# Final Report of Preliminary Findings and Recommendations

## By The

Technical Committee for the Review of the
Application for Credentialing by the
Nebraska Association of Naturopathic Physicians

To The

Nebraska Board of Health,

Director of Health,

and the

Nebraska Legislature

October 15, 1988

The members appointed by Gregg F. Wright, M.D., M.Ed., Director of Health, to serve on the Naturopathic Physicians Technical Committee are as follows:

- Julie Brown-Arfmann, D.D.S., (Chairperson), Member of the Nebraska Board of Health (Gering)
- Randall Bradley, N.D., President, Nebraska Association of Naturopathic Physicians (Lincoln)
- David Brown, Ph.D., Professor of Oral Biology, University of Nebraska Medical Center, College of Dentistry (Lincoln)
- Patricia Stivrins, M.D., Director of the Great Plains Regional Apnea Referral Center (Lincoln)
- Jon J. Hinrichs, M.D., General Practitioner with S.C.C., Inc. (Lincoln)
- Corrinne L. Pedersen, Executive Vice-President of the Broken Bow Chamber of Commerce (Broken Bow)
- Vicki Iwai, Homemaker (Bellevue)

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### INTRODUCTION

The Nebraska Credentialing Review Program, established by the Nebraska Regulation of Health Professions Act (LB 407) in 1985, is a review process advisory to the Legislature which is designed to assess the necessity of the state regulation of health professions in order to protect the public health, safety, and welfare.

The law directs those health occupations seeking credentialing or a change in scope of practice to submit an application for review to the Director of Health. At that time, an appropriate technical committee is formed to review the application and make recommendations after a public hearing is held. The recommendations are to be made on whether the health occupation should be credentialed according to the four criteria contained within Section 71-6221 Nebraska Revised Statutes; and if credentialing is necessary, at what level. The relevant materials and recommendations adopted by the technical committee are then sent to the Board of Health and the Director of Health for the review and recommendations. All recommendations are then forwarded to the Legislature.

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#### SUMMARY OF COMMITTEE RECOMMENDATIONS

The committee recommended that the applicant group's proposal for autonomous licensure not be approved at this time. Although the majority of committee members agreed that the first three criteria were satisfied, the committee members' disagreement over the issue of autonomous licensure resulted in the majority voting that the fourth criterion had not been satisfied.

The committee did recommend that the Director of Health and the Legislature explore mechanisms that would incorporate naturopathic physicians into the health care system of Nebraska. The committee developed several alternatives to autonomous licensure in order to provide guidance to subsequent review bodies.

The committee recommended that, if the Legislature were to approve licensure for this group, the Board of Medical Examiners and the Board of Health should be actively involved in developing standards and scope of practice for naturopaths. The committee also recommended against the creation of an independent board of examiners for naturopaths if the Legislature were to approve licensure for this group.

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### SUMMARY OF THE ORIGINAL PROPOSAL

Naturopathic physicians of Nebraska seek licensure for all practitioners of the field of Naturopathic medicine who can meet the standards of the proposal.

This proposal requires that all applicants for licensure satisfy the following requirements:

- 1.) Applicants must possess a doctoral degree from an accredited naturopathic medical college, which includes two years of supervised clinical internship and preceptorship under licensed physicians.
- 2.) Applicants must pass a competency-based national standardized examination developed by the ACSI National Assessment Institute in conjunction with the American Association of Naturopathic Physicians (AANP) and several state boards and licensing agencies. This examination would be administered by the Department of Health.

The proposal requests a limited scope of practice that is comparable to that practiced by naturopaths in other states that currently license naturopathic physicians. This includes diagnosis using standard exams and lab tests of general practice, and the treatment of disease using natural medicine and therapies. The proposal specifically excludes major surgery, therapeutic radiation, most pharmaceuticals and emergency medicine.

The proposal would create a Board of Naturopathic Examiners within the Bureau of Examining Boards of the Department of Health. The Board in conjunction with the state naturopathic association would develop and adopt a code of professional ethics.

The Department of Health would develop rules and regulations establishing standards for license renewal, revocation, and suspension. These would include continuing education requirements. The Department would also establish professional disciplinary standards and procedures.

The proposal contains a grandfather clause. Current practitioners would be grandfathered if they meet the following standards:

- They have a doctoral degree in naturopathic medicine or other "drugless" therapeutics.
- 2.) They were in practice in Nebraska prior to 1987.
- 3.) They apply for licensure within ninety (90) days after the operative date.
- 4.) They successfully pass the regular board examination.

