

Senate File 2234 - Introduced

SENATE FILE 2234
BY COMMITTEE ON STATE
GOVERNMENT

(SUCCESSOR TO SSB 3057)

A BILL FOR

1 An Act providing for the licensing of polysomnographic
2 technologists, making penalties applicable, and including
3 effective date provisions.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. Section 135.24, subsection 2, paragraph a, Code
2 2014, is amended to read as follows:

3 a. Procedures for registration of health care providers
4 deemed qualified by the board of medicine, the board of
5 physician assistants, the dental board, the board of nursing,
6 the board of chiropractic, the board of psychology, the board
7 of social work, the board of behavioral science, the board
8 of pharmacy, the board of optometry, the board of podiatry,
9 the board of physical and occupational therapy, the board of
10 respiratory care and polysomnography, and the Iowa department
11 of public health, as applicable.

12 Sec. 2. Section 147.1, subsections 3 and 6, Code 2014, are
13 amended to read as follows:

14 3. "*Licensed*" or "*certified*", when applied to a physician
15 and surgeon, podiatric physician, osteopathic physician and
16 surgeon, physician assistant, psychologist, chiropractor,
17 nurse, dentist, dental hygienist, dental assistant,
18 optometrist, speech pathologist, audiologist, pharmacist,
19 physical therapist, physical therapist assistant, occupational
20 therapist, occupational therapy assistant, orthotist,
21 prosthetist, pedorthist, respiratory care practitioner,
22 practitioner of cosmetology arts and sciences, practitioner
23 of barbering, funeral director, dietitian, marital and
24 family therapist, mental health counselor, polysomnographic
25 technologist, social worker, massage therapist, athletic
26 trainer, acupuncturist, nursing home administrator, hearing aid
27 dispenser, or sign language interpreter or transliterator means
28 a person licensed under this subtitle.

29 6. "*Profession*" means medicine and surgery, podiatry,
30 osteopathic medicine and surgery, practice as a physician
31 assistant, psychology, chiropractic, nursing, dentistry,
32 dental hygiene, dental assisting, optometry, speech pathology,
33 audiology, pharmacy, physical therapy, physical therapist
34 assisting, occupational therapy, occupational therapy
35 assisting, respiratory care, cosmetology arts and sciences,

1 barbering, mortuary science, marital and family therapy, mental
2 health counseling, polysomnography, social work, dietetics,
3 massage therapy, athletic training, acupuncture, nursing
4 home administration, hearing aid dispensing, sign language
5 interpreting or transliterating, orthotics, prosthetics, or
6 pedorthics.

7 Sec. 3. Section 147.2, subsection 1, Code 2014, is amended
8 to read as follows:

9 1. A person shall not engage in the practice of medicine
10 and surgery, podiatry, osteopathic medicine and surgery,
11 psychology, chiropractic, physical therapy, physical
12 therapist assisting, nursing, dentistry, dental hygiene,
13 dental assisting, optometry, speech pathology, audiology,
14 occupational therapy, occupational therapy assisting,
15 orthotics, prosthetics, pedorthics, respiratory care,
16 pharmacy, cosmetology arts and sciences, barbering, social
17 work, dietetics, marital and family therapy or mental health
18 counseling, massage therapy, mortuary science, polysomnography,
19 athletic training, acupuncture, nursing home administration,
20 hearing aid dispensing, or sign language interpreting
21 or transliterating, or shall not practice as a physician
22 assistant, unless the person has obtained a license for that
23 purpose from the board for the profession.

24 Sec. 4. Section 147.13, subsection 18, Code 2014, is amended
25 to read as follows:

26 18. For respiratory care and polysomnography, the board of
27 respiratory care and polysomnography.

28 Sec. 5. Section 147.14, subsection 1, paragraph o, Code
29 2014, is amended to read as follows:

30 o. For respiratory care, one licensed physician with
31 training in respiratory care, ~~three~~ two respiratory care
32 practitioners who have practiced respiratory care for a minimum
33 of six years immediately preceding their appointment to the
34 board and who are recommended by the society for respiratory
35 care, one polysomnographic technologist who has practiced

1 polysomnography for a minimum of six years immediately
2 preceding appointment to the board and who is recommended by
3 the Iowa sleep society, and one member not licensed to practice
4 medicine, osteopathic medicine, polysomnography, or respiratory
5 care who shall represent the general public.

