

REVENUE: No revenue impact

FISCAL: Fiscal statement issued

Action:	Do Pass as Amended and Be Printed Engrossed and Be Referred to the Committee on Ways and Means
Vote:	5 - 0 - 0
Yeas:	Bates, Kruse, Morse, Shields, Monnes Anderson
Nays:	0
Exc.:	0
Prepared By:	Brian Niebuurt, Administrator
Meeting Dates:	3/14, 4/14

WHAT THE MEASURE DOES: Changes name of Respiratory Therapist Licensing Board to Respiratory Therapist and Polysomnographic Technologist Licensing Board (Board). Defines “polysomnography” and “polysomnographic technologist.” Allows students to practice polysomnography if they are licensed in a Board-approved educational program and are in the physical presence of a Board-approved supervisor. Defines settings where polysomnography may be practiced. Requires that the practice of polysomnography be performed in accordance with the prescription or verbal orders of a physician, physician assistant or nurse practitioner and under the direction of a qualified medical director for polysomnography. Defines titles polysomnographic technologists may use. Defines requirements for licensure as a polysomnographic technologist. Expands membership of the Board to include a medical director and two individuals who practice polysomnography. Requires the Board to license polysomnographic technologists beginning January 1, 2012. Prohibits the practice of polysomnography by a person other than a licensed polysomnographic technologist or respiratory therapist effective January 1, 2013. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Accreditation of polysomnographic technologists
- Potential impact of fees
- Patient protection

EFFECT OF COMMITTEE AMENDMENT: Clarifies the definition of “polysomnography,” including removing the activities of gastroesophageal pH monitoring and esophageal pressure monitoring. Adds definition for “qualified medical director for polysomnography.” Requires that practice of polysomnography be performed in accordance with the prescription or verbal orders of a physician, physician assistant or nurse practitioner and under the direction of a qualified medical director for polysomnography. Clarifies that respiratory care practitioners can practice polysomnography.

BACKGROUND: Polysomnography is a test used to diagnose sleep disorders. Polysomnography records brain waves, blood oxygen levels, heart rate and breathing rate, as well as eye and leg movements during sleep.

Senate Bill 723-A statutorily defines the practice of polysomnography and requires the Board to begin licensing polysomnographic technologists on January 1, 2012. In order to be eligible for licensure an applicant must: (a) be at least 18 years of age; (b) have completed an approved four-year high school course of study or equivalent; (c) have completed a polysomnography education approved by the Board; and, (d) pass an examination approved by the Board.

In 2005, Louisiana became the first state to require independent licensure for polysomnographic technologists. Eight other jurisdictions have since adopted similar regulations: California, Maryland, New Jersey, New Mexico, North Carolina, Tennessee, Virginia and Washington, D.C.

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This summary has not been adopted or officially endorsed by action of the committee.