GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2007

H HOUSE BILL 2015

Short Title: F	Polysomnography Practice Act. (Public)			
Sponsors: F	Representative Wainwright.			
Referred to: J	udiciary II, if favorable, Finance.			
	May 10, 2007			
	A BILL TO BE ENTITLED			
AN ACT ESTABLISHING THE POLYSOMNOGRAPHY PRACTICE ACT.				
The General Assembly of North Carolina enacts:				
SECTION 1. Chapter 90 of the General Statutes is amended by adding a				
new Article to read:				
" <u>Article 42.</u>				
"Polysomnography Practice Act.				
"§ 90-710. Title; purpose.				
(a) This Article may be cited as the 'Polysomnography Practice Act'.				
(b) The practice of polysomnography affects the public health, safety, and				
welfare. It is the purpose of this Article, through the licensure and regulation of persons				
practicing as polysomnographic technologists, to ensure minimum standards of				
competency and to provide the public with safe polysomnography services.				
" <u>§ 90-711. Definitions.</u>				
The following definitions apply in this Article:				
<u>(1)</u>	Committee The North Carolina Polysomnography Professional			
	Standards Committee.			
<u>(2)</u>	<u>Direct supervision.</u> – The authority and responsibility to direct the			
	performance of activities as established by policies and procedures for			
	safe and appropriate completion of polysomnography services			
	whereby the physical presence of a supervisor is required throughout			
	the performance of a polysomnographic procedure.			
<u>(3)</u>	General supervision. – The authority and responsibility to direct the			
	performance of activities as established by policies and procedures for			
	safe and appropriate completion of polysomnography services			
	whereby the physical presence of a supervisor is not required during			
	the performance of the polysomnographic procedure, but the			

supervisor must be available for assistance, if needed.

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

3334

35

36

37

38 39

40

41 42

- 1 (4) <u>Licensee. A person who has been issued a license to practice</u> 2 <u>polysomnography under this Article.</u>
 - (5) <u>Licensed physician. A physician licensed to practice medicine under Article 1 of Chapter 90 of the General Statutes.</u>
 - (6) <u>Medical Board. The North Carolina Medical Board, as established</u> under Article 1 of Chapter 90 of the General Statutes.
 - (7) Polysomnography. The allied health specialty involving the process of attended and unattended monitoring, analysis, and recording of physiological data during sleep and wakefulness to assist in the assessment of sleep and wake disorders and other sleep disorders, syndromes, and dysfunctions that are sleep-related, manifest during sleep, or disrupt normal sleep and wake cycles and activities, as performed by polysomnographic technologists, polysomnographic technicians, polysomnographic trainees, or polysomnographic students who are permitted to perform polysomnography services under this Article.
 - Polysomnographic student. A person who is actively enrolled in a (8) polysomnography program accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP), an Accredited Sleep Technologist Educational Program (A-STEP), or the Committee on Accreditation of Education for Polysomnographic Technologists (CoAPSG), but is not employed in the field of polysomnography; however, the student mav provide polysomnographic services with a temporary license from the Committee as part of the student's educational program under the direct supervision of a licensed polysomnographic technologist and under the general supervision of a licensed physician.
 - (9) Polysomnographic technician. A person who has been employed full-time at least six months in the practice of polysomnography but has not passed the national certifying examination given by the Board of Registered Polysomnographic Technologists (BRPT) and does not hold the credential Registered Polysomnographic Technologist (RPSGT). This person may practice polysomnography with a provisional license from the Committee under the general supervision of both a licensed polysomnographic technologist and a licensed physician.
 - (10) Polysomnographic technologist. A person who has passed the examination given by the Board of Registered Polysomnographic Technologists (BRPT), the worldwide credentialing agency for polysomnography, received the credential of Registered Polysomnographic Technologist (RPSGT), and is fully licensed by the Committee to engage in the practice of polysomnography under the general supervision of a licensed physician.