6 Sec. 6. Section 147.74, Code 2014, is amended by adding the
7 following new subsection:

8 NEW SUBSECTION. 22A. A person who is licensed to engage in
9 the practice of polysomnography shall have the right to use the
10 title "polysomnographic technologist" or the letters "P.S.G.T."
11 after the person's name. No other person may use that title
12 or letters or any other words or letters indicating that the
13 person is a polysomnographic technologist.

14 Sec. 7. NEW SECTION. 148G.1 **Definitions.**

15 As used in this chapter, unless the context otherwise
16 requires:

17 1. "*Board*" means the board of respiratory care and
18 polysomnography established in chapter 147.

19 2. "*Direct supervision*" means that the polysomnographic
20 technologist providing supervision must be present where the
21 polysomnographic procedure is being performed and immediately
22 available to furnish assistance and direction throughout the
23 performance of the procedure.

24 3. "*General supervision*" means that the polysomnographic
25 procedure is provided under a physician's or qualified health
26 care professional prescriber's overall direction and control,
27 but the physician's or qualified health care professional
28 prescriber's presence is not required during the performance
29 of the procedure.

30 4. "*Physician*" means a person who is currently licensed in
31 Iowa to practice medicine and surgery or osteopathic medicine
32 and surgery and who is board certified in sleep medicine and
33 who is actively involved in the sleep medicine center or
34 laboratory.

35 5. "*Polysomnographic student*" means a person who is enrolled

1 in a commission on accreditation of allied health education
2 program or an equivalent program accredited by a nationally
3 recognized accrediting agency and who may provide sleep-related
4 services under the direct supervision of a polysomnographic
5 technologist as a part of the person's educational program.

6 6. "*Polysomnographic technician*" means a person who
7 has graduated from a commission on accreditation of allied
8 health education program or equivalent program accredited
9 by a nationally recognized accrediting agency, but has not
10 yet received an accepted national credential awarded from
11 an examination program that is accredited by a nationally
12 recognized examination accrediting organization but who may
13 provide sleep-related services under the direct supervision of
14 a licensed polysomnographic technologist for a period of up to
15 thirty days following graduation while awaiting credentialing
16 examination scheduling and results.

17 7. "*Polysomnographic technologist*" means a person licensed
18 by the board to engage in the practice of polysomnography under
19 the general supervision of a physician or a qualified health
20 care professional prescriber.

21 8. "*Practice of polysomnography*" means as described in
22 section 148G.2.

23 9. "*Qualified health care practitioner*" means an individual
24 who is licensed under section 147.2, and who holds a
25 credential listed on the board of registered polysomnographic
26 technologists list of accepted allied health credentials.

27 10. "*Qualified health care professional prescriber*" means a
28 physician assistant operating under the prescribing authority
29 granted in section 147.107 or an advanced registered nurse
30 practitioner operating under the prescribing authority granted
31 in section 147.107.

32 11. "*Sleep-related services*" means acts performed by
33 polysomnographic technicians, polysomnographic students, and
34 other persons permitted to perform those services under this
35 chapter, in a setting described in this chapter that would be

1 considered the practice of polysomnography if performed by a
2 polysomnographic technologist.

3 Sec. 8. NEW SECTION. 148G.2 Practice of polysomnography.

4 The practice of polysomnography consists of but is not
5 limited to the following tasks as performed for the purpose of
6 polysomnography, under the general supervision of a licensed
7 physician or qualified health care professional prescriber:

8 1. Monitoring, recording, and evaluating physiologic
9 data during polysomnographic testing and review during the
10 evaluation of sleep-related disorders, including sleep-related
11 respiratory disturbances, by applying any of the following
12 techniques, equipment, or procedures:

13 a. Noninvasive continuous, bilevel positive airway pressure,
14 or adaptive servo-ventilation titration on spontaneously
15 breathing patients using a mask or oral appliance; provided,
16 that the mask or oral appliance does not extend into the
17 trachea or attach to an artificial airway.

18 b. Supplemental low-flow oxygen therapy of less than six
19 liters per minute, utilizing a nasal cannula or incorporated
20 into a positive airway pressure device during a polysomnogram.

21 c. Capnography during a polysomnogram.

22 d. Cardiopulmonary resuscitation.

23 e. Pulse oximetry.

24 f. Gastroesophageal pH monitoring.

25 g. Esophageal pressure monitoring.

26 h. Sleep stage recording using surface
27 electroencephalography, surface electrooculography, and surface
28 submental electromyography.

29 i. Surface electromyography.

30 j. Electrocardiography.

31 k. Respiratory effort monitoring, including thoracic and
32 abdominal movement.

33 l. Plethysmography blood flow monitoring.

34 m. Snore monitoring.

35 n. Audio and video monitoring.

