



Ohio Legislative Service Commission

Genevieve Davison

Fiscal Note & Local Impact Statement

Bill: H.B. 266 of the 131st G.A.

Date: October 13, 2015

Status: As Introduced

Sponsor: Rep. Schuring

Local Impact Statement Procedure Required: No

Contents: Modifies the laws governing respiratory care professionals

State Fiscal Highlights

- Minimal increase in administrative costs to the Ohio Respiratory Care Board to adopt rules and accommodate a potential increase in disciplinary hearings.

Local Fiscal Highlights

- Possible increase in administrative costs for local hospitals to develop protocols regarding respiratory care professionals.
- Possible decrease in costs for local hospitals if physician assistants are able to prescribe respiratory care allowing physicians to attend to other patients.

Detailed Fiscal Analysis

The bill makes several changes to the laws governing respiratory care professionals. The bill authorizes a respiratory care professional to practice pursuant to a protocol developed by a hospital or nursing home and requires the Ohio Respiratory Care Board to adopt rules prescribing standards for such protocols. The bill also authorizes the Board to take disciplinary action against a respiratory care professional due to denial, revocation, suspension, or restriction of the professional's authority to engage in a licensed profession or to practice a healthcare occupation in Ohio or another state or jurisdiction for any reason other than failure to renew and changes the circumstances under which the Board can impose discipline related to use of drugs and alcohol. The Board anticipates a minimal increase in administrative costs associated with adopting rules and a possible increase in disciplinary hearings, but expects to absorb these costs into the Board's existing budget. Local hospitals that choose to develop protocols regarding respiratory care professionals may experience an increase in administrative costs.

The bill makes several other changes to the law governing respiratory care professionals including changes to license examinations, limited permits, and prescription orders, including allowing a physician assistant to prescribe or order respiratory care. The Board does not anticipate any costs associated with these changes. Local hospitals may experience a decrease in costs if physician assistants are able to prescribe respiratory care allowing physicians to attend to other patients.