



Out of Center Sleep Testing **Policy Statement**

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Introduction

The integrity of any Out of Center Sleep Testing (OCST) program begins with the initial screening of the patient. Today, initial patient assessment for sleep illnesses are not just performed by sleep physicians but also performed by primary care providers and dentists. Patients suspected of a sleep illness should be referred to a board certified sleep medicine physician (BCSMP) for a comprehensive evaluation. A BCSMP is best qualified to order a sleep test because OCST is not appropriate for all patients with suspected sleep illnesses. For more information, reference the paper “Clinical Guidelines for the use of Unattended Portable Monitors in the Diagnosis of Obstructive Sleep Apnea in Adult Patients.”

AASM’s Out of Center Sleep Testing in Adult Patients accreditation standards set guidelines for developing the policies and procedures for OCST programs. The inherent challenge with OCST is that there are activities that may not occur under direct supervision of the OCST program such as the distribution, retrieval and cleaning of the portable monitoring devices. All accredited OCST programs must comply with the accreditation standards regardless of who performs the activity or where the activity occurs. This policy is separate from the accreditation standards and is intended to assist with the implementation of OCST in an accredited sleep center.

Recognizing that certain sleep centers may find it beneficial, at their sole discretion, to contract with other providers to perform specific technical functions associated with the provision of OCST, the AASM has developed a process for credentialing certain Approved Out of Center Sleep Testing Providers (AOCSTP) which can complete specified technical components of OCST in accordance with AASM OCST standards. Such AOCSTPs are independent providers of OCST services which may contract with an Accredited OCST Entity (AOE) in any state to complete specific technical functions on behalf of the AOE. The AOE can be confident that the AOCSTP has been examined by AASM and is following OCST accreditation standards.

AOCSTP Approval Process

A formal process for approving an AOCSTP was developed by a Task Force and approved by the AASM Board of Directors. The applying AOCSTP will complete an online application to indicate compliance with all of the AASM standards. Completed applications will be sent to the AASM National Office for review. If the application indicates compliance with the current standards, the AOCSTP will be

approved for a site visit. In some cases, additional information may be requested prior to site visit scheduling. The BOD will establish a reasonable fee for the application process.

During the application process, the AASM will verify all policies and procedures of the AOCSTP relating to OCST, with particular attention to:

- **Valid Business and Management Requisites**

The AOCSTP must maintain a valid license, certificate of occupancy, and/or permit, where required by applicable law and regulation, to provide health care services. The AOCSTP is capable of providing services on a national basis to any AOE. The AOCSTP must have an employed Medical Director available during regular office hours and is Board Certified in Sleep Medicine by the ABSM or an ABMS-approved board.

- **Medical Code of Ethics**

Principles of the AOCSTP's published code of conduct must be consistent with the judicial opinions and medical ethics of the American Medical Association.

- **Properly Trained Personnel**

All AOCSTP personnel involved with the provision of OCST technical services must provide proof that they are appropriately trained and supervised for the functions they perform and where required by state and federal law, licensed as required by the OCST accreditation standards. Technical personnel fulfill standard B-11.

- **Available Patient Support during Testing**

The AOCSTP must have appropriately trained personnel available by phone throughout the duration of all sleep tests for patient support. The AOCSTP should be able to show that they have 24/7 patient support. If the AOCSTP does not have 24/7 support, they need to demonstrate that support is available whenever a patient is being tested.

- **Equipment meets Accreditation Standards**

The equipment used by the AOCSTP in the performance of OCST must comply with the accreditation standards set for OCST equipment.

- **Established Equipment Cleaning and Infection Control Procedures**

An AOCSTP should be able to demonstrate that it has set procedures to properly clean, disinfect and decontaminate the equipment before it is sent to patients. Portable monitoring equipment should be cleaned, disinfected and decontaminated according to the accreditation standards. Unclean equipment should be stored in an area separate from cleaned equipment to prevent cross contamination.