1 2 3 4 5 6	(11)	full-to has n of Re hold (RPS	somnographic trainee. – A person who has been employed ime less than six months in the practice of polysomnography, but ot passed the national certifying examination given by the Board egistered Polysomnographic Technologists (BRPT) and does not the credential Registered Polysomnographic Technologist GT). This person may practice polysomnography with a		
7 8		_	orary license from the Committee under the direct supervision of ensed polysomnographic technologist and the general supervision		
9			icensed physician.		
10	"§ 90-712. Pra		f polysomnography.		
11			e of polysomnography' means the performance of any of the		
12	12 <u>following tasks under the general supervision of a licensed physician:</u>				
13	<u>(1)</u>				
14		sleep	-related disorders, including sleep-related respiratory		
15		distu	bances, by applying the following techniques, equipment, or		
16		proce	edures:		
17		<u>a.</u>	Continuous or bi-level positive airway pressure titrations used		
18			to treat sleep disordered breathing on patients using a mask or		
19			oral appliance, provided the mask or oral appliance does not		
20			extend into the trachea or attach to an artificial airway.		
21		<u>b.</u>	Supplemental low flow oxygen therapy, up to six liters per		
22			minute, utilizing nasal cannula or administered with continuous		
23			or bi-level positive airway pressure during a polysomnogram.		
24		<u>c.</u>	Capnography during a polysomnogram.		
25		<u>c.</u> <u>d.</u>	Cardiopulmonary resuscitation.		
26		<u>e.</u> <u>f.</u>	Pulse oximetry.		
27		<u>f.</u>	Gastroesophageal pH monitoring.		
28		<u>g.</u>	Esophageal pressure monitoring.		
29		<u>h.</u>	Sleep staging, including surface electroencephalography,		
30			surface electrooculagraphy, and surface submental or masseter		
31			electromyography.		
32		<u>i.</u>	Surface electromyography.		
33		<u>i.</u> j. <u>k.</u>	Electrocardiography.		
34		<u>k.</u>	Respiratory effort monitoring, including thoracic and abdominal		
35			movement.		
36		<u>l.</u>	Plethysmography blood flow monitoring.		
37		<u>m.</u>	Snore monitoring.		
38		<u>n.</u>	Audio and video monitoring.		
39		<u>O.</u>	Body movement.		
40		<u>p.</u>	Nocturnal penile tumescence monitoring.		
41		<u>q.</u>	Nasal and oral airflow monitoring.		
42		<u>r.</u>	Body temperature monitoring.		
43		<u>S.</u>	Actigraphy.		

- (2) Observing and monitoring physical signs and symptoms, general behavior, and general physical response to polysomnographic evaluation and determining whether initiation, modification, or discontinuation of a treatment regimen is warranted based on protocol and physician's order. (3) Analyzing and scoring data collected during the monitoring described in subdivisions (1) and (2) of this subsection for the purpose of assisting a licensed physician in the diagnosis and treatment of sleep and wake disorders.
 - (4) Implementing a written or verbal order from a licensed physician that requires the practice of polysomnography.
 - (5) Educating a patient regarding the treatment regimen that assists the patient in improving the patient's sleep.
 - (b) The practice of polysomnography shall take place in a hospital, a stand-alone sleep laboratory or sleep center, or a patient's home. However, the scoring of data and education of patients may take place in settings other than a sleep laboratory or sleep center.

"§ 90-713. License required; exemptions.

- (a) On or after January 1, 2010, no person shall practice polysomnography, offer to practice polysomnography, or employ unlicensed persons to practice polysomnography as defined in this Article, use the title 'licensed registered polysomnographic technologist,' or otherwise indicate or imply orally or in writing that the person is licensed to practice polysomnography unless that person is currently licensed as provided in this Article.
 - (b) The provisions of this Article shall not apply to:
 - (1) Any person registered, certified, credentialed, or licensed to engage in another profession or occupation or any person working under the supervision of a person registered, certified, credentialed, or licensed to engage in another profession or occupation in this State if the person is performing work incidental to or within the practice of that profession or occupation and the person does not represent himself or herself as a licensed polysomnographic technologist or a provisionally licensed polysomnographic technologist.
 - (2) A polysomnographic technologist employed by the United States government when performing duties associated with that employment.
 - (3) Research investigation that monitors physiological parameters during sleep or wakefulness provided that the research investigation has been approved and deemed acceptable by an institutional review board, follows conventional safety measures required for the procedures, and the information is not obtained or used for the practice of clinical medicine.
- "§ 90-714. The North Carolina Polysomnography Professional Standards Committee.

