Legislative Issues Addressing the Sleep Technology Profession

Developed by: The AAST Government Affairs Committee

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Overview

- Overview of AAST and how it can assist with your legislative initiative
- State Statutory Language for Sleep Technologists
- State Legislative Issues Affecting Sleep Over the Past Year
- Steps to Introduce Legislation
- AAST/AASM State Society Initiative

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Five bullet points to read to the audience on the topics you will be addressing in your presentation.

American Association of Sleep Technologists (AAST)

- Provide standards & cohesive direction at the national level that serves to further develop and preserve the profession.
- AAST serves as conduit between the sleep technologist working in the field & the environment in which Polysomnography Technology exists.

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Slide is pretty self explanatory –Illustrates that the AAST is the leader for the sleep technology profession.

AAST Government Relations

Services the AAST can provide our members:

- Respond to inquiries about the profession from members, state legislators, policymakers, and other stakeholders;
- Analyze legislative/regulatory issues that could influence the scope of practice for sleep technologists;
- Educate the public & policymakers on the role and qualifications of the sleep technology professional.

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Slide outlines the tasks AAST can perform for our members and state societies.

AAST and the AASM work together on legislative issues affecting the sleep technology profession.

Some of the other duties the AAST/AASM staff can provide:

- •Draft legislation
- Draft testimony
- Draft letters
- •Assist your state society with your legislative issue;

- Statutory requirements for sleep technologists vary greatly from state to state.
- Some states require licensure for sleep technologists while other states do not address education or training for sleep technologists at all in their statutes.

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State law (statutes) defining the practice for sleep technology vary greatly from state to state.

Some states require licensure – meaning that individuals looking to enter the sleep technology field must complete certain education and training requirements and pass a test in order to practice polysomnography in their state.

However, other states do not have any laws "on the books" addressing the practice of sleep technology.

The next slide will further detail the five basic categories sleep technologists fall into regarding what state law requires.

Basically, the practice for sleep technologists falls into five categories:

- 1. States which have a Polysomnography Practice Act.
- 2. States that have general exemption language for sleep technologists in their Respiratory Care Act.
- 3. States that specifically define sleep technology and the scope of practice for sleep technologists in their Respiratory Care Act.
- 4. States that do not address the practice of sleep technology at all in their Respiratory Care Act.
- 5. States that do not have either a Polysomnography or Respiratory Care Practice Act.

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Basically, sleep technologists fall into five categories:

- Licensure States may require licensure which means that individuals looking to enter the field must meet certain education requirements (CAAHEP or A-STEP) and pass a test – usually BRPT or NBRC-SDS.
- 2. Exemption State Respiratory Care Acts may have exemption language. Exemption language means that there is a provision within the Respiratory Act that allows a sleep technologist to work within their scope of practice while under the direction of a licensed physician.
- 3. Respiratory Care Acts that Define Sleep Technology Some State Respiratory Care Acts specifically define the education and training a sleep technologist must complete to perform polysomnography in the state.
- 4. Not addressed States that do not address the profession of sleep technology at all in their Respiratory Care Practice Act.
- 5. States that do not address sleep technology or respiratory care at all in their state laws

The next few slides will further detail each category.

 California, Louisiana, Maryland, New Jersey, New Mexico, North Carolina, Tennessee, Virginia, and Washington D.C., are the only jurisdictions with a Polysomnography Practice Act, which provides sleep technologists a specific licensing/certification pathway.

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1) Licensure – The first category that we will discuss is the qualifications for licensure

Nine jurisdictions (8 states and Washington D.C.) require licensure for sleep technologists. Again, this means that individuals looking to enter the field must complete certain education requirements – like a CAAHEP or A-STEP program and pass a certification test – usually BRPT or NBRC-SDS.

The next slide details the licensure requirements in New Mexico.

Licensure

• Example: New Mexico: Polysomnography Practice Act

Chapter 61 – Professional and Occupational Licenses Article 6B

On and after July 1, 2010, a person who is engaged in the practice of polysomnography must have a valid polysomnographic technologist license issued by the board.

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Here is an example of a state that has licensure language.

New Mexico passed legislation in 2008 requiring licensure for sleep technologists.

The law states that after July 1, 2010 a person engaging in the practice of sleep technology must have a valid sleep technologist license issued by the New Mexico Medical Board.

New Mexico

Requirements for licensure:

- Graduation from a CAAHEP or CoARC program; or
- Graduation from an Electroneurodiagnostic (END) program; or
- Completion of an A-STEP program; and
- Passed the BRPT or another national certifying examination approved by the New Mexico Medical Board.

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The New Mexico language requires that in order to obtain a license, an applicant must graduate from a CAAHEP, CoARC, or END program or complete an A-STEP program.

They must also pass the BRPT or another exam that has been approved by the New Mexico Medical Board.

