hearing, if the act or acts charged constitute sufficient
7 grounds for an action under this Act. The written notice may be
8 served by ~~personal delivery or certified~~ mail to the address
9 of record or by email to the email address of record.

10 (Source: P.A. 99-230, eff. 8-3-15.)

11 (225 ILCS 106/110)

12 (Section scheduled to be repealed on January 1, 2026)

13 Sec. 110. Record of proceedings; transcript. The
14 Department, at its expense, shall provide a certified
15 shorthand reporter to take down the testimony and preserve the
16 record of all proceedings at a formal hearing of any case. The
17 notice of hearing, complaint, all other documents in the
18 nature of pleadings and written motions filed in the
19 proceedings, the transcript of testimony, the report of the
20 Board and orders of the Department shall be in the record of
21 the proceedings. The record may be made available to any
22 person interested in the hearing upon payment of the fee
23 required by Section 2105-115 of the Department of Professional
24 Regulation Law of the Civil Administrative Code of Illinois.

25 (Source: P.A. 99-230, eff. 8-3-15.)

1 (225 ILCS 106/135)

2 (Section scheduled to be repealed on January 1, 2026)

3 Sec. 135. Secretary; rehearing. Whenever the Secretary
4 believes that substantial justice has not been done in the
5 revocation, suspension, refusal to issue or renew a license,
6 or any other discipline of an applicant or licensee, the
7 Secretary ~~he or she~~ may order a rehearing by the same or other
8 hearing officers.

9 (Source: P.A. 99-230, eff. 8-3-15.)

10 (225 ILCS 106/155)

11 (Section scheduled to be repealed on January 1, 2026)

12 Sec. 155. Surrender of license. Upon the revocation or
13 suspension of a license, the licensee shall immediately
14 surrender the ~~his or her~~ license to the Department. If the
15 licensee fails to do so, the Department has the right to seize
16 the license.

17 (Source: P.A. 89-33, eff. 1-1-96.)

18 (225 ILCS 106/160)

19 (Section scheduled to be repealed on January 1, 2026)

20 Sec. 160. Summary suspension of license. The Secretary may
21 summarily suspend the license of a respiratory care
22 practitioner without a hearing, simultaneously with the
23 institution of proceedings for a hearing provided for in

1 Section 105 of this Act, if the Secretary finds that evidence
2 in the Secretary's ~~his or her~~ possession indicates that the
3 continuation of practice by the respiratory care practitioner
4 would constitute an imminent danger to the public. In the
5 event that the Secretary summarily suspends the license of
6 respiratory care practitioner without a hearing, a hearing
7 must be commenced within 30 calendar days after the suspension
8 has occurred and concluded as expeditiously as practical.

9 (Source: P.A. 99-230, eff. 8-3-15.)

10 (225 ILCS 106/170)

11 (Section scheduled to be repealed on January 1, 2026)

12 Sec. 170. Administrative review; certification of record;
13 costs.

14 All final administrative decisions of the Department are
15 subject to judicial review pursuant to the Administrative
16 Review Law and its rules. The term "administrative decision"
17 is defined as in Section 3-101 of the Code of Civil Procedure.

18 Proceedings for judicial review shall be commenced in the
19 circuit court of the county in which the party applying for
20 review resides, but if the party is not a resident of this
21 State, the venue shall be in Sangamon County.

22 The Department shall not be required to certify any record
23 to the court, or file an answer in court, or otherwise appear
24 in any court in a judicial review proceeding, unless and until
25 the Department has received from the plaintiff payment of the

1 costs of furnishing and certifying the record, which costs
2 shall be determined by the Department. ~~Exhibits shall be~~
3 ~~certified without cost.~~ Failure on the part of the plaintiff
4 to file a receipt is grounds for dismissal of the action.
5 During the pendency and hearing of any and all judicial
6 proceedings incident to the disciplinary action, the sanctions
7 imposed upon the accused by the Department specified in the
8 Department's final administrative decision shall, as a matter
9 of public policy, remain in full force and effect in order to
10 protect the public pending final resolution of any of the
11 proceedings.

12 (Source: P.A. 99-230, eff. 8-3-15.)

13 (225 ILCS 106/180)

14 (Section scheduled to be repealed on January 1, 2026)

15 Sec. 180. Illinois Administrative Procedure Act;
16 application. The Illinois Administrative Procedure Act is
17 hereby expressly adopted and incorporated in this Act as if
18 all of the provisions of the Act were included in this Act,
19 except that the provision of paragraph (d) of Section 10-65 of
20 the Illinois Administrative Procedure Act, which provides that
21 at hearings the registrant or licensee has the right to show
22 compliance with all lawful requirements for retention or
23 continuation or renewal of the license, is specifically
24 excluded. For the purpose of this Act, the notice required
25 under Section 10-25 of the Illinois Administrative Procedure

1 Act is considered sufficient when mailed to address of record
2 or emailed to the email address of record of the licensee or
3 applicant.

4 (Source: P.A. 99-230, eff. 8-3-15.)

5 Section 99. Effective date. This Section and Section 5
6 take effect upon becoming law.

1 INDEX

2 Statutes amended in order of appearance

- 3 5 ILCS 80/4.36
- 4 5 ILCS 80/4.41 new
- 5 225 ILCS 106/10
- 6 225 ILCS 106/12 new
- 7 225 ILCS 106/15
- 8 225 ILCS 106/20
- 9 225 ILCS 106/22
- 10 225 ILCS 106/30
- 11 225 ILCS 106/35
- 12 225 ILCS 106/42
- 13 225 ILCS 106/50
- 14 225 ILCS 106/60
- 15 225 ILCS 106/65
- 16 225 ILCS 106/70
- 17 225 ILCS 106/80
- 18 225 ILCS 106/85
- 19 225 ILCS 106/90
- 20 225 ILCS 106/95
- 21 225 ILCS 106/100
- 22 225 ILCS 106/105
- 23 225 ILCS 106/110
- 24 225 ILCS 106/135
- 25 225 ILCS 106/155

HB3681

- 40 -

LRB104 09452 AAS 19512 b

- 1 225 ILCS 106/160
- 2 225 ILCS 106/170
- 3 225 ILCS 106/180