- (a) Composition and Terms. The North Carolina Polysomnography Professional Standards Committee is created. The Committee shall consist of seven members who shall serve staggered terms. On or before July 1, 2008, the initial Committee members shall be selected by the Governor as follows:
 - (1) Three licensed registered polysomnographic technologists upon the recommendation of the North Carolina Association of Sleep Technologists (NCAST), one of whom shall serve a four-year term, one of whom shall serve a two-year term, and one of whom shall serve a one-year term. NCAST may submit a list of three names for each of these seats on the Committee.
 - One physician licensed under Article 1 of Chapter 90 of the General Statutes who is certified in sleep medicine by a national certifying body recognized by the American Academy of Sleep Medicine (AASM), who shall serve a three-year term. The North Carolina Medical Society may submit a list of three names for this seat on the Committee.
 - One person who is the polysomnographic director, manager, or supervisor of an accredited, hospital-based sleep center by the American Academy of Sleep Medicine (AASM), who shall serve a two-year term. The North Carolina Hospital Association may submit a list of three names for this seat on the Committee.
 - (4) One person who is a Registered Electro-Encephalogram Technologist (R.EEG.T) who is also a registered polysomnographic technologist, who shall serve a four-year term. The North Carolina Electro-Encephalogram Society may submit a list of three names for this seat on the Committee.
 - (5) One public member who shall serve a three-year term.

Upon the expiration of the terms of the initial Committee members, members shall be appointed for a term of four years and shall serve until a successor is appointed. No member may serve more than two consecutive full terms.

(b) Qualifications. – Members of the Committee shall be citizens of the United States and residents of this State. In making appointments to the Committee, the Governor shall strive to ensure that at least one Committee member is 50 years of age or older and at least one member is of a racial minority. The polysomnographic technologist members shall hold current licenses from the Committee and shall remain in good standing with the Committee during their terms. The public member of the Committee shall not be: (i) trained or experienced in the practice of polysomnography, (ii) an agent or employee of a person engaged in the practice of polysomnography, (iii) a health care professional licensed under this Chapter or a person enrolled in a program to become a licensed health care professional, (iv) an agent or employee of a health care institution, a health care insurer, or a health care professional school, (v) a member of an allied health profession or a person enrolled in a program to become a member of an allied health profession, or (vi) a spouse of an individual who may not serve as a public member of the Committee.

- (c) <u>Vacancies. Any vacancy shall be filled by the authority originally filling that position. Appointees to fill vacancies shall serve the remainder of the unexpired term and until their successors have been duly appointed and qualified.</u>
- (d) Removal. The Committee may remove any of its members for neglect of duty, incompetence, or unprofessional conduct. A member subject to disciplinary proceedings in his or her capacity as a licensed polysomnographic technologist shall be disqualified from participating in the official business of the Committee until the charges have been resolved.
- (e) <u>Compensation. Each member of the Committee shall receive per diem and reimbursement for travel and subsistence as provided in G.S. 93B-5.</u>
- (f) Officers. The officers of the Committee shall be a chair, a vice-chair, and other officers deemed necessary by the Committee to carry out the purposes of this Article. Each officer shall be elected annually by the Committee for a one-year term and shall serve until his or her successor is elected and qualified.
- (g) Meetings. The Committee shall hold its first meeting within 30 days after the appointment of its members and shall hold at least two meetings each year to conduct business and to review the standards and rules previously adopted by the Committee. The Committee shall establish the procedures for calling, holding, and conducting regular and special meetings. A majority of Committee members constitutes a quorum.

"§ 90-715. Actions; powers of the Committee.

- (a) All Committee actions shall be approved by the Medical Board for Committee actions to become effective. All actions of the Committee shall be considered by the Medical Board at its next regular meeting after the Committee has acted.
 - (b) The Committee shall have the power and duty to:
 - (1) Administer this Article.
 - (2) Issue interpretations of this Article.
 - (3) Adopt, amend, or repeal rules as may be necessary to carry out the provisions of this Article.
 - (4) Employ and fix the compensation of personnel that the Committee determines is necessary to carry into effect the provisions of this Article and incur other expenses necessary to effectuate this Article.
 - (5) Determine the qualifications and fitness of applicants for licensure, provisional licensure, licensure renewal, and reciprocal licensure.
 - (6) Request that the Department of Justice conduct criminal history record checks of applicants for licensure in accordance with G.S. 114-19.11B.
 - (7) <u>Issue, renew, deny, suspend, or revoke licenses, order probation, issue reprimands, and carry out any other disciplinary actions authorized by this Article.</u>
 - (8) Set fees for licensure, provisional licensure, temporary licensure, licensure renewal, late licensure renewal, and other services deemed necessary to carry out the purposes of this Article.
 - (9) Establish continuing education requirements for licensees.

