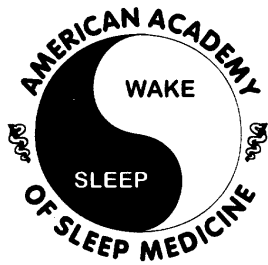


ACCREDITATION OF SLEEP DISORDERS CENTERS



American Academy of Sleep Medicine

POLICIES REVISED OCTOBER 2011

APPLICATION OVERVIEW

Welcome to the AASM Accreditation Application Process. **Please take the time to read these policies and follow the directions closely.** It is recommended that you visit the accreditation link at www.aasmnet.org for Frequently Asked Questions (FAQs), review of the accreditation process, and up-to-date *Standards for Accreditation*.

Please follow these steps in the application process:

1. **Read** the Application Guide completely before beginning the online application forms or gathering supporting materials.
2. **Decide** if you are applying for provisional accreditation. If so, see Categories of Accreditation for more information.
3. **Fill out** the online Application for Accreditation.
4. **Assess** your facility using the Standards Self-Assessment. Check each box in the Standards Self-Assessment indicating that you meet or do not meet each standard. If you are applying for provisional accreditation, mark the appropriate boxes.
5. **Collect** supporting materials.
6. **Upload** the materials to your online application. Please note that the materials submitted for full accreditation are not the same as those submitted for provisional accreditation.
7. **Submit** your application to AASM to begin review.

APPLICATION GUIDE FOR AASM ACCREDITATION OF SLEEP DISORDERS CENTERS AND LABORATORIES FOR SLEEP RELATED BREATHING DISORDERS

HISTORY OF AASM ACCREDITATION

The first sleep facility was established in 1964 at Stanford University for the diagnosis and treatment of narcolepsy. In 1975, the Association of Sleep Disorders Centers, a predecessor of the American Academy of Sleep Medicine (AASM), was formed and a Certification Committee was appointed to establish and maintain standards for the evaluation and treatment of patients with sleep disorders. The Montefiore Hospital Sleep Center, New York, was the first to be accredited on April 27, 1977.

The Accreditation Committee (formerly the Certification Committee) writes and maintains the *Standards for Accreditation*. Final approval of the *Standards* rests with the AASM Board of Directors. The Standards are updated periodically to remain consistent with changes in technology and clinical practice.

OVERVIEW OF THE AASM ACCREDITATION PROGRAM

AASM accreditation is a voluntary activity, providing recognition that a facility meets rigorous standards set forth by the AASM. The AASM accredits sleep disorders centers. A sleep disorders center provides clinical diagnostic and treatment services for patients with sleep disorders.

The length of time an individual application spends in the accreditation process varies widely depending upon the quality of the application, the volume of applications currently in process, and the speed with which responses are received from the applicant facility. The application period can take up to nine months.

The Accreditation Committee oversees the accreditation process. Site visitors are board certified sleep specialists who are or have been directors of AASM accredited sleep facilities.

THE ACCREDITATION PROCESS

1. The AASM reviews all applications using the most current Application and Standards, regardless of the age of the application submitted. The current Application for Accreditation is always available for free download at www.aasmnet.org.

Separate applications must be submitted for each facility seeking accreditation.

Please note the AASM Board of Directors eliminated accreditation of satellite centers and laboratories in January 2002. Each facility must be capable of operating independently.

2. The medical director completes the online application and submits it with the accreditation fee to the national office. The fee is \$4500 for new accreditation and \$4500 (non-refundable) for provisional accreditation. For reaccreditation, the fee is \$4500 for an AASM member center and \$7200 for a non-AASM member center. Please note that fees are subject to change without notice.
3. The application is reviewed upon receipt. Applications are normally through an initial review within 4-6 weeks of receipt. The AASM will contact the applicant facility via email to the primary contact designated in the application. Please ensure that your spam filters do not block messages from the AASM.
 - a. The facility may be asked to submit additional information regarding mandatory standards based on the application review. Such a request is communicated to the facility via email to the primary contact designated in the application. The medical director is required to respond in writing within 30 days to queries for information necessary to complete the review. Applicants who do not respond within 30 days will be assessed a late fee of \$500.
 - During the initial review phase, applicants will only be required to respond to requests for information about mandatory standards. Issues related to other standards will be provided to the facility for review and must be corrected by the time of the site survey
 - b. If a response to the request for additional information is not received in 60 days, the application is voided. \$1000 will be refunded to facilities applying for full accreditation. After this,

the facility must submit a new application along with full accreditation fee payment. The \$1000 refund does not apply to facilities applying for provisional accreditation or those moving from provisional to full accreditation.

