



March 21, 2023

Representative Justin Ruffridge, Vice Chair  
House Health and Social Services Committee

**RE: Support for Alaska HB 115, An Act relating to the practice of naturopathy**

Dear Representative Ruffridge,

The American Association of Naturopathic Physicians (AANP), the national professional association representing Licensed Naturopathic Physicians, wholeheartedly supports Alaska HB 115. Naturopathic physicians (NDs) are trained and licensed as primary care physicians in Alaska. AK HB115 has been introduced to modernize the naturopathic physician scope of practice to authorize NDs to prescribe based on training and education and commensurate with primary care practice. AK HB115 reinforces and clarifies education qualifications and accountability, further protecting Alaska's citizenry and safeguarding its public health.

Additionally, there are multiple compelling reasons to support passage HB115.

- NDs are educated, trained, and qualified to diagnose and treat illness. NDs eligible for licensure in the 26 US Commonwealths, Districts, States, and Territories, are graduates of four-year, full-time, in-residence, doctoral level programs that are accredited by the Council on Naturopathic Medical Education (CNME), an accrediting agency recognized by the U.S. Department of Education. Graduates complete 4,100 hours in basic and clinical sciences, naturopathic philosophy, naturopathic modalities, and naturopathic medicine, and 1,200 hours of supervised clinical training. Graduates must then sit for the Naturopathic Physicians Licensing Examination (NPLEX).
- Naturopathic physicians are educated and trained in office minor surgery and office procedures, including repair of superficial wounds and removal of foreign bodies, cysts and other superficial lesions. Of the 26 regulated jurisdictions in the US, over 51% (13), expressly allow them to perform minor office procedures, which are commonly defined to include the removal of foreign bodies located in superficial tissues; and the use of antiseptics and local topical anesthetics in connection with minor office surgical procedures. Additionally, full scope of practice language includes the use of operative, electrical, or other methods for the repair and care of superficial lacerations, abrasions, and benign lesions.



- Naturopathic medicine reduces the financial burden on the healthcare system and overall cost of healthcare. Naturopathic physicians are already offering primary care services to Alaskans in rural and underserved communities, but are forced to refer patients to their MD counterparts for certain prescriptions, causing unneeded delay in care and duplication in health care costs. Eliminating the outdated restrictions on prescription rights for NDs will immediately provide patients in rural and underserved communities with access to an already-trained pool of primary care physicians, and with faster access to a primary care doctor when they might otherwise need to wait for weeks to get an appointment.
- NDs have been safely practicing as primary care providers in the US in the US for an average of 30 years, with two states licensing NDs for over 100 years. Arizona, Montana, Oregon, Utah, Vermont, and Washington have enacted full scope of practice acts that enable NDs to practice to the full extent of their education and credentialing, including prescribing controlled substances. Of the over 5,500 licensed NDs practicing in these regulated states, there have been a total of 62 disciplinary actions relating to prescribing between 2010 and 2022, compared to an average of 4000 MD/DOs receiving disciplinary actions by their state medical boards from 2011 - 2021<sup>1</sup>.

AANP fully supports AK HB115 and efforts to modernize Alaska's ND licensure law.

Thank you for your time and consideration. Please call me at 202-849-6306 if you have questions.

Sincerely,

AANP Executive Director

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<sup>1</sup> Physician Discipline, 2021, Federation of State Medical Boards. Retrieved 03.20.2023  
<https://www.fsmb.org/u.s.-medical-regulatory-trends-and-actions/u.s.-medical-licensing-and-disciplinary-data/physician-discipline/>

**Dr. Carrie Baldwin-Sayre, ND**

**Director of Development - National University of Natural Medicine, Oregon**

Testimony in Favor of HB115 – March 25, 2023

Good afternoon, Representative Prax and members of the committee. My name is Dr. Carrie Baldwin-Sayre, and I am a licensed naturopathic doctor currently holding the position of Director of Development at the National University of Natural Medicine (NUNM) in Portland, OR. I am here speaking on behalf of Dr. Melanie Henriksen, President of NUNM, as she was unable to be here today. My testimony is specifically intended to provide information about the education and training completed by naturopathic physicians, and how that training is overseen and regulated by national accreditation organizations.

First, Licensed Naturopathic Physicians have attended accredited naturopathic medical schools. The entities that accredit these schools are recognized and overseen by the US Department of Education. Our institution is overseen by both programmatic accreditors and a regional institutional accreditor. The accreditor that oversees the Naturopathic Medical program at our institution is the Council on Naturopathic Medical Education (CNME). This entity sets the standards for curriculum delivery, performance outcomes, financial stability of the institutions, Student Services, and College Board function to ensure our graduates are well trained and prepared for professional success. The accreditation process is rigorous. It requires annual reports, performance of self-studies, and regular site visits. Our university is also overseen by our regional accreditor, NWCCU. The NWCCU is the same accreditor to oversee our state's allopathic medical school – Oregon Health Sciences University, and the University of Alaska. I am proud to report that we meet the same high standards as those prestigious institutions.

Naturopathic medical programs are four-year graduate training programs. NUNM's program includes approximately 5047 hours of education, including 1254 hours of direct clinical exposure. This is comparable to the education requirements for many other medical providers. Admissions requirements include a bachelor's degree from an accredited college, as well as a list of science and social science prerequisites that is nearly identical to the prerequisites for any other MD or DO program in the country.

The first two years of academic education consist of biomedical sciences and diagnostic training, including courses in anatomy, physiology, biochemistry, histology, embryology, microbiology, etc. This foundation in Human Sciences is followed by an extensive study in diagnostic methods and procedures. This includes courses in physical examination, laboratory diagnosis, and diagnostic imaging. Success in mastering this material is measured by the biomedical science National Board exam, which our students take after their second year of education.

The second two years of our program are focused on translating that basic science knowledge into clinical application. These courses provide a framework for developing our graduates into primary care physicians and include cardiology, gastroenterology, gynecology, endocrinology, and many others. Concurrently, students take courses on disease management and prevention through the use of therapeutic modalities such as nutrition, lifestyle counseling, botanical medicine, pharmaceutical prescribing, minor surgical

procedures, and much more. The students receive hands-on clinical training in a variety of settings throughout the program with gradually increasing levels of responsibility for patient care. They complete nearly 1300 hours of direct clinical training and must pass three hands-on clinical examinations to graduate, including a full year with their own patient load in a state-credentialed Primary Care Medical Home serving mostly Medicaid patients with complex medical needs.

In addition to graduation from an accredited institution, to become eligible for licensure, all NDs must pass 2 national board examinations.

In summary, I want to highlight that the educational program of naturopathic medical colleges does prepare our graduates to be competent, safe, effective healthcare providers who are able to assess the primary care needs of their patients, particularly in medically underserved states. I would also like to point out that allowing ND's to have nonscheduled medication prescriptive authority, and the ability to perform minor office procedures, is a very low risk addition to their existing scope of practice and is well within the confines of their training.

The two most striking benefits of this are, first, keeping the cost of patients down by avoiding duplicative costs of multiple visits to both an ND and an MD in order to obtain a needed prescription or a minor procedure. Secondly, to directly reduce the risk of much more severe illness that would go untreated. By not making them wait to have a second appointment with an MD, or go to an urgent care, to obtain a needed prescription. We've been accomplishing these tasks in Oregon, Washington and elsewhere safely for decades.

Thank you very much for your time. I very much appreciate being here and I welcome any questions that you might have.

## **Dr. Clyde Jensen, PhD Professor of Pharmacology, Rocky Vista University**

Testimony in Favor of HB115 – March 25, 2023

Thank you, Mr. Chair. My name is Clyde Jensen. I have a PhD in pharmacology. Early in my career I was appointed to a leadership position in an osteopathic medical school, and since that time I have been permitted to serve not only as a professor of pharmacology in a variety of healthcare professions, but as the leader of Colleges of Osteopathic Medicine, allopathic medicine, naturopathic medicine, chiropractic, and some of the mid-level health care professional schools as well. I also have served on the accrediting bodies for some of those professions as well.

Currently I am a professor of pharmacology, interprofessional education and leadership at Rocky Vista University, which is an osteopathic medical school with other programs and campuses located in Denver, the St. George, UT where I am speaking to you from today and a new campus is being developed now in Billings, MT.

I testify at hearings like this because I am interested in helping not just the naturopathic profession but other professions to practice at the limit of their scope of practice. I do that because I believe that that is the economical, responsible way to utilize the services that taxpayers and students have paid for in the educational programs in which they engage. It is my belief that the training in pharmacology and pharmacotherapeutics of a naturopathic physician is sufficient that their scope of practice should enable them to prescribe most, if not all, prescription drugs that are available to MDs, DOs, physician assistants (PAs) and other mid-level practitioners, including nurse practitioners (NPs).

Having taught pharmacology, I can say with some confidence that not only is the quantity of pharmacology that we teach in the first two years of naturopathic medical schools, the same as that which is taught in MD and DO institutions, but the intensity and the science behind the pharmacology that we teach in those first two years is also the same. When I have lectured to naturopathic medical students, I give the same content that I give when I lecture to osteopathic (DO) or allopathic (MD) medical students.

All health care professionals have at least two components to their education. I have been speaking with you about the first component of preclinical education, and that education is taught primarily in classrooms. There is a second component that is clinical in nature. In the MD and DO institutions which I have worked, that education takes place in hospitals and outpatient clinics and a variety of other venues as well. During those clinical years. MD's and DOs have a lot of practice in administering a variety of different types of drugs.

In the naturopathic clinical education, as has been mentioned before, the emphasis is largely on prevention and less invasive forms of therapy, including nutrition, herbal medicine, lifestyle medicine. I think that's an advantage to naturopathic physicians. If they have the ability to prescribe drugs, but before doing so, they utilize some of the less dangerous, or less costly forms of therapeutic modalities, that is an advantage that naturopathic physicians have been trained during their clinical years to embrace.

I think I have shared with you the messages with which I am most confident and in speaking. I am not a naturopathic physician; but I am an advocate for all healthcare professions to be able to practice to the limits of their scope. I advocate for that because I think that is in the best interest of both patients and providers and, as a matter of fact, to taxpayers who are supporting the education of those healthcare professions.

Thank you for allowing me to visit with you today and as with is the case with others, I'll be happy to remain for any questions.

## **Dr. Rob Downey, MD**

Board-certified family medicine MD, with a dual certificate in functional medicine, founder of Seaworthy Functional Medicine, a department of South Peninsula Hospital, in Homer, Alaska.

Testimony in Favor of HB115 – March 25, 2023

Hi, thanks for your time. I'm Rob Downey, a family practice MD, and Institute for Functional Medicine certified practitioner. I work for South Central Hospital in Homer, Alaska. I am dual certified in that I'm board certified in family medicine, and I also am certified in functional medicine through the Institute for Functional Medicine. The Institute for Functional Medicine Training is recognized by the American Medical Academy for the highest level of recognition for continuing medical education for physicians like myself. It is certainly a very similar approach to naturopathic medicine, in no small part due to the father of functional medicine, Doctor Jeffrey Bland, who was mentored by the Nobel laureate Linus Pauling, both founding the Institute for Functional Medicine 30 plus years ago and Bastyr University along with Doctor Joseph Pizzorno in the Pacific Northwest.

So, I have had a unique opportunity to live in both worlds, which I think physicians may well have the privilege to talk with all of you today about some very specific aspects I can share about the power and safety of naturopathic medicine and why I'm an advocate, very strong advocate, for this bill to be passed.

Starting in 2006, my practice in Montana in a rural healthcare clinic, I met Doctor Hillary Daily, a naturopathic doctor trained at Bastyr and a case of autoimmunity that did not respond well to conventional medicine. A woman who was disabled with psoriatic arthritis, responded spectacularly well to stress management, whole food probiotics, and the tactical anti-inflammatory Boswellia and curcumin.

At that time, I asked Doctor Daily how I could have similar results with my patients. She encouraged me to get trained by the Institute for Functional Medicine and based on a similar model at cancer treatment Centers of America, Doctor Daily and I endeavored together to see patients together at the point of care every Wednesday, which we did from 2006 all the way up to 2014, after she came up to Alaska for a few years so we could keep practicing together here at Seldovia Village Tribe Health and Wellness where I was the medical director from 2012 to 2014.

