

Department of Legislative Services
Maryland General Assembly
2012 Session

FISCAL AND POLICY NOTE

Senate Bill 350

(Senator Conway)

Education, Health, and Environmental Affairs

Health and Government Operations

Respiratory Care Practitioners - Practicing Polysomnography - Licensing Exceptions

This bill clarifies that licensed respiratory care practitioners have the right to practice respiratory care within the scope of their license, including practicing respiratory care in a sleep laboratory. The bill exempts respiratory care practitioners whose duties include practicing polysomnography and who are licensed by the State Board of Physicians to practice respiratory care by December 31, 2012, from the requirement to be licensed as a polysomnographic technologist by October 1, 2013.

Fiscal Summary

State Effect: None. The bill clarifies who is subject to licensure as a polysomnographic technologist.

Local Effect: None.

Small Business Effect: None.

Analysis

Current Law: The practice of polysomnography means monitoring and recording physiologic data during sleep, including sleep-related respiratory disturbances under the supervision of a licensed physician, or using these data for the purposes of assisting a licensed physician in the diagnosis and treatment of sleep and wake disorders. It also includes diagnosing and treating individuals who suffer from sleep disorders under certain circumstances.

Chapter 595 of 2006 requires the State Board of Physicians to license and regulate the practice of polysomnography and established the board's Polysomnography Professional Standards Committee. Under Chapter 595, polysomnographic technologists initially had to be licensed by October 1, 2009. However, Chapters 261 and 262 of 2009 delayed the licensing requirement to October 1, 2011. Chapters 267 and 268 of 2011 further delayed the licensing requirement until October 1, 2013.

To qualify for licensure as a polysomnographic technologist, applicants must have passed a national certifying examination, submit proof of certification as a Registered Polysomnographic Technologist™ or other national certification approved by the board, and meet certain educational requirements. Specifically, an applicant must have (1) graduated from a polysomnographic educational program accredited by the Commission on Accreditation of Allied Health Education Programs; (2) graduated from an accredited respiratory care educational program and completed the Committee on Accreditation of Respiratory Care's curriculum for a polysomnography certificate; or (3) graduated from an accredited electroneuro-diagnostic educational program.

“Practice respiratory care” means to evaluate, care for, and treat, including the diagnostic evaluation of, individuals who have deficiencies and abnormalities that affect the pulmonary system and associated aspects of the cardiopulmonary and other systems under the supervision of and in collaboration with a physician. Respiratory care includes (1) providing direct and indirect respiratory care services; (2) practicing the principles, techniques, and theories derived from cardiopulmonary medicine; (3) evaluating and treating individuals whose cardiopulmonary functions have been threatened or impaired; (4) observing and monitoring physical signs and symptoms, general behavior, and general physical response to respiratory care procedures; (5) transcribing and implementing respiratory care orders; (6) using evaluation techniques; and (7) applying the use of techniques, equipment, and procedures involved in the administration of respiratory care.

Additional Information

Prior Introductions: None.

Cross File: HB 833 (Delegate Reznik, *et al.*) – House Health and Government Operations Committee.

Information Source(s): Department of Health and Mental Hygiene, Department of Legislative Services

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