The proposal does allow for reciprocity. An applicant for licensure would be issued a license if they satisfy the Department of Health that:

- 1.) They are duly licensed to practice naturopathy in another state with standards equivalent to Nebraska's and when such licensure requires the passage of a competency-based board examination.
- 2.) They are of good moral character.
- 3.) Their license has never been suspended or revoked.
- They have been in practice at least one year.

#### CRITICAL ISSUES RAISED BY THE NATUROPATHIC PHYSICIANS PROPOSAL

### I. What are Naturopathic Physicians and what do they do?

The applicant group stated that naturopathic physicians are general practitioners of natural medicine, and are trained to offer entry-level health care. According to the applicant group, naturopathic physicians use the standard diagnostic techniques, but differ from orthodox physicians in the type of therapeutics that they use to treat their patients. The applicant group stated that the principal difference between the practices of orthodox general practitioners and naturopathic physicians is philosophical. Naturopathic physicians seek to stimulate the body's natural healing mechanisms with non-invasive natural medicines and therapies. Naturopathic physicians refer to orthodox physicians when patients need other kinds of care. (p. 1 of the Application)

The applicants stated that the therapies and medicines used by naturopathic physicians in general practice include:

- 1.) <u>Natural medicines</u> such as nutritional medicines, botanical medicines and homeopathy.
- Physical modalities such as hydrotherapy, diathermy, electrotherapy, ultrasound, and naturopathic manipulative therapy.
- Counseling such as psycho/social, lifestyle and nutritional counseling.
- 4.) <u>Natural antibiotics</u> such as non-synthetic penicillins, cephalosporins, erythromycins, streptomycins, tetracyclines, and nystatin.
- 5.) <u>Biologicals</u> such as common vaccines, allergens, antitoxins, and immune globulins, as well as some hormones and enzymes.

6.) <u>Topical medicines</u> such as topical analgesics, anesthetics, antiseptics, scabicides, antifungals, and antibacterials.
(pp. 17-25 in the <u>Application</u>)

The applicant group stated that naturopathic physicians do not use major surgery, therapeutic radiation, or emergency medicine. The applicants also stated that naturopathic physicians do not use synthetic pharmaceuticals in their treatment regimens. However, the applicants stated that naturopaths occasionally perform such minor surgical procedures as the surgical repair of minor superficial lacerations and abrasions, superficial lesions, and the removal of foreign bodies from the superficial tissues. The applicants added that naturopaths occasionally do perform minor emergency care for patients such as treating minor cuts and abrasions and sprains. (pp. 26-27 of the Application)

The applicant group also stated that two specialty practices are not included in general practice. To practice these each naturopathic physician must be specially certified and is required to have taken additional training beyond the general licensure requirements and must have passed a specialty examination.

- 1.) <u>Acupuncture</u>: It includes the insertion of acupuncture needles for the treatment of disease.
- 2.) Natural childbirth: This practice excludes the use of forceps delivery, general and spinal anesthesia, cesarean section, and induced abortions. It includes the use of minor surgery in obstetrical repair and special prescription medicines such as oxytocin and ophthalmic antibiotics, and emergency procedures. High risk pregnancies are referred to orthodox practitioners. (pp. 25-26 of the Application)

Those persons with concerns about this proposal for credentialing questioned the way some of the terminology contained in the proposal was used by the applicants. Terms such as "natural medicine" that were used in the application to describe naturopathic treatments were not adequately defined, in the opinion of these persons. (p. 141 of the <a href="Transcript of the Public Hearing">Transcript of the Public Hearing</a>) Concern was also expressed as to what the applicants meant by their use of the term "minor surgery."

