

ALASKA STATE LEGISLATURE
SENATE LABOR AND COMMERCE STANDING COMMITTEE

April 3, 2024

1:33 p.m.

MEMBERS PRESENT

Senator Jesse Bjorkman, Chair
Senator Click Bishop, Vice Chair
Senator Elvi Gray-Jackson
Senator Kelly Merrick
Senator Forrest Dunbar

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

SENATE BILL NO. 204

"An Act relating to the issuance of certificates of fitness for plumbers and electricians; relating to fees for certificates of fitness for plumbers and electricians; and providing for an effective date."

- MOVED SB 204 OUT OF COMMITTEE

SENATE BILL NO. 44

"An Act relating to the practice of naturopathy; establishing the Naturopathy Advisory Board; relating to the licensure of naturopaths; relating to disciplinary sanctions for naturopaths; relating to the Department of Commerce, Community, and Economic Development; and providing for an effective date."

- HEARD & HELD

PREVIOUS COMMITTEE ACTION

BILL: SB 204

SHORT TITLE: CERT. OF FITNESS: PLUMBERS/ELECTRICIANS

SPONSOR(S): RULES BY REQUEST OF THE GOVERNOR

01/24/24	(S)	READ THE FIRST TIME - REFERRALS
01/24/24	(S)	L&C, FIN
02/26/24	(S)	L&C AT 1:30 PM BELTZ 105 (TSBldg)
02/26/24	(S)	Heard & Held

02/26/24 (S) MINUTE (L&C)
04/03/24 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)

BILL: SB 44

SHORT TITLE: NATUROPATHS: LICENSING; PRACTICE

SPONSOR(s): GIESSEL BY REQUEST

01/25/23 (S) READ THE FIRST TIME - REFERRALS
01/25/23 (S) HSS, L&C, FIN
02/23/23 (S) HSS AT 3:30 PM BUTROVICH 205
02/23/23 (S) Heard & Held
02/23/23 (S) MINUTE (HSS)
03/07/23 (S) HSS AT 3:30 PM BUTROVICH 205
03/07/23 (S) Moved CSSB 44 (HSS) Out of Committee
03/07/23 (S) MINUTE (HSS)
03/08/23 (S) HSS RPT CS 1DP 4NR SAME TITLE
03/08/23 (S) NR: WILSON, TOBIN, KAUFMAN, DUNBAR
03/08/23 (S) DP: GIESSEL
05/15/23 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)
05/15/23 (S) -- MEETING CANCELED --
03/04/24 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)
03/04/24 (S) <Bill Hearing Canceled>
03/15/24 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)
03/15/24 (S) Heard & Held
03/15/24 (S) MINUTE (L&C)
04/03/24 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)

WITNESS REGISTER

KIM KOLVIG, Legislative Liaison
Department of Labor and Workforce Development (DOLWD)
Juneau, Alaska

POSITION STATEMENT: Gave invited testimony on SB 204.

SCOTT DAMEROW, Chief of Mechanical Inspection
Labor Standards and Safety
Department of Labor and Workforce Development (DOLWD)
Anchorage, Alaska

POSITION STATEMENT: Answered questions on the fiscal note for SB 204.

SENATOR CATHY GIESSEL, District E
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Sponsor of SB 44.

LAURA CULBERSON FARR, Executive Director

American Association of Naturopathic Physicians
Washington, D.C.

POSITION STATEMENT: Gave invited testimony in support of SB 44.

DR. KRISTIN MITCHELL, President Elect
Alaska State Medical Association (ASMA)
Soldotna, Alaska

POSITION STATEMENT: Gave invited testimony in opposition to SB 44.

JOSEPH (JOE) ROTH, MD, representing self
Juneau, Alaska

POSITION STATEMENT: Gave invited testimony in opposition to SB 44.

KATHY GALLARDO, MD, representing self
Juneau, Alaska

POSITION STATEMENT: Gave invited testimony in opposition to SB 44.

JANE CONWAY, Staff
Senator Cathy Giessel
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Gave closing comments on SB.

