SENATE FILE 337 BY COMMITTEE ON STATE GOVERNMENT

(SUCCESSOR TO SSB 1130)

A BILL FOR

- 1 An Act providing for the licensing of polysomnographic
- 2 technologists and exceptions thereto, making penalties
- 3 applicable, and including 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 2015, 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 <u>and polysomnography</u>, and the Iowa department 11 of public health, as applicable.

12 Sec. 2. Section 147.1, subsections 3 and 6, Code 2015, are 13 amended to read as follows:

3. "Licensed" or "certified", when applied to a physician 14 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.

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

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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 2015, 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, ll 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 2015, is amended 25 to read as follows:

26 18. For respiratory care <u>and polysomnography</u>, the board of 27 respiratory care and polysomnography.

28 Sec. 5. Section 147.14, subsection 1, paragraph o, Code 29 2015, is amended to read as follows:

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

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1 has practiced polysomnography for a minimum of six years

2 immediately preceding appointment to the board and who

3 is recommended by the Iowa sleep society, and one member

4 not licensed to practice medicine, osteopathic medicine,

5 <u>polysomnography</u>, or respiratory care who shall represent the 6 general public.

7 Sec. 6. Section 147.74, Code 2015, is amended by adding the 8 following new subsection:

9 <u>NEW SUBSECTION</u>. 23A. A person who is licensed to engage in 10 the practice of polysomnography shall have the right to use the 11 title "polysomnographic technologist" or the letters "P.S.G.T." 12 after the person's name. No other person may use that title 13 or letters or any other words or letters indicating that the 14 person is a polysomnographic technologist.

15 Sec. 7. NEW SECTION. 148G.1 Definitions.

16 As used in this chapter, unless the context otherwise 17 requires:

18 1. "Board" means the board of respiratory care and 19 polysomnography established in chapter 147.

20 2. "Direct supervision" means that the polysomnographic 21 technologist providing supervision must be present where the 22 polysomnographic procedure is being performed and immediately 23 available to furnish assistance and direction throughout the 24 performance of the procedure.

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

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

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

1 enrolled in a program approved by the board and who may 2 provide sleep-related services under the direct supervision 3 of a polysomnographic technologist as a part of the person's 4 educational program.

5 6. "Polysomnographic technician" means a person who has 6 graduated from a program approved by the board, but has not 7 yet received an accepted national credential awarded from an 8 examination program approved by the board and who may provide 9 sleep-related services under the direct supervision of a 10 licensed polysomnographic technologist for a period of up to 11 thirty days following graduation while awaiting credentialing 12 examination scheduling and results.

13 7. "Polysomnographic technologist" means a person licensed 14 by the board to engage in the practice of polysomnography under 15 the general supervision of a physician or a qualified health 16 care professional prescriber.

17 8. "Practice of polysomnography" means as described in 18 section 148G.2.

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

23 10. "Qualified health care professional prescriber" means a 24 physician assistant operating under the prescribing authority 25 granted in section 147.107 or an advanced registered nurse 26 practitioner operating under the prescribing authority granted 27 in section 147.107.

28 11. "Sleep-related services" means acts performed by 29 polysomnographic technicians, polysomnographic students, and 30 other persons permitted to perform those services under this 31 chapter, in a setting described in this chapter that would be 32 considered the practice of polysomnography if performed by a 33 polysomnographic technologist.

34 Sec. 8. <u>NEW SECTION</u>. 148G.2 Practice of polysomnography.
35 The practice of polysomnography consists of but is not

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1 limited to the following tasks as performed for the purpose of 2 polysomnography, under the general supervision of a licensed 3 physician or qualified health care professional prescriber:

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

9 a. Noninvasive continuous, bilevel positive airway pressure, 10 or adaptive servo-ventilation titration on spontaneously 11 breathing patients using a mask or oral appliance; provided, 12 that the mask or oral appliance does not extend into the 13 trachea or attach to an artificial airway.

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

17 c. Capnography during a polysomnogram.

18 d. Cardiopulmonary resuscitation.

19 e. Pulse oximetry.

20 f. Gastroesophageal pH monitoring.

21 g. Esophageal pressure monitoring.

22 h. Sleep stage recording using surface

23 electroencephalography, surface electrooculography, and surface 24 submental electromyography.

25 *i*. Surface electromyography.

26 j. Electrocardiography.

k. Respiratory effort monitoring, including thoracic andabdominal movement.

29 1. Plethysmography blood flow monitoring.

30 *m*. Snore monitoring.

31 *n*. Audio and video monitoring.

32 *o.* Body movement monitoring.