Concern was expressed that the applicant group has not accurately characterized orthodox medical practice as regards such issues as "wellness" and noninvasive therapeutics. Those with concerns about the proposal stated that the orthodox medicine has incorporated the concept of "wellness" and utilizes noninvasive therapies whenever these are appropriate. (pp. 97, 142, and 154 in the <u>Transcript of the Public</u> Hearing)

The applicant group responded to these concerns by stating that their definition of the term "minor surgery" is the same as that used by orthodox physicians. The applicants stated that their use of such terms as "natural medicine" was clearly defined in the proposal, and that the term refers to the use of a substance that occurs in nature in such a way as to enhance and support normal physiological function. (p. 18 of the Application)

# II. <u>Is there harm to the public inherent in the current legal</u> restrictions on naturopathic physicians?

The applicant group stated that current health care statutes that prohibit naturopathic physicians from diagnosing and treating disease have the effect of denying Nebraskans access to the full range of services of a health care profession that has demonstrated that it can successfully and safely treat people's health problems. The applicants stated that because naturopathic medicine is a legitimate alternative to orthodox medicine, no Nebraskan should be denied the freedom to choose a naturopathic physician to diagnose and treat their health problems. (pp. 50-51 of the Application)

The applicant group stated that there is public demand for an alternative to orthodox medical care. The applicants stated that many Nebraskans are disillusioned with the "high-tech" medicine and "toxic" drugs that have become so much a part of orthodox medical practice.

These Nebraskans are seeking an alternative to orthodox medicine. (see the Petitions submitted by the applicant group)

The applicant group stated that many people in the country, including many Nebraskans, have become disillusioned with orthodox medicine because its practitioners have not helped them solve their health care problems. The applicants went on to state that many of these people have since had their health care needs satisfied by naturopathic physicians. (p. 51 of the <u>Application</u>) The applicants stated that the research, documentation, and testimonial evidence presented by their group at the public hearing demonstrated the efficacy of naturopathic treatment regimens. (pp. 52-53 of the <u>Transcript of the Public Hearing</u>)

The opponents of the proposal stated that there is no need for the state of Nebraska to license naturopathic physicians. In the viewpoint of the opponents, the evidence submitted by the applicant group demonstrates only that there is a demand for naturopathic physicians, not a need for naturopathic medicine.

The opponents objected to the applicant group's characterization of orthodox medicine as being unwilling to use natural and holistic methods of treatment. They stated that medical doctors frequently prescribe changes in the dietary and exercise regimes of their patients in order to prevent such health problems as heart disease from developing. The opponents added that orthodox physicians encourage their patients to participate in "wellness" programs. (pp. 142 and 154, Transcript of the Public Hearing)

The opponents responded to the applicant's comments on the issue of "freedom of choice" by stating that the state has a responsibility to protect the members of the public from making choices that might harm their health and well-being. They stated that the current statutory restrictions prohibiting naturopathic physicians from diagnosing and treating disease serves to provide the members of the public with protection they need.

### III. Is there harm to the public inherent in the proposal?

The opponents stated that the major issue raised by the proposal is whether or not the medicines and treatment regimens used by naturopathic physicians are safe and effective. The opponents stated that the medicines used by naturopaths have not been subjected to the scrutiny of the FDA's drug approval process. The opponents stated that the efficacy of most natural medicines has been established primarily through empirical methods rather than through controlled scientific studies. opponents stated that controlled scientific studies are essential in order to identify the pharmacologically active substances in a medicine, as well as to define safe dosages and to develop accurate procedures for quality control. Because botanical medicines have never been scientifically analyzed, there is no way of knowing what number of active ingredients these medicines might contain. This means that there is as yet no meaningful information regarding the potential for harm or benefit to the public that might result from the application of these medicines. (pp. 107-110 in the Transcript of the Public Hearing)

The opponents also expressed skepticism about the ability of naturopathic physicians to safely and effectively treat the health problems of their patients. They stated that the training of naturopathic physicians is not sufficient to prepare a student for the realities of practice. They compared the training of medical students and naturopathic physicians in the areas of laboratory work and clinical experience. The opponents stated that it is not unusual for medical students to average 80-100 hours per week in clinical settings studying internal medicine, pediatrics, surgery, and obstetrics. In contrast, the naturopathic student spends 35 hours per week in such clinical settings.

The opponents stated that this amount of clinical experience is not sufficient to prepare a student for the realities of practice.

