

**ALASKA STATE LEGISLATURE**  
**SENATE HEALTH, EDUCATION AND SOCIAL SERVICES STANDING COMMITTEE**

February 13, 2008

1:33 p.m.

**MEMBERS PRESENT**

Senator Bettye Davis, Chair  
Senator Joe Thomas, Vice Chair  
Senator John Cowdery - via teleconference  
Senator Kim Elton  
Senator Fred Dyson

**MEMBERS ABSENT**

All members present

**COMMITTEE CALENDAR**

SENATE BILL NO. 241

"An Act relating to a report to the legislature on teacher preparation, retention, and recruitment by the Board of Regents of the University of Alaska."

MOVED CSSB 241(SED) OUT OF COMMITTEE

SENATE BILL NO. 107

"An Act relating to naturopaths and to naturopathic practice; establishing a Naturopathic Advisory Committee and an Alaska Naturopathic Formulary Council; amending the duties of the State Medical Board and the Board of Pharmacy relating to naturopathic practice; and providing for an effective date."

HEARD AND HELD

SENATE BILL NO. 239

"An Act relating to the practice of dentistry and to dental assistants."

SCHEDULED BUT NOT HEARD

**PREVIOUS COMMITTEE ACTION**

BILL: SB 241

SHORT TITLE: UNIV. REPORT: TEACHER TRAINING/RETENTION

SPONSOR(S): SENATOR(S) STEVENS BY REQUEST OF JT LEG EDUCATION FUNDING TASK FORCE

01/18/08	(S)	READ THE FIRST TIME - REFERRALS
01/18/08	(S)	SED, HES

02/01/08 (S) SED AT 8:00 AM BUTROVICH 205  
 02/01/08 (S) Heard & Held  
 02/01/08 (S) MINUTE(SED)  
 02/06/08 (S) SED RPT CS 3DP 2NR NEW TITLE  
 02/06/08 (S) DP: STEVENS, WILKEN, DAVIS  
 02/06/08 (S) NR: OLSON, HUGGINS  
 02/06/08 (S) SED AT 8:00 AM BUTROVICH 205  
 02/06/08 (S) Moved CSSB 241(SED) Out of Committee  
 02/06/08 (S) MINUTE(SED)  
 02/13/08 (S) HES AT 1:30 PM BUTROVICH 205

BILL: SB 107

SHORT TITLE: NATUROPATHS

SPONSOR(S): SENATOR(S) DAVIS BY REQUEST

03/07/07 (S) READ THE FIRST TIME - REFERRALS  
 03/07/07 (S) L&C, HES, FIN  
 04/19/07 (S) L&C AT 1:30 PM BELTZ 211  
 04/19/07 (S) Heard & Held  
 04/19/07 (S) MINUTE(L&C)  
 01/15/08 (S) L&C AT 1:30 PM BELTZ 211  
 01/15/08 (S) -- MEETING CANCELED --  
 01/17/08 (S) L&C AT 1:30 PM BELTZ 211  
 01/17/08 (S) -- MEETING CANCELED --  
 01/22/08 (S) L&C AT 1:30 PM BELTZ 211  
 01/22/08 (S) Heard & Held  
 01/22/08 (S) MINUTE(L&C)  
 01/25/08 (S) L&C AT 3:00 PM BELTZ 211  
 01/25/08 (S) -- Rescheduled from 01/24/08 --  
 01/28/08 (S) L&C RPT CS 3DP 1NR NEW TITLE  
 01/28/08 (S) DP: ELLIS, DAVIS, HOFFMAN  
 01/28/08 (S) NR: BUNDE  
 02/13/08 (S) HES AT 1:30 PM BUTROVICH 205

**WITNESS REGISTER**

PAT PITNEY, Vice President  
 Budget and Planning  
 University of Alaska Anchorage (UAA)  
 Anchorage, AK

**POSITION STATEMENT:** Presented overview of University of Alaska (UA) educational programs.

CYNTHIA HENRY  
 Board of Regents  
 Chair of Academic Student Services Committee  
 University of Alaska

Fairbanks, AK

**POSITION STATEMENT:** Supported SB 241.

TOM OBERMEYER,  
Staff to Senator Davis  
Alaska State Capitol  
Juneau, AK

**POSITION STATEMENT:** Presented an overview of SB 107.

JENNIFER STRICKLER, Licensing Chief  
Division of Corporations  
Business and Professional Licensing  
Department of Commerce, Community & Economic Development  
Juneau, AK

**POSITION STATEMENT:** Answered questions on SB 107.

DR. MARY MINER, Naturopathic Doctor and Secretary  
Alaska Association of Naturopathic Physicians  
Palmer, AK