During that period, I met Doctor Abby Lang in 2012, who I share patients with to the present. I should note that both of these two individuals, these brilliant, caring, dynamic female providers, have not only won my respect, but they're my clinical heroes. Both of them solve challenging cases which are beyond even the powers I've accumulated as a dual trained provider. I should note that I think that naturopathic doctors are heroes who are well trained and perfectly positioned to meet an absolutely critical, crux problem of primary care here in Alaska.

Naturopathic doctors are very well trained in the use of pharmacologic agents and the equivalents to MD training and the use of drugs and prescribing has already been well elaborated today. If this bill goes through, which I strongly believe it should, it won't

endanger patients and it will be safe. I also think this change in Alaska, and around the rest of the United States is inevitable, and I think of it more as when, not if. The reason I say that is because of my experience.

Over 17 years working literally in the same rooms with naturopathic doctors, making decisions with them, in shared collaborative settings, I am absolutely convinced that reservations that happened around the time of states making these changes will go by the wayside. In retrospect, and in addition, those states will be very satisfied to see that good things are happening for everyone. The rare win-win solutions so many of us are eager for, and this time we live in. This bill will allow naturopathic doctors to work to their level of training.

Anyone who's concerned that naturopathic doctors may be like that teenager that then turns 21 and when they first have access to liquor will somehow be out of control or inappropriate probably may not be aware of the fact that naturopathic doctors by temperament do tend to use medications as a last resort. But this is also really important time to make the distinction. The naturopathic doctors I have worked with and also the many, many NDs that I work with naturopathic doctors, through collaboration, networking around the country, etcetera, educational settings, these folks fundamentally have the same judgment I do. By that I mean they know when somebody's blood pressure is 200 over 110, that person needs an immediate care; that person needs to go to the emergency department. If there's going to be a one-hour lag between when they're treated and when they get to the emergency department, they need to be prescribed clonidine to bring down their blood pressure immediately.

If somebody has a decreased O<sub>2</sub> SAT, or oxygen saturation, there's crackles in their lungs via the stethoscope, and they appear to have labored breathing, they need an antibiotic. Naturopathic doctors don't proceed stepwise through stress management and a whole food recommendation for somebody with bacterial pneumonia. So, in that respect there's really no difference in clinical judgment whatsoever based on my experience.

I'm just so deeply concerned that consideration about getting this bill passed not be theoretical. I see in my real-world practice day-to-day that if we don't have the person with the training being able to deliver the prescription at the time of care, any secondary measures fall short. The theoretical that there could be some sort of collaboration, where the medical doctor (MD) or a PA or a nurse practitioner (NP) is contacted to prescribe, basically adds an extra link of communication on the chain. There is extensive data from the world of aviation, mountaineering and medicine that the more steps there are in the chain, the worse the outcomes are. So, it I think in Alaska, if we want to get really serious about getting this primary care shortage met and delivering safe care, we should go right at the heart of it and get these excellent naturopathic doctors the prescribing privileges they've earned and which they're prepared to use on behalf of all of us. Thank you for the privilege of getting to talk to you today.



**Letter of Support for  
House Bill 115  
Regulation of the Practice of  
Naturopathic Medicine in Alaska**

Federation of  
Naturopathic Medicine  
Regulatory Authorities

March 22, 2023

**RE: Support of HB 115**

Dear Honorable Representative Mike Prax, Chair, and Members of House Health and Social Services Committee,

The Federation of Naturopathic Medicine Regulatory Authorities (FNMRA) supports regulation of naturopathic medicine in Alaska. Regulation is integral to the safe practice of naturopathic medicine and protection of the public.

The FNMRA's mission is to protect the public by connecting regulatory authorities and promoting standards of excellence in the regulation of naturopathic medicine. The Federation supports new and existing regulatory organizations in fulfilling their statutory obligations to regulate the profession in the interest of public protection. The FNMRA envisions a coordinated regulatory system for naturopathic medicine throughout the United States.

The FNMRA appreciates this opportunity to illustrate a verifiable need for naturopathic doctors (NDs) in Alaska. Smart regulation of the naturopathic profession permits qualified NDs to practice as trained while ensuring public safety, empowering the citizens of Alaska to pursue their choice of qualified healthcare provider, and all the associated benefits.

**Verifiable Need for NDs to practice as Primary Care Providers in Alaska**

• **Alaska faces a statewide shortfall in primary care providers<sup>1</sup>**

Alaska will need to add up to 237 primary care providers in the next decade, according to projected estimates.<sup>2</sup> By licensing NDs in Alaska to practice as trained, the state would increase its primary care provider workforce with safe, effective, and well-trained practitioners.

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<sup>1</sup> <https://data.hrsa.gov/topics/health-workforce/shortage-areas>

<sup>2</sup> Petterson, Stephen M; Cai, Angela; Moore, Miranda; Bazemore, Andrew. State-level projections of primary care workforce, 2010-2030. September 2013, Robert Graham Center, Washington, D.C. <https://www.graham-center.org/content/dam/rgc/documents/maps-data-tools/state-collections/workforce-projections/Alaska.pdf>

The Institute of Medicine (IOM) urges regulators to allow for innovation and inclusiveness of all healthcare practitioner types in meeting patient needs.<sup>3,4,5</sup> And the IOM encourages the use of interdisciplinary teams to optimize patient care.<sup>3,4,5</sup>

Further, the Pew Health Commission Taskforce on Health Care Workforce Regulation has called for jurisdictions to allow all qualified professionals to provide services to the full extent of their current knowledge, training, experience, and skills.<sup>3,6</sup>

### **Licensed NDs Are Safe Primary Care Providers**

- **Licensed NDs have fewer disciplinary actions than MDs/DOs**

NDs have been safely practicing as primary care providers in other jurisdictions for decades, and for approximately a century in several more. Safe practice by NDs can be objectively demonstrated by the fact that NDs have fewer disciplinary actions taken against them compared to MDs and DOs (see addendum A).

- **Minimal disciplinary actions occur even when NDs have broad prescribing rights**

Alaska would benefit from the regulation of NDs to include broad prescribing rights because it would effectively improve access to qualified primary care providers. An important aspect of primary care is the ability to prescribe drugs at the time of care so that the patient does not need to delay treatment by being forced to seek care with a second provider. Primary care providers need broad prescribing authority to provide timely and effective treatment, improve access to care, and ensure patient safety. FNMRA interprets “broad prescribing rights” to mean access to all major categories of prescription drugs required for primary care.

NDs have proven themselves to be safe prescribers. Through 2021, 11 out of 25 regulated jurisdictions allow NDs broad prescriptive authority. Only three of these jurisdictions have taken disciplinary action against NDs for prescribing decisions. And, the majority of these actions involved opioid management, which is a challenging area for all licensed primary care providers.

Of the six jurisdictions that allow NDs broad prescriptive authority including opioids, only two require oversight by an MD or DO: California and Vermont. Vermont requires oversight for one year or the first 100 prescriptions (or other qualified experience) after passing the NPLEX Part II – Elective Pharmacology Examination. Conversely, California currently requires ongoing prescriptive oversight, creating an unnecessary burden on MDs, DOs, and NDs. Therefore, the California regulator is currently seeking to remove this requirement because it interferes with the ability of a qualified ND to practice as trained and provide effective primary care.

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<sup>3</sup> <https://www.fsmb.org/siteassets/advocacy/policies/assessing-scope-of-practice-in-health-care-delivery.pdf>

<sup>4</sup> *Crossing the Quality Chasm: A New Health System for the 21 st Century*, The Institute of Medicine, National Academy Press, 2001.

<sup>5</sup> *Health Professions Education: A Bridge to Quality*, The Institute of Medicine, Committee on Health Professions Education Summit, National Academies Press, 2003.

<sup>6</sup> *Reforming Health Care Workforce Regulation: Policy Considerations for the 21 st Century*, Report of the Pew Health Professions Commission’s Taskforce on Health Care Workforce Regulation, December 1995, ix.

## Disciplinary Actions Related to Naturopathic Doctor Prescribing

Disciplinary Actions Related to Prescribing from 2010 through 2021*				
Jurisdiction	Average Disciplinary Actions Per Year	Disciplinary Actions	Number of Years since 2010 with Broad Prescribing Rights	Estimated Number of Licensees
<b>Jurisdictions with Broad Prescribing Rights EXCLUDING Opioids</b>				
Hawaii	0.0	0	11	150
Idaho	0.0	0	1.5	27
New Hampshire	0.0	0	11	60
New Mexico	0.0	0	2.5	15
Utah	0.0	0	11	60
<b>Jurisdictions with Broad Prescribing Rights INCLUDING Opioids</b>				
California	0.0	0	11	1270
Montana	0.0	0	11	105
Vermont	0.0	0	11	350
Oregon	1.1	12	11	1200
Arizona	1.6	18	11	1450
Washington	2.9	32	11	1400
<b>TOTAL</b>		<b>62</b>		<b>6087</b>
* Or since year of licensure if established after 2010.				
FNMRA interprets broad prescribing rights to mean access to all major categories of prescription drugs required for primary care.				

All categories of disciplinary actions can be seen in Addendum B.

### **Formal Education, Training, and Accreditation Supports Broad Prescribing Rights for NDs**

- **Formal Education & Training Supports Independent Prescribing Rights for NDs**

NDs who have graduated from a Council on Naturopathic Medical Education-accredited (CNME) doctoral training program in naturopathic medicine have been trained to be primary care providers. The CNME provides that:

The Council’s in-depth accreditation process promotes high-quality naturopathic education and training, and safe and effective practice. Our educational standards provide the basis for licensing/regulating naturopathic doctors in the U.S. and Canada. CNME is recognized by the U.S. Department of Education to accredit doctoral programs in naturopathic medicine.

CNME does not accredit online or distance education programs.<sup>7</sup>

NDs are required to pass competency-based national naturopathic licensing examinations to demonstrate that they are competent to safely and effectively use naturopathic medicine to diagnose and treat disease while optimizing overall health. The formal education and clinical training prepare NDs to be independent prescribers, with all the rights and responsibilities that entails.

<sup>7</sup> <https://cnme.org/>

## **Proposed Regulatory Mechanism to Support Independent Prescribing Rights for NDs**

- **Naturopathic Physicians Licensing Examination (NPLEX) Part II - Elective Pharmacology Examination can be adopted to establish prescribing competency**

The NPLEX has developed four Part II – Clinical Elective Examinations (Acupuncture, Minor Surgery, Pharmacology, Parenteral Medicine).<sup>8</sup> The Elective Pharmacology Examination is composed of 75 stand-alone items. This exam has been adopted by several jurisdictions to establish prescribing competency, allowing qualified NDs to practice as trained with broad and independent prescribing rights.

## **Accountability & Liability Issues Related to Regulation**

- **Regulation provides consumer protection and accountability**

For the purpose of public protection, Naturopathic doctors have been regulated for decades in many states and for approximately a century in several more. This protection is provided in part by the use of proper title (Naturopathic Doctor (ND), or Naturopathic Medical Doctor (NMD)), by excluding unqualified persons from practicing naturopathic medicine, and by creating a structure through which the public can report complaints where both licensees and lay practitioners can be investigated.

Naturopathic regulatory authorities consistently report to the FNMRA that there are many more consumer complaints against lay naturopaths than licensed naturopathic doctors. It is difficult to track this number, but we have a few examples. In 2013 in California, 6 actions were taken against licensed NDs and 51 were taken against lay naturopaths. More recently, California has reported that approximately 75% of investigations are related to lay naturopaths. In the past ten years in Utah, there has been one disciplinary action taken against a licensed ND and an average of one action taken per year against lay naturopaths. Lay naturopaths, because of their lack of training, can recommend dangerous or ineffectual treatments and prevent consumers from accessing appropriate care, leading to physical harm or death.

### **In Conclusion:**

Allowing NDs to practice as trained will ensure that Alaska increases its number of primary care providers. NDs have been safely practicing as primary care providers with broad prescribing rights in other states for decades, and for approximately a century in several more.

As a member of this committee, we know you are a champion of public safety. Your support of naturopathic medical regulation will effectively increase the number of safe primary care prescribers by improving access and efficient delivery of healthcare.

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<sup>8</sup> <https://www.nabne.org/exam-overview/>

We thank you for the opportunity to share our comments and hope this information, and any future dialogue between the Federation of Naturopathic Medicine Regulatory Authorities and the Members of the Alaska House Health and Social Services Committee, will lead to smart regulations that promote the safe practice of naturopathic medicine.

