

Board of Registered Polysomnographic Technologists



2016 Year In Review The BRPT Annual Report

Published November 2017



A Look Back

The advent of new technologies in the form of home sleep apnea testing and auto PAP, consumer electronics of all kinds to monitor and track sleep and other vital signs, and telesleep medicine platforms have greatly allowed us to assist our patients remotely. The growing epidemic of sleep deprivation, coupled with this influx of new technologies, means the future of the sleep technologist industry continues to grow at lightning speed. The modern sleep technologist will be comfortable with technology, have a thorough understanding of sleep disorders and the medical conditions they cause, contribute to or exacerbate, and the rapidly expanding options for treatment, many of which are quickly becoming mainstream options.

Simply put: sleep is the power of life. Lack of sleep hijacks the body's ability to effectively monitor and regulate blood sugar, blood pressure and the immune system. Studies show that lack of sleep and/or poor sleep can affect our cancer-fighting immune cells and significantly raise the risk of developing Alzheimer's disease. Consider Margaret Thatcher and Ronald Reagan, both of whom were vocal about how little sleep they "needed," and both of whom went on to develop the disease.

Sleep technologists play a critical role in the diagnosis and therapy of sleep disorders. The role of sleep technologists is expanding their scope of practice while embracing a more comprehensive approach to sleep medicine. They are working more closely with patients to educate and empower them to better self-manage their sleep disorders. Sleep is becoming the preventive medicine. And because of that, the future is rewarding and exciting.

Daniel D. Lane, RPSGT, CCSH, BS BRPT President



A Look Ahead

I enter my term as President humbled and honored to serve the BRPT. I became a sleep technologist after graduate school, not really sure what I wanted to be when I grew up. It wasn't a career anyone had heard of back then. But I was offered a living wage and full benefits and thought I had hit the jackpot. I am still so impressed by the opportunities this field presents to career-oriented people with a range of educational and professional backgrounds. I have been affiliated with CoA-PSG programs and have been so pleased to see the career prospects for our graduates. I've also been associated with sleep research projects and am delighted in the sleep technologists' role and contributions to discovering new treatments for a number of sleep disorders. And, most importantly, I still derive great satisfaction in helping each individual patient to sleep a little better.

Our still-new field has been through a lot of changes, and I'm sure many more will come. There was a time, perhaps five years ago, when there was much talk about the irrelevance of the sleep technologist. Some people predicted home sleep tests and auto-PAPs would replace us. They said insurers wouldn't cover us. Instead, what I've seen is an evolution of the field, one in which I'm confident we will continue to play a critical role in. We may be doing more outcomes-based compliance, we may be spending more time alongside the physicians in the clinic, but we will remain integral to ensuring our patients get the care (and ongoing support) they need.

The BRPT has evolved along with the field. We developed the CCSH credential to address these more longitudinal outcomes and, prior to that, we developed the CPSGT to expand the number of technologists who could serve in geographic areas with a shortage of RPSGTs or college programs. And, we continue to move forward. The most recent Job Task Analysis – in the field at the time of this writing – will not only keep our credentials current with the state of the profession, but will ask stakeholders about their role in pediatrics, advanced treatment modalities, and even their language preference for sitting for the exam.

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I am lucky to be entering the Presidency at a time of great opportunity. My goals are to build on the great work of my predecessors and to assure the BRPT credentials are available and meaningful to the next generation of professionals. To do this, we will explore additional languages for the exam and continue to work with various educational partners to assure a pipeline of qualified technologists. I'm also at my core a bridge builder. I look forward to developing more partnerships with other organizations both within and beyond sleep.

Fundamentally, I am optimistic about our field. Sleep impacts so many other areas of health and wellness. The healthcare economics literature demonstrates the savings to patients who receive treatment for their sleep disorders. The occupational health literature demonstrates the importance of adequate sleep to job performances, attendance, and preventing on-the-job injury and accidents. The quality literature demonstrates that identifying and treating a sleep disorder in inpatients can reduce sentinel events, reduce readmission rates, and save significant money under value-based payments programs. We will keep educating patients, insurers, and other key decision makers on these findings. If we can all do that, we'll assure a seat at the table for our profession in the decades to come.