Once an individual has completed their education and passed the test, the New Mexico Medical Board will issue them a sleep technologist license.

- Thirty states contain general exemption language in their respective Respiratory Care Acts.
- General exemption language allows sleep technologists to work within their scope of practice while under the direction of a licensed physician.

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2) Exemption – The next category which we will discuss is exemption for sleep technologists.

Again, exemption language means that there is a provision within the state Respiratory Act that allows a sleep technologist to work within their scope of practice while under the direction of a licensed physician.

The next slide is an example of Illinois' exemption language.

• Example: Illinois

Respiratory Care Practice Act (225 ILCS 106/15) Sec. 15. Exemptions.

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

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Here is an example of a state that has exemption language.

The Illinois language allow a sleep technologist, technician or trainee – as their job descriptions are defined by the AASM, AAST, and BRPT – to perform all the duties within their scope of practice under the direction of a physician.

- States with general exemption language include:
- AL, AZ, AR, CO, GA, HI, IL, IN, IA, KS, ME, MA, MI, MN, MS, MO, NE, NH, NV, OH, OK, PA, SC, SD, TX, UT, VT, WA, WV, WY.

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Here is a list of the other states that have exemption language.

 Idaho and North Dakota specifically define sleep technology and their scope of practice in their respective Respiratory Care Acts.

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3) Respiratory Care Acts that Define the Profession of Sleep Technology.

The Idaho and North Dakota Respiratory Care Act specifically define the education and training a sleep technologist must complete in order to perform polysomnography in the state.

Basically, the Respiratory Care Board in these two states has authority over the sleep technology profession.

• Nine states contain a Respiratory Care Act that does not address the practice of polysomnography. These states include: CT, DE, FL, KY, MT, NY, OR, RI, WI.

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4) Not addressed – Nine states do not address the profession of sleep technology at all in their state laws.

This is an issue for sleep technologists residing in these states because although there is no statutory language prohibiting them from performing sleep procedures, there is no language that specifically allows them to perform sleep procedures either.

They are kind of in a limbo situation.

 Alaska is the only state that does not have language pertaining to respiratory therapists or to sleep technologists in their statutes or regulations.

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4) Alaska is the only state that does not address sleep technology or respiratory care at all in their state laws.

State Legislation: 2010 Legislative activity occurring in the following states: Florida Hawaii New York

Legislative Activity in 2010

The next few slides will provide an overview of the legislative activity affecting sleep over the past year.

Florida

Florida House bill 971:

- Designates Drowsy Driving Prevention Week;
- Encourages the public and the law enforcement community to be better educated about the relationship between fatigue and driving performance; and
- Restricts use of mobile telecommunications devices by school bus drivers.

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FLORIDA

On June 4, Florida Governor Charlie Crist signed House Bill 971 into law.

The bill designates the first week of September as "Drowsy Driving Prevention Week."

During the week, the Department of Highway Safety and Motor Vehicles and the Department of Transportation are encouraged to educate the law enforcement community and the public about the relationship between fatigue and driving performance. These efforts will emphasize the research showing that fatigue is as dangerous as alcohol while operating a motor vehicle.

Hawaii

SB 2600 - Respiratory Therapist Licensure

As introduced, the bill had the following exemption language:

Exemptions. This chapter shall not apply to:

- (1) A person working within the scope of practice or duties of another licensed profession that overlaps with the practice of respiratory care...
- (2) A person enrolled as a student in an accredited respiratory therapy program...
- (3) A person rendering services in the case of an emergency... or
- (4) A person employed by a federal, state, or county government agency in a respiratory therapist position...

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HAWAII

On June 28, Hawaii Governor Linda Lingle signed Senate Bill 2600 into law. The bill establishes licensure for respiratory therapists. Hawaii was one of two states (with Alaska) that did not have statutory language addressing the education or training requirements for either sleep technologists or respiratory therapists.

When SB 2600 was first introduced, the bill did not contain any language addressing the practice of sleep technology.

Hawaii

The AAST and AASM worked with the Hawaii Sleep Society (HSS) to expand the exemption language in SB 2600 to include sleep technologists:

Exemptions – This chapter shall not apply to:

A person working as, or training to become, a sleep technologist or person who is enrolled in a Commission on Accreditation of Allied Health Education Programs, Accredited Sleep Technologist Education Program, or a program approved by the American Association of Sleep Technologists to become a sleep technologist; provided that, as used in this paragraph, a "sleep technologist" is defined as a person trained in sleep technology and relevant aspects of sleep medicine, evaluation, and follow-up care of patients with sleep disorders.

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However, the AAST and AASM worked with the Hawaii Sleep Society (HSS) to include exemption language into the bill which would ensure that sleep technologists would be able to continue working unimpeded within their scope of practice.

