



## **Naturopathy Work Group Traditional Naturopathy Working Session Summary September 23 and October 1, 2008**

### **Work Group Members and Alternates:**

Present: Arlene Bushard, N.D., Natural Health Practitioners of MN; Greg Schmidt, MN Natural Health Legal Reform Project; Diane Miller, Director, Legal & Public Policy for National Health Freedom Action/Coalition; Katie Murphy, Minnesota Advocates for Complementary and Alternative Practices (MNACAP); Pat Ruether, N.D., Natural Health Practitioners of MN; Christine Stueve, MNACAP; Scott A. Banas, J.D, Office of Complementary and Alternative Medicine; and, Barbara Hartwell (on 9/23/08 only) and Bonnie Bolash (on 10/01/08 only), Acupuncture and Oriental Medicine Association of Minnesota (AOMOM).

### **Staff:**

Tom Hiendlmayr, Health Occupations Program and Kay Herzfeld, Compliance Monitoring Division

### **I. Review and Accept Proposed Agenda**

The proposed agenda was reviewed (agenda and e-mail message explaining the focus of the next two work group meetings is available on the Naturopathy Work Group's web site under meeting information (09/23/08) at <http://www.health.state.mn.us/divs/hpsc/hop/nawg/index.html>). Mr. Hiendlmayr reminded members that the meeting was a "working session" focusing exclusively on any Traditional Naturopaths' proposals for amendments to 147E and/or 146A, and other possible changes. Proposed amendments and changes to statute language from this discussion would be presented to the Naturopathic Physicians for consideration at their October 14, 2008 "working session." Agenda was accepted as proposed.

### **II. Review and Discuss:**

- a. Traditional Naturopaths' Proposed Amendments to 147E**
- b. Amending 147E without adding new Language**
- c. Draft Statement of Legislative Intent**
- d. Suggestions for Amending 146A**

Members reviewed and discussed proposed amendments and other changes presented by the Traditional Naturopath Work Group Members (Diane Miller, Arlene Bushard, Pat Ruether) and Alternates (Katie Murphy and Christine Stueve representing Minnesota Advocates for Complementary and Alternative Practitioners or MNACAP). See Attachments A and B, which are available on the Naturopathy Work Group's web site under meeting information (09/23/08) at <http://www.health.state.mn.us/divs/hpsc/hop/nawg/index.html>. They also reviewed a draft statement of legislative intent and suggestions for amending 147E and 146A, presented by MDH (Attachment C which is available on the Naturopathy Work Group's web site under meeting information (09/23/08) at <http://www.health.state.mn.us/divs/hpsc/hop/nawg/index.html>). Members and Alternates tried to identify where there might be similarities and possible agreement.

After considerable review and discussion, the Traditional Naturopath representatives came to the conclusion that they basically were representing two differing proposals as solutions for the concerns from the community of naturopath and complementary and alternative practitioners with some possible overlapping common agreements. The primary differences were noted during the discussions surrounding:

- 1) the proposal submitted by Members Diane Miller, Arlene Bushard, Pat Ruether and supported by Alternate Greg Schmidt to recommend licensing Naturopathic Medicine Doctors, and also the proposal for additional definitions including a definition for an enhanced Scope of Practice for 147E (See Attachment A); and,
- 2) the proposal submitted by Alternates Katie Murphy and Christine Stueve representing MNACAP to reduce the definition of the Naturopathic Physician's Scope of Practice to include only those practices that have been granted to them under 147E that they cannot already perform under 146A, (see Attachment B).

Traditional Naturopath Members and Alternates opted to begin discussing the small amendments, where there might be agreement.

### **Protected Title Discussion**

Registered or protected title, amendment #3 on Attachment A, 147E.10, Subd. 1., was one of the first proposed amendments discussed (amendment #3 on Attachment A). Comments included the following:

Naturopathic medicine practitioners registering under 147E are part of a national organization, American Association of Naturopathic Physicians, AANP, through their state organization Minnesota Association of Naturopathic Physicians, MnANP. Other AANP state associations' members have demonstrated intentions to restrict the use of the words "naturopathy", "naturopath", "traditional naturopath", "naturopathic medicine", "naturopathic doctor", "N.D.", etc in their licensure legislation for their state.