(pp. 87-88 of the <u>Transcript of the Public Hearing</u>)

The opponents presented information that was intended to bring some of the practices of naturopathy into question. One opponent quoted from a report from the <u>Journal of Pediatrics</u>, (September 1981), based on a survey of naturopathic medicine in the state of Washington. This report stated that some naturopathic physicians in that state were advising their patients not to immunize their children. The report revealed that many practitioners of naturopathy oppose routine immunizations because they view immunization programs as unnatural and unnecessary. (p. 131 of the <u>Transcript of the Public Hearing</u>) The report went on to state that some naturopaths believe that immunization is an invasion of the patient's defenses, and is, therefore, potentially harmful to the patient. The opponent who presented this information to the committee then stated that these viewpoints and attitudes on immunization by naturopathic physicians make these practitioners a source of potential harm to the public. (p. 132 of the Transcript of the Public Hearing)

Concern was also expressed by opponents about the views of some naturopaths on such topics as the treatment of infections. One opponent quoted comments by a naturopathic physician on ear infections in children in an article on pediatrics that was published in a homeopathic newsletter called <a href="Resonance">Resonance</a>, (May-June, 1988). The comments by the naturopath in question stated that there is no benefit to the use of such "alternative treatments" as antibiotics, decongestants, and ear tubes in the treatment of ear infections. This naturopath went on to state in this article that homeopathic remedies will stop such acute

illnesses, often times in seconds, and will bolster the immune system so that the patient will become more resistant to the disease. The opponents used this article as an example of potential harm to the public from naturopathic practices.

Concern was also expressed by some opponents about the proposed scope of practice for naturopathy. The opponents stated that the proposed scope of practice for naturopathy licensure is vague and confusing. On the one hand, the members of the applicant group want to be licensed as "primary care providers," but on the other hand they propose a scope of practice for naturopaths that would exclude such procedures as trauma care which is customarily associated with the concept of primary care in Nebraska. (p. 101 of the Transcript of the Public Hearing) The opponents also expressed skepticism about the applicants claim that they treat patients with natural and noninvasive therapies. The opponents responded to these claims by stating that the proposal includes several invasive therapies in the proposed scope of practice, namely minor trauma care and minor surgery. (pp. 26-27 of the Application) To the opponents, these procedures seem to be inconsistent with a "natural" approach to health care. Some of the opponents stated that the proposed scope of practice of naturopathy is not broad enough to be consistent with the primary care provider concept, but is too broad for the so-called "natural" concept of health care.

The fact that naturopathic scope of practice does not fit into the existing health care system of Nebraska raised questions in the minds of the opponents as to the ability of naturopathic physicians to make an appropriate referral. The opponents were concerned that this practice situation would create confusion among practitioners as to which maladies

they were qualified to treat, and which maladies would require a referral. (p. 141 of the <u>Transcript</u> of the Public Hearing)

The proponents responded to opponent criticisms of the quality of the research that has been done on naturopathic medicines by submitting to the committee a stack of research articles on various subjects in naturopathy. The proponents stated that this research was selected randomly from such major medical journals as <u>JAMA</u>, <u>The New England Journal of Medicine</u>, <u>The British Medical Journal</u>, and <u>LANCET</u>. The proponents also submitted a stack of volumes from the <u>Complimentary Medicine Index</u> which they stated was the British counterpart to the <u>Index Medicus</u>. These volumes contain research articles from around the world on subjects pertinent to naturopathic medicine. The proponents stated that their evidence refutes the charge by the opponents that scientific research is lacking in the area of naturopathic medicine. (pp. 33-34 of the <u>Transcript of the Public Hearing</u>)

The proponents stated that the vast majority of the medicinal agents that are part of naturopathic scope of practice are relatively safe, over-the-counter medicines such as vitamins and minerals, most botanical medicines, and most homeopathic medicines. The proponents stated that over-the-counter medicines are considered safe for use by the FDA. (p. 19 of the <u>Application</u>)

The proponents stated that some natural medicines have long since been made prescription medicines by the FDA because there is potential for harm if they are used without professional supervision. The proponents stated that some of the natural medicines allowed under the proposed scope of practice are in this category. These medicines include a few botanticial medicines, some hormones, natural antibiotics,

and immunizations. The proponents stated that the proposal would limit the use of prescription medicines by naturopaths to only those that the Department of Health would approve. (p. 19 of the Application)

The opponents stated that proponent comments pertinent to the FDA approval process were misleading because they create the impression that the FDA has approved naturopathic medicines. The opponents stated that the FDA does not subject all over-the-counter drugs to analysis and testing. They said that any product that was available or marketed prior to 1938 would not be covered by the <u>Food, Drug, and Cosmetic Act</u>, and therefore, would not automatically be tested by the FDA. Most botanticial medicines are in this category. The opponents stated that the only circumstance under which a substance marketed prior to 1938 would be tested would be if a complaint had been made about the substance in question. The opponents added that few if any of the over-the-counter substances that naturopaths would use have ever been tested by the FDA. (pp. 110 and 115 of the Transcript of the Public Hearing)

The proponents countered these assertions by stating that the FDA regularly investigates OTC medicines if problems are reported. They cited sassafras and lobelia as examples of botanical medicines that the FDA recently investigated and subsequently removed from the market.