33 p. Nocturnal penile tumescence monitoring.

34 q. Nasal and oral airflow monitoring.

35 r. Body temperature monitoring.

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

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

10 4. Analyzing and scoring data collected during the 11 monitoring described in this section for the purpose of 12 assisting a physician in the diagnosis and treatment of sleep 13 and wake disorders that result from developmental defects, 14 the aging process, physical injury, disease, or actual or 15 anticipated somatic dysfunction.

16 5. Implementation of a written or verbal order from a 17 physician or qualified health care professional prescriber to 18 perform polysomnography.

19 6. Education of a patient regarding the treatment regimen 20 that assists the patient in improving the patient's sleep. 21 7. Use of any oral appliance used to treat sleep-disordered 22 breathing while under the care of a licensed polysomnographic 23 technologist during the performance of a sleep study, as 24 directed by a licensed dentist.

Sec. 9. <u>NEW SECTION</u>. 148G.3 Location of services. The practice of polysomnography shall take place only in a facility that is accredited by a nationally recognized sleep medicine laboratory or center accrediting agency, in a facility operated by a hospital or a hospital licensed under chapter allocation of patient's home pursuant to rules adopted by the board; provided, however, that the scoring of data and the education of patients may take place in another setting.

33 Sec. 10. NEW SECTION. 148G.4 Scope of chapter.

Nothing in this chapter shall be construed to limit or restrict a health care practitioner licensed in this state from

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l engaging in the full scope of practice of the individual's
2 profession.

3 Sec. 11. NEW SECTION. 148G.5 Rulemaking.

4 The board shall adopt rules necessary for the implementation 5 and administration of this chapter and the applicable 6 provisions of chapters 147 and 272C.

7 Sec. 12. <u>NEW SECTION</u>. **148G.6** Licensing requirements. 8 1. Beginning January 1, 2017, a person seeking licensure 9 as a polysomnographic technologist shall apply to the board 10 and pay the fees established by the board for licensure. 11 The application shall show that the applicant is of good 12 moral character and is at least eighteen years of age, and 13 shall include proof that the person has satisfied one of the 14 following educational requirements:

15 a. Graduation from a polysomnographic educational program 16 that is accredited by the committee on accreditation for 17 polysomnographic technologist education or an equivalent 18 program as determined by the board.

19 b. Graduation from a respiratory care educational program 20 that is accredited by the commission on accreditation for 21 respiratory care or by a committee on accreditation for 22 the commission on accreditation of allied health education 23 programs, and any of the following:

(1) Completion of the curriculum for a polysomnographic
certificate established and accredited by the commission
on accreditation of allied health education programs as an
extension of the respiratory care program.

(2) Obtaining the sleep disorder specialist credential from29 the national board for respiratory care.

30 (3) Obtaining the registered polysomnographic technologist
 31 credential from the board of registered polysomnographic
 32 technologists.

33 (4) Completing or obtaining any other certificate or34 credential program as recognized by the board.

35 c. Graduation from an electroneurodiagnostic technologist

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1 educational program that is accredited by the committee 2 on accreditation for education in electroneurodiagnostic 3 technology or by a committee on accreditation for the 4 commission on accreditation of allied health education 5 programs, and completion of the curriculum for a 6 polysomnographic certificate established and accredited by the 7 commission on accreditation of allied health education programs 8 as an extension of the electroneurodiagnostic educational 9 program.

10 2. a. Notwithstanding subsection 1, beginning January 11 1, 2017, the board shall issue a license to perform 12 polysomnography to an individual who holds an active license 13 under section 147.2 in a profession other than polysomnography 14 and who is in good standing with the board for that profession 15 upon application to the board demonstrating any of the 16 following:

17 (1) Successful completion of an educational program in18 polysomnography approved by the board.

19 (2) Successful completion of an examination in20 polysomnography approved by the board.

(3) Verification from the medical director of the individual's current employer or the medical director's designee that the individual has completed on-the-job training in the field of polysomnography as approved by the board, along with written verification from the medical director of the individual's current employer or the medical director's designee that the individual is competent to perform polysomnography.

29 b. The board shall not collect a licensing or application 30 fee from a health care practitioner who receives a license 31 pursuant to this subsection.

32 3. Notwithstanding subsection 1, beginning January 1, 33 2017, a person who is working in the field of sleep medicine 34 on January 1, 2017, may apply to the board for a license to 35 perform polysomnography. The board shall issue a license to

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1 the person, without examination, provided the application 2 contains verification that the person has completed five 3 hundred hours of paid clinical or nonclinical polysomnographic 4 work experience within the three years prior to submission 5 of the application. The application shall also contain 6 verification from the medical director of the person's current 7 employer or the medical director's designee that the person 8 is competent to perform polysomnography. An active license 9 holder under section 147.2 being issued a license under this 10 subsection is exempt from paying the licensure fee required for 11 a polysomnography license.

