

Senate Study Bill 1130 - Introduced

SENATE FILE _____
BY (PROPOSED COMMITTEE ON
STATE GOVERNMENT BILL BY
CHAIRPERSON DANIELSON)

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 and polysomnography, 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:

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

30 o. For respiratory care and polysomnography, one licensed
31 physician with training in respiratory care, ~~three~~ two
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

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 polysomnography, 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 NEW SUBSECTION. 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.

25 3. "*General supervision*" means that the polysomnographic
26 procedure is provided under a physician's or qualified health
27 care professional prescriber's overall direction and control,
28 but the physician's or qualified health care professional
29 prescriber's presence is not required during the performance
30 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 in sleep medicine and
34 who is actively involved in the sleep medicine center or
35 laboratory.

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

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

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

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

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

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

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

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

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

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

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

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

18 c. Capnography during a polysomnogram.

19 d. Cardiopulmonary resuscitation.

20 e. Pulse oximetry.

21 f. Gastroesophageal pH monitoring.

22 g. Esophageal pressure monitoring.

23 h. Sleep stage recording using surface
24 electroencephalography, surface electrooculography, and surface
25 submental electromyography.

26 i. Surface electromyography.

27 j. Electrocardiography.

28 k. Respiratory effort monitoring, including thoracic and
29 abdominal movement.

30 l. Plethysmography blood flow monitoring.

31 m. Snore monitoring.

32 n. Audio and video monitoring.

33 o. Body movement monitoring.

34 p. Nocturnal penile tumescence monitoring.

35 q. Nasal and oral airflow monitoring.

1 r. Body temperature monitoring.

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

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

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

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

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

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

26 Sec. 9. NEW SECTION. 148G.3 Location of services.

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

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

35 Nothing in this chapter shall be construed to limit or

1 restrict a health care practitioner licensed in this state from
2 engaging in the full scope of practice of the individual's
3 profession.

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

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

8 Sec. 12. NEW SECTION. 148G.6 Licensing requirements.

9 1. Beginning January 1, 2017, a person seeking licensure
10 as a polysomnographic technologist shall apply to the board
11 and pay the fees established by the board for licensure.
12 The application shall show that the applicant is of good
13 moral character and is at least eighteen years of age, and
14 shall include proof that the person has satisfied one of the
15 following educational requirements:

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

20 b. Graduation from a respiratory care educational program
21 that is accredited by the commission on accreditation
22 for respiratory care or by a committee on accreditation
23 for the commission on accreditation of allied health
24 education programs, and completion of the curriculum for a
25 polysomnographic certificate established and accredited by the
26 commission on accreditation of allied health education programs
27 as an extension of the respiratory care program.

28 c. Graduation from an electroneurodiagnostic technologist
29 educational program that is accredited by the committee
30 on accreditation for education in electroneurodiagnostic
31 technology or by a committee on accreditation for the
32 commission on accreditation of allied health education
33 programs, and completion of the curriculum for a
34 polysomnographic certificate established and accredited by the
35 commission on accreditation of allied health education programs

1 as an extension of the electroneurodiagnostic educational
2 program.

3 2. *a.* Notwithstanding subsection 1, beginning January 1,
4 2017, the board may issue a license to perform polysomnography
5 to a health care practitioner who holds an active license under
6 section 147.2 in a profession other than polysomnography and
7 who is in good standing with the board for that profession upon
8 application to the board demonstrating either of the following:

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

11 (2) Successful completion of an examination in
12 polysomnography approved by the board.

13 *b.* The board shall not collect a licensing or application
14 fee from a health care practitioner who receives a license
15 pursuant to this subsection.

16 3. Notwithstanding subsection 1, beginning January 1,
17 2017, a person who is working in the field of sleep medicine
18 on January 1, 2017, may apply to the board for a license to
19 perform polysomnography. The board may issue a license to the
20 person, without examination, provided the application contains
21 verification that the person has completed five hundred
22 hours of paid clinical or nonclinical polysomnographic work
23 experience within the three years prior to submission of the
24 application. The application shall also contain verification
25 from the person's supervisor that the person is competent to
26 perform polysomnography.