Exemption language – SEE ABOVE – was incorporated into SB 2600:

New York

AB 9546 - Polysomnographic Technology Practice

Relates to licensing the practice of polysomnographic technology: establishes requirements and procedures for professional licensure and registration; allows limited permits to be issued to eligible applicants; establishes mandatory continuing education for licensed polysomnographic technologists.

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NEW YORK

The New York State Sleep Society introduced Assembly Bill 9546 which would have established licensure for sleep technologists. Unfortunately, the bill did not make it out of Committee in the Assembly.

However, New York is looking to introduce another licensure bill in 2011.

Mobilize

- The first step in introducing legislation is mobilizing every sleep physician and technologist in the state.
- While this seems simple enough it requires a great deal of coordination.

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LEGISLATIVE INITIATIVE

The next few slides will address what state societies need to do to have a successful legislative campaign.

The first step is to Mobilize. The Society needs to make their members aware of the legislative campaign that is about to take place.

Although it seems like a simple task, this requires a great deal of coordination.

Draft Legislation/Hire Lobbyist

- Draft a bill that all can agree on AAST/AASM staff can assist in drafting language.
- Consider hiring a lobbyist A lobbyist generally is essential when introducing legislation.
- The State Medical or Hospital Society might be able to recommend a lobbyist.

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Again, AAST can assist in drafting your bill. Once a bill has been drafted it should be reviewed and approved by the Society's Board of Directors.

Once the Board has signed off on the bill, the Board should consider hiring a lobbyist. Lobbyists are usually necessary in getting your bill passed. They know the legislative processes and the players in the system.

Contact your state medical or hospital society for a recommendation. They might also let you use their lobbyist.

Identifying a State Legislator to Sponsor Your Bill

• One of the most effective ways of identifying a sponsor for your legislation is to first find out who you know.

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More times than not, you will discover that one of your members has some type of relationship or association with a state representative. A state legislator might be a member's next door neighbor, his or her patient, a sailing buddy, or a friend of a friend.

As the saying goes "It is not what you know but who you know."

Schedule a meeting to discuss and identify which member has a relationship with a state representative and **ORGANIZE YOUR MESSAGE.** You can work with the AAST National Office if necessary.

Coalition with other Organizations

• Solicit the support of the State Medical Society and the State Hospital Society.

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As a general rule health related legislation must get the approval of the State Medical and Hospital Society.

If you can not get them to support your bill, the next best thing would be to have them remain neutral on your bill.

If you know someone who has a connection to either organization it can be very beneficial towards your legislative efforts.

Timeline

- Expect the process to take at least two years. Most bills do not pass in the first year.
- Review your legislative calendar before making any definitive judgment on a time line.
- Stay united!

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The legislative process can be a long and frustrating one. Expect the process to take at least two years.

Some states – like New York – have been trying to get licensure passed for the past 10 years.

Review your state's legislative calendar to see when is the best time to move forward with a legislative initiative. **NOTE: The speaker should have the information on the state's legislative calendar and provide the information to the audience.** The Society should be 100% ready. If the Society is not 100% prepared, the chances of a successful campaign are slim.

Legislative Lessons to Remember

- Organization-be organized and enlist dedicated and talented individuals
- Long Haul-prepare for a long process
- Legislative Process takes Preparation and Hard Work
- Enlist help of AAST/AASM

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Legislative Lessons to Remember

- Be inclusive Multiple stakeholders in the legislative process
- Hire a lobbyist
- Keep involved throughout-e.g. attend meetings, send letters to relevant participants
- Keep informed of your state's Respiratory Care Society's thoughts

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State Sleep Society Initiative

- The AAST and AASM launched this initiative in March, 2008.
- At the start of this initiative there were 18 state sleep societies. Currently, there are 42 state sleep societies, and we are in the process of working with AAST and AASM members in additional states.

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STATE SLEEP SOCIETY INITIATIVE

Reasons AAST/AASM wanted to establish state sleep societies was to:

- Strengthen the sleep care community in the state;
- Establish a unified voice for the profession;
- Provide a forum that will serve to educate members, and;
- Advance the profession in addressing any issues that may affect the ability to provide high quality care.

State Sleep Society Initiative

• Established State Sleep Societies:

Alabama, Arizona, California, Colorado, Connecticut, Delaware, Georgia, Florida, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Mississippi, Montana, Nebraska, New Hampshire, New Jersey, New York, New Mexico, North Carolina, Ohio, Oregon, Pennsylvania, South Carolina, Tennessee, Texas, Utah, Virginia, West Virginia, Washington, Wisconsin, & Washington D.C.

In the Process of Being Established:

Arkansas, Oklahoma, and Nevada

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"Good night, son – sweet dreams and a great sleep experience."



"Good night, son—sweet dreams and a great sleep experience."

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