ACTION NARRATIVE

[1:33:50 PM](#)

CHAIR JESSE BJORKMAN called the Senate Labor and Commerce Standing Committee meeting to order at 1:33 p.m. Present at the call to order were Senators Dunbar, Gray-Jackson, Merrick and Chair Bjorkman. Senator Bishop arrived thereafter.

SB 204-CERT. OF FITNESS: PLUMBERS/ELECTRICIANS

[1:34:41 PM](#)

CHAIR BJORKMAN announced the consideration of SENATE BILL NO. 204 "An Act relating to the issuance of certificates of fitness for plumbers and electricians; relating to fees for certificates of fitness for plumbers and electricians; and providing for an effective date."

[1:35:15 PM](#)

KIM KOLVIG, Legislative Liaison, Department of Labor and Workforce Development (DOLWD), Juneau, Alaska, read a prepared summary of SB 204.

[Original punctuation provided.]

**Hearing for HB 290 & SB 204 -
Certificate of Fitness (COF)
Opening Remarks**

An act relating to the issuance of certificates of fitness for plumbers and electricians; relating to fees for certificates of fitness for plumbers and electricians; and providing for an effective date.

Thank you, Chair Bjorkman and members of the committee.

Legislation changes:

- The legislation before you changes the trainee level certificates of fitness for plumbers and electricians from two years to six years.
 - Currently, if a trainee fails to renew their COF, those hours worked during that lapse will not be counted.
 - The training period is typically accomplished in 4 years.
- Increases the fee for issuance of journeyman level certificates or renewal certificates from \$200 to \$300.
 - The journeyman two-year certificate cost has been in effect since 2006.
 - The fee increase will partially cover the loss in revenue created by the changes to the training level certificate.
- The elimination of the requirement for trainees to apply for and pay for renewals during their training period will expedite the apprenticeship procedure overall.
- And will avoid the difficult situation of having to reject training hours because a certificate of fitness is not valid.
- With me today is the Chief of our Mechanical Inspection Unit, Mr. Scott Damerow, to give a presentation of the Certificate of Fitness (COF) process.

[1:37:32 PM](#)

CHAIR BJORKMAN opened public testimony on SB 204; finding none, he closed public testimony.

[1:38:03 PM](#)

SCOTT DAMEROW, Chief of Mechanical Inspection, Labor Standards and Safety, Department of Labor and Workforce Development (DOLWD), Anchorage, Alaska, said the fiscal notes primarily will result in a decrease of approximately \$58,000 in revenue due to the non-renewal of Certificates [of Fitness] (COF) at the training level, based on a five-year survey. Assuming COF renewal continues at the expected rate, he said DOLWD would lose money and the COF program would be unsustainable. SB 204 includes an increase in fees that would make up for the past seventeen years with no increase in COF application fees and for the decrease in trainee licensing. It would also bring [the COF program budget] more in line with inflationary changes and allow normal business. He said the estimated revenue increase of \$164,000 would result in \$105,000 annual expenditure increase. The expenditures would be used for: increased travel throughout the state for enforcement staff. It would also be used for training education and memberships in national level organizations. He noted that Alaska is secluded from the rest of the U.S. both geographically and code-wise from the lower 48 states. He said more national organization membership and more training would equip [DOLWD certifying personnel] to be recognized industry experts in their areas. He also said the current software database was developed in the 1990's and is in desperate need of updating to increase the level of service to the community and to allow for on-line application, payments and on-line receipt of COFs. He said DOLWD would upgrade equipment and machinery and credit card processing to allow online payment processing. He said the state equipment fleet would receive a large percentage of the fund and explained that DOLWD had 14 vehicles, ten of which were more than ten years old. He said the staff were primarily field workers, spending most of their time in the vehicles. He emphasized the need to upgrade the fleet of vehicles to reduce the number of vehicle breakdowns. He also said funds would be spent to upgrade computers and monitors and infrastructure to support Information Technology (IT) for the Labor Standards and Safety Division.

MR. DAMEROW concluded that the fiscal note was straightforward and mostly reflected a lack of infrastructure spending over the past seventeen years, during which there had been an increase in spending but not in fees.