- c. Reaccreditation applications must be received six months prior to the expiration date of the current accreditation term. Centers failing to do so may still submit an application; however, it will be reviewed as a new accreditation, the original accreditation date will be lost, and a site visit will be required. Except in the case of special circumstances (See **SPECIAL CIRCUMSTANCES**), applications for reaccreditation will not be accepted more than nine (9) months in advance of the expiration date.
 - d. The AASM reserves the right to return incomplete applications.
 - e. If the application does not pass the review process, the applicant will be notified that the application has been rejected. New and reaccreditation applicants will be reimbursed \$1000 of the accreditation fee. Provisional applicants and those moving from provisional to full accreditation will not be offered a refund. The medical director may appeal the decision of the reviewer in writing to the AASM Board of Directors within 30 days (See **APPEALS PROCESS**).
4. AASM begins coordinating the site visit upon application receipt. A business associate agreement must be submitted with the *Application for Accreditation*. If this agreement is not fully executed prior to the site visit, the visit will be cancelled (see **CANCELLATION POLICY**)

a. Scheduling

AASM will begin the site visit scheduling process immediately upon application submission. Based on site visitor availability, a visit date will be selected by accreditation staff. The facility will then be notified that a site visit has been scheduled and provided with site visit preparation materials.

b. Requirements for the Site Visit

The applicant must enter the names of all required interviewees in the site visit itinerary and send it to the AASM Accreditation Department at least two weeks prior to the site visit. Failure to do so may result in cancellation of the site visit.

The medical director must be present during the entire site visit.

All staff physicians who interpret polysomnograms must be present during the site visit.

Generally, site visits will start at 8:00 am and last 6-8 hours.

Facilities should NOT contact their site visitor with questions or concerns related to the application review, site visit process or for issues concerning provisos following a site visit. All such contact should be directed to the AASM national office.

Site visitors pay their own expenses with subsequent reimbursement by the AASM.

c. Cancellation policy

Cancellation of a scheduled site visit, for any reason, renders the facility's application null and void. The accreditation fee will not be refunded. If the applicant reapplies, the application and applicable fee must be resubmitted. Once received, the accreditation process will start from the beginning.

The AASM reserves the right to make exceptions to this policy when it deems warranted. Such circumstances may include catastrophic weather or environmental emergencies, unexpected injury or death of a key sleep facility staff member, or other similar situations beyond the control of either the sleep facility or the AASM. Regardless of cause for cancellation, the facility will be required to pay all cancellation fees and re-booking fees.

The decision to make such an exception is at the sole discretion of the AASM.

5. Following the site visit, the site visitor submits a report to the Accreditation Committee for review. A recommendation regarding accreditation status is submitted to the AASM Board of Directors for final approval.

6. The Board of Directors will render one of three decisions:
- If the Board of Directors approves accreditation without reservation, the sleep facility is granted full accreditation for five years dating from the site visit.
 - If the Board of Directors finds a sleep facility is generally but not fully in compliance with the Standards, accreditation is granted for a five-year term pending compliance with provisos. A proviso is a condition that must be met within three months of the notification date stated by the AASM.
 - If the Board of Directors denies the sleep facility for accreditation, the facility may reapply, submit all applicable fees and begin the accreditation process again.

The medical director of a sleep facility that is denied accreditation has the right to appeal in writing to the AASM Board of Directors (see **APPEALS PROCESS**).

CATEGORIES OF ACCREDITATION

Full Accreditation

Full accreditation is granted by the Board of Directors for five years from the date of approval by the Board of Directors.

Accreditation with Provisos

Accreditation with provisos is granted by the Board of Directors if the sleep facility does not satisfactorily meet all of the *Standards for Accreditation*, but the Board believes that the facility will be able to meet the *Standards* within three months of notification by the AASM, and will be able to operate safely in the interim. Compliance with requirements described in the provisos must be communicated in writing to the AASM.

The deadline for submitting information regarding correction of deficiencies described in the provisos is three months from the notification date stated by the AASM.

- If the information is approved, the provisos are lifted and full accreditation granted from the date of approval by the Board of Directors.
- If written information addressing the provisos is not received within three months, the review process is terminated and accreditation is withdrawn.

The Accreditation Committee will decide if on-site verification of compliance with provisos is necessary. If on-site verification is required, AASM will bill the facility a flat fee of \$1600 to cover the costs of the site visit. Payment must be made before the second site visit is scheduled. Once the facility meets the *Standards for Accreditation*, it will be granted full accreditation for five years from the date of approval by the Board of Directors.