(p. 115 of the Transcript of the Public Hearing)

The opponents reacted to some of the research literature submitted by the proponents with skepticism. They stated that some of the articles in question were seriously flawed. As an example, one opponent described one of the articles in <u>LANCET</u>. He stated that the article should not have been approved for publication because the article in question described results that were "virtually impossible." (p. 112 of the Transcript of the Public Hearing)

The proponents responded to these assertions by stating that LANCET is an internationally renown publication, and that they would not publish an article that posited impossible results. They added that the article in question was a "double-blind crossover" study, and as such has the kind of scientific rigor that the opponents have been demanding from those who research natural medicines. (pp. 119-120 of the Transcript of the Public Hearing)

The proponents responded to opponent criticisms of the education and training of naturopathic physicians by stating that naturopathic colleges are fully accredited. Naturopathic students are rigorously trained by an academically diverse faculty. One medical doctor who testified on behalf of the proponents stated that naturopathic students in naturopathic colleges in Oregon and Washington are well-educated and well-trained. He stated that naturopaths are trained sufficiently to know their limits and to make an appropriate referral. (p. 24 of the <u>Transcript of the Public Hearing</u>) This orthodox physician stated that naturopathic physicians that he had dealt with made referrals to him promptly and appropriately. (pp. 20-21 of the <u>Transcript of the Public Hearing</u>) The opponents responded by stating that the vast differences between naturopaths and medical doctors in medical philosophy makes it difficult for a normal referral process between these two groups to work properly. (p. 93 of the <u>Transcript of the Public Hearing</u>)

The proponents responded to opponent assertions about the supposed hostility of naturopathic physicians to immunization by stating that the proposal includes immunization as part of their scope of practice. They stated that there are some naturopaths who oppose immunization, but that these naturopaths are not representative of naturopathic physicians in

Nebraska. The opponents countered by stating that nothing in the current proposal would prevent those naturopaths who oppose immunization from practicing in Nebraska if the proposal were to become law. (p. 138 of the Transcript of the Public Hearing)

The proponents responded to opponent criticisms of the views of some naturopaths on the best way to treat ear infections by stating that the opponents erroneously implied that all naturopaths disapprove of the use of antibiotics and decongestants in the treatment of ear infections. The proponents stated that these naturopaths are not representative of those seeking licensure in Nebraska.

The proponents commented on the opponents' assertions about the supposed vagueness of the proposed naturopathic scope of practice by stating that the opponents do not understand the proposal. The proponents stated that naturopathic physicians are general practitioners and do not claim to be family practitioners, pediatricians, internists or any other board-certified medical specialist. The proponents went on to say that the application establishes the minimum requirements for state recognition, just as Nebraska's minimum requirement for medical doctors is one year post-graduate training not the three or four years required by board certification. Similarly the proposal would allow naturopathic physicians to acquire specialty certification in natural childbirth only after acquiring additional training beyond that required for the general naturopathic practice license. (pp. 100-101 of the Transcript of the Public Hearing and p. 25 of the Application)

The opponents stated that the proposal asks for licensure for naturopaths as "primary care providers," and that this term is synonymous with the terms general practitioner and family care practitioner in the

public mind. If the proposal were to become law, many people would seek out the services of naturopaths assuming that they would receive all of the services associated with family care providers. The opponents stated that this situation would create potential for harm to the public health and welfare. (p. 101 of the Transcript of the Public Hearing)

The proponents stated that the potential for harm from naturopathic medicines and treatments must be put into comparative perspective. The proponents presented evidence that compared naturopathic physicians of the state of Washington (where they are licensed) with medical doctors of Nebraska as to the number of complaints from the public. There were 18 complaints filed with the Washington Department of Licensing against naturopathic physicians, while there were 213 complaints against medical doctors according to the Nebraska Bureau of Examining Boards. There are 208 naturopaths licensed in Washington, while there are 2,553 licensed medical doctors in Nebraska. In each case there was an average of .02 complaints per practitioner. (pp. 12-13 of the Transcript of the Public Hearing) The proponents added that none of the 18 complaints against naturopaths had anything to do with charges of malpractice. However, according to the proponents, 27 of the 213 complaints against medical doctors did involve malpractice.