- a. Historically, "naturopathy", "naturopath", "naturopathic medicine", and "naturopathic doctor" and "traditional naturopath" refers to a philosophy, lifestyle, and health practices that includes natural methods of bringing the body into a state of wellness and does not involve invasive allopathic techniques. Some practitioners and consumers use the methods as an alternative to conventional medicine's philosophy and practices, while others integrate or complement them with conventional medicine.
  - i. Naturopathic medicine practitioners registering under 147E practice naturopathic medicine which includes invasive medical procedures. Invasive medical procedures are contrary to the practice of naturopathy.
  - ii. Whereas, some modalities, therapies, products and services practiced by these traditional naturopaths currently practicing under 146A may also be practiced by the soon to be registered naturopathic medicine practitioners and integrated or added into the conventional medicine approaches, this does not indicate naturopathy is being practiced.

- b. While using the same titles of naturopath, naturopathy, naturopathic medicine, and N.D., the four year schools referred to in 147E introduced a new philosophy of naturopathic medicine as compatible in nature and definition with conventional medicine, thereby attempting to change the perspective of these titles.
  - i. These titles have been used by naturopathic and natural health practitioners for over one hundred years before the creation of the four year federally accredited naturopathic medicine schools in 147E.
  - ii. The bills introduced into the Minnesota Legislature by the practitioners of naturopathic medicine attempted to restrict the use of “N.D.”. This restriction would eliminate the use of educational diplomas and discredit the education of traditional naturopathic practitioners.
  
- c. Traditional Naturopaths and 146A practitioners alike prefer one unique title for future use by registered practitioners of naturopathic medicine that would not alter the general standard or commonplace perspective of naturopathy, its philosophy and practices.
  - i. The opportunity to study and make recommendations for this registration bill was not available to the traditional naturopathic community prior to legislative action as they were not consulted during the bill drafting process.
  - ii. Examples of suggested unique titles for registrants instead of the titles in 147E discussed at the October 1, 2008 meeting included: Holistic Integrative Medicine Doctors, Doctors of Integrative Medicine Practices, etc.

Conclusion: Review of the awarded title and initials in 147E led to the recommendation to amend 147E to provide only one title for the practitioners registering which would maintain alignment with the titles already awarded, yet address the concerns of naturopaths regarding title and philosophy of practice (see proposed amendment below). The “Registered Doctors of Naturopathic Medicine” with the initials R.D.N.M. was chosen as the preferred title. The titles “naturopathy”, “traditional naturopath”, “naturopathic medicine”, “naturopathic doctor”, and “N.D.” remain in the public domain within the realm of the historical and current perspective of naturopathy, its philosophy and practices.

**Sec. 4. [147E.10] PROTECTED TITLES.**

Subdivision 1. **Designation.** (a) No individual may use the title "~~registered naturopathic doctor~~", "~~naturopathic doctor~~", "~~doctor of naturopathic medicine~~", "registered doctor of naturopathic medicine," or use, in connection with the individual's name, the letters ~~R.N.D.~~ or "~~N.M.D.~~," "R.D.N.M." or any other titles, words, letters, abbreviations, or insignia indicating or implying that the individual is a registered ~~naturopathic doctor unless the individual has been registered as a registered naturopathic doctor according to this chapter~~ under this chapter. The use of the title and terms "naturopathy", "naturopathic" "naturopath," "traditional naturopath," "naturopathic practitioner," or "traditional naturopathic practitioner," or any other title or term not otherwise prohibited by law shall not be restricted, protected, or regulated under this chapter.

## Definitions Discussion

### “Naturopathic Physical Medicine”

The definition of “naturopathic physical medicine”, amendment #4 on Attachment A, 147E, Subd. 11., was the second proposed amendment discussed. Attendees had the following comments:

The 147E definition of naturopathic physical medicine is a list of the elements of nature, therapies, practices, and devices.