- **Established Equipment Maintenance Procedures**

An AOCSTP should be able to demonstrate that it has set procedures for proper inspection and maintenance of the portable monitoring equipment. A visual inspection should be performed prior to distributing equipment to patients and equipment maintenance should occur on a regular basis following the accreditation standards. An AOCST should have a formal procedure to validate the functional integrity of any device before it is provisioned to a patient, and shall, at a minimum, complete and document such validation procedure whenever a device is returned with non-diagnostic or unsatisfactory results, or when visual inspection suggests the possibility of device damage. An AOCSTP should be able to report on the failure rate of their equipment and supply maintenance records to an AOE.

- **Proven Patient Education**

An AOCSTP must show that their mode and method of patient training addresses a variety of culturally and linguistically appropriate services (e.g., verbal, written, video). In addition, an AOCST must have formal arrangements for timely provision of translation services for non-English speaking patients.

- **HIPAA Compliant Data Exchange**

Patient privacy is a legal requirement under HIPAA laws. Most AOCSTPs offer an electronic means for transferring patient data to an AOE. An AOCSTP must demonstrate that their information systems are HIPAA compliant and the OCST raw data can be transferred with accuracy. An AOCSTP must also show that access to each AOE's OCST records are limited to allowed persons and entities. A HIPAA compliant host has physical safeguards, technical safeguards, audit reports and technical policies. The AOCSTP must report any HIPAA violation or breach of patient information to the AOE and appropriate legal authorities immediately. The AOCSTP shall be required to document all such violations for AASM review and, where possible, develop action plans to correct processes enabling such violations.

- **Reporting Available for Quality Assurance Measures**

An AOCSTP must be able to provide access to information about the reliability of the tests and the adequacy of the data on a quarterly basis. The AOE is required to have this information for quality assurance reporting and measurement to meet the accreditation standards. The AOCSTP must have a process by which it collects the required data, performs root cause analysis and can supply easily understandable reports.

Following the site visit, the site visitor submits a report to the Accreditation Committee for review. A recommendation regarding approved status is submitted to the BOD for final approval. The BOD will (i) approve the AOCSTP without reservation, (ii) tentatively approve the AOCSTP with provisos, or (iii) deny approval to the AOCSTP.

The AOCSTP will be allowed to communicate their approved status in their marketing material and on their website but may not use the term “accredited” or “endorsed.” The AASM reserves the right to approve any press releases concerning the approved status prior to publication, and such approval will not be unreasonably withheld. The AASM will add the AOCSTP to the list of approved OCST delegates on the AASM website after an approval has been finalized.

The AOCSTP will notify AASM immediately of any changes in either their Standard Operating Procedures related to AASM standards, the supervising Medical Director, or facility locations. To the extent that the AASM does not approve of any such change, upon receipt of required notice, the AASM shall provide feedback of its concern and allow for a 90-day cure period. Failure to cure may result in revocation of the approval status of the AOCSTP. Approval will last three years. The process for re-approval will be established by the BOD.

The AOE-AOCSTP Contract

Once an AOCSTP has earned an approved status, any AOE may directly contract with the AOCSTP.

Transfer of Test Data

Software-generated data that may be scored is provided by the AOCSTP to the BCSMP. Under the supervision of the BCSMP, appropriate personnel employed by the AOE may score the sleep tests. The final review of the entire raw data recording obtained from the sleep test is always interpreted by the BCSMP. The review of the data must assure that the quality of the recording and the scoring of sleep and associated events is sufficient to allow for interpretation. It is important that the staff providing ongoing care for the patient be involved in the initial diagnosis, which includes interpretation.

AOE Must Retain Control of Billing

Business integrity is just as important as clinical integrity when managing an OCST program. An AOE contracting with an AOCSTP for OCST services should retain control of billing the payer, unless precluded by law or regulation. The AOCSTP should bill the AOE a pre-negotiated amount for the service provided. The pre-negotiated amount should be guided by the technical portion of reimbursement. The AOE will pay the AOCSTP based on the terms of the contract.



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