1 Establish a code of ethics for licensees. (10)2 (11)Maintain a current list of all persons who have been licensed under this 3 Article. 4 Develop standards of care for the practice of polysomnography in this (12)5 State and develop standards of practice in accordance with the 6 American Academy of Sleep Medicine (AASM). 7 Conduct investigations, subpoena individuals and records, and do all (13)8 other things necessary and proper to discipline persons licensed under 9 this Article and to enforce this Article. 10 (14)Conduct administrative hearings in accordance with Article 3A of 11 Chapter 150B of the General Statutes. 12 Maintain a record of all proceedings and make available to all (15)13 licensees and other concerned parties an annual report of all 14 Committee action. 15 Adopt a seal containing the name of the Committee for use on all (16)official documents and reports issued by the Committee. 16 17 "§ 90-716. Qualifications for licensure; provision of services. 18 An applicant shall be licensed to practice polysomnography if the applicant 19 meets all of the following qualifications: 20 Is at least 18 years old. (1) 21 **(2)** Is of good moral character. 22 Completes an application on a form provided by the Committee. (3) 23 Has passed the national certifying examination given by the Board of (4) 24 Registered Polysomnographic Technologists (BRPT) and holds the 25 credential of Registered Polysomnographic Technologist (RPSGT). 26 Meets at least one of the following educational requirements: (5) 27 Is a graduate from a polysomnographic educational program a. 28 accredited by the Commission on Accreditation of Allied 29 Health Education Programs (CAAHEP). Is a graduate from any Allied Health Program, including a 30 <u>b.</u> 31 Electroneurodiagnostic Technologist (END/EDT), Registered 32 Nurse (RN), Licensed Practical Nurse (LPN), Respiratory 33 Therapist (RT), or any other licensed allied health profession 34 approved by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) with the addition of a 35 36 curriculum in a polysomnography certificate or add-on that is approved by CAAHEP or the Committee on Accreditation of 37 38 Education for Polysomnographic Technologists (CoAPSG). All 39 respiratory therapist programs with add-ons or certificates 40 approved in conjunction with the Committee on Accreditation 41 of Education for Respiratory Care (CoARC) shall be acceptable 42 until January 1, 2010, after which time all accredited CAAHEP, 43 including respiratory therapy, shall have CoAPSG accreditation 44 for their add-on or certificate program.

Has successfully completed an Accredited Sleep Technologist 1 <u>c.</u> 2 Educational Program (A-STEP) accredited by the American 3 Academy of Sleep Medicine (AASM); provided, however, this 4 option shall not remain available after January 1, 2010, if there 5 are at least eight polysomnographic technologist educational 6 programs in North Carolina dispersed throughout the State that 7 have obtained accreditation, and remain accredited, by the 8 Commission on Accreditation of Allied Health Educational 9 Programs (CAAHEP) for two years. If there are not eight polysomnographic accredited educational programs by January 10 11 1, 2012, this option shall remain available until there are eight 12 programs that have been accredited for two years. 13 Any person who holds the credential of Registered Polysomnographic 14 Technologist (RPSGT) as of January 1, 2007, shall be exempt from 15 meeting the requirements under sub-subdivisions a. and b. of this 16 subdivision. 17 (6) Maintains and provides proof of continuing education requirements 18 established by the Board of Registered Polysomnographic 19 Technologists (BRPT). Successfully completes the requirements for Basic Cardiac Life 20 <u>(7)</u> Support as recognized by the American Heart Association, the 21 22 American Red Cross, or the American Safety and Health Institute. 23 Pays the required fee under G.S. 90-722(c). (8) 24 "§ 90-717. Classifications; identifications of persons providing polysomnography services. 25 26 Upon issuance of a license, the following classes of persons may provide 27 polysomnographic services: 28 A licensed polysomnographic technologist with the credential (1) Registered Polysomnographic Technologist (RPSGT) under the 29 30 general supervision of a licensed physician. The person shall have a 31 full license granted by the Committee and use the abbreviation 'L.RPSGT' on the required identification badge. 32 A polysomnographic technician may provide polysomnographic 33 (2) 34 services under the general supervision of a licensed polysomnographic 35 technologist and the general supervision of a licensed physician for a 36 period of up to three years and shall obtain his or her credential of 37 Registered Polysomnographic Technologist (RPSGT). The 38 polysomnographic technician shall obtain a provisional license granted