Jessica Schmidt, MA, RPSGT, CCSH President-Elect



BRPT Mission Statement

The mission of The Board of Registered Polysomnographic Technologists (BRPT) is to build upon its history as the global leader in sleep technologist credentialing and certification; to provide high quality sleep technology products and services that inspire professional excellence, recognition, and lifelong learning; and to create long-term value for credential and certificate holders.

BRPT Vision Statement

The organization recognized around the world for the highest standards in sleep credentialing, certification and education.













The Certification In Clinical Sleep Health Examination Celebrates A Strong Year



The Certification In Clinical Sleep Health (CCSH) exam was first offered in May 2014 and at the start of 2017 there were more than 500 CCSH credential holders with 306 certified in 2016 alone. Like other BRPT examinations, the CCSH exam is available on demand with immediate test results. CCSH

credential holders are advanced level health professionals who help newly diagnosed patients learn how to make improvements in their day-to-day lifestyle habits for better overall health, recognize symptoms of underlying associated health issues, and empower them to ask appropriate questions for better self-management of their sleep disorder.

In 2016, BRPT released the Certification in Clinical Sleep Health (CCSH) study guide – a companion to the CCSH Candidate Handbook – which provides information and resources to help candidates prepare for the CCSH examination and the test-taking experience. This guide enhances, but does not take the place of, professional resources, formal training, experience, and classroom study. The best way to use the guide is to become familiar with its overall content and structure, then review the individual sections in more detail. A list of education resources is also included in the study guide. To order and purchase the study guide, <u>click here</u>.

In addition, the BRPT offers a Sleep Educator Reimbursement Guide geared towards sleep

"We're delighted to see clinical sleep health professionals embracing this credential, expanding their roles and taking their careers to the next level,"

> Daniel Lane, RPSGT, CCSH, BS BRPT President

professionals working as clinical sleep educators, Certification in Clinical Sleep Health credential holders, or those who hope to develop a program in their sleep center but aren't sure how to bill for these services. Because these continue to be new, evolving roles, there remains a lack of clarity and consistency in the field about how to bill for activities such as PAP de-sensitizations, mask fittings, and

smart card downloads. This guide summarizes some of the billing practices in the field today. As the field evolves, this Guide will be regularly updated to reflect such developments. To download the Sleep Educator Reimbursement Guide, <u>click here</u>.



CCSH Eligibility Pathways

There are currently two eligibility pathways for the CCSH exam:

CCSH Pathway 1: Clinical Experience. For candidates with at least 1000 hours of experience in clinical sleep health AND a bachelor's degree or above.

CCSH Pathway 2: Healthcare Credential. Healthcare Credential. For candidates with an approved healthcare credential or license AND an associate's degree or above.

Note: The CCSH Temporary Pathway – the CSE Certificate – expired March 31, 2017.

Complete details of documentation and requirements necessary for the different examination Pathways can be found at <u>www.brpt.org</u>.







RPSGT Eligibility Pathways

There are 5 eligibility pathways for the RPSGT exam:

RPSGT Pathway 1:

Clinical Experience. For candidates with a minimum of 1,638 hours of experience in the field and who have also completed a STAR-designated Self-Study education program.

RPSGT Pathway 2:

Healthcare Credential. For candidates with a minimum of 546 hours of experience and who have another healthcare credential.

RPSGT Pathway 3:

CAAHEP/CoARC Student. For graduates of a CAAHEP or CoARC-accredited polysomongraphy education program.

RPSGT Pathway 4:

CAAHEP/CoARC Student. For candidates with a minimum of 819 hours of experience in the field and who have also completed STAR-designated Focused education, or a combination of Self-Study and Focused 2 education.

RPSGT Pathway 5:

International Option. For international candidates with a minimum of 546 hours of experience in the field.