**POSITION STATEMENT:** Supported SB 107.

DR. JOHN RASTER  
Alaska State Medical Association  
Juneau, AK

**POSITION STATEMENT:** Opposed SB 107.

DR. EMILY KANE, Naturopathic Doctor  
Juneau, AK

**POSITION STATEMENT:** Supported SB 107.

DR. ALEX MALTER, Internist  
Juneau, AK

**POSITION STATEMENT:** Opposed SB 107.

#### **ACTION NARRATIVE**

**CHAIR BETTYE DAVIS** called the Senate Health, Education and Social Services Standing Committee meeting to order at [1:33:31 PM](#). Present at the call to order Senators Thomas, Elton, and Davis, and Senator Cowdery was on teleconference.

#### **SB 241-UNIV. REPORT: TEACHER TRAINING/RETENTION**

CHAIR DAVIS announced the consideration of SB 241. [The committee was considering CSSB 241(SED).]

[1:34:39 PM](#)

SENATOR STEVENS said SB 241 represents a recommendation from the Joint Legislative Education Funding Task Force (JLEFTF). This bill requests that the University of Alaska Board Of Regents come into closer dialogue with the legislature. This bill specifically asks the Board of Regents to sit down on an annual basis and talk with the legislature whether it's with the health and social services committee or the special education committee and talk about what's going on with teacher education in the state. There are enormous needs for teachers in Alaska and there's a desire to produce as many teachers as possible locally. The bill requires the regents to present a report to the proper committee on the 30<sup>th</sup> legislative day of each session on an annual basis until 2013. After that it would be required every other year.

He said the question arose about whether it was proper or even necessary to put it into statute, but there was a concern that it might be forgotten, especially with different legislators.

[1:37:07 PM](#)

SENATOR DYSON joined the meeting.

SENATOR ELTON said that one of the things discussed is the quality of entering students at the University of Alaska. He asked Senator Stevens how it came to be narrowed down to teacher preparation. He said it would be important to also have a report of the types of high school students that were entering and what kind of challenges are faced by those students.

SENATOR STEVENS said that was beyond the purview of this task force. They were specifically focusing on teacher preparation. He agreed that Senator Elton's concern should be addressed. He said that wasn't something that needs to be known on an annual basis while teacher training does need to be addressed annually.

[1:39:08 PM](#)

SENATOR STEVENS said another request of the task force was to establish a standing committee on education that could be a forum for university oversight.

SENATOR COWDERY asked how the bill will be different from what the university already has. He also asked if other incentive methods for retaining teachers like bonuses had been discussed.

SENATOR STEVENS said this was specifically a recommendation by Senator Wilken who thought the university had plenty of programs to help train teachers but legislators were never brought into

the picture in a systematic way to know what was going on. Therefore, this bill only deals with the university's workforce development in education and the hiring and training of teachers. It does not go beyond that. The whole purpose of this bill is to bring the legislature up to date on an annual basis on what the university is doing in its responsibility to train teachers in Alaska.

1:42:31 PM

PAT PITNEY, Vice President, Budget and Planning, University of Alaska Anchorage (UAA), Anchorage, AK presented an overview of programs. There are Schools of Education in Anchorage, Juneau and Fairbanks. Each school provides programs for their region for on-campus and off-campus needs ranging from baccalaureate programs to master's programs. There was a large transition in teacher education in the early 2000s that shifted away from baccalaureate degree teacher certification to master's degree certification. It has since eased back into additional baccalaureate programs. This has presented a significant change in teacher preparation.

She said the number of graduates produced in Alaska isn't sufficient to meet all the openings, especially in special education, math and science, primarily in the rural communities. In addition to teacher preparation programs there are other activities that the university participates in including the Future Teachers of Alaska which gets younger students interested in teaching as a career; and the Native Educators Student Association at UAS that encourages more Native students into the teaching profession. Other successful programs are the Alaska Teacher Placement Program and the Teacher Mentoring Program in partnership with the Department of Education, which reaches 400 new teachers each year, placing master teachers with new teachers. It has proven very effective in keeping teachers in the profession by providing early support and mentoring.

MS. PITNEY said there has been significant research on Alaska teacher supply and demand through the Institute of Economic Research (ISER). It has answered questions like how many teachers are needed in the state and in what areas, and how the university and other teacher training is filling those needs. Alaska Teacher Placement is particularly instrumental in that area.

She said there is a four-page summary document in the bill packet describing these programs. It is important to have teachers working in Alaska trained here, and the university is

comfortable with the legislature's proposal to have this report be in statute.