- a. All of the therapies and devices listed in the definition are methods of healing that are in the public domain and are used by MN 146A practitioners including but not limited to traditional naturopaths.
- b. Air, water, heat, cold, etc. are life itself and as such do not require defining as a property of a specific registered title.
- c. The therapies and devices listed are available for purchase and use by the general public. Therefore, these are not a unique or learned practice requiring a unique or registered definition.
- d. These public domain therapies and devices are utilized by other therapeutic professions.

Conclusion: Review of this language led to the recommendation to delete the following definition of “naturopathic physical medicine”:

#### Section 1. ~~[147E.01] Definitions~~

##### Subd. 11. ~~Naturopathic physical medicine.~~ "Naturopathic physical medicine"

~~includes, but is not limited to, the therapeutic use of the physical agents of air, water, heat, cold, sound, light, and electromagnetic nonionizing radiation and the physical modalities of electrotherapy, diathermy, ultraviolet light, hydrotherapy, massage, stretching, colon hydrotherapy, frequency specific microcurrent, electrical muscle stimulation, transcutaneous electrical nerve stimulation, and therapeutic exercise~~

### “Complementary and Alternative Health Care Practices”

There is currently no language in 147E defining complementary and alternative health care practices. It was determined that leaving the term undefined in 147E left open the possibility of including a definition different or in conflict with the definition of 146A.

Conclusion: Traditional Naturopaths recommended adding the following definition (amendment # 5 on Attachment A):

#### Section 1. [147E.01] Definitions

Subd. 13. Complementary and Alternative Health Care Practices. “Complementary and Alternative Health Care Practices” has the same meaning as defined in MN Stat Chapter 146A

Subd. 4

## **Scope of Practice Discussion**

Scope of practice is a major issue in the Traditional Naturopath Community. Comments from attendees included the following:

The 147E practice parameters include elements of nature, practices, products, services, and modalities available to all Minnesotans.

- a. Complementary and alternative practitioners practicing under 146A utilize nearly all of the practices, products, services and modalities listed in the practice parameters of the new MN 147E.
- b. The 147E registration law does not require or need for clarity the listing of these practices, products, services and modalities.
- c. Naturopathic Physicians should define in 147E what practices they cannot do under 146A.
- d. The original bill H.F. No. 1724 posted on Mar 05, 2007 was for licensing of naturopathic doctors and contained this broad scope of practice parameters that include natural modalities. Passage of this bill into law would have prohibited all chapter 146A practitioners from earning a living practicing those modalities because occupation license laws prohibit anyone not licensed, from practicing that scope of practice.
- e. Future “registered doctors of naturopathic medicine” have publicly stated their intention is not to infringe on the practices of 146A practitioners, therefore, removing the practice parameter list would be consistent with their statements and support their intentions.
- f. Removal of the practice parameters is also consistent with title/registration legislation.
- g. Traditional Naturopath Members (Diane Miller, Arlene Bushard, Pat Ruether) and Alternate Greg Schmidt, assert that if the scope of practice is not changed then it must be made extremely clear throughout the statute that there is an overlap of practices and that all parties have the right to practice the natural health modalities in the public domain, some of the practitioners will be practicing under MN147E and some under MN146A. Suggested amendments to accomplish this were amendments #2a and #2b of Attachment A):

### **Revision of Section 1. Subd. 10. (1) and (2)**

2.20 Subd. 10. Naturopathic medicine. "Naturopathic medicine" means a system  
2.21of primary health care for the prevention, assessment, and treatment of human health  
2.22conditions, injuries, and diseases that uses:

(1) services, procedures, and treatments as described in section 147E.05, many of which are also practiced by unlicensed complementary and alternative health care practitioners under MN146A; and

(2) other complementary and alternative health care practices that do not require registration and are also provided under chapter 146A

### **Or additional clause Section 1. Subd. 10. (3)**

(3) section 2. [147E.05] Scope of Practice includes a number of complementary and alternative health care practices including but not limited to naturopathy that do not require registration and are also provided under chapter 146A.