If you have any questions, please call me at 503-244-7189 or email me at [ShannonBraden@FNMRA.org](mailto:ShannonBraden@FNMRA.org).

Sincerely,

A handwritten signature in black ink, appearing to read 'S. Braden', followed by a horizontal line and the initials 'ND'.

Shannon Braden, ND  
Executive Director, FNMRA

Addendum A

**Number of Disciplinary Actions taken in Oregon against NDs, MDs, and DOs from 2013-2019**

Year	Profession	# of Licensees	# of Disciplinary Actions	%
2019	MD	15,927	89	0.559
	DO	1,666	11	0.66
	ND	1,086	1	0.092
2018	MD	11,730	88	0.75
	DO	984	8	0.813
	ND	1,054	10	0.949
2017	MD	15,099	92	0.609
	DO	1,428	21	1.471
	ND	1,030	4	0.388
2016	MD	16,266	101	0.621
	DO	1,537	11	0.716
	ND	1,091	6	0.549
2015	MD	16,266	102	0.627
	DO	1,456	15	1.03
	ND	1,010	5	0.495
2014	MD	15,288	79	0.517
	DO	1,295	6	0.463
	ND	985	3	0.305
2013	MD	14,249	82	0.575
	DO	1,168	11	0.942
	ND	936	0	0
TOTALS	MD	88,559	633	
	DO	9,535	83	
	ND	7,192	29	
AVERAGES	MD	76,346	563	0.737
	DO	8,533	12	0.141
	ND	6,390	4	0.063

**REFERENCES:** <http://www.oregon.gov/omb/board/Pages/Board-Actions.aspx>  
<http://www.oregon.gov/OMB/board/Pages/Newsletters.aspx>  
<https://www.oregon.gov/obnm/Pages/Discipline.aspx>  
 ND #s provided by email - OR ND Board  
[https://store.aamc.org/downloadable/download/sample/sample\\_id/305/](https://store.aamc.org/downloadable/download/sample/sample_id/305/)  
<https://www.fsmb.org/siteassets/advocacy/publications/2018census.pdf>

**Disciplinary Actions Taken by States from 2010 to July 2021  
(6,000 estimated licensees)**

**Physician Acts Related to the Administration of Naturopathic Medical Practice**

State	Practicing without a license	Providing false information to obtain or maintain a license (e.g. failure to disclose information on renewal)	Using false or misleading advertising, or misrepresenting credentials	Engaging in discriminatory behavior regarding which patients are seen or how they are treated	Failing to obtain appropriate patient consent to examine or treat	Failing to follow appropriate charting procedures and/or to maintain record-keeping standards
Alaska						
Arizona	1		1			3
California						
Colorado	1					
Connecticut						
Dist. of Columbia						
Hawaii			1			
Idaho						
Kansas						
Maine						
Maryland	2					
Minnesota						
Montana						
New Hampshire						
New Mexico						
North Dakota						
Oregon		4				3
Puerto Rico						
Rhode Island						
Utah						
Vermont						
Virgin Islands						
Washington	1	1	3	0	0	1
<b>TOTAL</b>	<b>5</b>	<b>5</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>7</b>

**Disciplinary Actions Taken by States from 2010 to July 2021  
(6,000 estimated licensees)**

**Physician Acts Related to the Administration of Naturopathic Medical Practice**

State	Engaging in fraudulent insurance/billing procedures and/or financially exploiting patients	Breaching patient confidentiality	Reciprocal action	Failing to report disciplinary action in another jurisdiction	Failing to meet CE requirements
Alaska					
Arizona			1	1	5
California					
Colorado					
Connecticut					
Dist. of Columbia					
Hawaii					
Idaho					
Kansas					1
Maine					
Maryland					
Minnesota					
Montana					
New Hampshire					
New Mexico					
North Dakota					
Oregon	1			1	
Puerto Rico					
Rhode Island					
Utah					
Vermont					
Virgin Islands					
Washington	4		3	1	
<b>TOTAL</b>	<b>5</b>	<b>0</b>	<b>4</b>	<b>3</b>	<b>6</b>

**Disciplinary Actions Taken by States from 2010 to July 2021  
(6,000 estimated licensees)  
Physician Acts that Directly Harm Patients Physically or Emotionally**

PHYSICIAN ACTS THAT (DIRECTLY) HARM PATIENTS PHYSICALLY OR EMOTIONALLY									
State	Providing substandard patient care (e.g., misdiagnosing, failing to use standard care protocols)	Performing an inappropriate procedure that is not in the jurisdiction's scope of practice	Failing to report abuse	Neglecting or abandoning the patient	Inappropriately prescribing drugs (opioids and other legend drugs)	Providing substandard care in the prescription of Cannabis	Engaging in sexual contact with a patient	Violating appropriate doctor-patient boundaries	Exhibiting physical impairment (e.g., alcohol or substance abuse, mental/emotional impairment)
Alaska									
Arizona	6	2			18	14	1	1	10
California	1								
Colorado		1							
Connecticut									
Dist. of Columbia									
Hawaii	1								
Idaho									
Kansas									
Maine									
Maryland									
Minnesota									
Montana									
New Hampshire									
New Mexico									
North Dakota									
Oregon			1	2	12	2	2	3	2
Puerto Rico									
Rhode Island									
Utah	1								
Vermont									
Virgin Islands									
Washington	8			1	32	10	4	2	2
<b>TOTAL</b>	<b>17</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>62</b>	<b>26</b>	<b>7</b>	<b>6</b>	<b>14</b>

**Disciplinary Actions Taken by States from 2010 to July 2021  
(6,000 estimated licensees)  
Physician Acts that Potentially (Indirectly) Harm Patients**

State	Exhibiting rude or disruptive behavior in the clinic (verbally abusing and/or sexually harassing patients or staff)	Receiving a criminal conviction	Failing to comply with Regulatory Authority Order	UNKNOWN (records could not be obtained for analysis)
Alaska				1
Arizona		2		2
California				
Colorado				1
Connecticut				
Dist. of Columbia				3
Hawaii				
Idaho				
Kansas				1
Maine				
Maryland				
Minnesota				
Montana				
New Hampshire				
New Mexico				
North Dakota				
Oregon		1	6	
Puerto Rico				
Rhode Island				
Utah		1		
Vermont				1
Virgin Islands				
Washington	1		1	1
<b>TOTAL</b>	<b>1</b>	<b>4</b>	<b>7</b>	<b>10</b>



*Federation of  
Naturopathic Medicine  
Regulatory Authorities*

**Letter of Support for  
Senate Bill 532  
Regulation of the Practice of  
Naturopathic Medicine in Wisconsin**

September 29, 2021

Dear Members of the Wisconsin Senate Committee on Insurance, Licensing and Forestry,

The Federation of Naturopathic Medicine Regulatory Authorities (FNMRA) supports regulation of naturopathic medicine in Wisconsin. Regulation is integral to the promotion of safe naturopathic medical practice and protection of the public.

The FNMRA's mission is to protect the public by connecting regulatory authorities and promoting standards of excellence in the regulation of naturopathic medicine. The Federation supports new and existing regulatory organizations in fulfilling their statutory obligations to regulate the profession in the interest of public protection. The FNMRA envisions a coordinated regulatory system for naturopathic medicine throughout the United States.

The FNMRA appreciates this opportunity to illustrate the need for licensure of qualified naturopathic doctors (NDs) in Wisconsin. NDs who have graduated from a CNME-accredited naturopathic medicine program have been trained to be primary care providers. When they have passed competency-based national naturopathic licensing examinations, they have demonstrated that they are competent to safely and effectively use naturopathic medicine to diagnose and treat disease and to optimize health.

Naturopathic doctors have been regulated for decades in many states for the purpose of public protection. This protection is provided by the use of proper title (naturopathic doctor), by excluding unqualified persons from practicing naturopathic medicine, and by creating a structure through which the public can report complaints and subsequently both licensees and lay practitioners can be investigated.

**Licensed NDs Are Safe Primary Care Providers**

• **Licensed NDs have fewer disciplinary actions than MDs/DOs**

NDs have been practicing as primary care providers safely for decades in other states. This can be objectively demonstrated by the fact that NDs have fewer disciplinary actions taken against them compared to MDs and DOs (see addendum A).

## Licensed NDs Are Safe Primary Care Providers (Cont.)

- **Minimal disciplinary actions occur even when NDs have broad prescribing rights**

Wisconsin has mandated improved outcomes for chronic disease and would benefit from licensing NDs because it would increase the number of qualified primary care providers. An important aspect of primary care is the ability to prescribe drugs so that the patient does not need to delay treatment by being forced to seek care with another provider. Primary care providers need broad prescribing authority in order to provide effective treatment, improve access to care, and ensure patient safety

NDs have proven themselves to be safe prescribers. Currently, 11 out of 25 regulated jurisdictions allow NDs broad prescriptive authority. Disciplinary action was only taken against NDs in three of the regulated jurisdictions and, the vast majority of those actions involved opioid management, a challenging area for all licensed primary care providers.

<b>Disciplinary Actions Related to Prescribing from 2010 to 2021*</b>		
<b>Jurisdiction</b>	<b>Disciplinary Actions</b>	<b>Estimated Number of Licensees</b>
<b>Jurisdictions with Broad Prescribing Rights EXCLUDING Opioids</b>		
Hawaii	0	150
Idaho	0	27
New Hampshire	0	60
New Mexico	0	15
Utah	0	60
<b>Jurisdictions with Broad Prescribing Rights INCLUDING Opioids</b>		
California	0	900
Montana	0	105
Vermont	0	350
Oregon	12	1200
Arizona	18	1450
Washington	32	1400
<b>TOTAL</b>	<b>62</b>	<b>5717</b>
* Or since year of licensure.		
FNMRA interprets broad prescribing rights to mean access to all major categories of prescription drugs required for primary care.		

## **Licensing Laws Decrease Risk of Harm to Consumers**

- **Regulation of naturopathic doctors provides consumer protections against harmful behavior**

Anytime a consumer enters into a doctor-patient relationship, there is an inherent power imbalance that places the patient at risk of harm; regulation helps to minimize this risk.

The FNMRA has tallied the number of disciplinary actions taken the U.S. against licensed naturopathic doctors from January 2010 to July 2021 (see Addendum B). The disciplinary actions are grouped by type. For example, “Physician acts that (directly) harm patients physically or emotionally.” This category includes sexual boundary violations. It is essential for a regulatory structure to be in place so that patients can file complaints of sexual violations. Although disciplinary actions of this type are rare, in the last 11 years there has been only 12 licensed NDs disciplined for sexual boundary violations, out of an estimated 6,000 active licensees (0.2 % of licensed NDs). This is consistent with the percentage of sexual boundary violations by MDs/DOs.<sup>1</sup>

Sexual boundary violations are a type of harm to the public that requires a response from regulators. Consumer protection agencies and attorneys general are not equipped to handle these types of complaints, whereas a Board of Naturopathic Medicine will have experienced administrators and will have policies and procedures in place to investigate these types of complaints. Licensing naturopathic doctors will provide the citizens of Wisconsin with a way to have this type of harm addressed and prevented.

- **Regulation provides consumer protection against lay naturopaths**

Naturopathic regulatory authorities consistently report to the FNMRA that there are many more consumer complaints against lay naturopaths than licensed naturopathic doctors. It is difficult to track this number, but we have a few examples. In 2013 in California, 6 actions were taken against licensed NDs and 51 were taken against lay naturopaths. In the past ten years in Utah, there has been one disciplinary action taken against a licensed ND and an average of one action taken per year against lay naturopaths. Lay naturopaths, because of their lack of training, can recommend dangerous or ineffectual treatments and prevent consumers from accessing appropriate care, leading to physical harm or death. Establishing a regulatory structure of licensing in Wisconsin will help educate the public on the difference between qualified naturopathic doctors and lay naturopaths as well as provide consumers formal complaint process.

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1. Randy A. Sansone, MD and Lori A. Sansone, MD. “Crossing the Line: Sexual Boundary Violations by Physicians” *Psychiatry (Edgmont)*. 2009 Jun; 6(6): 45–48.

**In Conclusion:**

Licensure will ensure that naturopathic doctors are competent by establishing educational and practice standards. Furthermore, a naturopathic medicine regulatory structure in Wisconsin will allow enforcement of the state's rules by monitoring licensee activity and implementing disciplinary actions.

As a member of this committee, you are a champion of public safety. Your support of naturopathic medical regulation will increase number of safe primary care providers, protect the citizens of Wisconsin from untrained lay naturopaths who may cause harm, and establish a structure under which consumers can have their complaints addressed.