[1:48:16 PM](#)

CYNTHIA HENRY, Member, Board of Regents, University of Alaska, and Chair of Academic Student Services Committee, Fairbanks, AK, said she appreciated Senator Steven's summary of the bill. She said the Board of Regents would agree that there's no mission of the state university more important than training teachers for local schools, and closing the gap is a laudable goal. Having teachers who graduated from the University of Alaska talking to their students about the university encourages those same students to pursue their postsecondary education at Alaska's universities. She said the Board of Regents has not considered retention of teachers in much depth. She agreed that the mentor program has a huge influence in this area. She supports the regents' assignment to meet with legislators on this topic once a year with the goal of a readable report.

[1:53:43 PM](#)

SENATOR THOMAS said there are many areas regarding the university that interest legislators, but this is one of the more important ones because it deals with K through 12.

[1:57:28 PM](#)

SENATOR STEVENS said it had been helpful to hear about the wide variety of things the university is involved in. The university and the legislature are in agreement regarding the need for this forum. It's not just about what the regents are doing. It will inform the legislature how it can best help as well.

[1:58:57 PM](#)

SENATOR THOMAS moved to report committee substitute for SB 241 from committee with individual recommendations and accompanying fiscal note(s). Hearing no objections, CSSB 241(SED) moved out of committee.

### **SB 107-NATUROPATHS**

[2:00:44 PM](#)

CHAIR DAVIS announced consideration of SB 107. [The committee was working from CSSB 107(L&C), 25-LS0702\M.]

TOM OBERMEYER, Staff to Senator Davis, sponsor of SB 107, said changes from the original bill for purposes of expanding the scope of practice and regulating naturopathic medicine in Alaska were created in the Senator Labor and Commerce Committee on

January 2008. A task force assigned to study the matter in the 23<sup>rd</sup> legislature failed to produce a report.

This bill establishes required licensing fees and an Alaska Naturopathic Council comprised of five members: two naturopaths, two public members, and one pharmacist appointed by the Board of Pharmacy. This bill authorizes naturopaths to perform the formerly prohibited acts of minor surgery using antiseptics and local anesthetics; and to prescribe drugs by obtaining a prescription endorsement from the Department of Commerce, Community & Economic Development's Division of Corporations, Business and Professional Licensing, after first obtaining a DEA authorization.

This bill also authorizes naturopaths to order laboratory and imaging tests consistent with naturopathic medical education and training. It prohibits major surgery, and spinal and general anesthetics.

Oversight was changed from more rigorous state regulations involving Medical Doctors (MD) and the State Medical Board to largely self-regulation by two naturopaths, one public member and one pharmacist. This change was reportedly due in part to unwillingness by medical doctors and the State Medical Board to oversee the practice for liability reasons, as well as differences in training and ethical responsibilities. It may also reflect the added expense of multiple committees for such a small membership, one of the reasons a formal board was not created and funded initially. The bill does, however, leave open the public member position for an MD willing to volunteer on the Alaska Naturopathic Council.

The advisory committee and formulary council were removed. The advisory committee would have selected the formulary council and reviewed allegations of misconduct. The formulary council would have included a medical doctor or osteopath and pharmacist appointed by their respective boards to approve designated prescription drugs and to authorize prescription endorsements to qualified naturopaths.

[2:02:15 PM](#)

MR. OBERMEYER explained that the Division of Corporations, Business and Professional Licensing, has had full licensing responsibility for licensing and regulating naturopaths in Alaska since 1994. In 2002 Alaska had an estimated 44 licensed naturopaths, several with addresses in other states. About a

dozen have very active practices and view the expanded scope of this bill as recognizing an important natural extension of their training and everyday practice.

The department only licenses naturopaths who have provided satisfactory proof of graduation from one of four accredited on-campus school, of naturopathy in the United States(US). They must also pass the Naturopathic Physicians Licensing Examination. Naturopathic licensing and practice procedures are found in 15 states. Nine allow various levels of prescribing privileges and different levels of independence and supervision by state medical and pharmacy boards, licensing agencies and MDs. A number of states prohibit licensing naturopaths, including Massachusetts and South Carolina. Nevertheless, this bill recognizes the growing interest in naturopathy nationwide. This bill attempts to expand naturopathic scope of practice while providing enough oversight to protect the public.

SENATOR COWDERY said he thought that generally these councils were appointed by the governor. He asked why this bill has the councils appointed by the commission.

