



How do I contact a Lawmaker?

Communicating with your lawmakers

In all communications with your legislator it is important to *stress that you are their constituent, or provide services for their constituents*. When communicating, *always be brief and to the point*. While you may have multiple concerns, it is important that you *focus solely on one or two issues*. Remember, your legislator is probably not a physician, be clear and *avoid using industry specific jargon*. Although you may be eager to impress, it's of utmost importance that you are always *honest*. Your legislator will appreciate it if *you inform them about potential opposition* to your proposal, but also *make it known if others support your cause*. To make quick and accurate answers to questions, *have your legislation materials in front of you for reference*. There is no shame in admitting that you cannot answer a question; instead, say you will quickly *follow up with an answer* after further research.

To wrap up your correspondence, make it known that *you can be a resource* for your representative or senator if they pursue your concerns further. As always, a gracious *“please” and a “thank you” go a long way*. Spread your friendly, positive attitude throughout the room.

Invite your legislator to your sleep center. A visit will provide both you and your lawmaker *with positive press*. Valuable one-on-one time with your senator or representative can be the start of a very fruitful, mutually beneficial business relationship.

Any questions? The American Academy of Sleep Medicine (AASM) makes itself a resource for all political correspondence. Please direct any legislative questions to Senior Health Policy and Government Affairs Analysis, Ted Thurn, by email at tthurn@aasmorg.org or by phone at (630) 737-9700.

The best way to contact your representative or senators is by written letter, email, or phone; while any of these mediums are acceptable, nothing beats a face to face conversation.

Letter/Email

Regardless of how you contact your legislator, include your name, title (if applicable), and both your home and email address in your letter. Many lawmakers still primarily use written correspondence because it reaches more of their constituents than email.

Remember your courtesies. In the mailing address, refer to your representative or senator as “The Honorable (Full Name).” In your greeting, write “Dear Representative (Last Name)” or “Dear Senator (Last Name).” If you are contacting a chairman or the Speaker of the House use the title “Mister/Madame (Title).”

To find the contact information for your representative, search by their name after you click [here](#). To find the contact information for your senator, search by their name, or your state, after you click [here](#).

Phone

When calling your legislators, ask for the legislative assistant or legislative correspondent who handles health issues. The assistant and correspondent are specialized members of a legislator's team. They will typically be better equipped to communicate about your concern over any specific issue than your legislator will be. Assistants and correspondents have the ear of the representative and senator they serve and will be a great resource. More than likely, you will not have an opportunity to speak with your representative or senator on the phone due to their very busy schedules.

Be sure to follow up with your phone call with an email or letter to touch base on your concern.

To find the phone number for your representative, search by their name after you click [here](#). To find the phone number for your senator, search by their name or your state after you click [here](#).

Requesting a Meeting

The best way to get a legislator's attention is through a sit-down meeting. While the House and Senate are in session, a meeting must take place in a lawmaker's Washington D.C. office. While the House and Senate are not in session, you can likely meet with your representative or senator in one of their in-state offices. Most lawmakers have no preference where their meeting is scheduled, so take advantage of their time away from Capital Hill. Click [here](#) to find updated calendars for the U.S. Senate and House of Representatives.

Something may come up and you might be surprised to find that you are meeting legislative assistant rather than your representative or senator. Federal lawmakers have very busy schedules that may force them elsewhere. With meetings, calm flexibility is the key to a productive discussion.

Meetings with lawmakers must be made at least a month in advance. To make an appointment, ask for the legislator's scheduler. A phone number for a representative is searchable [here](#). Your senator's phone number is searchable [here](#).

Plan your meeting to be as short as 15 minutes. Be prepared for your conversation to start late or be cut short. Nonetheless, do not arrive late to the meeting yourself. If you know that you will be late, be sure to call your legislator's office. Allocate an extra 15 minutes in your schedule to arrive early.

Be firm; ask for a commitment. Your opportunity to voice your opinion may be short, but it does not have to be without result.

As you exit, leave a brief memo of supporting materials with the office and be sure to follow up with a letter or email thanking staff members for their time.

Again, the AASM has a government relations team working for your benefit. For any questions, please contact Senior Health Policy and Government Affairs Analyst, Ted Thurn, by email at tthurn@aasmnet.org or by phone at (630) 737-9700.