We thank you for the opportunity to share our comments and hope this information, and any future dialogue between the Federation of Naturopathic Medicine Regulatory Authorities and the Wisconsin Senate Committee on Insurance, Licensing and Forestry, will lead to the establishment of regulations that promote the safe practice of naturopathic medicine.

If you have any questions, please call me at 503-244-7189 or email me at [ShannonBraden@fnmra.org](mailto:ShannonBraden@fnmra.org).

Sincerely,

A handwritten signature in black ink, appearing to read 'S. Braden ND', with a horizontal line extending to the right.

Shannon Braden, ND  
Executive Director, FNMRA

Addendum A

**Number of Disciplinary Actions taken in Oregon against NDs, MDs, and DOs from 2013-2019**

Year	Profession	# of Licensees	# of Disciplinary Actions	%
2019	MD	15,927	89	0.559
	DO	1,666	11	0.66
	ND	1,086	1	0.092
2018	MD	11,730	88	0.75
	DO	984	8	0.813
	ND	1,054	10	0.949
2017	MD	15,099	92	0.609
	DO	1,428	21	1.471
	ND	1,030	4	0.388
2016	MD	16,266	101	0.621
	DO	1,537	11	0.716
	ND	1,091	6	0.549
2015	MD	16,266	102	0.627
	DO	1,456	15	1.03
	ND	1,010	5	0.495
2014	MD	15,288	79	0.517
	DO	1,295	6	0.463
	ND	985	3	0.305
2013	MD	14,249	82	0.575
	DO	1,168	11	0.942
	ND	936	0	0
TOTALS	MD	88,559	633	
	DO	9,535	83	
	ND	7,192	29	
AVERAGES	MD	76,346	563	0.737
	DO	8,533	12	0.141
	ND	6,390	4	0.063

**REFERENCES:** <http://www.oregon.gov/omb/board/Pages/Board-Actions.aspx>  
<http://www.oregon.gov/OMB/board/Pages/Newsletters.aspx>  
<https://www.oregon.gov/obnm/Pages/Discipline.aspx>  
 ND #s provided by email - OR ND Board  
[https://store.aamc.org/downloadable/download/sample/sample\\_id/305/](https://store.aamc.org/downloadable/download/sample/sample_id/305/)  
<https://www.fsmb.org/siteassets/advocacy/publications/2018census.pdf>

**Disciplinary Actions Taken by States from 2010 to July 2021  
(6,000 estimated licensees)**

**Physician Acts Related to the Administration of Naturopathic Medical Practice**

State	Practicing without a license	Providing false information to obtain or maintain a license (e.g. failure to disclose information on renewal)	Using false or misleading advertising, or misrepresenting credentials	Engaging in discriminatory behavior regarding which patients are seen or how they are treated	Failing to obtain appropriate patient consent to examine or treat	Failing to follow appropriate charting procedures and/or to maintain record-keeping standards
Alaska						
Arizona	1		1			3
California						
Colorado	1					
Connecticut						
Dist. of Columbia						
Hawaii			1			
Idaho						
Kansas						
Maine						
Maryland	2					
Minnesota						
Montana						
New Hampshire						
New Mexico						
North Dakota						
Oregon		4				3
Puerto Rico						
Rhode Island						
Utah						
Vermont						
Virgin Islands						
Washington	1	1	3			1
<b>TOTAL</b>	<b>5</b>	<b>5</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>7</b>

**Disciplinary Actions Taken by States from 2010 to July 2021  
(6,000 estimated licensees)**

**Physician Acts Related to the Administration of Naturopathic Medical Practice**

State	Engaging in fraudulent insurance/billing procedures and/or financially exploiting patients	Breaching patient confidentiality	Reciprocal action	Failing to report disciplinary action in another jurisdiction	Failing to meet CE requirements
Alaska					
Arizona			1	1	5
California					
Colorado					
Connecticut					
Dist. of Columbia					
Hawaii					
Idaho					
Kansas					1
Maine					
Maryland					
Minnesota					
Montana					
New Hampshire					
New Mexico					
North Dakota					
Oregon	1			1	
Puerto Rico					
Rhode Island					
Utah					
Vermont					
Virgin Islands					
Washington	4		3	1	
<b>TOTAL</b>	<b>5</b>	<b>0</b>	<b>4</b>	<b>3</b>	<b>6</b>

**Disciplinary Actions Taken by States from 2010 to July 2021  
(6,000 estimated licensees)  
Physician Acts that Directly Harm Patients Physically or Emotionally**

PHYSICIAN ACTS THAT (DIRECTLY) HARM PATIENTS PHYSICALLY OR EMOTIONALLY									
State	Providing substandard patient care (e.g., misdiagnosing, failing to use standard care protocols)	Performing an inappropriate procedure that is not in the jurisdiction's scope of practice	Failing to report abuse	Neglecting or abandoning the patient	Inappropriately prescribing drugs (opioids and other legend drugs)	Providing substandard care in the prescription of Cannabis	Engaging in sexual contact with a patient	Violating appropriate doctor-patient boundaries	Exhibiting physical impairment (e.g., alcohol or substance abuse, mental/emotional impairment)
Alaska									
Arizona	6	2			18	14	1	1	10
California	1								
Colorado		1							
Connecticut									
Dist. of Columbia									
Hawaii	1								
Idaho									
Kansas									
Maine									
Maryland									
Minnesota									
Montana									
New Hampshire									
New Mexico									
North Dakota									
Oregon			1	2	12	2	2	3	2
Puerto Rico									
Rhode Island									
Utah	1								
Vermont									
Virgin Islands									
Washington	8			1	32	10	4	2	2
<b>TOTAL</b>	<b>17</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>62</b>	<b>26</b>	<b>7</b>	<b>6</b>	<b>14</b>

**Disciplinary Actions Taken by States from 2010 to July 2021  
(6,000 estimated licensees)  
Physician Acts that Potentially (Indirectly) Harm Patients**

State	Exhibiting rude or disruptive behavior in the clinic (verbally abusing and/or sexually harassing patients or staff)	Receiving a criminal conviction	Failing to comply with Regulatory Authority Order	UNKNOWN (records could not be obtained for analysis)
Alaska				1
Arizona		2		2
California				
Colorado				1
Connecticut				
Dist. of Columbia				3
Hawaii				
Idaho				
Kansas				1
Maine				
Maryland				
Minnesota				
Montana				
New Hampshire				
New Mexico				
North Dakota				
Oregon		1	6	
Puerto Rico				
Rhode Island				
Utah		1		
Vermont				1
Virgin Islands				
Washington	1		1	1
<b>TOTAL</b>	<b>1</b>	<b>4</b>	<b>7</b>	<b>10</b>

Bruce W. Campbell  
PO Box [REDACTED]  
Fairbanks, AK 99708

The Honorable  
Representative Mike Prax

Re: Support for HB 115  
House Health and Social Services Committee Hearing, April 6<sup>th</sup>, 2023

Date: April 6, 2023

Dear Representative Prax:

I am writing to support passage of HB 115, enabling my naturopathic Doctor to practice medicine to the full extent of his training. I want to thank you for sponsoring this bill.

When the FNSB Covid vaccine clinic sought volunteers, I was shocked to discover that my naturopathic doctor (ND) could not provide vaccines, even though existing Alaska statutes appear to include the ability to administer injections. But a vaccine is a prescription item, and neither naturopathic, nor for that matter dentists, were able to step in and provide vaccinations in the Fairbanks North Star Borough Covid vaccine clinic. Fortunately, we were able to find enough EMT's, RN's, and others willing to assist. Adding naturopaths will simply increase the number of willing volunteers for the next global pandemic.

I find I am provided a longer and more in-depth appointment with my naturopathic doctor, closer to the family doctor visit of long ago. The shorter 15 to 20 minute appointment with an MD may be sufficient for a quick decision and script for a pill, but frankly, seems too brief to discuss underlying symptoms and conditions at a level I can absorb.

The MD's focus on prescribing drugs to treat symptoms led me to an alternative approach to a health care. I greatly appreciate the in-depth technical discussions I have with my ND. The relationship of diet, hormones, lifestyle and how to affect desirable changes in all. Yes, discussions can include medications, for which, under current regulatory authority, I need to add several weeks in order to schedule an additional appointment with an MD. Lifestyle issues may seem obvious to an MD, but are difficult to unravel, and in my case, take time.

I encourage members of the committee to vote the bill out with a "Do-Pass" recommendation.

Sincerely,

Bruce W. Campbell



## Why broad prescriptive authority is an essential element of naturopathic practice

Naturopathic medicine is a distinct system of medicine that skillfully combines natural therapeutic traditions with modern science to restore and optimize health. Many think that, because of the emphasis on more natural modalities, that prescriptive authority is not necessary in naturopathic practice. This is not the case for the following reasons:

1. **Allows naturopathic physicians to prescribe the safest, most effective medicines for their patients.** Prescribing authority should be based on training, standard of care, and safety. While naturopathic doctors will prioritize less expensive and less invasive natural substances and modalities first, sometimes the safest, most effective drug is a pharmaceutical. For example, a patient presenting with dangerously high blood pressure should be put on a pharmaceutical to quickly and safely bring their blood pressure into a safe zone, while slower acting natural substances and lifestyle changes treat the underlying cause of the symptom. [another example would be that some pharma antibiotics are just better first-line treatment than herbal antibiotics].
2. **Reduces healthcare costs** – patients of naturopathic physicians who do not have prescriptive authority are forced to schedule appointments with a medical doctor or nurse practitioner to access or refill their prescriptions, simply because the best prescription for their needs happens to not be naturally derived. The time lag can result in delayed treatment, higher costs of treatment, and confusion for patients
3. **Helps alleviate the shortage of primary care providers** – especially in underserved communities. NDs have the training and education to prescribe, and should be authorized to use their complete knowledge-base. Community clinics serving underserved populations, medical volunteer agencies, and other primary-care facilities are not able to hire NDs - despite the fact that they are trained as primary care physicians – simply because of limited prescriptive authority.

4. **Lowers pharmaceutical drug costs** - Many studies have found that naturopathic care results in substantially lower prescription drug costs than conventional care. Naturopathic physicians are also much less likely to use prescription medications as treatment, even when these drugs are included in their scope of practice, and integrative medicine users in two studies reported significantly lower prescription drug use of 48% and 61%, respectively. NDs will also work to deprescribe drugs when medically possible and following careful supervision. A doctor needs prescriptive authority to safely reduce usage of or taper patients off of drugs in favor of natural alternatives and lifestyle changes.

## **Licensed NDs have the education and training**

Licensed Naturopathic and Registered Naturopathic Doctors (NDs) are a uniquely educated and skilled, accredited healthcare workforce serving as primary care and specialty care physicians throughout the US. NDs graduate from four year, graduate-level naturopathic medical schools accredited by the Council on Naturopathic Medical Education (CNME) and approved by the US Department of Education. These individuals have also passed a standardized national postdoctoral examination called the Naturopathic Physicians Licensing Examination (NPLEX).

NDs gain extensive knowledge and expertise not only in natural approaches to healthcare, but also in the clinical and biomedical sciences typically taught in MD programs (e.g., pharmacology). Accredited ND programs are a minimum of 4,100 hours in length and 1200 clinical hours, inclusive of two years biomedical sciences and two years clinical sciences. ND Pharmacology programs are a minimum of 1200 hours of hands-on clinical training<sup>1</sup>

As part of the pharmacology curriculum, NDs study and learn both medical and clinical pharmacology, including the primary therapeutic uses, mechanisms of action, potential adverse effect, and drug/drug interactions of medicines commonly encountered, including prescription drugs, controlled substances, and over the counter medications.

