

**SB2494**



**104TH GENERAL ASSEMBLY**

**State of Illinois**

**2025 and 2026**

**SB2494**

Introduced 2/7/2025, by Sen. Suzy Glowiak Hilton

**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 09451 AAS 19511 b

**A BILL FOR**

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 Acts repealed on January 1, 2026.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8           Acts are repealed on January 1, 2026: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~~  
~~licensee to inform the Department of any change of address and~~  
~~those changes must be made either through the Department's~~  
~~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.

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

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

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

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

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

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

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

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

#### (6) Mechanical ventilatory support.

(7) Patient assessment.

(8) Patient education.

(9) The transferring of oxygen devices, for purposes 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.)

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  
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.

(14) Abandonment of a patient.

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

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

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

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

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

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

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

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

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

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

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

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

## Abused and Neglected Child Reporting Act.

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

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

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

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

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

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

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

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

(b) If a person holds oneself ~~himself or herself~~ out as being a respiratory care practitioner under this Act and is not licensed to do so, then any licensed respiratory care practitioner, interested party, or injured person may petition 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~~

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

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

(225 ILCS 106/110)

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

Sec. 110. Record of proceedings; transcript. The Department, at its expense, shall provide a certified shorthand reporter to take down the testimony and preserve the record of all proceedings at a formal hearing of any case. The notice of hearing, complaint, all other documents in the nature of pleadings and written motions filed in the proceedings, the transcript of testimony, the report of the Board and orders of the Department shall be in the record of the proceedings. The record may be made available to any person interested in the hearing upon payment of the fee required by Section 2105-115 of the Department of Professional

(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

1 225 ILCS 106/160

2 225 ILCS 106/170

3 225 ILCS 106/180