[2:06:14 PM](#)

JENNIFER STRICKLER, Licensing Chief, Division of Corporations, Business and Professional Licensing, Department of Commerce, Community & Economic Development (DCCED), Juneau, AK, said that she consulted with the Department of Law (DOL) about appointing the members. DOL said that if it's an advisory council to the department and the department is the regulatory agency there is no constitutional issue. But if this council sets regulations it must be appointed by the governor.

MS. STRICKLER further commented that the bill creates a five-member Alaska Naturopathic Council and expands the scope of practice to allow prescriptive authority and the performance of minor surgery. Her division is responsible for regulation of programs established without a board; naturopathy is one of those programs.

She said her mission is to protect the public by insuring that only safe, competent and qualified practitioners can offer services to Alaskan consumers. Her division is not staffed by industry members, but she has access to practitioners of other health care industries whom she turns to for opinions and guidance. For instance, she said, since licensure was created in 1994, only 44 naturopaths are licensed and 37 have Alaskan addresses. No complaints were filed in FY05; only one complaint

of unlicensed activity was filed in FY06; and no complaints were filed in FY07. Only the fees have changed under the self-sufficiency laws.

MS. STRICKLER said the creation of this council, whether advisory or regulatory, is an expensive proposition. The licensing of naturopaths is under the Centralized Licensing Act in AS 08.01.065 that requires programs to be self-sufficient through licensing fees. Any expenses arising from a council need to be paid for through an increase in naturopathic licensing fees. Currently, this program is staffed by one position that also provides support to nine other programs without licensing boards. The creation of a council will require the need of a staff person to keep the official records as required under the Alaska Procedures Act.

If naturopaths are allowed to expand their scope of practice, she said there will be a need to establish a regulatory oversight entity. The bill currently establishes the Alaska Naturopathic Council within the DCCED under guidance from the governor's office. However, she proposed that this council be established through boards and commissions in the governor's office and not the department. A process already exists to make such appointments and recreating the process within the department would be cumbersome.

MS. STRICKLER had other concerns. The department maintains that it is the industry's responsibility to convince the legislature of the value in expanding the scope of practice. She said that in 2004, the State Medical Board wrote a letter unanimously opposing the expanded practice presented in the bill. Their reasoning was that naturopathic theory and practice are not based on the body of basic knowledge related to health, diseases and health care that has been widely accepted by the scientific community. Moreover, irrespective of its theory, the scope and quality of naturopathic education does not prepare the practitioner to make an adequate diagnosis and provide appropriate treatment.

More alarming is the Medical Board's statement that "the education and training attained by those who practice naturopathy does not prepare them adequately in modern pharmacology nor are they sufficiently trained and skilled to perform surgical procedures." It said naturopaths receive four years of education which consists of two years of didactic training and two years of clinical training. Allopaths and osteopaths typically get 8-12 years of education and training.

Section 5 on page 4 requires 60 hours of education from an approved program to gain prescriptive authority. Physician assistants (PA) are required to have formal training in addition to clinical rotation training for at least a year, similar to medical doctors, before being allowed to prescribe or perform minimally invasive procedures. Advanced nurse practitioners (ANP) are required to have formal training and work under a preceptor to perform minimally invasive procedures. They are required to obtain additional pharmacology hours.

Both PAs and ANPs could originally practice only under an approved collaborative plan with a medical doctor. Veterinarians possess a minimum of eight years of education; their junior surgery training begins in the seventh year of schooling and minor surgery is performed independently once they graduate after eight or more years of schooling. Some choose never to do surgery while others specialize in it. Pharmacology training spans approximately six years of education.

Information from the Commonwealth of Massachusetts Special Commission on Complimentary and Alternative Medical Practitioners Minority Report questions the quality of naturopath education, experience, and efficacy of treatments, accuracy of diagnosis, and the rational basis of their beliefs. The majority report suggested that regulation exclude certain practices such as surgery and prescribing controlled substances. It suggested creating regulations to establish standards for required collaboration between naturopathic doctors and conventional medical doctors.

The writings by Kimble C. Atwood, MD, state "for an occupation with little semblance of objective, scientific and ethical basis, licensure legitimizes an otherwise illegitimate and dangerous activity." Arnold S. Wilman, M.D., who studied the text book of normal medicine used in schools of naturopathic medicine, stated that the text book explains that "naturopathy objects to the use of pharmaceutical agents and depends instead on the use of herbal or natural remedies of unproven value." She said information like this has caused Alaskan regulators to question whether allowing licensed naturopaths to expand their scope of practice to perform minor surgery and be granted prescriptive authority is really in the best interest of Alaskan consumers.

If the legislature wants to expand the scope of practice, she suggested they be allowed to perform under an approved

collaborative relationship plan with a conventional medical doctor.