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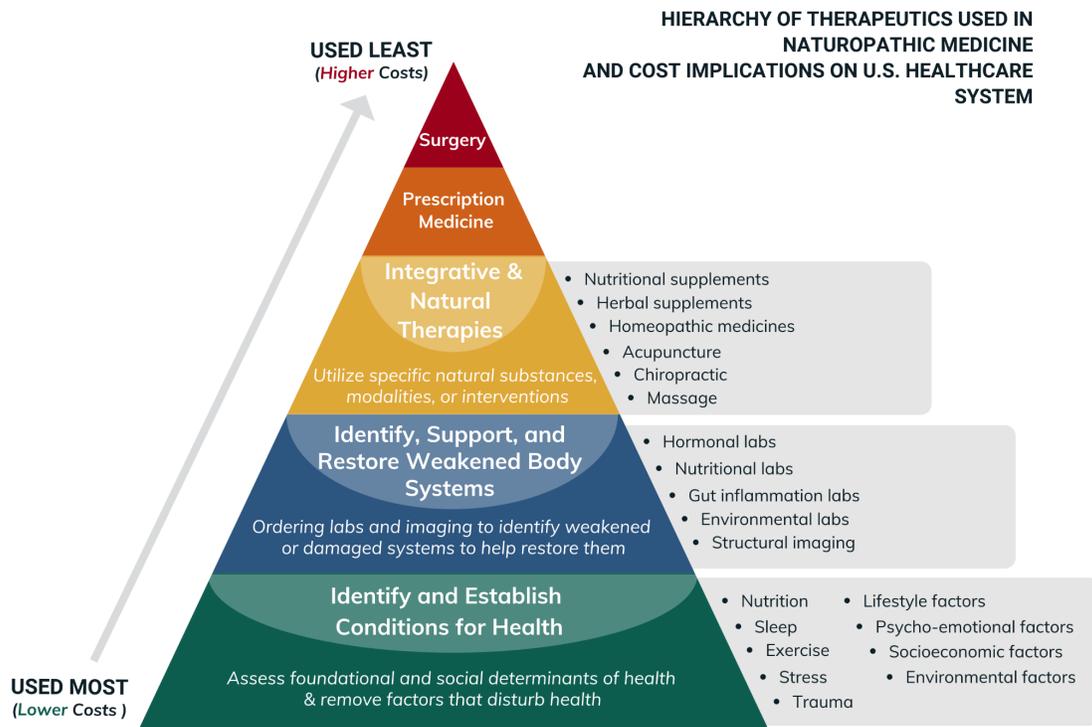
1

<https://naturemed.org/do-naturopathic-doctors-prescribe-medication/#:~:text=Pharmacology%20is%20taught%20through%20a,United%20States%20Department%20of%20Education.>

## One element in Whole Person Health

NDs prescribe drugs based on available evidence, clinical experience, patient preference, and the Therapeutic Order. They match the patient's level of health and pathology with the necessary level of intervention. As a principle, naturopathic doctors support and enhance the body's inherent ability to heal itself. They utilize a deep toolbox of natural therapies to help get a patient healthy enough to heal disease without strong interventions. Yet when a careful assessment of lifestyle, social/emotional factors, physical exam, and/or targeted laboratory testing reveals that the patient is not able to heal with natural therapies, NDs will refer or prescribe appropriate medicine.

The Therapeutic Order is the framework NDs use to evaluate the patient's obstacles to healing and to choose therapeutic approaches in the most logical, least invasive ways first. If NDs do prescribe medication, they anticipate and address potential side effects of that medication with natural therapies. For example, if a patient requires antibiotics, which are known to wipe out needed, healthy bacteria in the microbiome in addition to harmful bacteria, NDs may also prescribe probiotic foods or supplements to help keep the GI system in healthy balance.



Adapted from "Naturopathy as a Model of Prevention-Oriented, Patient-Centered Primary Care: A Disruptive Innovation in Health Care" by R. Bradley, et al.

## **Licensed NDs are proven safe guardians with pharmaceuticals**

NDs have been safely practicing as primary care providers in 26 regulated US states, districts, and territories. ND licensure statutes have been in place on average over 30 years, and in two states over 100 years. Safe practice by NDs can be objectively demonstrated by the fact that NDs have fewer disciplinary actions taken against them compared to MDs and DOs (see addendum A).

Through 2021, 11 out of 26 regulated jurisdictions allow NDs broad prescriptive authority. Only three of these jurisdictions have taken disciplinary action against NDs for prescribing decisions. The majority of these actions involved opioid management, which is a challenging area for all licensed primary care providers.

Of the six jurisdictions that allow NDs broad prescriptive authority including opioids, only two require oversight by an MD or DO: California and Vermont. Vermont requires oversight for one year or the first 100 prescriptions (or other qualified experience) after passing the NPLEX Part II – Elective Pharmacology Examination. Conversely, California currently requires ongoing prescriptive oversight, creating an unnecessary burden on MDs, DOs, and NDs. As a result, the California regulator is currently seeking to remove this requirement because it interferes with the ability of a qualified ND to practice as trained and provide effective primary care.

Addendum A

## Disciplinary Actions Related to Prescribing from 2010 to 2021\*

Jurisdiction	Disciplinary Actions	Estimated Number of Licensees
<b>Jurisdictions with Broad Prescribing Rights EXCLUDING Opioids</b>		
Hawaii	0	150
Idaho	0	27
New Hampshire	0	60
New Mexico	0	15
Utah	0	60
<b>Jurisdictions with Broad Prescribing Rights INCLUDING Opioids</b>		
California	0	900
Montana	0	105
Vermont	0	350
Oregon	12	1200
Arizona	18	1450
Washington	32	1400
<b>TOTAL</b>	<b>62</b>	<b>5717</b>

\* Or since year of licensure.

FNMRA interprets broad prescribing rights to mean access to all major categories of prescription drugs required for primary care.



22 March, 2023  
Representative Mike Prax  
State Capitol Room 108  
Juneau, AK 99801  
RE: Support for House Bill 115

Dear Representative Prax,

Thank you for supporting, and sponsoring, House Bill 115, which updates the scope of practice for licensed Naturopathic Doctors to reflect their level of training and competency. As such, it allows for prescriptive management and minor office procedures.

As you know, our state is in a medical crisis with a scarcity of medical providers, inadequate to meet the needs of our communities. There are about 50 licensed Naturopathic Doctors in this state who are qualified, trained, and ready to support Alaskans with their healthcare needs. House Bill 115 will help address these needs. In the current model of care, Naturopathic Doctors must refer patients to other, similarly trained, medical providers for prescriptive needs and minor office procedures. It causes a great deal of frustration to our patients and causes them to incur additional medical costs. Due to the limited availability of other providers, our patients must wait long periods before they can even be seen for these needs. It is an unnecessary burden to our healthcare infrastructure.

Naturopathic Doctors receive training in clinical pharmacology, commensurate with our NP colleagues who have a much less restrictive scope of practice in our state. We receive more training than PAs who have a much broader scope of practice in our state, with minimal oversight. Currently, I need to refer patients to my PA colleague to write prescriptions for my patients. Ironically, when I practiced medicine in Arizona, I was one of the physicians overseeing the PAs in my office.

In many states, Naturopathic Doctors have prescriptive rights to include scheduled medications. In fact, I practiced in Arizona for many years, and had a DEA number and prescriptive authority, including schedule II (limited) through IV drugs; and was able to perform sutures, IUD removals, administer vaccines, etc. These are necessary tools for primary care providers. We are well-trained to utilize these tools, and our Alaskan patients need us to have the ability to prescribe medications and perform minor office procedures. It will help cushion the overwhelming healthcare burden, and it will prevent our patients from requiring duplicative office appointments to meet their healthcare needs.

It simply makes sense. We are trained, and we are capable. There is a need. We can meet that need. It is in the best interest of Alaskans.

Sincerely,

Dr. Natalie J. Wiggins  
2927 Dartmouth Drive  
Anchorage, AK 99508

T 907.929.2222  
F 907.929.2225

2925 Debarr Rd. Suite 150  
Anchorage, AK 99508

[WWW.VITAEHEAL.COM](http://WWW.VITAEHEAL.COM)

Comments on the proposed Naturopath scope of practice bill SB0044

From Kristin Mitchell, MD, FACP

Board certified in Internal Medicine and Sleep Medicine

Trustee, Alaska State Medical Association

Physician in Soldotna since 1998

Faculty with UAA and WWAMI

Members of the Health and Social Services Committee

Senators,

Thank you for accepting my written comments, as I expect to be caring for patients during your scheduled hearing, and some of my comments are quite specific (In the appendix at the bottom, marked with \*\*).

For context, as a physician and educator in the WWAMI school of Medicine, I am very aware that Alaska has a serious primary care shortage. I applaud efforts by the Legislature to stabilize long-term funding for WWAMI, Alaska's Medical School, and support for training physicians in residency programs in Family Medicine, Pediatrics, and soon, Internal Medicine in Alaska, as a mechanism to increase the physician workforce.

This bill, as proposed, is not a good solution to the primary care problem.

As Senators, your charge to protect the health and safety of Alaskans is a serious one. It is essential that good legislation is clear and based in grounded research, and that it increases clarity and safety for the Alaskan Public.

The proposed bill SB 44 falls short.

It implies that Naturopaths are equivalent to fully trained physicians - they are not.

It grants broad prescriptive authority to individuals who do not have the scientific method training, clinical hours of experience or supervision to do this safely.

It allows all licensed Naturopaths to perform surgeries, although there is no standardized training or national examining body that certifies that their experience has prepared them to do this safely.

It allows Naturopaths to market their services as "M.D." or "Physician" - degrees which they have not completed.

It allows Naturopaths to order and perform tests and examinations that typically require specialized training to perform and interpret, for which they are not trained.

The standard of practice is explicitly unclear.

Naturopaths study plants and other natural substances and their effects on restoring a body to health. They practice what is widely known as Complementary Medicine - a practice that supports health and is complementary to, but not a replacement for, a medically trained physician. Their hours of clinical training are far fewer than physicians. Their training about the

actions and interactions of drugs - prescription pharmaceuticals - is far less than physicians are required to complete in accredited medical schools. Their training system does not have a standardized national accreditation for residency training. This bill instead proposes a 2 year externship or apprenticeship. Prior to 1910, the US relied on apprenticeship training for all doctors, and it was not a good situation for patients. The concerns about the risk to public health lead to the Flexner Report, which implemented high standards of medical training, and resulted in the closure of 75% of existing medical schools at the time. Alaska should not aim to lead the nation back in that direction.

Naturopaths should not have the authority to prescribe pharmaceutical medications (drugs from a pharmacy). Medication errors are already a significant cause of death in the US, according to studies from Johns Hopkins (2017) and the BMJ (2016). Insufficient training and experience with safe medication prescribing would increase that risk.

Fewer than half of all US states license Naturopaths to practice at all. Alaska has historically not allowed Naturopaths to prescribe pharmaceutical medications. Some states allow naturopaths to use a significantly restricted formulary of medications. The Naturopaths advocating for SB 44 are not requesting controlled substance prescriptive authority, but are requesting a broad increase in scope to prescribe medications including seizure medication, diabetes medication, psychiatric medication, blood pressure medication, antibiotics. Again, Naturopaths do not have the training to safely prescribe these potentially dangerous medications safely.

Many large programs, including cancer treatment programs, include a naturopath as part of a team that includes science-based physicians to allow for the complementary approach for patients who prefer that. In the interest of patient safety, the Legislature should explore licensure rules that encourage collaboration and oversight, but not independent prescriptive and surgical authority.

Respectfully,

Kristin M Mitchell MD FACP

## **Appendix**

Specific notes on the proposed bill:

Names matter.

Naturopaths are not medically trained in the scientific method in accredited medical schools with accredited 3 or more year residencies. They should not be permitted to call themselves "Physician"

SB 44 suggests that anyone could call themselves a "M.D." or "doctor" or "physician" as long as they clarify the title with a "specialist designation." A Naturopath is not a medical specialist, not

is an audiologist or occupational therapist, and the legislation should not allow for such public confusion.

In addition, a person engaged in 8 the practice of medicine or osteopathy as defined in AS 08.64.380, or a person 9 engaged in any manner in the healing arts who diagnoses, treats, tests, or counsels

10 other persons in relation to human health or disease and uses the letters "M.D." or the 11 title "doctor" or "physician" or another title that tends to show that the person is 12 willing or qualified to diagnose, treat, test, or counsel another person, shall clarify the 13 letters or title by adding the appropriate specialist designation, if any, such as 14 "dermatologist," "radiologist," "audiologist," "naturopath," or the like.

\*\* (This is not permitted per Section 9; at least the legislation should be consistent)

**Sec. 08.45.030. Issuance of license.** The department shall issue a license to 13 practice naturopathy to an applicant who

14 **(1)** provides proof satisfactory to the department that the applicant 15 **(A)** has received a **doctoral** degree from an **accredited** 16 **naturopathic medical school**

\*\* Source of accreditation should be specified

**(2) has completed a two-year naturopathic externship program;** 5 **(3) has passed a pharmaceutical examination approved by the** 6 **department that is equivalent to any examination of pharmaceutical knowledge** 7 **required under AS 08.64.210 or 08.64.220;**

\*\* .220 was repealed, so this refers only to any exam the department deems necessary. And this could be changed by a board consisting of 3 naturopaths and 2 community members - this seems like very weak oversight and safety guarantee for the public.

