



American Academy of Sleep Medicine

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Dear members, Board of Directors, colleagues and friends:

It is an honor and privilege to address you today as the 22nd president of your American Academy of Sleep Medicine. My path to this podium began with AASM membership in 1989 and in the following 18 years I have witnessed AASM leadership and member affect profound changes throughout sleep medicine. Still, the foreseeable future holds much excitement and opportunity for advancements in the American healthcare system. Within this environment, your AASM can capitalize on its role as the premier professional society representing organized sleep medicine by advocating for reimbursement based on professional standards, well-funded education and research programs and unbiased public education programs. I am deeply indebted to the AASM Board of Directors and members for this opportunity and for your confidence in my capabilities.

The field of sleep medicine was born out of fundamental scientific discovery achieved by dedicated researchers. Undeniably, novel discovery in clinical and basic sciences is needed to nourish the continued growth of sleep medicine and yet there exists significant fiscal and administrative barriers to the recruitment and retention of new clinical and basic sleep researchers into sleep medicine. Under the leadership of Past President Dr. Michael Silber, your AASM has recently introduced an initiative designed to encourage the development of comprehensive academic sleep programs, an initiative that mandates, at minimum, one full-time sleep disorders research fellow. Academic

institutions meeting requirements receive more than just token recognition as they will be invited to compete for an American Sleep Medicine Foundation grant for funding a dedicated sleep fellowship research position. This creative initiative cannot possibly fulfill the expected need for gifted and dedicated young sleep researchers. Therefore, your AASM will continue to explore novel and conventional pathways aimed at bolstering careers in sleep disorders research and I encourage all members to generously support the American Sleep Medicine Foundation.

The study and practice of sleep medicine is no longer just an area of research or clinical interest – it is an independent medical subspecialty that has received formal recognition and endorsement from the medical community. While our roots may have been multidisciplinary, we are now independent practitioners of sleep medicine. The establishment of a Health Care Provider Taxonomy Code for sleep medicine is the latest evidence that our profession has come of age. With specialized clinical training, a comprehensive body of scientific knowledge, and evidence-based standards, sleep specialists are uniquely equipped to provide medically-proven solutions for the millions of people from disorders of sleep and alertness. Having practiced sleep medicine as a board-certified sleep specialist for 18 years, I can testify to the extraordinary efforts of your AASM in the promotion of sleep specialists and advocating for the specialty status we now hold. As we enjoy the benefits that come with this status, I encourage all of you to embrace your standing as an independent practitioner of sleep medicine and to identify yourself first and foremost as a sleep specialist. As AASM President I will seek opportunities to highlight and strengthen the position of the sleep specialist as the preferred healthcare practitioner for sleep medicine services. You can also expect the AASM to continue providing resources and support to help advance careers as sleep medicine professionals, researchers, technologists, nurse practitioners and other vested allied health personnel.

As the medical director of both an academic hospital-based sleep center and a private free-standing sleep center, I know that reimbursement is arguably the most pressing area of concern for sleep specialists. Academic and community-based hospital practices as well as freestanding sleep practices now complete for sleep service contracts in an environment where decision are based on cost without appreciation of established quality standards, sleep specialist oversight and technical expertise. The AASM will continue to educate public and private insurers about the beneficial effects of diagnosing, treating and managing sleep disorders, the value of accreditation and board

certification, and the need for reasonable and equitable reimbursement for professional, laboratory and behavioral sleep medicine services. I am convinced the most effective manner by which to establish fair reimbursement is for both public and private health insurance providers to adopt AASM accreditation as necessary for reimbursement of sleep services. Further, such a policy does far more than simply correct reimbursement and competitive inequity, it also bolsters the quality of sleep health services for our patients. Healthcare quality as assessed by verifiable outcome measures is central to the federal initiatives for Value Driven Healthcare and Pay-for-Performance. These programs are in-part designed to provide health consumers with reliable quality and cost information and they provide financial incentive to health practitioners for reporting established outcome measures. It is proper that the AASM take the lead in developing such measures for the field of sleep medicine and your Board of Directors recently committed to the development of outcome measures for the CMS Pay-for-performance initiative. It had been established that sleep health care delivered by board-certified sleep specialists in AASM-accredited facilities positively influences patient outcomes. Given this and the federal emphasis on healthcare quality improvement, AASM accreditation will prove increasingly attractive to federal and private payers. Indeed, in response to AASM initiatives and recognizing that superior healthcare outcomes result from diagnosis and treatment in AASM-accredited facilities, several private and government payers have already adopted a policy of reimbursement sleep services only when performed in an AASM-accredited center or laboratory. Unfortunately the penetrance of this policy varies considerably between states and individual private insurance carriers. During my tenure on the Board of Directors, I have been a consistent advocate for the linking of reimbursement to AASM accreditation, and as your President, I intend to expend substantial energies on the widespread adoption of a policy that links payment for sleep services to AASM accreditation.