- h. Traditional Naturopath Members (Diane Miller, Arlene Bushard, Pat Ruether) and Alternate Greg Schmidt assert that if the scope of practice is not changed then it must be made extremely clear throughout the statute that “naturopathy” is not “naturopathic medicine” and this can be done by having only one exclusive title for the Registered practitioners and leaving all other titles in the public domain (See Amendment #3 as amended above), having a proactive statement that there is an overlap of practice (See Amendment #2a and #2b of Attachment A above); having a proactive statement that traditional titles remain in the public domain (See Amendment #3 as amended above), deleting the definition of naturopathic physical medicine so as not to give the impression that it is an exclusive practice (See Amendment #4 in Attachment A), and possibly considering some new intent language.
- i. Considerations were raised, by Traditional Naturopaths Members (Diane Miller, Arlene Bushard, Pat Ruether) and Alternate Greg Schmidt, that supported the view that small amendments might be inadequate in the area of scope of practice and that significant changes should be made to the current scope of practice.
- j. Traditional Naturopath Alternates (Katie Murphy and Christine Stueve representing MNACAP) asserted that that the definitions for naturopathy, naturopathic physicians, naturopathic medicine, and naturopathic doctors as promoted by the American Association for Naturopathic Physicians and the Minnesota Association for Naturopathic Physicians were discussed and not generally accepted by the Traditional Naturopath group as true definitions from an historical and general public perspective. It was noted that these same organizations have systematically attempted to change the historical and public perception of these definitions to meet their interests.

Conclusion: Traditional Naturopath Members and Alternates could not reach agreement on scope of practice language or any changes to be sought to it.

### **Education, Testing, and Accreditation Discussion**

The amount of education and type of course work Naturopathic Physicians receive was also an issue. Pat Ruether presented a handout that compared naturopathy schools and coursework for Traditional Naturopaths with that of Naturopathic Physicians (See Attachments D and E, which are available on the Naturopathy Work Group’s web site under meeting information (09/23/08) at <http://www.health.state.mn.us/divs/hpsc/hop/nawg/index.html>). Comments from attendees included the following:

- a. All four Naturopathic Medicine colleges did not offer the same courses.
- b. Some of the practices listed in the practice parameters were not taught in all four Naturopathic Medicine colleges.
- c. Other colleges such as Trinity, Clayton and U. of Natural Medicine, CA offer a greater selection of naturopathy courses than the four Naturopathic Medicine colleges.
- d. Other colleges such as Trinity, Clayton and U. of Natural Medicine, CA require more credit hours in naturopathic courses for a degree than the four Naturopathic Medicine colleges.
- e. Are the “clinical practice” hours adequate for invasive medical procedures and practices?

- f. Should there be a requirement for continued education hours to be earned for the new authorized practitioners, before registration is authorized, since they have not practiced these clinical practices since their schooling days?
- g. Are the continued education requirements adequate for the responsibilities of this title?
- h. Are the educational requirements appropriate for the responsibilities and status of this title?
- i. Have the comments of the Auditor General report from Arizona 2000 been taken into consideration regarding the inadequacies of education requirements?
- j. Should there be direct supervision by Medical Doctors?

Conclusion: All Traditional Naturopath representatives suggested a complete review of 147E regarding these definitions and requirements, as directed in the “Naturopathy Work Group” section.

### **Addition of a Statement of Legislative Intent Discussion**

MDH prepared a draft Statement of Legislative Intent for Traditional Naturopath representatives to consider, which would clarify the intent of the Naturopathic Physicians to support the continued practice of complementary and alternative practices (See Attachment C). Traditional Naturopaths representative agreed to review the review the draft Statement of Legislative Intent prepared by MDH and revise as needed.