15 **Sec. 08.45.032. Documentation of license refusals and revocations.** If the 16 department refuses to issue or revokes a license, the department shall issue a concise 17 written statement describing the reasons for the department's decision. 18 \* **Sec. 6.** AS 08.45.035(a) is amended to read:

19 (a) The department shall issue a temporary license to practice naturopathy to 20 an applicant who

21 **(1)** **has applied for and is qualified to take** the next Naturopathic 22 Physicians Licensing

Examination offered after the date of application; **and** 23 **(2)** [AND PROVIDES PROOF SATISFACTORY TO THE 24 DEPARTMENT THAT THE APPLICANT (1)] meets the requirements of 25 **AS 08.45.030(1)(A) and (2) - (6)** [AS 08.45.030(2)(A); AND 26 (2) HAS NOT PREVIOUSLY FAILED THE NATUROPATHIC 27 PHYSICIANS LICENSING EXAMINATION].

\*\* This means that Alaska plans to license Naturopaths who could take an exam, but does not require that they take or pass the exam. Again - this is too weak for oversight and safety.

**SB 44 -4- SB0044A** *New Text Underlined [DELETED TEXT BRACKETED]*

33-LS0297\B

1 education requirements.

2 (b) Before a license may be renewed, a naturopath licensed under this chapter 3 shall submit evidence to the department that continuing education requirements 4 prescribed by regulations adopted by the department have been met. Continuing 5 education requirements must be equivalent to the continuing education requirements 6 of a physician assistant under AS 08.64.107 and must also include a requirement that 7 not less than two hours of education in pain management and opioid use and addiction 8 be completed not more than two years before the application for renewal.

9 (c) **The department may exempt a naturopath** licensed under this chapter from 10 the requirements of (b) of this section upon an application by the naturopath giving 11 evidence satisfactory to the department that the naturopath is unable to comply with 12 the requirements because of extenuating circumstances. However, the department may 13 **not exempt a naturopath from**

**14 (1) more than 15 hours of continuing education in a five-year period;** 15 (2) the requirement to receive at least two hours of education in pain 16 management and opioid use and addiction.

\*\* I'm not sure why Naturopaths not prescribing controlled substances need the required opioid education, but if they do, why would the State see fit to exempt them from continuing education hours 'because of extenuating circumstances.' CME is not optional for other practicing health

professionals.

(From the State of AK Div of Licensing website:

### **Continuing Medical Education**

Alaska law requires an average of 25 hours of Category I AMA- or AOA-or CPMR approved continuing education hours for each year of the licensing period (two-year licensing cycle). Of which 2 hours must be related to opioid education, At the time of renewal, the licensee must attest to compliance with the CME requirements. After renewal is completed, the division will perform a computer- generated random audit of licensees who will be required to provide proof of CME courses. Please see regulations 12 AAC 40.200, 210, and 220.

A two-hour education course (equivalent to a continuing medical education program) is required, unless you do not hold a valid DEA registration. Courses must be category 1 of AMA-approved education, or Category 1 or 2 of AOA-approved education. For a podiatrist, it may be earned in a continuing medical education program from a provider that is approved by the Council on Podiatric Medical Education (CPMR). To document compliance with the opioid education requirement, the title/description of the program on your Certificate of Completion should specifically reference all three areas of the required subject matter: pain management, opioid use, and addiction.

Individuals who are renewing their licenses in "Retired" status are not required to complete continuing medical education (CME) requirements)

\*\*Malpractice Standard is unclear:

**the department may not make a 25 finding of professional incompetence solely on the basis that a licensee's practice 26 is unconventional or experimental in the absence of demonstrable physical harm 27 to a patient;**

**From:** [Shawn Vainio](#)  
**To:** [Sen. David Wilson](#)  
**Subject:** Re: Alaska Academy of Family Physicians  
**Date:** Wednesday, February 22, 2023 7:47:13 AM

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Senator Wilson

I hope this legislative session is going well for you.

I understand the Naturopathic Bill (SB 44) will be going to committee tomorrow. I apologize for the late email, but I have been working nights out in Bethel since I returned from our Advocacy Day with The Alaska Academy of Family Physicians on February 7<sup>th</sup>.

Here are the facts surrounding this matter:

- 1) There are a limited number of naturopaths in Alaska seeking to expand scope of practice to prescribe Western medications, perform procedures and order labs and imaging.
- 2) The population of Alaska sits at approximately 730,000.
- 3) Some Alaskan citizens will preferentially seek naturopathic medical care.
- 4) It is the duty of government to protect the people.
- 5) I work with traditional Tibetan healers in the Himalayas and have done so for 20+ years.
- 6) I work with non-physician prescribers every work day in Bethel, AK.
- 7) I lobbied Senator Stevens and then Representative Austerman back in the late 2000s early 2010s to require direct entry midwives to be certified by the state and therefore overseen by the state with statute and regulations governing their scope of practice, rather than the prior legislation allowing direct entry midwives to practice without certification or supervision. I did this not to restrict the practice of midwifery, but to protect the public.
- 8) I worked on a naturopath working group from May 2021 to November 2021, and dedicated dozens of hours to meeting with Joe Hayes (from Senator Kawasaki's office), Naturopaths Scott Luper and Abby Laing, the Alaska State Medical Association and the Alaska Academy of Family Physicians (of which I am a Board member, currently serving as Past President).
- 9) The educational and practical comparison of naturopaths to nurse practitioners and physician assistants are not equivalent. The cited numbers by the American Academy of Naturopathic Physicians do not take into account that:
  - a) Nurse practitioners have a nursing degree and nursing experience including additional pharmacology coursework and practical use prior to nurse practitioner

school.

b) Physician assistants practice under a collaborative agreement.

**10) My proposal to the working group for last year's legislative session was that a naturopath seeking expanded scope of practice work under a collaborative agreement for their expanded scope of practice.**

I believe that my suggested plan is the safest plan moving forward. It is a safe way to assure oversight not just by the State (which will undoubtedly have little to no actual oversight of the practice of medicine) but by colleagues working directly with those who seek to expand their scope.

For the safety of the state, please recognize that one does not accommodate the few to risk the many.

In reference to the proposed bill:

Section 2 creates a bill that allows a board of 3 naturopaths and 2 public members to then control the practice of naturopathy in the state, whereupon the board can then further expand scope.

Section 3 does not allow a naturopath to practice in the state unless they seek prescribing authority. (contradicted in Sec.08.45.045 (2) (D)). The overwhelming majority of naturopaths are not seeking expanded scope of practice, per the discussions of our 2021 working group. At that time 3 of the approximate 50 naturopaths in the state were seeking expanded scope of practice.

Sincerely,

Shawn Vainio MD FAAFP

Family Physician

[shawnvainio@gmail.com](mailto:shawnvainio@gmail.com)

907-942-9039

On Sat, Feb 18, 2023 at 5:24 AM Shawn Vainio <[shawnvainio@gmail.com](mailto:shawnvainio@gmail.com)> wrote:

Senator Wilson

Thank you for taking the time to meet with our representatives of the Alaska Academy of Family Physicians while we were in Juneau on February 7th for our Annual Advocacy Day.

It was unfortunate that we couldn't spend more time discussing the healthcare issues of the state, but I understand it was an especially busy day with Senator Sullivan in town.

I hope this meeting fortified our relationship, and that you understand that our organization (and the Family Physician members that we represent) is committed to the health of the people and communities of Alaska. Please feel free to contact us regarding any healthcare related issues.

(I have personally invested dozens of hours in the naturopathic working group back in 2021 with Senator Kawasaki's office, Joe Hayes, Scott Luper, ASMA, among others, and would be happy to speak to you about the progress we made back in 2021.)

Be well

Sincerely,

Shawn Vainio MD FAAFP

Family Physician

Residence Gridwood, Alaska

Employment at YKHC in Bethel, Alaska

[shawnvainio@gmail.com](mailto:shawnvainio@gmail.com)

907-942-9039

**From:** [Tsigonis, Jean M.](#)  
**To:** [Senate Health and Social Services](#)  
**Cc:** [Panko, Jessica](#); [asma@asmadocs.org](mailto:asma@asmadocs.org)  
**Subject:** Naturopaths  
**Date:** Tuesday, February 21, 2023 10:42:57 AM

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Dear Legislators:

I have great concern over the requests being made by the Naturopaths, regarding the practice of medicine. They should practice within their scope of practice. They should not be doing procedures that fall into the realm of a surgical practice. They should not be prescribing pharmaceutical medications, that require medical training. They should not be inserting IUDs or implantable contraceptives, which falls in the realm of Family Medicine and Obstetrics and Gynecology. These are lines which they should not cross.

Sincerely,

Jean Tsigonis, MD, MPH

**From:** [Rhene Merkouris](#)  
**To:** [Sen. David Wilson](#)  
**Subject:** SB44A  
**Date:** Wednesday, February 22, 2023 10:46:37 AM

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Dear Senator Wilson,

I am against Naturopathic practitioners increasing their scope of practice especially doing procedures. Medical practitioners spend years and untold hours with many checks and balances recognizing disease and the multiple treatments options to tailor care take is most appropriate to a specific individual. Their mantra is “right” patient “right” procedure. Not all procedures are appropriate for all patients. The medical physician has also been trained to recognize when a procedure goes wrong with complications . Like when an IUD has been poked through a uterus and now is in the belly of the patient which can be life threatening if bowel is perforated. The OBGYN has been trained to quickly recognize, order appropriate diagnostic tests and surgically treat the complication. These procedures are not without risk to the general population.

Appropriate schooling with transparency of Lea

**From:** [Werle, Zachary](#)  
**To:** [Senate Health and Social Services](#)  
**Subject:** SB44  
**Date:** Friday, February 24, 2023 6:38:13 PM

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To Whom It May Concern,

I am reaching out to you to state my opposition to SB 44. I have been a practicing Family Medicine physician in Fairbanks, Alaska for 15years. As a board-certified fellow of the Americal Academy of Family Physicians, I feel that prescribing of medications is not within the scope of training for naturopaths and may be harmful to patients. The same can be said for the broad scope of surgical procedures they are requesting privilege to perform.

Respectfully,

Zach Werle DO, FAAFP

## **Emails of Support 02-21-22**

### **Senate Bill 44 Naturopathy**

TO: Senator Cathy Geissel  
Re: SB 44

My name is Kerry Howard, and I am writing to urge you to support Senate Bill 44 (SB 44), which updates the scope of practice for Naturopathic doctors to reflect their education and training.

The changes proposed in SB 44 reflect a scope of practice that is being practiced safely and effectively by naturopathic doctors in many other states around the country. Given our unique healthcare challenges in Alaska, we should be leading the charge in pursuing policies which provide consumers with more options and greater access to affordable care.

I have been receiving care from a naturopathic doctor, Dr. Emily Kane, for many years and my experience has always been extremely positive. Dr. Kane has helped me with both acute and chronic health conditions, and I value her experience and expertise.

Thank you, in advance, for your support of SB 44, and for taking another step towards better healthcare in our great state.

Sincerely--Ms. Kerry Howard

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**To: Senator Cathy Geissel**

**Re: Support for Senate Bill 44**

My name is Mary Cordry and I am writing to urge you to support Senate Bill 44 (SB 44), which updates the scope of practice for Naturopathic doctors to reflect their education and training.

The changes proposed in SB 44 reflect a scope of practice that is being practiced safely and effectively by naturopathic doctors in many other states around the country. Given our unique healthcare challenges in Alaska, we should be leading the charge in pursuing policies which provide consumers with more options and greater access to affordable care.

I have been receiving care from a naturopathic doctor and my experience has been [insert personal experience here].

Thank you in advance for your support of SB 44, and for taking one step toward better healthcare in our great state.

Sincerely, Mary Cordry

My name is John Drips and I am writing to urge you to support Senate Bill 44 (SB 44), which updates the scope of practice for Naturopathic doctors to reflect their education and training.