[1:41:41 PM](#)

SENATOR GRAY-JACKSON referred to the fiscal note from the Department of Labor and Workforce Development, OMB Component Number 346, dated February 29, 2024, noting that it called for one new car per year for the State Equipment Fleet. She asked how many cars the department needs and how they are used.

[1:42:01 PM](#)

MR. DAMEROW answered that the department has 14 vehicles, one assigned to each of the current inspectors with some flexibility for their use. Due to the age of the fleet, the cars suffer significant breakdown, leading to setbacks in conducting field inspections. He said the department does not maintain an excess of vehicles, so when a vehicle is down, an inspector is not in the field. He explained that some of the vehicles are not road-worthy for longer trips, requiring inspectors to switch cars. He said he hoped to standardize the fleet by selecting a single, standard compact SUV, replacing one vehicle per year and allowing for parts and tires to be interchangeable among the vehicles. He noted that this would improve the efficiency of maintaining the fleet and reduce waste of otherwise usable parts and equipment.

[1:43:31 PM](#)

SENATOR GRAY-JACKSON appreciated the clarification.

[1:43:41 PM](#)

CHAIR BJORKMAN solicited the will of the committee.

[1:43:46 PM](#)

SENATOR GRAY-JACKSON moved to report SB 204, work order 33-GS2370\A, from committee with individual recommendations and attached fiscal note(s).

[1:44:05 PM](#)

CHAIR BJORKMAN found no objection and SB 204 was reported from the Senate Labor and Commerce Standing Committee.

[1:44:10 PM](#)

At ease

SB 44-NATUROPATHS: LICENSING; PRACTICE

[1:47:57 PM](#)

CHAIR BJORKMAN reconvened the meeting and announced the consideration of SB 44(HSS) [CSSB 44, Work Order:33-LS0297\S] "An Act relating to the practice of naturopathy; establishing the Naturopathy Advisory Board; relating to the licensure of

naturopaths; relating to disciplinary sanctions for naturopaths; relating to the Department of Commerce, Community, and Economic Development; and providing for an effective date."

[1:48:22 PM](#)

SENATOR CATHY GIESSEL, District E, Alaska State Legislature, Juneau, Alaska, sponsor of SB 44 provided an overview of SB 44. She said SB 44 deals with the practice of Naturopathy and Naturopathic doctors. She said SB 44:

- Modernizes statutes for Naturopaths
- Cleans up outdated language
- Imposes the same public health duties on Naturopaths as other medical providers
- Creates a regulatory board for Naturopaths, which includes a seat for a medical doctor
- Updates scope of practice for Naturopaths that includes limited prescriptive authority, excluding prescriptive authority for controlled substances, such as opioids and testosterone, for example
- Allows minor office procedures
- No more duplicative office visits
- Improved access to care for Alaskans
- More choice for patients

SENATOR GIESSEL said Naturopathy focuses on wellness and the prevention of illness. She noted that approximately 80 percent of healthcare spending is spent on lifestyle choice illnesses such as obesity, hypertension, insulin resistance, etc. and that is the focus of Naturopaths.

[1:50:17 PM](#)

SENATOR GIESSEL said she worked with naturopaths as a clinician and found them very knowledgeable, more knowledgeable than she in physiology. One argument against SB 44 has been that Naturopaths should not be prescribing. She pointed out that Nurse Practitioners (NPs) have had full prescribing rights in Alaska for over 40 years, though Alaska has no residency requirement [for NPs]. She said Physician Assistants (PAs), optometrists and dentists can all prescribe though there are no residency requirements for those professions beyond their initial education program. She said one of the arguments against SB 44 is that Naturopaths should be subject to a residency requirement as are doctors, but, she argued, we are holding naturopaths to a higher standard than most of the prescribers in Alaska.

SENATOR GIESSEL mentioned expanding Telehealth authority and pointed out that practitioners from out of state have the authority to prescribe in Alaska. She emphasized that these Naturopaths live in Alaska; they are our neighbors and the clinicians that residents seek out for health care.

SENATOR GIESSEL noted malpractice insurance costs and characterized malpractice insurance to be an objective measure of the safety of a clinician. She said the cost of a practitioner's malpractice insurance is a reflection of the risk that the insurance company perceives for a specific type of practice. She pointed out that naturopaths have exceedingly low malpractice insurance costs.