[2:14:31 PM](#)

CHAIR DAVIS asked if Ms. Strickler would support this bill if the bill incorporated her recommendation.

[2:16:06 PM](#)

MS. STRICKLER answered she has a neutral position other than urging the committee to adopt her suggestion. She would implement what the legislature enacts.

SENATOR DYSON asked if she knew of reports of harm to patients in the last four or five years.

MS. STRICKLER said her investigative unit had no record of complaints or harm.

SENATOR DYSON asked if she would have known of legal or civil actions taken.

MS. STRICKLER answered yes.

SENATOR DYSON asked if this bill has limits for their prescriptive authority.

CHAIR DAVIS answered yes.

MR. OBERMEYER said his understanding is that naturopaths want to prescribe all legend drugs, not narcotics. It was intended that the Board of Pharmacy would deal with this issue.

[2:19:25 PM](#)

SENATOR THOMAS said he was concerned that someone who referenced Dr. Atwood called naturopaths witch doctors. When someone takes that approach, he said he is suspicious of their motivations. He wanted to know what the department's real feelings were on the subject and felt that he needed more direction.

SENATOR DYSON asked if they had heard from the State Medical Board on this issue.

CHAIR DAVIS said not within this session. Three or four years ago an advisory group was established, but nothing came of it. The bill has been introduced several times since then.

SENATOR COWDERY commented that Senator Seekins had a task force on the subject. He asked if there was a definition of "minor surgery."

CHAIR DAVIS replied that the bill didn't have a definition, but she would have a professional address that issue.

[2:23:12 PM](#)

SENATOR ELTON asked if any studies or reports have covered the issue of medical mistakes by naturopaths compared to medical mistakes by other health practitioners.

MS. STRICKLER said she wasn't familiar with any such reports at this time, but she would look into that.

SENATOR COWDERY asked if naturopaths are required to have malpractice insurance.

[2:25:18 PM](#)

MARY MINER, Naturopathic Doctor, Secretary, Alaska Association of Naturopathic Physicians, Palmer, AK, referred the committee to the Legislative Research Report 05.074. that was requested by Representative Kott on complaints against naturopathic doctors and disciplinary actions against licensed physicians in selected states 1997-8. There weren't enough complaints against naturopaths to make an accurate comparison, but it indicated in Arizona, Washington and Oregon, naturopaths had half the disciplinary actions per capita as medical doctors.

She said this isn't novel legislation; naturopaths in other states have had prescriptive authority since approximately 1985. Their record for safety is amazingly good.

Regarding Senator Dyson's question about prescriptive authority, the bill does not provide for unlimited prescriptive authority. The reason for the council is to look at the formularies of other states so it can recommend certain criteria. She said the authority extends by and large to legend drugs, which are non-controlled substances that have a very low potential for abuse or dependency.

[2:30:21 PM](#)

She explained that most of the schools where naturopaths are trained have had the ability to write prescriptions since the mid-80s. She also pointed out that Dr. Atwood's complaints of several years ago were presented in Massachusetts, a state with no licensed naturopaths, and that there is a big difference

between so-called schools that are certificate mills and schools that provide four years of rigorous training.

DR. MINER said she sent Ms. Strickler a head to head comparison of University of Washington Medical School's WAMI (Washington-Alaska-Montana-Idaho Medical School) Program and the Bastyr University's school including the requirements to get into the program. It's easy to see that there are many more similarities than there are differences. All their programs are certified through the US Department of Education which accredits medical schools as well as naturopathic schools. They have been vetted and there is a standard.

She said she has been practicing in Alaska since 1990. The present state of medicine is far more integrative than it was 20 years ago and that trend will continue into the future. It's important for people who are taking responsibility for their own health to have the guidance of someone who has a foot in both worlds. As the doctor shortage becomes worse, it's in the best interest of the public to have well-trained qualified people who can give appropriate treatments for problems like diabetes, infections and heart diseases.

DR. MINER said "There's no data that supports that where this has been done in other states, the public health has been harmed."

[2:35:00 PM](#)

CHAIR DAVIS said this is not the bill's first referral; it came from the Labor and Commerce Committee where no concerns were expressed.

DR. JOHN RASTER, Alaska State Medical Association, Juneau, AK, said that as a private practice physician he appreciates the naturopathic community operating within its realm. They provide good service to many patients, but he objects to the expanded scope of practice in SB 107. He said the board's concerns have been voiced in the past. The two main concerns are access to care and patient safety, and how that relates to the training of naturopaths versus physicians. He said it's true there is a shortage of medical doctors, but neither Medicaid nor Medicare reimburses naturopathic care so he didn't think expanding the scope of practice would significantly augment access to care.