1 o. Body movement monitoring.

2 p. Nocturnal penile tumescence monitoring.

3 q. Nasal and oral airflow monitoring.

4 r. Body temperature monitoring.

5 2. Monitoring the effects that a mask or oral appliance
6 used to treat sleep disorders has on sleep patterns; provided,
7 however, that the mask or oral appliance shall not extend into
8 the trachea or attach to an artificial airway.

9 3. Observing and monitoring physical signs and symptoms,
10 general behavior, and general physical response to
11 polysomnographic evaluation and determining whether initiation,
12 modification, or discontinuation of a treatment regimen is
13 warranted.

14 4. Analyzing and scoring data collected during the
15 monitoring described in this section for the purpose of
16 assisting a physician in the diagnosis and treatment of sleep
17 and wake disorders that result from developmental defects,
18 the aging process, physical injury, disease, or actual or
19 anticipated somatic dysfunction.

20 5. Implementation of a written or verbal order from a
21 physician or qualified health care professional prescriber to
22 perform polysomnography.

23 6. Education of a patient regarding the treatment regimen
24 that assists the patient in improving the patient's sleep.

25 7. Use of any oral appliance used to treat sleep-disordered
26 breathing while under the care of a licensed polysomnographic
27 technologist during the performance of a sleep study, as
28 directed by a licensed dentist.

29 **Sec. 9. NEW SECTION. 148G.3 Location of services.**

30 The practice of polysomnography shall take place only in a
31 facility that is accredited by a nationally recognized sleep
32 medicine laboratory or center accrediting agency, in a hospital
33 licensed under chapter 135B, or in a patient's home pursuant to
34 rules adopted by the board; provided, however, that the scoring
35 of data and the education of patients may take place in another

1 setting.

2 Sec. 10. NEW SECTION. 148G.4 **Scope of chapter.**

3 Nothing in this chapter shall be construed to limit or
4 restrict a health care practitioner licensed in this state from
5 engaging in the full scope of practice of the individual's
6 profession.

7 Sec. 11. NEW SECTION. 148G.5 **Rulemaking.**

8 The board shall adopt rules necessary for the implementation
9 and administration of this chapter and the applicable
10 provisions of chapters 147 and 272C.

11 Sec. 12. NEW SECTION. 148G.6 **Licensing requirements.**

12 1. Beginning January 1, 2016, a qualified health care
13 practitioner, as determined by the board by rule, may apply to
14 the board for a license to perform polysomnography. The board
15 shall issue a license to the health care practitioner, without
16 examination, provided the application contains verification
17 that the health care practitioner has completed five hundred
18 hours of paid clinical or nonclinical polysomnographic work
19 experience within the three years prior to submission of the
20 application. The application shall also contain verification
21 from the health care practitioner's supervisor that the health
22 care practitioner is competent to perform polysomnography.

23 2. Beginning January 1, 2016, a person seeking licensure
24 as a polysomnographic technologist shall be of good moral
25 character, be at least eighteen years of age, pay the fees
26 established by the board for licensure, and present proof that
27 the person has satisfied one of the following educational
28 requirements:

29 a. Graduation from a polysomnographic educational program
30 that is accredited by the committee on accreditation for
31 polysomnographic technologist education or an equivalent
32 program as determined by the board.

33 b. Graduation from a respiratory care educational program
34 that is accredited by the commission on accreditation
35 for respiratory care or by a committee on accreditation

1 for the commission on accreditation of allied health
2 education programs, and completion of the curriculum for a
3 polysomnographic certificate established and accredited by the
4 commission on accreditation of allied health education programs
5 as an extension of the respiratory care program.

6 *c.* Graduation from an electroneurodiagnostic technologist
7 educational program that is accredited by the committee
8 on accreditation for education in electroneurodiagnostic
9 technology or by a committee on accreditation for the
10 commission on accreditation of allied health education
11 programs, and completion of the curriculum for a
12 polysomnographic certificate established and accredited by the
13 commission on accreditation of allied health education programs
14 as an extension of the electroneurodiagnostic educational
15 program.

16 *d.* An individual who is licensed under section 147.2
17 who holds an active license in good standing may practice
18 polysomnography without holding a polysomnographic license upon
19 approval of the board. Individuals shall submit verification
20 to the board of either of the following:

21 (1) Successful completion of an educational program in
22 polysomnography approved by the board.

23 (2) Successful completion of an examination in
24 polysomnography approved by the board.

