
Detailed Fiscal Analysis

House Bill 505 presents many revisions related to the Ohio Respiratory Care Board. Various provisions may impact expenditures of those currently regulated by, or that may have contact with, the Board and would include the following:

Information sharing:

The Board is authorized to share investigation information with other licensing boards and government agencies as well as law enforcement agencies and other government agencies that are investigating or prosecuting professional misconduct or criminal offenses.

The Board estimates that by sharing and receiving information, total costs associated with investigating and documenting information may be reduced or eliminated resulting in decreased costs for some investigations. However, it is not possible to estimate precise figures at this time.

Reporting Requirements for Prosecutors and Employers:

Prosecutors are required to notify the Board if a respiratory care professional or an individual with a limited permit pleads to or is found guilty of a felony, a misdemeanor committed in the course of practice, or a misdemeanor involving moral turpitude. The report shall consist of the following: name, address, nature of the offense, and any certified court documents recording the action.

Employers who discipline or terminate a respiratory care professional or an individual with a limited permit for reasons similar to those that the Board would use as grounds for disciplinary actions (ORC 4761.09) are required to notify the Board. The report shall consist of the name of the individual and reason the employer took the action.

During fiscal year 1999, approximately 100 complaints were reported to the Board. The Board assumed that no more than 6-10 cases annually would require a report. As a result, a minimal cost impact is estimated associated with forwarding the required information.

Polysomnographic Technologists:

The bill exempts polysomnographic technologists from licensure but includes authority for the Board to oversee the respiratory care tasks that an individual who practices as a polysomnographic technologist may perform. One change would allow (1) individuals who are credentialed by an organization that the Board recognizes, (2) trainees of these individuals or (3) individuals the Board recognizes as being eligible to be credentialed as a polysomnographic technologists to perform polysomnographic tasks.

As a result, there may be organizations (i.e. hospitals and laboratories) without appropriate staff employed to perform the allowed tasks. It is possible that costs may increase to these groups in order to meet Board standards. Organizations may need to either hire someone who meets the

requirements necessary to perform the tasks, or may need to invest in the training necessary to get a current staff person to meet the required standards.

Another option that may not increase costs is to have any actual treatments be performed by a licensed respiratory therapist – providing one is currently employed by the organization.

Permanent License Revocation:

If H.B. 505 were enacted, the Board would have the authority to permanently revoke an individual's license. Currently, individuals who have their licenses "revoked" can request reinstatement hearings. These hearings require staff time and occasionally a hearing examiner is used. Approximately 2-3 licenses per year are revoked. It is estimated at least one case per year would petition the Board for reinstatement unless this bill is enacted. As a result, potential expenditure reductions of \$1,000-4,000 are estimated.

□ *LBO staff: Elisabeth Gorenstein, Budget/Policy Analyst*

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