SENATOR GIESSEL recalled that Doctors of Osteopathic Medicine (DOs) were the subject of controversy in the past and one argument was that they were not medical doctors and should not be allowed to practice. She pointed out that many are in practice today and often patients don't recognize the difference. She opined that Naturopaths are considered odd people out and they should not be. She concluded that SB 44's purpose was to allow Alaskans to have more [health care] choice, particularly choices based on wellness, lifestyle and how to care for oneself.

[1:54:01 PM](#)

LAURA CULBERSON FARR, Executive Director, American Association of Naturopathic Physicians, Washington, D.C., sought to support SB 44 by offering her experience with other states where NPs have prescribing authority. She quoted written testimony offered by Ms. Pam Ventgen of the Alaska State Medical Association: "The legislature should support and utilize different practitioners in the manner they each are educated and trained in." She concurred with Ms. Ventgen's statement and said naturopathic education and training comprehensively covers pharmacology and prescribing.

[1:55:01 PM](#)

MS. FARR emphasized that the schools for naturopaths must educate graduates to practice in every licensed state, including those that have very broad prescribing authority, including for controlled substances as appropriate in a primary care setting. She noted that SB 44 does not include broad prescribing authority for NDs and emphasized this proposal is not bringing an "experiment" to Alaska. She said every western state that

licenses NDs allows for similar prescribing rights except for Alaska.

MS FARR said conventional medical doctors claim NDs don't receive the same training and that giving NDs prescribing rights would jeopardize public safety, etc. She said these arguments are not grounded in any actual data. She shared data points from statistics where Naturopathic Doctors are prescribing pharmaceuticals every day, safely.

[1:55:47 PM](#)

SENATOR BISHOP arrived.

MS. FARR noted Senator Giessel's reminder that several other providers, dentists, optometrists, NPs in Alaska have prescribing privileges without residency requirements. She said there is evidence that residencies do not equate to safety in prescribing. She referred to a comparison chart of education of several different types of medical providers. She said the sample in the handout is from Washington State and is comparable to Alaska. She noted that NDs have more pharmacology-specific classroom hours than most other professions, more than double the credits. She noted that the professions represented on the chart, without residencies, do practice and prescribe safely.

MS. FARR referred to another comparison chart from Oregon compiled by the government agencies responsible for regulating NDs. She said Oregon has one of the broadest formularies in the country, and the chart compares disciplinary actions between Medical Doctors (MDs), Doctors of Osteopathy (DOs), and NDs. Of the three professions, the percentage of licensees disciplined for prescribing problems is higher for both MDs and DOs than it is for NDs. She said the data for the chart was from the regulatory boards.

MS. FARR confirmed data mentioned by Senator Giessel, that malpractice rates are dramatically lower for naturopathic doctors than for other practitioners, even in states with the broadest prescribing rights. She said there is no better indicator of safety in prescribing than the actuarial data of insurers.

[1:57:29 PM](#)

MS. FARR said SB 44 would help patients by allowing naturopathic doctors to prescribe, reducing the need for duplicate visits, and reducing the cost to the health care system of duplicate visits to allow for prescriptions. She said SB 44 is not about

gaining market share or solving provider shortages in rural communities. She said it is about providing appropriate and timely care for patients.

MS. FARR said she does testify in a number of state legislatures, and she said there is rarely opposition from patients concerned about their safety. She said there is opposition from medical societies affiliated with the AMA, unfortunately. She opined that sharing beliefs that are not tethered to data and statistics is inappropriate. MS. FARR said she supports SB 44 and she encouraged the committee to support it. She urged that as the committee heard other testimony, they would stay grounded in the evidence provided from other regulatory boards in states that have taken this step.

[1:58:57 PM](#)

CHAIR BJORKMAN recounted concern brought up in a previous hearing regarding the prescription and possible overuse of thyroid by naturopathic doctors. He asked whether this occurrence is at a level the industry would deem normal.