The proponents also presented statistical evidence which compared some of the medications that medical doctors use with those used by naturopaths. The proponents stated that a study by <a href="The New England">The New England</a>
<a href="Journal of Medicine">Journal of Medicine</a> revealed that 36 percent of 815 consecutive patients on a general medical service of a university hospital had iatrogenic disease. Iatrogenic disease is a disease caused by the system or method of treatment of another disease or condition. In nine percent of these

patients the incidence was severe enough to be life threatening. In two percent of the cases iatrogenic disease was a significant factor in the death of the patient. (pp. 160-161 of the <u>Public Hearing Transcript</u>)

The proponents argued that no naturopathic remedies could affect patients in this manner.

The proponents also quoted research from the Office of Technological Assessment of the United Stated Congress which stated that only 10-20 percent of all medical procedures in use today have ever been shown to be clinically effective by double-blind studies. (p. 161 of the <u>Transcript of the Public Hearing</u>) The proponents stated that this puts opponent criticisms of naturopathic remedies into perspective. The proponents went on to state that this evidence also helps to explain why many people are seeking alternatives to orthodox medical care.

The proponents also submitted documentation which they said demonstrates that naturopathic obstetrics is as safe as hospital obstetrics. This document is the official Annual Report of the American College of Naturopathic Obstetricians (ACNO) for 1987-1988. This report contains statistical evidence that the proponents claimed supports their contentions on naturopathic obstetrics. The proponents made some of this data available to the committee at the public hearing. (See the proponent's summary of this data entitled "Analysis of Out-of-Hospital Delivery Reports...") The opponents were skeptical of these claims, and stated that out-of-hospital deliveries are potentially less safe than hospital deliveries because those who would be administering the former process lack immediate access to emergency services which in some cases might become necessary.

#### IV. Is the proposal cost-effective?

The proponents presented testimonial evidence at the public hearing which they said supports their contention that on the average naturopathic care is less costly to patients than orthodox medical care. The proponents also submitted a document to the committee which compared the health care costs of a family of six for orthodox medical care on the one hand, and naturopathic care for a three-year period on the other (1986-1988). The document showed that health care costs for this family were over \$1000 for orthodox medical care in 1986. However, this family's health care costs were only about \$230 in 1987 after the family sought the services of a naturopathic physician.

The opponents expressed skepticism about such anecedotal information. One opponent stated that his experience with naturopaths in the state of Washington suggested to him that a patient's visit to a naturopathic physician is at least as expensive as a visit to an orthodox practitioner. (p. 93 of the <u>Transcript of the Public Hearing</u>) However, the opponents added that it is the quality of care, not the cost of care that is the principal issue facing the committee.

In order to address committee concerns about the cost of establishing a licensing system for naturopaths, the proponents submitted an amendment to their proposal which they said would provide a more cost-effective alternative for administering naturopathic licensure than an independent board. This alternative would create a Naturopathic Subcommittee of the Board of Examiners and Surgery. (see the proponents' amendment to their Proposal)

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#### COMMITTEE CONCLUSIONS AND RECOMMENDATIONS

At the fourth meeting the technical committee members took action on the four criteria of the Nebraska Regulation of Health Professions Act. The first criterion states:

Absence of a separate regulated profession creates a situation of harm or danger to the health, safety, or welfare of the public and the potential for the harm is easily recognizable and not remote or dependent upon tenuous argument. [See Section 71-6221, No. 2(a) in LB 384 (1988)]

Regarding the first criterion, a majority of the committee members decided that the proposal did satisfactorily demonstrate that harm is being done to the public as a result of current statutory restrictions on the scope of practice of naturopathic medicine.