27 4. A person who is working in the field of sleep medicine
28 on January 1, 2017, who is not otherwise eligible to obtain
29 a license pursuant to this section shall have until January
30 1, 2018, to achieve a passing score on an examination as
31 designated by the board. The board shall allow the person
32 to attempt the examination and be awarded a license as a
33 polysomnographic technologist by meeting or exceeding the
34 passing point established by the board. After January 1,
35 2018, only persons licensed as polysomnographic technologists

1 pursuant to this chapter, or excepted from the requirements of
2 this chapter may perform sleep-related services.

3 Sec. 13. NEW SECTION. **148G.7 Persons exempt from licensing**
4 **requirement.**

5 1. The following persons may provide sleep-related services
6 without being licensed as a polysomnographic technologist under
7 this chapter:

8 a. A qualified health care practitioner may provide
9 sleep-related services under the direct supervision of a
10 licensed polysomnographic technologist for a period of up to
11 six months while gaining the clinical experience necessary
12 to meet the admission requirements for a polysomnographic
13 credentialing examination. The board may grant a one-time
14 extension of up to six months.

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

22 2. Before providing any sleep-related services, a
23 polysomnographic technician or polysomnographic student who is
24 obtaining clinical experience shall give notice to the board
25 that the person is working under the direct supervision of a
26 polysomnographic technologist in order to gain the experience
27 to be eligible to sit for a national certification examination.
28 The person shall wear a badge that appropriately identifies the
29 person while providing such services.

30 Sec. 14. NEW SECTION. **148G.8 Licensing sanctions.**

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

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

35 1. "*Board*" means the board of respiratory care and

1 polysomnography created under chapter 147.

2 Sec. 16. Section 272C.1, subsection 6, paragraph z, Code
3 2015, is amended to read as follows:

4 z. The board of respiratory care and polysomnography in
5 licensing respiratory care practitioners pursuant to chapter
6 152B and polysomnographic technologists pursuant to chapter
7 148G.

8 Sec. 17. INITIAL APPOINTMENT OF POLYSOMNOGRAPHIC
9 TECHNOLOGIST TO BOARD. For the initial appointment of the
10 polysomnographic member to the board of respiratory care and
11 polysomnography pursuant to section 147.14, as amended in this
12 Act, such appointee must be eligible for licensure pursuant to
13 this Act. The appointment shall be effective upon the first
14 expiration of the term of an existing respiratory care board
15 member which occurs after the effective date of this section
16 of this Act.

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

19 1. The section of this Act amending section 147.2,
20 subsection 1.

21

EXPLANATION

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

24 This bill requires the licensing of polysomnographic
25 technologists beginning January 1, 2017, and makes the
26 provisions of Code chapters 147 and 272C, including penalty
27 and other regulatory provisions, applicable to other health
28 professions applicable to the practice of polysomnography.
29 Code section 147.86 provides that it is a serious misdemeanor
30 to violate a provision of the licensing laws. A serious
31 misdemeanor is punishable by confinement for no more than one
32 year and a fine of at least \$315 but not more than \$1,875. The
33 licensing program is administered and regulated by the board of
34 respiratory care and polysomnography, with one respiratory care
35 practitioner replaced by a polysomnographic technologist.

1 The bill provides that the board may issue a license to a
2 person who has graduated from one of three educational programs
3 approved by the board. The board may also issue a license to
4 any health care practitioner licensed under Code section 147.2
5 to practice polysomnography as long as the practitioner shows
6 the board that the practitioner has completed an educational
7 program or passed an examination approved by the board. The
8 board may license a person working in the field of sleep
9 medicine on January 1, 2017, without examination, to perform
10 polysomnography. The applicant must provide evidence that
11 the applicant has completed 500 hours of paid clinical or
12 nonclinical polysomnographic work experience within the three
13 years prior to submission of the application. The application
14 shall also contain verification from the applicant's supervisor
15 that the applicant is competent to perform polysomnography.
16 A person currently practicing polysomnography who is not
17 otherwise eligible for licensure under the bill has until
18 January 1, 2018, to pass an examination approved by the board.
19 A licensed polysomnographic technologist practices under
20 the general supervision of a physician, a physician assistant,
21 or an advanced registered nurse practitioner, providing
22 specifically enumerated services related to sleep disorders. A
23 polysomnographic student enrolled in an approved educational
24 program provides services under the direct supervision of a
25 polysomnographic technologist.