[1:59:37 PM](#)

MS. FARR said that [thyroid] is something that naturopathic doctors do prescribe. She said it is a common concern that patients go to naturopathic doctors for. She said prescribing pharmaceutical drugs is not first line of defense for Naturopathic Doctors. She said, of the modalities used, it is the fourth or fifth most common and NDs will turn to other supportive ways to help the body manage symptoms that could be related to thyroid [dysfunction]. In the case when prescription is necessary, naturopaths will prescribe but will do so conservatively. She said she knows this from speaking with a pharmacist in Oregon who has filled hundreds of thousands of prescriptions from NDs. She said prescribing complaints [of NPs] are rare, and complaints around thyroid prescription are infinitesimal if it even exists.

[2:01:32 PM](#)

KRISTIN MITCHELL, President Elect, Alaska State Medical Association (ASMA), Soldotna, Alaska, said she was board certified in internal medicine by the American Board of Internal Medicine, and practiced in Soldotna for 25 years, serving adults with highly complex medical conditions. She said she was faculty at the Alaska WWAMI (Washington, Wyoming, Alaska, Montana, Idaho) Medical School, serving on the admissions committee and clinical faculty and professor at the University of Washington School of Medicine where she taught third year medical students

in their six-week internal medicine rotation and also medical residents. She served on national committees for the American College of Physicians. She expressed appreciation for the opportunity to speak about the scope of practice for NPs in Alaska.

[2:02:39 PM](#)

DR. MITCHELL said she was testifying in her role as President of ASMA and a physician with extensive experience caring for adults [with complex medical conditions] to encourage the committee to oppose SB 44. She said her concern was for patient safety. She said Alaskans deserve excellent, safe, reliable, evidence-based medical care and she said this care is best provided by teams led by a physician. She said physicians have extensive education, skills and training that make them most qualified to exercise advanced clinical responsibilities within teams.

DR. MITCHELL noted previous testimony which discussed the accreditation of Naturopathic schools and said that, while accreditation is an important tool to create a minimum acceptable standard and uniformity across schools, she opined that Naturopathic School standards are not equivalent to standards for physicians. She specifically compared standards of education and training to those of family physicians because the Council on Naturopathic Medical Education (CNME) standards states that the goal of their accredited institutions is to train "primary care/general practice physicians/doctors." CNME is the accrediting body that creates educational standards for the Naturopathic schools. She said there has been some testimony that it is the same body that accredits naturopathic schools as well as medical schools. She opined that the quality of the accreditor does not have a bearing on the scope of practice of individuals trained under the programs. She said the Alaska Family Medicine residency, for example, is accredited by the same agency that accredits Neurosurgery residencies, and no one would claim that Alaska Family Medicine residents should be practicing Neurosurgery if they are not trained to practice Neurosurgery, so the identity of the accreditor does not really bear on this.

[2:04:40 PM](#)

DR. MITCHELL noted that according to the CNME standards, pharmacology is a required academic component of Naturopathic education. She mentioned testimony in the Alaska House of Representatives reporting that the same lectures are delivered to Naturopathic students and to first year medical students. She said while she appreciated her Ph.D. colleagues teaching basic

science courses to many disciplines, first year medical students are not given full prescriptive authority just because they've gotten through a lecture. She said, in medicine, it is the combination of lectures and thousands of hours of supervised clinical practice that make a physician competent to safely prescribe pharmaceuticals. She claimed that it is difficult to produce evidence because many of the accreditation exams are proprietary and the questions are not available for open examination. She said she reviewed the Naturopathic pharmaceutical study guide, and, for context, she said there are 272 medications and vaccines listed in the medications for the elective pharmacology exam that Naturopathic students can elect to take or not to take. She said there are over 32,000 generic medications approved by the FDA, and 55 novel drugs were approved by the FDA in 2023 alone. She said 272 medications is a very small fraction of the medications for which an internal medicine or family medicine physician would be responsible. She noted that the study guide did not include any of the class of proton pump inhibitor medications, acid-blockers that are commonly used in gastric ulcer disease. The study guide does include some unusual extended-spectrum antibiotics that would only be given intravenously in the hospital and it includes some novel cancer therapeutic agents that should not be prescribed by a primary care practitioner of any type. She summarized that those are some of the limitations of the elective pharmacology exam [offered to Naturopath students].