### **III. Meeting Outcome/Next Step**

The October 1, 2008 meeting (continuation of Sept. 23, 2008 meeting) ended with all Traditional Naturopath representatives wanting to discuss the following two options for going forward with their constituents: 1) propose major changes such as the licensure of Naturopathic Physicians that would include, but would not be limited to, addressing title, scope of practice, and education issues as submitted by Traditional Naturopath Work Group Members (Diane Miller, Arlene Bushard, Pat Ruether) and supported by Alternate Greg Schmidt, or 2) propose more limited amendments to 147E Scope of Practice as submitted by Traditional Naturopath Work Group Alternates (Katie Murphy and Christine Stueve representing MNACAP). There was agreement on the three small amendments mentioned above; protected title change, deletion of naturopathic physical medicine definition, and addition of a definition for complementary and alternative practices.

Traditional Naturopath representatives also agreed to review and revise as needed the draft Statement of Legislative Intent prepared by MDH.

The Traditional Naturopath representatives could not reach agreement on scope of practice language, a key issue in the discussions. Work Group Member, Diane Miller, who initially drafted a Model Licensure Act, agreed to send MNACAP representatives (Katie Murphy and Christine Stueve) the enhanced scope of practice language for review and consideration. MNACAP representatives agreed to take to their members the question of a licensure proposal and the proposal of an enhanced scope of practice amendment.

After the Traditional Naturopath Members and Alternates went back to their respective constituents, significant changes were submitted for proposed amendments to be considered by

the Naturopathic Physicians, from what was discussed and agreed to at the October 1, 2008 meeting. There are significantly different economic and professional interests and politically divergent views in the Traditional Naturopath community.

The Traditional Naturopath Work Group Members (Diane Miller, Arlene Bushard, and Pat Ruether) and their constituents, who include naturopath practitioners and members of Natural Health Practitioners of Minnesota, would prefer the limited amendments to the existing 147E. As an alternative they are open to discussing the possibility of licensure (as opposed to the 147E registration statute that is drafted like a licensure statute but called a registration statute), for Naturopathic Physicians because of the modalities of a medical nature they believe Naturopathic Physicians wish to practice. A licensure law would require significant changes to 147E, possibly similar to a Model Licensure Act, that would require more education and competency requirements for clinical work, more clarity to protect traditional naturopathy, limits on the application of scope of practice to an allopathic list of privileges, and include strong exemptions that make it clear that the licensing statute would have no jurisdiction over naturopathy or any other healing practice in the public domain under MN 146A (See Attachment F for final proposed amendments which is available on the Naturopathy Work Group's web site under meeting information (09/23/08) at <http://www.health.state.mn.us/divs/hpsc/hop/nawg/index.html>).

The Traditional Naturopath Work Group Alternates (Katie Murphy and Christine Stueve) and their constituents, who include naturopath practitioners and members of MNACAP, are supportive of amendments #3, 4 and 5 discussed previously, but only if the 147E scope of practice is stripped of traditional naturopathy modalities allowed under 146A. They are against proposing a licensing bill or a Model Licensure Act. They want 147E to have a limited scope of practice delineating allopathic practices for Naturopathic Physicians, with no reference to 146A modalities (See Attachment G for proposed amendments which is available on the Naturopathy Work Group's web site under meeting information (10/14/08) at <http://www.health.state.mn.us/divs/hpsc/hop/nawg/index.html>). Since the community of naturopaths includes a number of MNACAP members, who were actively engaged legislative in the 2008 Session and expect to be again in 2009, MDH determined it was important to submit their proposed amendments to the Naturopathic Physicians for review and consideration, but separate from the Traditional Naturopath Delegates' information.

#### **IV. Next Meeting, Date, Time and Location**

The next Naturopathy Work Group Meeting will be a "working session" for the Naturopathic Physician Members and Alternates to review and consider the amendments and comments presented by the Traditional Naturopaths. That meeting will be held on Tuesday, October 14, 2008, from 2:00 – 4:30 p.m., in Room, OLF B 362, of MDH Offices at Orville L. Freeman Building (near the State Capitol). Directions can be found at <http://www.health.state.mn.us/about/freeman.html>