In terms of patient safety and training, the two issues are medical prescription ability for non-controlled substances and surgery. To get a physician's license in Alaska, you have to

have graduated from four years of medical school; naturopaths also need four years. However, a physician has to practice for two years under someone in residency training in order to write a prescription. He said that non-controlled substances can sound innocuous, but they can be problematic because they include drugs like insulin, which if given in too high a dose can kill someone. Non-controlled substances include chemo-therapy for the treatment of cancer. Part of learning how to prescribe medicine is learning pharmacology, a broad education including seeing patients, and being under tutelage.

DR. RASTER said in terms of overall philosophy, medical doctors are pushing more and more towards evidence-based medicine, and naturopathy has generally not been as interested in evidence-based care. All the medications naturopaths are asking to prescribe have to pass muster with evidence-based care because the drugs have to get through the FDA. In order to get through the FDA, there must be evidence that a substance does what it says it's going to do.

Medical school trains doctors to do surgery under the eyes of a trained surgeon, but still a doctor cannot get licensed in Alaska even to do minor surgery without two years of residency training. This bill allows surgery under local anesthesia with significant complications in an office. He noted that physicians are required by state law to carry malpractice insurance.

[2:41:53 PM](#)

SENATOR ELTON asked if Dr. Raster saw any mitigating amendments that could be made to the existing bill that would help the board get beyond some of the concerns raised; for example, having an MD on the board or having a regular board that is appointed by the governor with all the authority of law under the Department of Commerce, or having a naturopath operate under the endorsement of an M.D.

DR. RASTER answered that he knows a little about what is done in other states where naturopaths are licensed, but he wasn't aware of great collaboration existing between the two professions. His main concerns are that the formulary would be decided by a board that would consist of naturopaths. Essentially that could be expanded to include all drugs. Having one physician on the board wouldn't necessarily help. About a half dozen states allow some restricted prescription ability by naturopaths, but only Arizona allows uncontrolled substances. He didn't know their experience. He suggested that a group could be formed to look at that issue rather than relying on his testimony.

[2:44:06 PM](#)

SENATOR DYSON said he's torn on this issue. The two naturopaths who practice in his community have good reputations and a wide following. A number of folks have said they've been helped by naturopaths and he's impressed with that. He also knows medical doctors who have said it's all quackery. At best they do no harm, but people are duped into thinking they're getting good treatment for their particular pathology when actually they're kept from getting to someone who could really help. He also said that a particular demagogue admitted that he had had to eat crow. The New England Journal of Medicine had published an article about the efficacy of a particular compound that naturopaths had been talking about for years and he was forced to admit that, "Darn it they were right."

SENATOR DYSON said he understands that there are so many prescriptive medicines available that there's significant danger of drug interactions. Many carry strong warnings about mixing prescription drugs without the primary physician's knowledge. That concern rings true for him. He noted that previous testimony indicates that AMA members in Alaska have been reluctant to sit on this board or to exercise any oversight for naturopaths.

DR. RASTER replied there was a task force sometime before he became an Alaska AMA board member. He doesn't know what went on, but perhaps Dr. Malter could speak to that.

[2:48:06 PM](#)

SENATOR THOMAS said he too is concerned, but it's also difficult to sort out the fact that tens of thousands of people die each year in hospitals under the care and treatment of medical doctors. He's become accustomed to listening to people in competing situations downgrade the ability, efficacy or reasonableness of the other viewpoint and he tries to sort that out as well.

SENATOR THOMAS said he'd like to see people who are a bit more participatory figure out how to do this. Differences in medical training obviously exist but he hopes the state is able to sort out the differences between the degrees that are granted from various schools. It would be helpful if there were more cooperation to promote what would be good for Alaska. That doesn't necessarily mean a broader approach to medical treatment. It could just mean more availability. This may be an opportunity for people that look at medicine in a different

fashion in the overall efforts to bring effective care into rural areas. The question is how to get doctors to work with naturopaths. He added that there's a shortage of doctors and trained professionals in urban areas but the need is dire in rural areas.

DR. RASTER replied he isn't sure SB 107 is the vehicle to get medical care to rural areas. With respect to collaboration, he refers patients to naturopaths when he has hit brick walls. In terms of cooperation at the state level, there's little data because this doesn't occur in most other states. "We're starting from ground zero." The alternative would be for the naturopathic community to make its training more similar to medical training in order to write prescriptions, perform medical procedures, and have evidence-based studies, mini-residencies and/or surgical training residencies. Historically doctors of osteopathy were separate from medical doctors dealing with spine alignment and non-traditional therapy. They have become more scientific and evidence-based and as a consequence, most people don't notice much difference. If that model were to happen from the bottom up that would seem reasonable. There is certainly a way to move forward if common ground could be found. Bu it's a hard task to create a sort of mini-residency here for 30 naturopaths to become more medicalized.