DR. MITCHELL reported another CNME accreditation standard is for Naturopathic students to have 850 hours, fewer than 1,000, "involved in patient care." She noted the students were not necessarily responsible for patient care but may have been observing the care. She said they also must have a minimum of 225 patients for whom they act as the primary student clinician before they are allowed to graduate.

2:07:25 PM

DR. MITCHELL noted there are no residency requirements for NPs. In contrast, she said, medical students have completed 3,000 to 5,000 hours of clinical practice by the time they graduate and are still not able to obtain a license to practice independently. Physicians are required to complete a minimum of two years of residency to be licensed in Alaska. She said the reason for this is the knowledge that additional supervised practice is needed to fully learn and appreciate the full complexity of medicine and how to safely diagnose and treat patients. Family Medicine and Internal Medicine doctors have an additional three years or approximately 10,000 to 12,000 hours

of supervised residency practice prior to becoming independent practitioners. She acknowledged that competency timelines vary from human to human, but she and other residency faculty have concluded that residency students are typically not ready for independent practice until the two to three-year mark has been met.

[2:08:27 PM](#)

DR. MITCHELL said much of this is comparing apples to oranges and the full prescribing authority of the full scope of western pharmaceuticals is an unqualified ask for Naturopathic scope practice and too risky for the Alaskan community.

DR. MITCHELL said, of specific interest to the Labor & Commerce Committee, malpractice implications and insurance coverage, she noted the testimony highlighting low rates of disciplinary action for NPs and said to keep in mind that disciplinary action is reviewed by a board composed of Naturopaths and there is no established standard of care for naturopath practice with which to compare a complaint. If naturopaths were to be granted prescribing authority privileges parallel to those granted by the State of Alaska for licensed medical physicians, she would argue that NPs should also be held to the same standard of malpractice liability as medical physicians. She said most medical physicians carry several millions of dollars in malpractice insurance because of the high risk of medication and other aspects of practice.

DR. MITCHELL mentioned the primary care access shortage and opined that expanding Naturopathic practice would not solve the primary access to care problem. She said Naturopathic care is not recognized by Medicare, Tricare or the Veteran's Administration (VA), and so the populations in Alaska most in need of primary care access would not be covered [by their health care insurance] to see a Naturopath. She noted that according to maps from the American Medical Association (AMA) show that NPs tend to practice in urban areas, places that are already served by physicians and not in areas that are under-served.

[2:10:32 PM](#)

DR. MITCHELL said the practice of medicine is highly complex and she speculated that it would be difficult for a legislator to understand all the issues in depth. She suggested looking outside Alaska for guidance and mentioned that it is completely unlawful to practice Naturopathy in three states, there are 28 states that do not license Naturopaths, and there are only

eleven states that allow any prescribing authority for Naturopaths for pharmaceutical medications. She suggested earlier testimony was misleading with regard to optometrists, for example, prescribing medications comparable to those NPs would be able to prescribe under SB 44. She said Alaska law allows optometrists to prescribe medications appropriate for eye disease, a much more limited scope than what is requested by Naturopaths. She said the state medical association had a series of conversations with the Naturopaths about putting together a limited formulary that would be appropriate for their scope of care and they were not open to a more limited formulary. She opined that while what is requested does not include controlled substances, it does include a very broad formulary with cancer drugs, diabetes drugs and medications that can have significant effects on antibiotic resistance. She said it is misleading to characterize it as a limited formulary just because it doesn't include opioids.

[2:12:24 PM](#)

DR. MITCHELL noted that in the United Kingdom (UK), the National Health Service (NHS) stopped funding homeopathic remedies in 2017 and in Australia, the medical advisory body concluded that homeopathy should not be used to treat health conditions that are chronic or serious or could become serious. She said Alaska's current statute defines Naturopathy and places restrictions that do not allow a person who practices Naturopathy to give, prescribe or recommend in practice a prescription drug, a controlled substance, a poison, engage in surgery or use the word physician in the person's title. She argued that Naturopathic education in the absence of residency training does not make them equal to primary care physicians. She said it would be confusing, misleading and frankly dangerous to pass SB 44, certifying to Alaskan patients and consumers that Naturopath training is sufficient to allow broad prescription of pharmaceutical medications and the practice of minor surgery. She urged the committee to reject SB 44.