A Snapshot Of The RPSGT Exam

By the end of 2016 there were a total of 17,063 active RPSGT credential holders. In 2016, 748 candidates passed the RPSGT exam in the United States. And, the total number of international RPSGTs totaled 1,409 with 122 RPSGTs credentialed in 2016. International credential holders hail from Australia, Bahamas, Brazil, Canada, China, India, Ireland, Japan, Malaysia, Mexico, Netherlands, Pakistan, Philippines, Portugal, Saudi Arabia, Singapore, South Africa, South Korea, Spain, Sweden, Switzerland, Taiwan, Thailand, Trinidad West Indies, United Arab Emirates, United Kingdom, Virgin Islands, Wales.

PASS RATES

Pathway #1	Clinical Experience	49%
Pathway #2	Healthcare Credential	74%
Pathway #3	CAAHEP/CoARC	50%
Pathway #4	Focused Training	52%
Pathway #5	International	82%



The CPSGT Exam Continues To Offer An Avenue For Those New To Sleep

The CPSGT exam is geared toward individuals who are new to polysomnography and have limited clinical experience, or are not ready to take the RPSGT exam. In 2016, 105 individuals became CPSGT certificate holders. Currently, there are 231 active CPSGTs.

CPSGT Examination Pathways:

There are 3 eligibility pathways for the CPSGT exam:

CPSGT PATHWAY 1: CLINICAL EXPERIENCE.

For candidates with a minimum of three months of clinical experience in polysomnography, and who have completed a STAR-designated Self-Study education program.

CPSGT PATHWAY 2: CAAHEP/COARC STUDENT.

For students within 2 months of graduation from, or graduates of, a CAAHEP or CoARCaccredited polysomnography technology education program.

CPSGT PATHWAY 3: FOCUSED TRAINING.

For candidates who have completed STAR-designated Focused education, or a combination of Self-Study and Focused 2 education.

The RPSGT Exam: NCCA Accredited

The National Commission For Certifying Agencies (NCCA) was created in 1987 by the Institute for Credentialing Excellence (ICE) – formerly the National Organization for Competency Assurance (NOCA) – to help ensure the health, welfare, and safety of the public through the accreditation of a variety of certification programs/organizations that assess professional competence. NCCA accredits over 200 of the leading credentialing examinations in the United States, including exams in many of the nursing and other allied health disciplines.

In the professional credentialing industry, NCCA accreditation represents compliance with best credentialing industry practices. Currently, the RPSGT credential offered by the BRPT is NCCA-accredited.





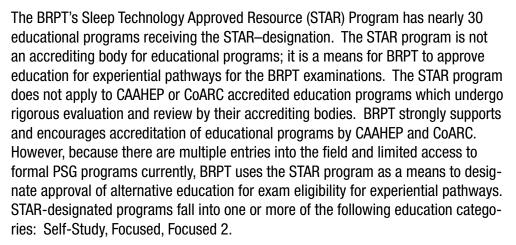
DARD OF REGISTERED POLYSOMNOGRAPHIC TECHNOLOGISTS

RPSGT Recertification – Representing Best Practices And A Commitment To Continuing Education

Recertification is required every five years in order to maintain the RPSGT credential. It represents best practices, a commitment to continuing education, and keeping up to date on the latest developments in the field. Recertification may be achieved either by accumulating 50 approved continuing education credits during the last active 5 year credential window, or by retaking and passing the RPSGT exam. Certification holders with more than one BRPT credential can apply the same continuing education credits toward multiple recertifications as long as the continuing education content is applicable and occurs within the required time period for recertification.

Over the course of 2016, 397 RPSGTs were required to recertify, with approximately 276 completing the recertification process. The recertification rate for RPSGTs was approximately 70%.

STAR Program Supports Education For Experiential Pathways For BRPT Exams



To learn more about the STAR Program and to view a list of all STAR-designated programs, <u>click here</u>.





Continuing Sleep Technology Education Program

Launched in July of 2011, the CSTE program establishes BRPT as a continuing education credit granting organization. The program is designed to specifically meet the professional needs of sleep technicians and technologists. In 2016, 195 programs were approved for CSTE credits. These programs were offered by state sleep societies, online educational providers and lab management companies, among others. They included webinars, in service programs, monthly case conference and state/regional meetings.