Provisional Accreditation

Provisional accreditation is available to new, start-up centers, and new facilities opened by an existing center. It is only available to facilities that have been open for six months or less.

1. **The following *Standards* must be met in order to be considered for provisional accreditation status:**
 - a. Section A
 - b. Section B
 - c. C-1
 - d. C-2
 - e. Section D
 - f. Section E
 - g. Section I

2. ***Standards* which do not have to be met at the time of request for Provisional Accreditation but will have to be met at the time of application for full accreditation (While patient data will not be required, some policies related to these standards may be requested):**
 - a. C-3
 - b. C-4
 - c. Section F
 - d. Section G
 - e. Section H
 - f. Section J

Provisional accreditation is granted for a period of six months. An application for full accreditation must be submitted within six months of the date of provisional accreditation; otherwise, provisional status is withdrawn. The fee for provisional accreditation is non-refundable. No refund will be provided should a facility fail to submit a full accreditation application within the appropriate timeframe. If an application for full accreditation is submitted within the six-month timeframe, provisional accreditation will continue through the review and site visit process.

Rescinded Accreditation

An accredited sleep facility may lose its ability to meet the *Standards for Accreditation*, e.g., loss of medical director or board certified sleep specialist. The Accreditation Committee may recommend to the Board of Directors that the facility accreditation status be rescinded until the facility again meets the *Standards for Accreditation*.

While accreditation is rescinded, the sleep facility is not accredited. The facility may not use the AASM member center logo, or other materials that imply accreditation by the AASM. All references to AASM accreditation in advertisements must cease.

In order for accreditation to be reinstated, the medical director must provide written documentation of changes that have been made to correct deficiencies. A site visit may be necessary, at the sleep facility's expense, to determine whether the facility now meets the *Standards for Accreditation*. It is not necessary to submit a new application for accreditation.

When accreditation is reinstated, full accreditation resumes for the remainder of the original accreditation term.

Rescinded accreditation status cannot be continued beyond one year. Failure to meet all standards within one year will result in revoked accreditation.

Failure to notify the AASM of changes in an accredited center that may lead to rescinded accreditation is cause for denial of future accreditation.

Revoked Accreditation

If a facility is not in substantial compliance with the *Standards for Accreditation*, the accreditation may be revoked. Examples of cause include but are not limited to illegal activity, incomplete or inadequate application, site visit failure, AASM Board of Directors action, violation of essential standards, ownership changes, and relocation.

If accreditation is revoked, the facility is required to wait one full year before applying for accreditation.

After accreditation is revoked, the facility may not use AASM member center logo, or other materials that imply accreditation by the AASM. All references to AASM accreditation in advertisements must cease.

The medical director of a sleep facility whose accreditation is revoked has the right to appeal in writing to the AASM Board of Directors (see **APPEALS PROCESS**).

REVIEW OF ACCREDITED PROGRAMS

The AASM reserves the right to audit an accredited sleep facility at any time.

WITHDRAWALS

A facility may withdraw their application for accreditation at any time. In order to withdraw, the medical director must send a letter, on sleep facility letterhead, requesting the withdrawal. A portion of the accreditation fee will be refunded to the facility, the amount of which will be determined based upon the status of the application at the time of withdrawal.

Prior to the completion of application review, an \$800 administrative fee will be withheld. If the application is withdrawn after initial review is complete, \$1,000 will be refunded. If a site visit has been scheduled, no refund will be given.

SPECIAL CIRCUMSTANCES

AASM reserves the right to require an accredited sleep facility to reapply for reaccreditation if there is reason to believe that a reappraisal of the sleep facility's accreditation is necessary. The AASM may require such reapplication for accreditation in the event of illegal activity, incomplete or inadequate application, AASM Board of Directors action, or violation of essential standards. The AASM will require reapplication in the event of relocation or a change in control of the accredited sleep facility for any reason including sale, acquisition, merger, or other substantial change in ownership or management of an accredited sleep facility.

AASM accreditation is owned solely by the AASM. It is neither saleable nor transferable.

Failure to notify the AASM of changes in an accredited center that may lead to special circumstances reapplication is cause for denial of future accreditation.