AASM Initiatives

What should I Discuss?

When meeting with legislators, please inform them that the AASM is currently pursuing the following legislative/policy initiatives:

Creating a Stark Law exception for sleep medicine;

In its current state, the [Stark Law](#)—also referred to as the physician self-referral law—forbids sleep physicians from providing therapeutic durable medical equipment (DME) to their Medicare patients. The Stark Law adds an unnecessary layer of complexity to the sleep care paradigm, as physicians must send their patients to a DME supplier to obtain their prescribed DME. Prohibiting physician involvement in their patient's long-term care increases the opportunity for miscommunication and mistakes to occur. Navigating this complex pathway to successful treatment can be a challenge for Medicare patients, who often are overwhelmed with medical needs and decisions.

Compounding the negative effects that the Stark Law has on sleep medicine, the fragmentation that the law creates leads to fraud and wasteful healthcare spending. In fact, under the Stark Law, audit reports reflect PAP error rates as high as 80%. In some cases, the patient's record does not even confirm delivery of the prescribed equipment.

Sleep physicians are uniquely specialized to treat sleep diseases and, therefore, should oversee all patients from diagnosis to therapy. Therefore, the solution to this problem is to amend the Stark Law by establishing an exception that will allow board certified sleep medicine physicians to provide PAP therapy to their Medicare patients. A Stark exception will allow Medicare patients with OSA to receive coordinated diagnostic and therapeutic care from their sleep medicine physician, which will improve patient care and quality of life while reducing improper payments and CMS costs.

AASM Pursuing the Following Resolutions

Resolutions are non-binding pieces of legislation which are used to indicate general support for the pertaining topic and build awareness among the given issue. It is important to advocate for resolutions as they set a precedent for the health policy of the future. Please view the list below to learn about the resolutions that the AASM is actively supporting:

Combating the dangers of drowsy driving:

Drowsy driving: Driving while sleep deprived—is the cause of 6% of all car crashes, including 21% of fatal accidents. The risks of drowsy driving resemble those of drunk driving as studies show that going 18 hours without sleep is equivalent the legal blood alcohol content of .08; a full day without sleep is equivalent to having a blood alcohol content of .10.

The AASM is pursuing a resolution to begin a legislative dialogue about the life-threatening presence of driver fatigue on American highways and residential roads

Protecting veterans and members of the U.S. Armed Forces from sleep disease and related illnesses:

20% of soldiers will develop sleep apnea in their lifetime, making them four times more likely to develop the disease than the civilians they protect. Adding to the factors that keep soldiers and veterans from healthy,

restorative sleep, many members of the Armed Forces return from duty suffering from posttraumatic stress disorder (PTSD). Recent studies have shown that these severe medical issues may be connected, as 54% of the patients with PTSD who underwent sleep studies at Walter Reed National Military Medical Center were diagnosed with OSA.

To protect the brave men and women who honorably serve the United States from the dangers of sleep diseases, the AASM is advocating for a resolution that encourages all American soldiers and veterans to practice and maintain healthy sleep habits both during and after active duty; additionally, the proposed resolution will encourage the Armed Forces to explore CPAP therapy as a viable treatment for PTSD.

Raising awareness and providing treatment for OSA in the black community:

Data has revealed that OSA disproportionately affects the black community. 80% of black citizens show symptoms of sleep apnea, opposed to 55% of white individuals. Although a significantly larger percentage of black individuals have sleep apnea, they are far less likely to seek out sleep care compared to their white neighbors.

To mitigate the discrepancies in accessible to sleep care the AASM has asked lawmakers to introduce a resolution that supports raising public awareness of sleep apnea within black community and encourages increased access to quality sleep care for black citizens who have sleep disorders such as OSA.

Expanding the use and access of telemedicine:

Telemedicine has proven itself to be an effective tool which can greatly increase provider efficiency and bring access to underserved communities which lack access to quality physician care.

The AASM has embraced the emergence of telemedicine, as seen by the launch of the AASM's internally developed, sleep specific telemedicine platform, [AASM SleepTM](#). To support 21st century telemedicine legislation, the AASM has endorsed existing legislation, such as the CONNECT for Health Act (S.2484), to lessen the regulatory burdens on physicians practicing telemedicine and the patients they serve.