The changes proposed in SB 44 reflect a scope of practice that is being practiced safely and effectively by naturopathic doctors in many other states around the country. Given our unique healthcare challenges in Alaska, we should be leading the charge in pursuing policies which provide consumers with more options and greater access to affordable care.

I have been receiving care from a naturopathic doctor and my experience has been that in addition to receiving care from them, I must also see another doctor in order to receive needed medication. This results in unnecessary costs for the insurance company, the health care system, and myself.

Thank you in advance for your support of SB 44, and for taking one step toward better healthcare in our great state.

Sincerely,  
-- John Drips

  
"Be kind to me or treat me mean, I'll make the most of it, I'm an extraordinary machine"

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**To: Senator Cathy Giessel**  
**Re: Support for Senate Bill 44**

My name is Donna Jefferson, and I am writing to urge you to support Senate Bill 44 (SB 44), which updates the scope of practice for Naturopathic doctors to reflect their education and training.

The changes proposed in SB 44 reflect a scope of practice that is being practiced safely and effectively by naturopathic doctors in many other states around the country. Given our unique healthcare challenges in Alaska, we should be leading the charge in pursuing policies which provide consumers with more options and greater access to affordable care.

Thank you in advance for your support of SB 44, and for taking one step toward better healthcare in our great state.

Sincerely, Donna Jefferson

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To Senator Cathy Giessel

Re: Support for Senate Bill 44

My name is Catherine Smith, and I am writing to urge you to support Senate Bill 44 (SB44) which updates the scope of practice for Naturopathic doctors to reflect their education and training.

The changes proposed in SB 44 reflect a scope of practice that is being practiced safely and effectively by naturopathic doctors in many other states. With Alaska's unique healthcare challenges, we should be leading the charge in pursuing policies which provide consumers with more options and greater access to affordable care.

I have been receiving care from a naturopathic doctor for many, many years. My care has been excellent. I have used naturopathic doctors as my primary care providers for over 20 years after my primary care MD retired. My care has been thorough, comprehensive, and complete.

Thank you in advance for your support of SB 44 and for taking a step toward better health care in our state.

Sincerely,  
Catherine Smith

[REDACTED]  
[REDACTED]  
Anchorage, AK 99515

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Dear Senator Cathy Giessel,

My name is Caroleen Monnseratt, I am a Licensed Massage Therapist working in Anchorage, Alaska, and I am writing to you to SUPPORT SENATE BILL 44 (SB 44). This bill updates the scope of practice for Naturopathic doctors to reflect their education and training.

The changes proposed in SB 44 reflect a scope of practice that is being practiced safely and effectively by Naturopathic Doctors in many other states around the country. Given Alaska's unique healthcare challenges, we should be leading the charge in pursuing policies which provide Alaskans with more options and greater access to affordable care.

Now, in Alaska, Naturopathic Doctors have a limited scope of practice than other health care providers with equal or lesser training. With the passing of SB 44 bill Naturopathic Doctors can practice to their full scope of their training. It will let patients access their medications from the primary care providers without the need for duplicative appointments and costs.

I have received care from a Naturopathic Doctors in the past. They are the only ones that helped me with a hormone issue.

PLEASE, Senator Giessel, support this bill. Thank you in advance for taking the time to read this e-mail.

Namaste'  
Caroleen T. Monnseratt, BP, LMT, NCTMB

[REDACTED]  
[REDACTED]  
[REDACTED]

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I am in full support for Naturopathic doctors to be granted prescriptive rights. Currently, if a patient needs a prescription, they need to try to get on a schedule with a general practitioner to obtain a prescription they need for their health. This is extremely limiting and stressful for the patient as they have as they have to wait days to weeks for an appointment. This causes a stop and delay in their medical care needs. As getting into another provider is very difficult the patient has to research for a provider that has an opening and in network for their insurance plan. Then after waiting many days to weeks for an appointment, they have to financially pay for a second office visit. This method of care is NOT helpful for patients' health. It has a negative impact on a patient's health, finances, and their overall wellbeing. I'm aware of the negative impact as I'm a patient at Vitae. I am one of the many patients that if my doctor at Vitae had prescriptive rights that this would positively benefit my overall health. Currently, it places me in the position that I have to forego appropriate medication due to the increased cost of scheduling another doctor appointment. I fully support making a positive change to help patients and our community live healthier lives. By passing SB44 this would allow Naturopathic doctors to treat and prescribe necessary prescriptions for their patients at the time of their appointment. I'm asking to please pass SB 44.

Warm regards, Michelle Sanford

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**From:** Rod and Bonnie Wheelers [REDACTED]  
**Date:** February 19, 2023 at 4:34:05 PM AKST  
**To:** "Sen. Cathy Giessel" <[Sen.Cathy.Giessel@akleg.gov](mailto:Sen.Cathy.Giessel@akleg.gov)>  
**Subject:** SB44

Senator Giessel,

My name is Bonnie Wheelers and I am writing today in support of SB 44, the bill you sponsored in support of increasing the scope of practice for licensed Naturopathic Doctors in the state of Alaska.

I am a patient of Dr. Natalie Wiggins, N.D. and consider her my Primary Care Physician. The fact that she is not allowed to write prescriptions has forced me to see an MD for the sole purpose of getting my prescription medicine. This is costly and a waste of my time and money. I am 68 years old, retired and quite frankly don't understand why these licensed physicians are being limited in their ability to care for patients by not being allowed to write prescriptions when the need arises. I fully trust Dr. Wiggins and have been her patient since 2019. If this bill passes, I will no longer need my current MD on my care team. That will save me money, time and the extra effort of keeping her informed of all I am doing under the care of Dr. Wiggins.

I fully support SB 44 and ask that you continue to fight for its passage.

Alternative medicine has been a huge help to me through some big health issues I have. I value my freedom to choose what type of doctor I see and ask that you help support that freedom by giving Naturopathic Doctors the prescription writing privilege that Medical Doctors enjoy.

Respectfully yours,

Bonnie Wheelers

[REDACTED] Anchorage, AK 99516

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My name is Susan Conlin and I urge you to support SB 44 that would allow Naturopathic Doctors to practice the full scope of their training and education. I have had a Naturopath for 35 years in Anchorage. Dr Wing and then Dr. Lenger have helped me beyond measure over the years while most MD's have limited knowledge of holistic health. Naturopaths are very willing to refer to and consult with MD's if need be but should be able to act as primary care physicians, especially the ability to prescribe. I would love that choice. Please visit a Naturopath and experience their knowledge, experience, and compassionate care. When was the last time a physician spent an hour really listening? Try it before you limit their practice and my right to access complete care. Thank you.

---

Dear Alaskan Representatives,

I am writing in support of Senate Bill 44.

I am a practicing physician assistant in Alaska who currently has the pleasure and privilege of working in a practice with Dr. Natalie Wiggins. She often refers her patients to me for medical treatment that she cannot provide due to the State of Alaska's license restrictions for Naturopaths. I was trained as a physician assistant in Pittsburgh, Pennsylvania at Chatham University. During my time at Chatham, one of the most valuable faculty at my PA school was Dr. John Laird, who is now retired. He was a practicing Naturopath that oversaw the Integrative Cancer Center at the University of Pittsburgh Medical Center. I learned the majority of the anatomy and pathophysiology of health and medicine from this brilliant doctor. Fluid and electrolyte balance, the angiotensin pathway, structure, and function (in depth), etc all from this man. I later worked alongside faculty at the Alaska Family Medicine Residency, my training and depth of knowledge prepared me for being Junior Faculty, a rare thing as a physician assistant, at a ACGME accredited Family medicine residency; the only Alaska medical residency training program. This residency prepares and trains the majority of physicians that work in Alaska. In my time at the residency, I continued to learn and teach alongside medical physicians whose skills were built serving Alaskans. I have since worked in a few rural places in Alaska and with Alaska Natives. I later completed a fellowship in Integrative Medicine and was re-educated on the importance of not working in silos in medicine; to work in collaboration with one another is key to our patients' health - not working individually or against one another.

I have prescriptive authority that matches my collaborative physician's (Dr. Nellie Nadeau) medical license and training in Alaska. It was a part of my training to be able to perform certain procedures and write prescriptions based on my collaborative physician's license. However, Naturopaths have both the training and licensure that allows them to knowledgeably treat their patients with or without pharmaceuticals or specific procedures independently. However, specific states, like Alaska have restricted this, which is demeaning to their training and ability to knowledgeably and skillfully treat their patients that is within their scope of practice. In Alaska there is a shortage of primary care medicine, and in my opinion, Naturopaths should be first in line to help patients heal, as they use less medicine in their approach and allow the patients to find ways to heal without medicines often times. However, we all know in medicine that some patients require pharmaceutical grade medicines with specific medications (i.e., uncontrolled hypertension as an example). It is inconvenient for patients to see a doctor and not be able to receive the treatments that they are trained to provide.

I am in full support of Senate Bill 44, so my colleague can treat her patients because her training is adequate, her knowledge is unparalleled, and her patients deserve the benefit of their chosen doctor being able to do so. Sincerely, Alisa Vickrey, MPAS, PA-C, FIAHM

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**To: Senator Cathy Giessel**

**Re: Support for Senate Bill 44**

My name is Catherine Straub, and I am writing to urge you to support Senate Bill 44 (SB44), to update the scope and practice for Naturopathic doctors to fully reflect their education and training.

My Naturopathic doctor (ND) is an integral part of my health care team. As a cancer survivor, I am grateful to my Naturopathic health care team for helping me to regain and maintain my health. Yet there is so much more my ND could do for me and I remain aggravated that, despite the training and education of NDs, the State of Alaska is limiting their productivity. This often results in having to seek other medical help when my ND is unnecessarily restricted by outdated laws.

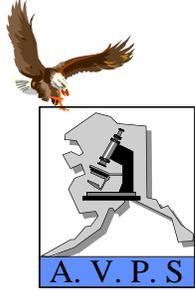
The changes proposed in SB44 reflect a scope of practice that is being safely implemented effectively by Naturopathic physicians in many other states around the country. Health care costs in Alaska are among the highest in the country. I do not have employer subsidized health care, nor do I qualify for a subsidy on the ACA healthcare exchange. As a result, I pay large premiums for sub-standard health insurance. The burden on my family and other families in a similar situation is a drag on our economy for dollars that could be spent more effectively in our state. SB44 is a step in the right direction, providing consumers like me with more options and access to affordable care.

Allowing Naturopathic physicians to do what they are trained for will benefit me, other consumers like me, and the State of Alaska. Driving down health care costs through increased competition and better access to preventative care, only makes sense. Please support SB44. Thank you for taking a step towards better health care in our great State.

Sincerely,

Catherine Straub

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## Alaska Veterinary Pathology Services

Kathy Burek Huntington, DVM, MS, Diplomate ACVP

23834 The Clearing Drive / Eagle River, AK 99577

Work: (907) 242-2566 / Fax: (907) 696-3565

Avps.kbh@gmail.com

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February 20, 2023

Senator Cathy Giessel through jane.conway@akleg.gov

RE: Senate Bill 44

Dear Senator Cathy Giessel

I am writing in support of Senate Bill 44 which will allow licensed Naturopathic Doctors to practice medicine as they were trained to do, including the ability to prescribe medications, and perform minor office procedures including sutures, skin lesion removals, etc. Their training has more than qualified them to do this tasks. My naturopathic doctor, Dr. Wiggins and other providers at Vitae Integrative services have helped me with some of my health much more that "traditional" MDs. They treat the whole person vs one part of their physiology and health, reducing the need to see multiple doctors, which often don't talk to each other. I am surprised and frustrated with their restrictions in Alaska. These limitations negatively affect our community's access to healthcare. Licensed Naturopathic doctors are primary care doctors, however they must refer patients to other healthcare professionals for prescriptive treatments. This results in patients requiring two appointments and increases cost for medical care. Due to limited availability of healthcare providers, patients must often wait long periods before obtaining the prescriptions or care that they require. These issues can be easily be avoided by allowing Naturopathic doctors to practice to the extent of their training and skill through the passage of Senate Bill 44. Dr. Wiggins was previously licensed in Arizona, and performed many office procedures and was able to prescribe medication, all of which she isn't allowed to in AK. Dr. Wiggins' approach to medicine is to use the least invasive and most effective treatment modality for each healthcare concern. Much of the time, this can be provided without the use of medications. However, there are cases in which a prescriptive agent is appropriate treatment, In these cases, her patients should not have to see a separate provider, when Dr. Wiggins in trained, and knowledgeable, and able to provide needed care. Thank you for your support!