Your AASM maintain a pro-active role in evaluating new technologies and setting standards for the field. Some changes, such as the universal adoption of electronic medical records, appear inevitable and will affect the entire medical community. The federal government and individual private employers have already taken the first steps by committing to standards for health information technology. HHS has publicly stated that health information technology will be used for the gathering of information allowing health consumers transparency when choosing providers. Your Board of Directors has begun monitoring the evolution of health information technology with intent to predict when and how to leverage health information technology to benefit sleep specialists and accredited sleep facilities. Other technological developments such as portable

monitoring used in the diagnosis and treatment of obstructive sleep apnea, demand that decision be based on scientific evidence to ensure quality patient care. The AASM is committed to promoting a thoughtful and scientific approach on issues related to the clinical practice of sleep medicine, and we will actively resist conclusions not substantiated by evidence. AASM evidence-based practice parameters remain one of the most valuable professional resources for sleep specialists, and your Board of Directors along with the standards of practice committee will identify and prioritize area of importance for our members. Two task forces have recently been formed to develop the “Indications of Pediatric Polysomnography” and to update the “Surgical Modifications of the Upper Airway for Treatment of OSA” practice parameters. The hard work and thoughtful approach provided by our volunteer members is appreciated and I look forward to reading the results of their efforts.

Under the stewardship of Dr. Larry Epstein, your AASM resolved to develop guidelines applicable to the broad areas of clinical practice. These clinical guidelines incorporate AASM practice parameters when such exist and expert consensus in situations where evidence is limited. The first of these guidelines, the “Evaluation and Management of Chronic Insomnia in Adults,” is nearing completion, and a second guideline for adult obstructive sleep apnea is underway. AASM clinical algorithms highlight the “best practices” for disorders of sleep and will serve as a valuable resource for those interested in clinical sleep medicine.

Many of us achieved our expertise in sleep medicine without the benefit of participating in an ACGME accredited sleep medicine training program. Appropriate numbers of ACGME accredited sleep medicine fellowship training programs are necessary to assure the growth of the sleep medicine field. Along with the fellowship training committee, your Board of Directors has identified barriers for existing AASM-accredited fellowship training programs to transition to ACGME accreditation. The Board of Directors remains committed to encouraging and assisting these AASM-accredited fellowship training program to apply for ACGME accreditation and to similarly assist new programs seeking ACGME accreditation, with the goal of achieving 75 ACGME-accredited sleep fellowship programs by 2008.

Education beyond sleep fellowship is critical to success as an independent practitioner of sleep medicine. Your AASM meets this membership need by regularly offering courses in the AASM Sleep Education Series, such as the Advanced Sleep Medicine

Course and the National Sleep Medicine Course. These courses provide comprehensive overviews of the field of sleep medicine from a faculty of distinguished experts. In response to those who cannot readily travel, your AASM introduced Webinars to the Sleep Education Series. These Webinars are dynamic, 60-minute online seminars, enabling you to participate in continuing education opportunities from the convenience of your home or office.

The education and training of a sleep specialist should result in achieving board certification, and I encourage all sleep medicine practitioners, including Diplomates of the American Board of Sleep Medicine, to take the new sleep certification examination offered by the American Board of Medical Specialties. While the AASM will recognize existing certification by the American Board of Sleep Medicine, we cannot predict nor should we necessarily expect similar acceptance from other organizations and institutions. It follows that the timely acquisition of certification in sleep medicine from the American Board of Medical Specialties is in our best interest.

Certification in behavioral sleep medicine will likely take on a greater importance as a growing number of sleep disorder patients and sleep facilities look for proven non-pharmacological approaches for treating insomnia and managing acclimation to positive pressure devices.

Yesterday the AASM administered its annual behavioral sleep medicine certification examination, and I encourage interested members who missed this year's exam to register for the 2008 exam.

My tenure as your President benefits by coinciding with the end of our three-year strategic plan. Past presidents Mike Sateia, Larry Epstein and Michael Silber and others have tirelessly devoted their energy and provided the leadership to successfully advance much of our strategic initiatives. I assume the position of President empowered by your support and equipped with a superb Board of Directors, a dynamic President-elect and the best staff in organized medicine. You should sleep peacefully and remain confident that during my term as President, your AASM will gain momentum as the leader in setting standards and promoting excellence in sleep medicine health care, education and research.