Those committee members who voted in favor of the proposal on this criterion stated that the public needs freedom of choice as regards the selection of a health care practitioner. Some of these committee members stated that orthodox medical doctors have not met all of the health care needs of the public, and that current laws unjustly prevent the public from seeking out naturopathic physicians as alternative care providers. One committee member stated that those persons who seek out the services of naturopathic physicians need the protection that state regulation provides just as much as do those who seek out the services of orthodox providers. Those committee persons who voted against the proposal on criterion one stated that the applicant group had not successfully demonstrated that there was harm in the current situation, and that no convincing evidence had been provided that demonstrated that naturopathic

physicians could address such harm even if it did exist. (The Minutes of the September 19, 1988 Meeting of the Technical Committee)

A majority of the committee members decided that the proposal did satisfy the second criterion. This criterion states:

Creation of a separate regulated profession would not create a significant new danger to the health, safety, or welfare of the public. [See Section 71-6221, No. 2(b) in LB 384 (1988)]

Those committee members who voted in favor of the proposal on this criterion stated that they were not convinced by the arguments and evidence of the opponents which was supposed to show that there is a significant potential for harm inherent in the proposal. The majority of committee members stated that the opponents provided evidence that was primarily hypothetical in nature, and that no documented examples of harm to the public from naturopathic practice was presented to the committee.

Those who voted against the proposal on criterion two stated that naturopathic medicines and practices are potentially harmful to the public because there is a lack of scientific evidence of their efficacy and safety. The opponents added that the views of some naturopaths on such topics as immunization, the treatment of infections, and obstetrics are dangerous. One committee member who voted against the proposal on this criterion expressed concern about the costs of setting up an autonomous board of examiners for naturopathy. This committee member stated that this could be a source of economic harm to the public. Those who voted for the proposal pointed out that the applicant group had amended its proposal in such a way as to allow for alternatives to the autonomous board concept of administration.

A majority of committee members decided that the proposal did satisfy the third criterion. This criterion states:

Creation of a separate regulated profession would benefit the health, safety, or welfare of the public.

[See Section 71-6221, No. 2(c) in LB 384 (1988)]

Those committee members who voted in favor of the proposal on this criterion stated that those citizens who have been alienated by orthodox medical practice need to be given a viable alternative. These committee members stated that the evidence presented to the committee by the proponents convinced them that the current proposal provides these citizens with an alternative wherein they can get their health care needs satisfied. These committee members added that the evidence presented by the opponents was ineffective in countering proponent arguments.

Those committee members who voted against the proposal on this criterion stated that there is no evidence that naturopathic remedies are effective in combatting disease. They added that whether or not some people are alienated from orthodox medical care is not the principal issue. The principal issue is whether or not the high standards of health care that Nebraskans currently enjoy are going to be sacrificed in order to appease the concerns of a small minority of the population.

A majority of the committee members decided that the proposal had not satisfied the fourth criterion. This criterion states:

The public cannot be effective protected by other means in a more cost-effective manner. [See Section 71-6221, No. 2(d) in LB 384 (1988)]

Those committee members who voted against the proposal on this criteria stated that autonomous licensure was not a cost-effective option for this profession. The proponents argued that only the establishment of autonomous licensure for naturopathic physicians could address the unmet health care needs of those citizens who have given up on orthodox medical care. By virtue of this vote on the fourth criterion, the committee members had decided not to recommend approve of the proposal.

The committee members then moved on to consider whether or not they wanted to make additional recommendations. The ensuing discussion revealed that a majority of the committee members wanted to find an alternative to the proposal that would incorporate naturopathic physicians into the health care system. A majority of the committee members voted in favor of a motion which requested that the Department of Health and the Legislature explore mechanisms that would incorporate naturopathic physicians into Nebraska's health care system. A majority of committee members voted to support a motion that expressed opposition to the creation of an independent board of examiners for naturopathy. A majority of the committee members voted in favor of a motion that recommended that the Board of Medical Examiners and the Board of Health should be involved in establishing standards of practice for naturopaths if the Legislature were to license them.

The committee members then discussed several alternatives to autonomous licensure as possible means of incorporating naturopathic physicians into Nebraska's health care system. The committee members discussed the following mechanisms that might accomplish this purpose:

- 1.) License naturopaths as "secondary providers." Under this concept, a patient would have to be examined by a medical doctor before entry into naturopathic care. The committee members agreed that a five-year sunset provision should be incorporated into any legislative version of this concept so that it could be evaluated at the end of the five-year period. The Department of Health would be required to collect data for this evaluation.
- 2.) Statutorily define specific scopes of practice for naturopathic practitioners at two levels; one for autonomous practice, and another for those working under supervision. All applicants would be required to take the "FLEX" exam. The Board of Examiners of Medicine and Surgery and the Board of Health would define what each level would be allowed to do.
- 3.) Require that patients see a medical doctor first, and require a second opinion from a medical doctor for all naturopathic treatments.
- 4.) Require that all prospective naturopathic practitioners take the "FLEX" exam as a prerequisite to practice, if feasible.