by the Committee and use the identification of 'Polysomnographic

Technician' on the required identification badge. No abbreviations are

acceptable.

39

40

41

42

43

period of not more than six months and shall obtain a temporary license granted by the Committee. The polysomnographic trainee shall use the identification of 'Polysomnographic Trainee' on the required identification badge up to six months. No abbreviations are acceptable. If the person is still employed after the completion of six months, the trainee shall be classified as a polysomnographic technician and shall apply for a provisional license. The identification as stated in subdivision (2) of this section shall be reflected on the required identification badge.

A polysomnographic student who is not currently employed in the practice of polysomnography may provide polysomnographic services under the direct supervision of a licensed polysomnographic technologist and the general supervision of a licensed physician as part of the student's educational program with a temporary permit granted by the Committee. The student shall use the identification 'Polysomnographic Student' on the required identification badge. No abbreviations are acceptable. If the student is employed for less than six months while actively enrolled in a polysomnography program, the student shall be classified as a trainee and shall comply with the requirements of subdivision (3) of this section. If the student is employed for at least six months while enrolled in a polysomnography program, the student shall be classified as a technician and shall comply with the requirements of subdivision (2) of this section.

"§ 90-718. Criminal record checks of applicants for licensure.

The Committee may, in its discretion, investigate the background of an applicant for licensure as a polysomnographic technologist to determine the applicant's qualifications for licensure with due regard given to the applicant's competency, honesty, truthfulness, and integrity. In accordance with G.S. 114-19.11B, the Department of Justice may provide a criminal record check to the Committee for a person who has applied for a license through the Committee. The Committee shall provide to the Department of Justice, along with the request, the fingerprints of the applicant, any additional information required by the Department of Justice, and a form signed by the applicant consenting to the check of the criminal record and to the use of the fingerprints and other identifying information required by the State or national repositories. The applicant's fingerprints shall be forwarded to the State Bureau of Investigation for a search of the State's criminal history record file, and the State Bureau of Investigation shall forward a set of the fingerprints to the Federal Bureau of Investigation for a national criminal history check. The Committee shall keep all information pursuant to this subsection privileged, in accordance with applicable State law and federal guidelines, and the information shall be confidential and shall not be a public record under Chapter 132 of the General Statutes. The Committee shall collect any fees required by the Department of Justice and shall remit the fees to the Department of Justice for expenses associated with conducting the criminal history record check.

For purposes of this section, the term 'criminal history' means a history of 1 2 conviction of a State crime, whether a misdemeanor or felony, that bears on an 3 applicant's fitness for licensure as a polysomnographic technologist. The crimes include 4 the criminal offenses set forth in any of the following Articles of Chapter 14 of the 5 General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes: Article 6 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, 7 Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and 8 Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary 9 Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson 10 and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, 11 Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, 12 13 Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 14 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; 15 Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and 16 17 Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; 18 Article 59, Public Intoxication; and Article 60, Computer-Related Crime. The crimes 19 also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act in Article 5 of Chapter 90 of the General Statutes and alcohol-related 20 21 offenses including sale to underage persons in violation of G.S. 18B-302 or driving 22 while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5. 23

"§ 90-719. Reciprocity; licensure of nonresidents.

- The Committee may grant, upon application and payment of proper fees, a license to a person who has obtained the credential Registered Polysomnographic Technologist (RPSGT) to practice polysomnography in another state or territory of the United States whose standards of competency are substantially equivalent to those provided in this Article.
- The Committee may grant, upon application and payment of proper fees, a license to a nonresident entering this State to practice polysomnography if the person meets the requirements under G.S. 90-716(a)(5), G.S. 90-717, or subsection (a) of this section. If none of the requirements under G.S. 90-716(a)(5), G.S. 90-717, or subsection (a) of this section are met, the person shall meet all requirements under this Article.