[2:52:58 PM](#)

SENATOR ELTON noted that his testimony didn't address a naturopath's ability to order and perform diagnostic and imaging tests consistent with their training. He asked if that's an issue with him or the AMA.

DR. RASTER replied it's not as big an issue in terms of doing potential harm. "Delay in diagnosis certainly is a problem, but not as identifiable as cutting a nerve or killing someone with insulin."

SENATOR ELTON recalling previous debates on prescriptive authority, asked what practitioners, other than optometrists, have prescriptive authority now but didn't in the recent past.

DR. RASTER replied that only optometrists come to mind.

SENATOR ELTON asked if midwives have prescriptive authority.

DR. RASTER replied he doesn't have that information, but he doesn't believe so.

CHAIR DAVIS informed members that nurse practitioners have prescriptive authority.

DR. RASTER agreed.

SENATOR ELTON said other testifiers may want to comment on whether or not the expansion of prescriptive authority created medical issues or caused harm to the public.

DR. RASTER suggested there's a lack of data.

[2:55:44 PM](#)

CHAIR DAVIS advised that some 12 or 13 states already do exactly what this bill proposes. Information regarding how the boards are set up should be easy to come by, and she'll make sure the committee has that information before the next hearing.

DR. EMILY KANE, Naturopathic Doctor, Juneau, AK, said she will summarize three areas: education of naturopathic doctors, access to healthcare in general and public safety. She noted that some committee members asked for information comparing disciplinary reports between allopaths and naturopathic doctors in different states as well as comparative training. She distributed a document with those facts.

DR. KANE said SB 107 establishes a five-member council consisting of two naturopaths, one pharmacist, and two public members. One of the public members may be a medical doctor. The intent is to pave the way to better use naturopathic doctors as primary healthcare providers in Alaska. "We are designated primary healthcare providers, and state-based insurance pays for us." Although Medicare and Medicaid don't reimburse for naturopathic services, that is a federal issue that is currently being debated. She estimated that topic will come up on a national level in the next four to eight years.

DR. KANE said that her education is fairly typical of licensed naturopaths in Alaska. To become licensed in this state it's necessary to have graduated from one of the four accredited schools of naturopathic medicine in the US, and an undergraduate degree is a prerequisite for entry. Her undergraduate studies were at Harvard University where she graduated with honors. She pursued a different career for about ten years before entering medical school at Bastyr University. She was in medical school for six years followed by one year of residency training or preceptorship. Part of her residency training included three months in two major teaching hospitals in China. One reason she

went to China is because it isn't easy for naturopathic doctors to find residencies in the US. When she graduated there were about 1,000 licensed naturopaths in the country and now there are about 5,000. During her three-month residency training she had almost 600 patient contacts and she saw lots of pathology. Thereafter, she passed national licensing examinations including 14 clinical and 6 basic science exams. The basic sciences exams are completely comparable to medical doctor basic science examinations. The clinical exams are somewhat different in that there is greater emphasis on dietary and herbal therapeutic training. She had four or five quarters of study in pharmacology and in order to maintain her license in Alaska, she needs 23 hours of continuing education each year. Seven of those hours must be pharmacology continuing credits even though her ability to use pharmacologic agents is limited. Most of the legend drugs, antibiotics and anti-hypertensives, she's interested in being able to offer her patients are not legally available for her to prescribe now, although she maintains current training in those substances.

DR. KANE said that since 1996 she has enjoyed a good relationship with the local hospital and has been on its roster as an allied healthcare provider. Part of maintaining that liaison requires that she carry malpractice insurance so she has standard \$3 million/\$1 million coverage. She surmised that most of her colleagues have similar malpractice coverage. She has never used her insurance. "There is a very, very low incidence of malpractice action against naturopaths." That's one reason her insurance is still affordable.

DR. KANE said that her liaison with the hospital also requires re-credentialing every two years. She has a sponsoring medical doctor and she must prove continuing education and up-to-date malpractice insurance. The hospital reviews the ways she's used the facility. She has diagnostic and admitting privileges, but once a patient is admitted she can't provide therapies. She regularly uses the diagnostic facilities at Bartlett because she doesn't have X-ray or ultrasound equipment in her office.