The committee members then advised any subsequent review body that might be inclined to approve the proposal as written to carefully study the alternative board proposal contained in the amendment submitted by the applicant group prior to the public hearing on the proposal, in order to find the most cost-effective means of setting up a regulatory system.

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#### OVERVIEW OF COMMITTEE PROCEEDINGS

The Naturopathic Physicians Technical Review Committee first convened on June 20, 1988, in Lincoln at the Nebraska State Office Building. An orientation session given by the staff focused specifically on the role, duties, and responsibilities of the committee under the credentialing review process. Other areas touched upon were the charge to the committee, the four criteria for credentialing contained in section 21 of LB 384, and potential problems that the committee might confront while proceeding through the review.

The second meeting of the committee was held on July 18, 1988, in Lincoln at the Nebraska State Office Building. After study of the proposal and relevant material compiled by the staff and submitted by interested parties between the meetings, the committee formulated a set of questions and issues it felt needed to be addressed at the public hearing. Contained within these questions and issues were specific requests for information that the committee felt was needed before any decisions could be made.

The committee convened on August 22, 1988, in Lincoln at the Nebraska State Office Building for the public hearing. Proponents, opponents, and neutral parties were given the opportunity to express their reviews on the proposal and the questions raised by the committee at their second meeting. Interested parties were given ten days to submit final comments to the committee.

The committee held its fourth meeting on September 19, 1988, in Lincoln at the Nebraska State Office Building. The committee formulated its recommendations on the proposal at this meeting. The committee did this by taking action on the four criteria of the Nebraska Regulation of

Health Professions Act as they relate to the application. Regarding Criterion One, Dr. Brown moved that the proposal satisfies the criterion. Vicki Iwai seconded the motion. Voting aye were Bradley, Brown, Iwai, Pedersen, and Brown-Arfmann. Voting nay were Hinrichs and Stivrins.

Committee person Dr. Brown moved that the proposal satisfies the second criterion. Vicki Iwai seconded the motion. Voting aye were Bradley, Brown, Iwai, and Pedersen. Voting nay were Hinrich, Stivrins, and Brown-Arfmann.

Committee person Vicki Iwai moved that the proposal satisfies the third criterion. Corrinne Pedersen seconded the motion. Voting aye were Bradley, Brown, Iwai, and Pedersen. Voting nay were Hinrichs, Stivrins, and Brown-Arfmann.

Committee person Dr. Brown moved that the proposal satisfies the fourth criterion. Vicki Iwai seconded the motion. Voting aye were Bradley and Iwai. Voting nay were Brown, Hinrichs, Pedersen, Stivrins, and Brown-Arfmann. By this vote, the committee had decided not to recommend approval of this proposal.

The committee decided to make additional recommendations in order to provide additional assistance to subsequent review bodies. Dr. Brown moved that the Director of Health and the Legislature explore mechanisms that would incorporate naturopathic physicians into the Nebraska health care system. Corrinne Pedersen seconded the motion. Voting aye were Bradley, Brown, Iwai, Pedersen, Stivrins, and Brown-Arfmann. Dr. Hinrichs abstained from voting. There were no nay votes.

The committee then identified several alternatives to autonomous licensure that the committee believed were worth further investigation. Among these alternatives was the concept of naturopaths as secondary providers.

Committee person Dr. Jon Hinrichs moved that the Board of Medical Examiners and the Board of Health be actively involved in establishing the standards of practice for naturopathic practice, examination of practitioners, and scope of naturopathic practice if some version of the proposal were to become law. Dr. Brown seconded the motion. Voting aye were Brown, Hinrichs, Pedersen, Stivrins, and Brown-Arfmann. Bradley and Iwai abstained from voting. There were no nay votes.

Committee person Dr. Brown moved that there be no independent naturopathic board of examiners if some version of the proposal were to become law. Dr. Stivrins seconded the motion. Voting aye were Brown, Hinrichs, Pedersen, Stivrins, and Brown-Arfmann. Vicki Iwai voted nay. Randall Bradley abstained from voting.

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