"§ 90-720. Provisional license.

A provisional license shall allow a polysomnographic technician to practice polysomnography under the general supervision of a licensed polysomnographic technologist and general supervision of a licensed physician in accordance with the rules adopted by the Committee. A license granted under this section shall contain an endorsement indicating that the license is provisional and state the terms and conditions of its use by the licensee, the date the license was granted, and the date it expires. Provisional licenses shall be renewed upon payment of the required fee under

- 41
- 42 G.S. 90-722(c).

24

25

26

27 28

29

30

31 32

33

34

35 36

37 38

39

40

"§ 90-721. Temporary license. 43

A temporary license shall allow a polysomnographic trainee or polysomnographic student enrolled in an accredited education program where polysomnography services performed by the student are an integral part of the student's course of study to practice polysomnography under the direct supervision of a licensed polysomnographic technologist and the general supervision of a licensed physician in accordance with rules adopted by the Committee. A license granted under this section shall contain an endorsement indicating the license is temporary and state the terms and conditions of its use by the licensee, the date the license was granted, and the date it expires. Temporary licenses shall be renewed upon payment of the required fee under G.S. 90-722(c).

"§ 90-722. Expenses; fees.

1 2

- (a) All fees shall be payable to the Medical Board and deposited in the name of the Medical Board in financial institutions designated by the Medical Board as official depositories. These fees shall be used to carry out the purposes of this Article.
- (b) All salaries, compensation, and expenses incurred or allowed to carry out the purposes of this Article shall be paid by the Medical Board exclusively out of the fees received by the Medical Board as authorized by this Article or funds received from other sources. In no case shall any salary, expense, or other obligation authorized by this Article be charged against the State Treasury.
- (c) The Committee, upon the approval of the Medical Board, shall establish fees not to exceed the following amounts:
 - (1) For an initial application, a fee not to exceed fifty dollars (\$50.00).
 - (2) For issuance of any license, a fee not to exceed one hundred fifty dollars (\$150.00).
 - (3) For the renewal of any license, a fee not to exceed seventy-five dollars (\$75.00).
 - (4) For the late renewal of any license, an additional late fee not to exceed seventy-five dollars (\$75.00).
 - (5) For a provisional license, a fee not to exceed one hundred fifty dollars (\$150.00).
 - (6) For a temporary license, a fee not to exceed fifty dollars (\$50.00).
 - (7) For a replacement license, a fee not to exceed seventy-five dollars (\$75.00).
 - (8) For official verification of licensure status, a fee not to exceed twenty dollars (\$20.00).
 - (9) For copies of rules adopted pursuant to this Article and licensure standards, charges not exceeding the actual cost of printing and mailing.

"§ 90-723. Content of license.

Each license issued by the Committee shall contain the name of the person to whom the license is issued, the address of the person, the date and number of the license, the issuance and expiration date, and any other information the Committee deems necessary. The address contained on the license shall be the address where all correspondence and renewal forms from the Committee shall be sent. A person whose address changes shall within 30 days from the date of the address change notify the

Committee of the change. The most recent address contained in the Committee's records for each licensee shall be the address deemed sufficient for purposes of service of process.

"§ 90-724. Display of license.

Every person issued a license pursuant to this Article shall either keep the license prominently displayed in the office or place in which the person practices or have it stored in a place where it can be immediately produced upon the request of a patient, the Committee, or the Medical Board.

"§ 90-725. Renewal of licenses.

- (a) All licenses to practice polysomnography shall expire one year after the date they were issued. The Committee shall send a notice of expiration to each licensee at his or her last known address at least 30 days before the expiration of his or her license. All applications for renewal of unexpired licenses shall be filed with the Committee and accompanied by proof satisfactory to the Committee that the applicant has completed the continuing education requirements established by the Committee and the renewal fee as required by G.S. 90-722(c).
- (b) An application for renewal of a license that has been expired for less than two years shall be accompanied by proof satisfactory to the Committee that the applicant has satisfied the continuing education requirements established by the Committee and the renewal and late fees required by G.S. 90-722(c). A license that has been expired for more than two years shall not be renewed, but the applicant may reapply for licensure by complying with the current requirements for licensure under this Article.