4. A person who is working in the field of sleep medicine on January 1, 2017, who is not otherwise eligible to obtain a license pursuant to this section shall have until January 15 1, 2018, to achieve a passing score on an examination as designated by the board. The board shall allow the person to attempt the examination and be awarded a license as a polysomnographic technologist by meeting or exceeding the passing point established by the board. After January 1, 20 2018, only persons licensed as polysomnographic technologists pursuant to this chapter, or excepted from the requirements of this chapter may perform sleep-related services.

5. The fees assessed by the board shall be sufficient to
24 cover all costs associated with the administration of this
25 chapter.

26 Sec. 13. <u>NEW SECTION</u>. 148G.7 Persons exempt from licensing 27 requirement.

28 1. The following persons may provide sleep-related services 29 without being licensed as a polysomnographic technologist under 30 this chapter:

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

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1 credentialing examination. The board may grant a one-time
2 extension of up to six months.

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

10 2. Before providing any sleep-related services, a 11 polysomnographic technician or polysomnographic student who is 12 obtaining clinical experience shall give notice to the board 13 that the person is working under the direct supervision of a 14 polysomnographic technologist in order to gain the experience 15 to be eligible to sit for a national certification examination. 16 The person shall wear a badge that appropriately identifies the 17 person while providing such services.

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

19 The board may impose sanctions for violations of this 20 chapter as provided in chapters 147 and 272C.

21 Sec. 15. Section 152B.1, subsection 1, Code 2015, is amended 22 to read as follows:

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

25 Sec. 16. Section 272C.1, subsection 6, paragraph z, Code 26 2015, is amended to read as follows:

27 z. The board of respiratory care <u>and polysomnography</u> in 28 licensing respiratory care practitioners pursuant to chapter 29 152B <u>and polysomnographic technologists pursuant to chapter</u> 30 148G.

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

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1 this Act. The appointment shall be effective upon the first 2 expiration of the term of an existing respiratory care board 3 member which occurs after the effective date of this section 4 of this Act.

5 Sec. 18. EFFECTIVE DATE. The following provision or 6 provisions of this Act take effect January 1, 2017:

7 1. The section of this Act amending section 147.2,8 subsection 1.

9

EXPLANATION

10The inclusion of this explanation does not constitute agreement with11the explanation's substance by the members of the general assembly.

12 This bill requires the licensing of polysomnographic 13 technologists beginning January 1, 2017, and makes the 14 provisions of Code chapters 147 and 272C, including penalty 15 and other regulatory provisions, applicable to other health 16 professions applicable to the practice of polysomnography. 17 Code section 147.86 provides that it is a serious misdemeanor 18 to violate a provision of the licensing laws. A serious 19 misdemeanor is punishable by confinement for no more than one 20 year and a fine of at least \$315 but not more than \$1,875. The 21 licensing program is administered and regulated by the board of 22 respiratory care and polysomnography, with one respiratory care 23 practitioner replaced by a polysomnographic technologist.

The bill provides that the board may issue a license to a person who has graduated from one of three educational programs approved by the board. If the educational program was in respiratory care, the person must also have received a certification or credential as a sleep disorder specialist, a registered polysomnographic technologist, or other area as designated by the board. The board shall also issue a license to practice polysomnography to any individual licensed under Code section 147.2 as long as the individual shows the board that the individual has completed an educational program or passed an examination approved by the board or receives verification from the medical director of the individual's

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1 current employer that the individual has completed on-the-job 2 training and is competent to perform polysomnography. The 3 board shall license a person working in the field of sleep 4 medicine on January 1, 2017, without examination, to perform The applicant must provide evidence that 5 polysomnography. 6 the applicant has completed 500 hours of paid clinical or 7 nonclinical polysomnographic work experience within the 8 three years prior to submission of the application. The 9 application shall also contain verification from the medical 10 director of the person's current employer that the applicant 11 is competent to perform polysomnography. A person currently 12 practicing polysomnography who is not otherwise eligible for 13 licensure under the bill has until January 1, 2018, to pass an 14 examination approved by the board.

15 An active license holder under Code section 147.2 being 16 issued a license under the bill is exempt from paying the 17 licensure fee required for a polysomnography license. The fees 18 assessed by the board shall be sufficient to cover all costs 19 associated with the administration of the bill.

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

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