[2:13:28 PM](#)

SENATOR DUNBAR referred to the suggestion that Naturopaths would have to carry more malpractice insurance if they are given the full scope of practice of Medical Doctors (MDs). He referred to AS 08.45.045, and said the procedures allowed for Naturopaths seemed to him to be quite different from full surgical abilities. He asked Dr. Mitchell to share her interpretation of the statute.

[2:14:27 PM](#)

DR. MITCHELL said the surgical issues requested in SB 44 are "minor surgery" and she suggested there could be a lot of discussion about the definition of minor surgery. She said in Arizona there is discussion of whether minor surgery includes a Brazilian Butt lift procedure, which she characterized as an involved procedure with a high complication rate. She said in other states, surgical abortion is considered "minor surgery", so there are a lot of surgeries that could be interpreted as minor office procedures because they don't require a hospital to be performed. She said the way SB 44 is written, it includes much more than laceration repair, which is what some of the testimony has suggested NPs would limit their care to.

DR. MITCHELL sought to clarify her remarks about malpractice insurance, and said anyone practicing medicine should be held to the same standard of care. She said NPs are currently held to a Naturopathic standard of care which explicitly says that something that is unusual or unconventional should not be considered malpractice because of the experimental nature of the practice, acknowledging that people try a lot of things that are unconventional. In medicine, there is a standard of care and scientific evidence and a group of peers in the same specialty [determine whether] the practice is standard or not. Naturopaths are judged by a different standard than physicians are for doing the same thing. She gave a hypothetical example in which she, as a physician were to infuse ozone into a patient, she would expect her colleagues to request that she relinquish her license, because that would not be considered standard care. She suggested that for Naturopathic physicians, that might be a reasonable thing to do for a patient. She said she did not intend to suggest that there should be a specific dollar amount of malpractice insurance, but that the judgement of whether an act of practice was judged to be malpractice or not should be judged by the same standard if the prescriptive authority is the same for people with different licenses.

[2:16:50 PM](#)

SENATOR DUNBAR suggested that it might inform the sponsor with a possible path forward for SB 44, suggesting language to provide for uniform standard of care. He referred to AS 08.45.045, Section 3, and quoted "superficial lacerations, abrasions, and lesions and removal of foreign bodies". He said that language, in his view, would not suggest the major surgery she suggested and he further pointed to the next sentence in the statute which explicitly excludes such procedures. He opined the language around surgeries was already "tight". He noted her opinion that the language for prescriptions was not narrow enough and asked

whether there was a level of independent prescriptive authority that she would support.

2:17:56 PM

DR. MITCHELL said a number of physicians from the Alaska State Medical Association (ASMA) and other groups throughout Alaska did meet with a previous iteration of a bill similar to SB 44 and requested from the Naturopaths a list of drugs they thought they would use in order to have a conversation about the list. She reported that the Naturopaths did not provide a list. She said the Naturopaths would have a much better sense of what they [would prescribe] in their practice than a medical doctor would; and so, she said it would be more appropriate for the Naturopaths to come to the physicians with a list of medications that they think they would use and ask to come to agreement about it rather than expecting physicians to understand their practice and say what they could use. She said there are a variety of other states that have some limited formularies [for Naturopaths to prescribe] and that they have reported some problems. She said, from her perspective as a residency trained internal medicine practitioner, she does not think NPS get the education and supervised training and residency experience to be able to prescribe a formulary of pharmaceutical FDA approved medications safely. She said she would be willing to engage in a conversation about a limited formulary but would not propose that at the Senate Committee level. She opined that would be a collaborative discussion between the people who might be prescribing.

2:20:09 PM

JOSEPH (JOE) ROTH, M.D., Juneau, Alaska, representing self, said he was a family physician in Juneau, born and raised in Alaska, a WWAMI graduate and a past Chief of Staff at Bartlett Regional Hospital. He said he opposed SB 44 and he said he did not think Naturopaths had the training necessary to prescribe medicine or perform minor surgeries effectively and safely.