25 Sec. 13. NEW SECTION. 148G.7 Persons exempt from licensing
26 requirement.

27 1. The following persons may provide sleep-related services
28 without being licensed as a polysomnographic technologist under
29 this chapter:

30 *a.* A qualified health care practitioner may provide
31 sleep-related services under the direct supervision of a
32 licensed polysomnographic technologist for a period of up to
33 six months while gaining the clinical experience necessary
34 to meet the admission requirements for a polysomnographic
35 credentialing examination. The board may grant a one-time

1 extension of up to six months.

2 *b.* A polysomnographic student may provide sleep-related
3 services under the direct supervision of a polysomnographic
4 technologist as a part of the student's educational program
5 while actively enrolled in a polysomnographic educational
6 program that is accredited by the commission on accreditation
7 of allied health education programs or an equivalent program as
8 determined by the board.

9 2. Before providing any sleep-related services, a
10 polysomnographic technician or polysomnographic student who is
11 obtaining clinical experience shall give notice to the board
12 that the person is working under the direct supervision of a
13 polysomnographic technologist in order to gain the experience
14 to be eligible to sit for a national certification examination.
15 The person shall wear a badge that appropriately identifies the
16 person while providing such services.

17 Sec. 14. NEW SECTION. 148G.8 Licensing sanctions.

18 The board may impose sanctions for violations of this
19 chapter as provided in chapters 147 and 272C.

20 Sec. 15. Section 152B.1, subsection 1, Code 2014, is amended
21 to read as follows:

22 1. "*Board*" means the board of respiratory care and
23 polysomnography created under chapter 147.

24 Sec. 16. Section 272C.1, subsection 6, paragraph z, Code
25 2014, is amended to read as follows:

26 *z.* The board of respiratory care and polysomnography in
27 licensing respiratory care practitioners pursuant to chapter
28 152B and polysomnographic technologists pursuant to chapter
29 148G.

30 Sec. 17. INITIAL APPOINTMENT OF POLYSOMNOGRAPHIC
31 TECHNOLOGIST TO BOARD. For the initial appointment of the
32 polysomnographic member to the board of respiratory care and
33 polysomnography pursuant to section 147.14, as amended in this
34 Act, such appointee must be eligible for licensure pursuant to
35 this Act. The appointment shall be effective upon the first

1 expiration of the term of an existing respiratory care board
2 member.

3 Sec. 18. EFFECTIVE DATE. The following provision or
4 provisions of this Act take effect January 1, 2015:

5 1. The section of this Act amending section 147.2,
6 subsection 1.

7 Sec. 19. IMPLEMENTATION PERIOD. A person who is working
8 in the field of sleep medicine on January 1, 2016, who is not
9 eligible to obtain the registered polysomnographic credential
10 shall have until January 1, 2017, to achieve a passing score on
11 the registered polysomnographic technologist examination for
12 licensure only. The individual shall be allowed to attempt
13 the examination and be awarded a license as a polysomnographic
14 technologist by meeting or exceeding the passing point
15 established by the board. After January 1, 2017, only persons
16 licensed as polysomnographic technologists or excepted from
17 this chapter may perform sleep-related services.

18 EXPLANATION

19 The inclusion of this explanation does not constitute agreement with
20 the explanation's substance by the members of the general assembly.

21 This bill requires the licensing of polysomnographic
22 technologists beginning January 1, 2016, and makes the
23 provisions of Code chapters 147 and 272C, including penalty
24 and other regulatory provisions, applicable to other health
25 professions applicable to the practice of polysomnography.
26 Code section 147.86 provides that it is a serious misdemeanor
27 to violate a provision of the licensing laws. A serious
28 misdemeanor is punishable by confinement for no more than one
29 year and a fine of at least \$315 but not more than \$1,875. The
30 licensing program is administered and regulated by the board of
31 respiratory care and polysomnography, with one respiratory care
32 practitioner replaced by a polysomnographic technologist.

33 The board may license other licensed health care
34 professionals, without examination, to perform polysomnography.
35 The applicant must provide evidence that the applicant

1 has completed 500 hours of paid clinical or nonclinical
2 polysomnographic work experience within the three years prior
3 to submission of the application. The application shall also
4 contain verification from the applicant's supervisor that the
5 applicant is competent to perform polysomnography.

6 A licensed polysomnographic technologist practices under
7 the general supervision of a physician, a physician assistant,
8 or an advanced registered nurse practitioner, providing
9 specifically enumerated services related to sleep disorders. A
10 polysomnographic student enrolled in an approved educational
11 program provides services under the direct supervision of a
12 polysomnographic technologist.

13 The bill sets out educational standards and testing
14 requirements, and provides for disciplinary actions.