[3:03:18 PM](#)

DR. KANE noted that Dr. Raster and Dr. Malter are part of her referral base and both have extended good care to her patients. Her interactions with the MD community have been courteous and helpful and her patients have been helped. "What doesn't help my patients is when I could provide service that they need right now that I'm capable of providing and for various reasons they don't follow up on my recommendations, and sometimes they can

come to harm because of that." She related two stories to make the point that some patients prefer using alternative healthcare. In the second circumstance her patient just didn't get around to going to see the regular medical doctor.

[3:07:28 PM](#)

DR. KANE said that SB 107 will give Alaskans instant access to several dozen more fully-trained wellness professionals that are capable of medication management in minor in-office procedures. Her training in minor surgery included removing moles, punch biopsies, removing splinters, and suturing lacerations. She agreed with previous testimony that not all naturopaths will want this extension, but her style is as a primary care doctor, and she'd like to serve her patients in that capacity. SB 107 will help to fill that need.

SENATOR DYSON said he's impressed with her attitude.

SENATOR THOMAS asked if her course of study was required for her degree or was some of it simply what she chose to do.

DR. KANE replied, "I don't think you need to go to an Ivy League college to become a naturopath, but you do need a four-year undergraduate degree." She elected to go to China to get more patient contact. A certain number of patient contacts are requisite in order to complete the clinical portion of the training. Alaska requires naturopaths to pass national licensing exams, and every two years their continuing education certification must be updated. Alaska is the only state in the block of western states including California, Oregon, Washington, Idaho, Arizona, and Colorado that doesn't allow naturopathic doctors to prescribe a limited roster of legend drugs. That does not include narcotics or chemotherapeutics.

SENATOR THOMAS asked if the required undergraduate degree has to be in a relevant field.

DR. KANE said it does not and her undergraduate degree wasn't science based. She went to a community college for two years to get basic sciences before she could enter the graduate program.

[3:11:47 PM](#)

DR. ALEX MALTER, Internist, Juneau, AK, said that several years ago he participated in Senator Seekins' task force as a representative of the medical community. It was formed to find a solution to the same difficult questions that have been raised

here. That legislature didn't think a solution could be fashioned during the 120-day legislative session.

DR. MALTER said he was disappointed that there wasn't a final report, but his observation was that Senator Seekins and others ultimately weren't comfortable crafting the solution that they had originally anticipated. "That was my impression of why we didn't get a report out of that task force."

DR. MALTER explained that the task force looked at some of the curriculum that was to be covered in four-year naturopathic schools. The information came from a text of naturopathic physicians, probably from the preeminent Bastyr University. It lists the scope of practice and types of therapeutics a naturopathic physician may choose including: acupuncture, botanical medicine, clinical nutrition, electro-hydrotherapy, homeopathy, light and air therapy, massage therapy, naturopathic manipulative techniques, psychologies, manipulations, surgery, and use of appropriate pharmacological agents.

DR. MALTER said his concern has been that for an internist, the first two years are in the classroom, the last two years in medical school and the three years of residency training are essentially dedicated to putting together diagnostic and therapeutic techniques and learning to prescribe safely and appropriately. That's five years of on-the-job training before going out to practice. In Alaska it takes at least two years after medical school to get licensed. His concern is that when he looks at the list of therapies that naturopaths are expected to master, he's not sure there's time in the four years to learn how to safely prescribe medicines. Doing 60 hours of pharmacology to get certified by the council as called for in the bill, might sound equivalent to what happens in the first year of medical school, "but it's not the pharmacy classes or Continuing Medical Education(CME) credits that makes you a prescriber." Safe prescribing comes from five years of on on-the-job training under the direct observation of practicing professors.

3:15:56 PM

DR. MALTER agreed with Dr. Kane that in many ways and on many levels there's a good relationship between western allopathic doctors and some of the naturopaths in the state. But it's not realistic to think that the required classroom time plus 60 more hours is sufficient to really learn to safely prescribe. He's wary that the state wants to sign off on a council of five, decreeing what a group of people who might have minimal training

could prescribe. Four years ago when he looked into the issue of residency for naturopaths he understood that the extra year of training after naturopathic school wasn't required.

DR. MALTER suggested that the task force idea was a good idea and a compromise might be to put together another one. As a member of the board of trustees for the state medical association, he assured the committee that the association would be happy to participate as it did previously. He disclosed that he also works for the Department of Health and Social Services (DHSS) as the Medicaid medical director. He clarified that DHSS does not have a position on the bill. His testimony has been personal.

CHAIR DAVIS announced she would hold SB 107 in committee. She wasn't sure a task force was needed but she wants to formulate a plan to move forward if possible.

There being no further business to come before the committee, Chair Davis adjourned the meeting at [3:19:39 PM](#).