"§ 90-726. Replacement of license due to loss or name change.

- (a) Any person whose license has been lost may make application to the Committee for a replacement. The application shall be accompanied by an affidavit setting out the facts concerning the loss of the original license.
- (b) Any person whose name changes may surrender his or her license and apply to the Committee for a replacement license.
- (c) A request for a replacement license under this section shall be accompanied by the required fee under G.S. 90-722(c).

"§ 90-727. Retirement of license.

Any person issued a license to practice under this Article who wishes to retire the license shall file with the Committee an affidavit on a form to be furnished by the Committee stating the date the person retired from practice and any other facts the Committee, in its discretion, deems necessary to verify the retirement. If a person who has retired his or her license thereafter wishes to reenter the polysomnography practice, the person shall request reinstatement of licensure in accordance with rules adopted by the Committee.

"§ 90-728. Suspension, revocation, and refusal to renew.

- (a) The Committee may deny, refuse to renew, suspend, or revoke an application or license, order probation, or issue a reprimand if the applicant or licensee:
 - (1) Gives false information or withholds material information from the Committee in procuring or attempting to procure a license.

1 (2) Gives false information or withholds material information from the 2 Committee during the course of an investigation conducted by the 3 Committee. 4 Has been convicted of or pled guilty or no contest to a crime that (3) 5 indicates the person is unfit or incompetent to practice 6 polysomnography as defined in this Article or that indicates the person 7 has deceived, defrauded, or endangered the public. 8 Has a habitual substance abuse or mental impairment that interferes <u>(4)</u> 9 with his or her ability to provide appropriate care as established by this Article or rules adopted by the Committee. 10 11 Has demonstrated gross negligence, incompetency, or misconduct in (5) 12 the practice of polysomnography as defined in this Article. Has had an application for licensure or a license to practice 13 (6) 14 polysomnography in another jurisdiction denied, suspended, or 15 revoked for reasons that would be grounds for similar action in this 16 State. 17 (7) Has demonstrated immoral, unethical, unprofessional, or dishonorable 18 conduct. 19 (8) Violates the code of ethics adopted by the Committee for 20 polysomnographic technologists. Uses or attempts to use a polysomnographic procedure or equipment 21 <u>(9)</u> 22 for which the licensee has not received sufficient education or training 23 in the proper use of that procedure or equipment. 24 Undertakes any duties that are outside the authorized scope of practice (10)25 of a licensed polysomnographic technologist as set forth in this Article. 26 Promotes the sale of services, drugs, devices, appliances, or goods to a (11)27 patient to exploit the patient for financial gain. 28 Willfully fails to file, or willfully impedes the filing of, any report or (12)29 record required by law to be filed. Knowingly engages in the practice of polysomnography with an 30 (13)unlicensed person, knowingly aids an unlicensed person in the practice 31 32 of polysomnography, or knowingly delegates a task involved in the 33 practice of polysomnography to an unlicensed person. 34 Knowingly fails to meet appropriate standards for the delivery of (14)35 polysomnographic services. Breaches patient confidentiality. 36 (15)37 Pays or agrees to pay any sum or provides any form of remuneration or (16)38 material benefit to any person for bringing or referring a patient, or 39 accepting or agreeing to accept any form of remuneration or material 40 benefit from a person for bringing or referring a patient. 41 Has willfully violated any provision of this Article or rules adopted by (17)42 the Committee.

The taking of any action authorized under subsection (a) of this section may

be ordered by the Committee after a hearing is held in accordance with Article 3A of

43

Chapter 150B of the General Statutes. The Committee may reinstate a revoked license if the Committee finds that the reasons for revocation no longer exist and that the person can reasonably be expected to perform the services authorized under this Article in a safe manner.

"§ 90-729. Investigative and disciplinary process; panels.