Legislative Update

BRPT has an active and engaged Government Relations Committee that tracks legislation impacting the field of sleep medicine. In 2016, the BRPT submitted formal comments to the Medicare Access and CHIP Reauthorization Act (MACRA) and the Federal Motor Carrier Safety Association (FMCSA) in support of various initiatives and inviting collaboration on questions of best practices in sleep medicine. The BRPT confirmed at least two Durable Medical Equipment Medicare Administrative Contractors (DMACs) (South and Mid-Atlantic) that will recognize an OSA diagnosis made on inpatients, which could have important yield for CCSHs in patient navigator roles. As these regulations change often, it's important to consult local DMACs for up to the minute opinions.

An important change for CMS states that reimbursement is tied to sleep center accreditation. In addition to the AASM, there are accreditation options through the Joint Commission and ACHC. It is crucial to note that general hospital-wide accreditation through the JC is insufficient; applicants must submit a specific center application as well. Sleep Review magazine covered this issue nicely:

Sleep-Specific Accreditation Catches Centers with Medicare Patients by Surprise

AASM Offering Expedited Accreditation for Sleep Facilities Impacted by Revised Medicare Policies



Photos From The BRPT's 10th Annual Symposium in Atlanta, Georgia



The 10th Annual BRPT Symposium in Atlanta, Georgia was full of colleagues sharing ideas, stories and having fun! It included a CCSH exam prep course and the CCSH workshop where clinical sleep health professionals shared their experiences working in this exciting new role.





Current BRPT Committees

Application Review Committee Mike Longman, RPSGT, RRT, Chair

Examination Development Committee Becky Appenzeller, RPSGT, R. EEG T., CNIM, Chair

Government Relations/ Legislative Committee

Jessica Schmidt, MA, RPSGT, CCSH Chair

International Committee

Daniel Lane, BS, RPSGT, CCSH, Chair

Professional Review Committee

Michael McLeland, PhD., M.Ed., BA, RPSGT, Chair

Volunteer Committee

Stephen Marquis, RPSGT, CCSH, Chair



2017 BRPT Board of Directors



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To read Board Member biographies, visit <u>www.brpt.org.</u>



BRPT Executive Office

8400 Westpark Drive 2nd Floor McLean, VA 22102 Phone (703) 610-9020 Fax (703) 610-0229

Website: <u>www.brpt.org.</u> E-mail: <u>info@brpt.org</u>; <u>recert@brpt.org</u>

Current Staff

Jim Magruder, Executive Director Ashley Shelton, Credentialing Director Cherise Lee, Credentialing Coordinator Maritza Saravia, Program Administrator Lydia Pelliccia, Communications Director

For more detailed information on BRPT programs and services, please visit <u>www.brpt.org.</u>



Past BRPT Leadership

APT Chairs (terms began and ended in June)

- 1978 1981 Moshe Reitman, RPSGT
- 1981 1983 Cynthia Mattice, RPSGT
- 1983 1985 David Franklin, RPSGT
- 1985 1987 Robin Foster, RPSGT
- 1987 1991 Andrea Patterson, RPSGT
- 1991 1993 Greg Landholdt, RPSGT
- 1993 1995 Gary Hansen, RPSGT
- 1995 1997 Daniel Herold, RPSGT
- 1997 1999 Bonnie Robertson, RPSGT, CRT
- 1999 2000 Cameron Harris, RPSGT

BRPT Presidents

- 2000 2001 Cameron Harris, RPSGT
- 2002 2003 Marietta Bellamy Bibbs, RPSGT, CCSH
- 2004 2005 Mark DiPhillipo, RPSGT
- 2006 2007 Bonnie Robertson, RPSGT, CRT
- 2008 2009 Becky Appenzeller, RPSGT, R. EEG T., CNIM, CCSH
- 2010 2011 Janice East, RPSGT, R. EEG T., CCSH
- 2012 2013 Cindy Altman, RPSGT, R. EEG/EP T., CCSH
- 2014 2015 Theresa Krupski, BS, RPSGT, RRT

Current President

Daniel D. Lane, RPSGT, CCSH, BS