The accreditation granted by AASM will remain with the person/entity holding legal ownership of the sleep disorders center. Legal ownership of the center must be specified at the time of application for accreditation. If a change in ownership or management occurs during the accreditation term, all involved parties must notify AASM in writing within one month of the change. Upon notification, the following will apply:

1. The facilities involved will receive an extension of accreditation for 90 days. All involved parties must provide information regarding the change to the AASM. This includes Forms I-VI, the Standards Self-Assessment, a copy of the medical director's current license, a copy of RPSGT certificates or detailed training information for each tech, a copy of CPR certification (cognitive and skills training) for each tech, an 8 ½ x 11 copy of the floor plan of your facility, and elements of the Policy and Procedures Manual.
2. The Accreditation Committee will review the information provided and determine if a site visit is warranted.
3. If a site visit is determined to be necessary, the cost will be assumed by the sleep facility. AASM will bill the facility a flat fee of \$1600 to cover the costs of the site visit. Payment must be made before the site visit is scheduled. The 90-day grace period of accreditation will be extended if AASM is unable to complete the site visit within 90 days.
4. The Board of Directors determines accreditation status after the site visit.
5. Accreditation, if approved, will be granted for the remainder of the original accreditation term. If two or more accredited sleep facilities merge, accreditation continues until the earlier scheduled expiration date.

If relocation occurs, facilities must notify the AASM of the move within one month. An extension of accreditation for 90 days will be granted and the facility will have two options:

1. Apply for reaccreditation. All regular fees will apply, a complete application must be submitted, and a site visit will be conducted. Following the site visit, the Board of Directors determines accreditation status. If approved, accreditation would be granted for a five-year period (see **THE ACCREDITATION PROCESS**).
2. Submit a special circumstances application
 - a. Application fees will be waived.
 - b. The facility must provide information regarding the change to the Accreditation Committee. This includes Forms I-VI, the Standards Self-Assessment, and an 8 ½ x 11 copy of the floor plan of your facility of the checklist for full accreditation. A copy of the medical director's current license, a copy of RPSGT certificates or detailed training information for each tech, a copy of CPR certification (cognitive and skills training) for each tech, and elements of the Policy and Procedures Manual should be submitted if any changes have occurred.

- c. The medical director must submit a letter attesting that the sleep facility will continue operating under the current Standards for Accreditation through the relocation and reapplication process.
- d. The application will be reviewed and a site visit will be scheduled, the cost of which will be assumed by the sleep facility. AASM will bill the facility a flat fee of \$1600 to cover the costs of the site visit. Payment must be made before the site visit is scheduled. The 90-day grace period of accreditation will be extended if AASM is unable to complete the site visit within 90 days.
- e. The Board of Directors determines accreditation status after the site visit.
- f. Accreditation, if approved, will be granted for the remainder of the original accreditation term.

APPEALS PROCESS

Accreditation of a sleep disorders center may be denied or revoked at any time for cause. Examples of cause include but are not limited to: illegal activity, incomplete or inadequate application, site visit failure, AASM Board of Directors action, violation of essential standards, ownership changes, or relocation. Only the AASM Board of Directors can approve, deny, rescind, or revoke accreditation status.

Facilities may appeal a denial or revocation. The appeal process must abide by the following guidelines:

The medical director of the sleep facility will be notified by mail, return receipt requested, whenever accreditation is denied or revoked. If the facility wishes to appeal the decision, a request must be submitted in writing by the medical director of the sleep facility within 30 calendar days of the date of the letter of denial. The letter of appeal will be reviewed initially by the AASM Director of Policy and Professional Standards, followed by the Chair of the Accreditation committee, and finally by the Board of Directors. The Board's decision will be sent to the medical director of the sleep facility within eight weeks of receipt of the appeal letter. The decision by the Board of Directors is final.

The cost to file an appeal is \$300. Payment must accompany the medical director's letter. If payment is not received, the appeal will automatically be rejected. All other costs associated with the appeal are the responsibility of the sleep disorders center or laboratory. Such costs could include a site visit.

LOGO USAGE AND ADVERTISEMENT OF ACCREDITED STATUS

Each fully accredited sleep facility may advertise that it is accredited by the American Academy of Sleep Medicine (AASM). Indication of accreditation by the AASM may be made in text only unless the accredited facility becomes a center member of the AASM, in which case a member center logo is available for use. Membership is voluntary and is separate from accreditation. Information on AASM membership for accredited sleep facilities is available at www.aasmnet.org.

Use of any AASM logo other than the AASM Accredited Member Center Logo or the AASM Accredited Member Lab Logo is strictly prohibited. These logos may be used by accredited member centers and laboratories that have earned this right. You must be given permission or consent in order to use the AASM Accredited Member Center Logo or the AASM Accredited Member Lab Logo.

An accredited sleep facility that is not an AASM member facility may not use the AASM logo in conjunction with its facility in any way. A warning will be given if a sleep facility is found to misrepresent itself, or any other facility that is operated in conjunction with an accredited facility but is not itself accredited, by using the AASM logo. A sleep facility that continues to misuse the logo is subject to legal action including revocation of accreditation and a fine of \$1000 per offense.