- (a) The Committee may use one or more screening panels in the investigative and disciplinary process for violations of this Article to ensure that complaints filed and investigations conducted are meritorious and to act as a mechanism for resolution of complaints or diversion to professional peer review organizations, impaired professionals' associations, or foundations of those cases the Committee, through established guidelines, deems appropriate.
 - (b) The screening panel has the authority to administer oaths to witnesses.
- (c) Members of a screening panel may be drawn from the membership of the Committee or may be appointed by the Committee. Noncommittee members shall meet the requirements of membership on the Committee and may include a consumer member. A Committee member serving on a panel shall not participate in a contested case involving any matter heard by the panel.

"§ 90-730. Violation a misdemeanor.

Any person who violates any provision of this Article shall be guilty of a Class 1 misdemeanor.

"§ 90-731. Enjoining illegal practices.

The Committee may apply to the superior court for an order enjoining violations of this Article. Upon a showing by the Committee that any person has violated this Article or is about to violate this Article, the court may grant injunctive relief or take other appropriate action.

"§ 90-732. Civil penalties; disciplinary costs.

- (a) Authority to Assess Civil Penalties. The Committee may assess a civil penalty not in excess of one thousand dollars (\$1,000) for the violation of any section of this Article or the violation of any rules adopted by the Committee. The clear proceeds of any civil penalty assessed under this section shall be remitted to the Civil Penalty and Forfeiture Fund in accordance with G.S. 115C-457.2.
- (b) Consideration Factors. Before imposing and assessing a civil penalty, the Committee shall consider the following factors:
 - (1) The nature, gravity, and persistence of the particular violation.
 - (2) The appropriateness of the imposition of a civil penalty when considered alone or in combination with other punishment.
 - (3) Whether the violation was willful and malicious.
 - (4) Any other factors that would tend to mitigate or aggravate the violations found to exist.
- (c) Schedule of Civil Penalties. The Committee shall establish a schedule of civil penalties for violations of this Article and rules adopted by the Committee.
- (d) Costs. The Committee may assess the costs of disciplinary actions against a person found to be in violation of this Article or rules adopted by the Committee.
- "§ 90-733. Third-party reimbursement.

3

4

5

6

7

8

9

10

11

12

13

14

15

16 17

18

19 20

21

22 23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

Nothing in this Article shall be construed to require direct third-party reimbursements to persons licensed under this Article."

SECTION 2. Article 4 of Chapter 114 of the General Statutes is amended by adding a new section to read:

"§ 114-19.11B. Criminal record checks of applicants for licensure as polysomnographic technologists.

The Department of Justice may provide to the North Carolina Polysomnography Professional Standards Committee from the State and National Repositories of Criminal Histories the criminal history of any applicant for licensure as a polysomnographic technologist under Article 42 of Chapter 90 of the General Statutes. Along with the request, the Committee shall provide to the Department of Justice the fingerprints of the applicant, a form signed by the applicant consenting to the criminal record check and use of fingerprints and other identifying information required by the State and National Repositories, and any additional information required by the Department of Justice. The applicant's fingerprints shall be forwarded to the State Bureau of Investigation for a search of the State's criminal history record file, and the State Bureau of Investigation shall forward a set of fingerprints to the Federal Bureau of Investigation for a national criminal history record check. The Committee shall keep all information obtained pursuant to this section confidential. The Department of Justice may charge a fee to offset the cost incurred by it to conduct a criminal record check under this section. The fee shall not exceed the actual cost of locating, editing, researching, and retrieving the information."

SECTION 3. Notwithstanding G.S. 90-714(a), as enacted by Section 1 of this act, the initial licensed registered polysomnographic technologists appointed to the North Carolina Polysomnography Standards Professional Committee do not have to meet the licensure requirements established under G.S. 90-716, as enacted by Section 1 of this act. The appointees must be registered polysomnographic technologists and must apply for and obtain a license from the Committee within 90 days after the Committee begins issuing licenses.

SECTION 4. All licensed or unlicensed allied health providers engaged in the practice of polysomnography in North Carolina as of January 1, 2007, must obtain their Registered Polysomnographic Technologist (RPSGT) credential within three years from the effective date of this act to continue practicing polysomnography in this State. Until the RPSGT credential is obtained, the allied health provider shall be classified as a polysomnographic technician under Article 42 of Chapter 90 of the General Statutes, enacted by Section 1 of this act.

SECTION 5. This act is effective when it becomes law.