Sincerely,

A handwritten signature in black ink that reads "Kathy Burek Huntington".

Kathy Burek Huntington  
DVM, MS, diplomate ACVP

TO: Senator Cathy Geissel  
Re. SB 44

I am writing to urge you to support Senate Bill 44 (SB 44). This bill updates the scope of practice for Naturopathic doctors to reflect their education and training.

The changes proposed in SB 44 reflect a scope of practice that is being practiced safely and effectively by naturopathic doctors in many other states around the country. **This will improve healthcare access and help drive down costs.** In addition:

- **Alaska faces a dire shortage of primary-care providers.** The US Department of Labor recognizes naturopathic doctors as primary-care physicians
- Allowing naturopathic doctors to practice the full scope of their training will immediately increase the number of primary-care providers in Alaska. **This will improve healthcare access and help drive down costs.**
- **The recommended changes reflect the actual training and qualifications of naturopathic doctors**, who graduate from accredited 4-year medical programs with more than 4,000 hours of training and clinical rotations. This training is [on par with that of medical doctors, osteopathic doctors and nurse practitioners](#), including 1200 hours of direct patient contact.
- In Alaska, **naturopathic doctors have a more limited scope of practice than healthcare providers in Alaska with equal or lesser training.** Naturopathic doctors practice safely under the complete scope in many other states — as I have done in Oregon since 2010.
- Allowing naturopathic doctors practice to the full scope of their training **lets patients access their medications from their primary care provider without the need for duplicative appointments and costs.**
- **Alaskans face some of the highest health care costs in the nation, increasing prevalence of chronic and preventable disease, and inadequate access to health care — particularly in rural areas.** Passing SB 44 is one step towards addressing these needs.
- Naturopathic doctors' primary focus is on disease prevention, rather than symptom and medication management. This type of care **saves money for consumers,**

**insurers and the state.** It also decreases the unnecessary ER visits, frequent med checks and follow-up visits.

- Regulating naturopathic doctors appropriately will **encourage more practitioners to move to Alaska** and serve Alaskans. Naturopathic doctors already qualify for [Indian Health Service's](#) national loan repayment program aimed to increase access to remote Alaskans, but are unable to make use of this program due to the currently limited scope of practice.

I have been receiving care from a naturopathic doctor since moving to Juneau in 2003 and my experience has been outstanding! My Naturopath, Dr. Emily Kane, provides me with lifestyle information and resources to help me stay healthy and avoid more expensive care.

Thank you in advance for your support of SB 44, and for taking one step toward better healthcare in our great state.

Sincerely,

Linda E. Kruger  
PO Box 35012  
Juneau AK 99803

cc. Senator Jesse Kiehl



Natural Health  
C E N T E R<sub>LLC</sub>  
COMPASSIONATE CARE CHANGING LIVES

February 18, 2023

Dear Senator Giessel:

I am writing to express my deep appreciation to you for sponsoring Senate Bill 44. SB 44 would allow naturopathic doctors to practice to the full extent of our training and provide patients with access to safe and effective medicine. Alaska is facing a shortage in primary care providers and we are well prepared to fill that role. Additionally, our focus on disease prevention has been proven to cut healthcare costs dramatically.

*My background:*

After graduating with a bachelor of science degree from the University of British Columbia, I attended Bastyr University in Seattle where I earned my naturopathic degree. My clinical rotations included the main Bastyr clinic in Wallingford, the 45th Street Clinic for homeless youth and the Redmond Community Clinic. While attending Bastyr I was taught minor surgery by Thomas Drost, MD, ND, FACS, a surgeon who had decided to further his allopathic medical training by also obtaining a degree in naturopathic medicine.

I am currently co-owner of the Natural Health Center in Anchorage where I have worked since 2001. I primarily serve patients from the Anchorage area and have also provided care for patients in Kodiak in addition to rural areas of Alaska. I have patients who travel to see me from as far north as Utqiagvik and as far south as Ketchikan and everywhere in between. While the majority of the time I am able to care for my patients effectively with non-prescription therapies, there are situations that arise that require additional treatment, such as antibiotics for a urinary tract infection, an epi-pen for allergies, or contraceptive options for a patient who has come in for her annual exam. Being able to write prescriptions for patients would reduce the need for additional medical visits, reduce medical costs, increase efficiency and allow for continuity of care. Over the 21 years I have been practicing medicine in Anchorage, I have often been faced with referring a patient elsewhere, when I could have readily provided the necessary treatment if our scope were broader.

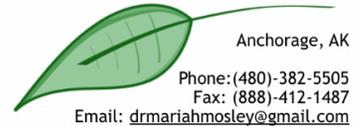
The current restricted scope of practice for naturopathic doctors is a deterrent to providers considering establishing a practice in Alaska. Imagine having the education and training to perform primary care duties and then upon arriving in Alaska part of your valuable toolbox is stripped and left behind.

Expanding our scope of practice to reflect our education and training will only benefit Alaskans and allow better access to comprehensive health care. Thank you for helping naturopathic doctors to provide quality healthcare to our Alaskan patients. Thank you for introducing Senate Bill 44 and for your ongoing support. I urge the Senate to pass SB 44.

Sincerely,

Birgit Lenger, ND

Dr. Mariah Mosley, NMD



February 19th, 2023

To: Senator Cathy Giessel

RE: Support of SB 44

My name is Dr. Mariah Mosley, and I am writing to urge you for support of Senate Bill 44 (SB 44). This bill will update the current scope of practice for licensed naturopathic doctors in Alaska, which will be extremely beneficial to both Alaskans and our overwhelmed healthcare system. This bill supports a more accurate representative of the education of naturopathic doctors, and allows them to practice how they were trained.

Before my family moved to Alaska, I practiced in southern Arizona- in a small family medicine practice where we saw multiple generations of families. From children presenting with acute otitis media (ear infections) and needing to have an antibiotic prescribed, to the young woman requesting oral contraceptives (birth control) to avoid pregnancy before her and her partner are ready, to the farmer who cut his hand while working and needs a few stitches, to the middle aged woman who had her thyroid removed and needs to be prescribed and take thyroid hormone for the rest of her life, I was able to practice good, safe medicine and prescribe when needed, the necessary pharmaceuticals. Here in Alaska, those same patients would have to go to me, and then afterwards make an appointment to go to another facility to obtain the prescription or minor office procedure. This is more time consuming for both the patient and for Alaska's healthcare system, which already has a doctor shortage.

The changes proposed in SB 44 will support Alaska's healthcare system by allowing naturopathic doctors to practice how they were trained, and give the public more options and greater access to affordable care. It will also encourage more providers to move to Alaska with expansion of the scope of practice, and that will relieve even more of the strain on our current healthcare system.

Thank you in advance for your support of SB 44, and for taking the step towards even better healthcare in our beautiful, well-loved state.

Respectfully,

*Dr. Mariah Mosley*

Dr. Mariah Mosley, NMD  
Anchorage, AK  
P: (480) 383-5505  
F: (888) 412-1487



Feb 11, 2023

To Whom It May Concern:

I have lived in Alaska since 1996 and graduated from University of Alaska Anchorage nursing school in 2001. I completed my Nurse practitioner education in 2007. I have provided care for Alaskans for the past 22 years. Over those years my children have received care from naturopathic doctors and I worked in a clinic with naturopathic doctors for the past 16 yrs. I have thoroughly enjoyed and benefited from their care and expertise in all aspects of health.

My patients have always done well and I refer to them in areas of medicine that they have expertise in, as well as general primary care. We have always collaborated and they work well with their medical colleagues. They consult and communicate and get results. Our family of five has needed our share of medicine over the past 20 yrs (cancer, births, surgeries, etc.) The care we receive from naturopathic doctors is fantastic. Their care addresses needs that I am unable to receive from other specialists. I can emphatically say that I am in good health today as a middle aged woman due to their practice of evidence-based medicine.

Naturopathic doctors have medical training and have full scope of practice in other states. In Alaska, we have a shortage of healthcare providers. Nurse practitioners have had independent scope of practice successfully to help meet that need since 1970's. The demand for healthcare is high and more people want preventative and holistic medicine. I implore you to allow naturopathic doctors their full scope of practice (to include prescriptive privilege and minor office procedures) to help meet this need.

Sincerely,

Christine Sagan, APRN, FNP-C  
Owner Vitae Integrative Medical Center  
Cell: 907-441-5568

TO: Senator Cathy Giessel  
RE: Support for Senate Bill 44

Dear Senator Giessel,

My name is Joanie Waller and I thank you for sponsoring Senate Bill 44, which updates the scope of practice for Naturopathic doctors to reflect their education and training.

It is high time that Alaska updates its outdated state laws to the same level as other states and the US Dept of Labor in recognizing Licensed Naturopathic Doctors as primary-care physicians. Their training is on the same level as medical doctors, osteopathic doctors and nurse practitioners, yet current Alaska law prohibits them from working to the full extent of their scope of practice and limits them from providing comprehensive care for their patients.

I have gone to Naturopathic physicians for most of my life and have benefited in many ways from the excellent diagnostic, preventative, and curative methods practiced by these physicians. I believe their profession offers the well-rounded personalized health support that has allowed me to stay healthy into my 60's.

Furthermore, I have had to maintain an alternative MD as my primary care provider in the case that I need an emergency hospital procedure for which my ND is unable to refer. This has become a cumbersome mandate, especially in sharing medical records between each and instructing hospital records departments where to send them, etc. For me, the MD is the alternative, not the other way around.

Alaskans should have access to the practitioner of their choice and Naturopathic Doctors' scope of practice should be allowed to be fully utilized per their training. Why would these practitioners' full licensed scope of practice be curtailed? What patient would understand these limitations? NDs should be allowed to issue vitamins, minerals and non-controlled substance prescription medication and perform minor office procedures as is needed by the patient.

Especially, in this post-covid reality, we need all the primary-care providers we can get!!! Keeping Alaskans healthy can save health care costs, and, especially since our state is so spread out, inviting Naturopaths to practice in remote towns and villages can help do that. Removing the current limitations can encourage new Naturopathic doctors to come to Alaska rather than deter them.

I am passionate about this! It's about time NDs are allowed to fully do what they do best.

Thank you in advance for your sponsoring SB44, and for taking one step toward modernized health care in our great state. Feel free to share my letter with committee members and consider this my testimony in support.

Sincerely,  
Joanie Waller  
323 Third St, Juneau AK 99801



18 February, 2023

Senator Cathy Giessel  
State Capitol Room 427  
Juneau, AK 99801

RE: Support for Senate Bill 44

Dear Senator Giessel,

Thank you for supporting, and sponsoring, Senate Bill 44, which updates the scope of practice for licensed Naturopathic Doctors to reflect their level of training and competency. As such, it allows for prescriptive management and minor office procedures.

As you know, our state is in a medical crisis with a scarcity of medical providers, inadequate to meet the needs of our communities. There are about 50 licensed Naturopathic Doctors in this state whom are qualified, trained, and ready to support Alaskans with their healthcare needs. Senate Bill 44 will help address these needs.

In the current model of care, Naturopathic Doctors must refer patients to other, similarly trained, medical providers for prescriptive needs and minor office procedures. It causes a great deal of frustration to our patients, and causes them to incur additional medical costs. Due to the limited availability of other providers, our patients must wait long periods before they can even be seen for these needs. It is an unnecessary burden to our healthcare infrastructure.

Naturopathic Doctors receive training in clinical pharmacology, commensurate with our NP colleagues whom have much less restrictive scope of practice in our state. We receive more training than PA's whom have much broader scope of practice in our state, with minimal oversight. Currently, I need to refer patients to my PA colleague to write prescriptions for my patients. Ironically, when I practiced medicine in Arizona, I was the physician overseeing the PA's in my office.

In many states, Naturopathic Doctors have prescriptive rights to include scheduled medications. In fact, I practiced in Arizona for many years, and had a DEA number and prescriptive authority, including schedule II (limited) through IV drugs; and was able to perform sutures, IUD removals, administer vaccines, etc. These are necessary tools for primary care providers. We are well- trained to utilize these tools, and our Alaskan patients need us to have the ability to prescribe medications and perform minor office procedures. It will help cushion the overwhelming healthcare burden; and it will prevent our patients from requiring duplicative office appointments to meet their healthcare needs.

It simply makes sense. We are trained, we are capable. There is a need. We can meet that need. It is in the best interest of Alaskans.

Sincerely,

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