DR. ROTH said, before being allowed to practice medicine in the State of Alaska as a physician, one must complete four years of medical school, followed by at least two years of supervised residency training. During this time residents are directly supervised in how to safely and effectively prescribe medicine along with how to monitor patients for potential side effects. He said residents are also supervised at that time for all surgeries. In contrast, he said, Naturopaths have four years of Naturopathic school and no residency requirement. He said the

elective residencies they do have are inconsistent in their expectations.

[2:21:24 PM](#)

DR. ROTH said, as physicians, we all know that allopathic medicine does not have the answers to how our bodies work. But, he said, physicians do take a scientific approach to how they treat patients and there is a huge field of medicine devoted to research and improving the understanding of how human bodies work. He said that is how we know, for instance, about the placebo effect and that it can account for a positive effect in over 50 percent of outcomes. He said he found Naturopaths to be well-meaning people, but that he and his colleagues had had too many interactions with them when it was clear that they did not adequately and sufficiently understand the science of medicine and, as a result, put patients' health and sometimes lives at risk.

DR. ROTH told about a partner of his who had a patient with a severely compromised immune system due to cancer treatment. He said a Naturopath in Juneau was doing high colonic therapy to try to purge the toxins from the patient's system. He said the Naturopath talked about cleaning built-up plaque and toxic sludge from the wall of the colon. He said he had performed colonoscopies and upper endoscopies and had looked at a lot of colons and had not seen plaque or toxic sludge built up on the wall of the colon with adequate preparation. He said pressurizing the colon can cause bacteria to move through the [intestinal] membrane wall and into the [abdominal] cavity. He said by giving the patient high colonics, the Naturopath was putting the patient at severe risk of becoming septic, going into shock and potentially dying. Luckily, he said, his partner stopped the treatment, and prescribed antibiotics and the patient did require hospitalization. He said the Naturopath did not understand why that was a potential problem.

[2:23:13 PM](#)

DR. ROTH told of another colleague who had a patient that was instructed by a Naturopath to place a slice of onion against their cervix to fight precancerous cervical changes. He said that one of his own patients with a terminal illness had a medicine recommended by a Naturopath based on good scientific evidence, yet that scientific evidence was composed of one person's blog and the resulting commentary on that blog.

[2:23:38 PM](#)

DR. ROTH said his problem with these experiences was not the unconventional therapy, but the lack of what good scientific evidence entails. He explained good scientific evidence means studies that are reproducible by other people with large numbers of subjects involved to have statistical significance.

DR. ROTH related a recent example of a patient who was taking a plethora of vitamins that were prescribed by a Naturopath. He said the Naturopath had done \$1,000 worth of vitamin testing, not based on any clinical findings and treated the patient unnecessarily. When he reviewed the lab results, he found no vitamin deficiencies, though the Naturopath had assured the patient there was something wrong. He said everyone makes mistakes, including himself and he said these mistakes are not the result of human error, rather they are the results of fundamental misunderstanding of the science of human physiology and scientific research. He said SB 44 would create an environment in which medical mistakes are not only overlooked but are allowed to proliferate at an even higher state level.

[2:24:54 PM](#)

SENATOR GRAY-JACKSON asked whether the anecdotal examples presented were from the same person.

[2:25:07 PM](#)

DR. ROTH said the examples referred to different people, some who were no longer practicing Naturopathic medicine in Juneau, and some were still practicing medicine.

[2:25:16 PM](#)

SENATOR GRAY-JACKSON asked how many NPs the examples represented.

[2:25:27 PM](#)

DR. ROTH said he was referring to two, and then four people practicing. He added that one of the other naturopaths said they had no desire to prescribe medicine. He said he had no problem with what they [those who chose not to prescribe medicine] were doing, but with the other two.

[2:25:52 PM](#)

SENATOR GRAY-JACKSON noted that Naturopaths do not have residency requirements and neither do Nurse [Practitioners] (NPs) or Physician's Assistants (PAs). She asked him to share his thoughts about residency requirements.

[2:26:04 PM](#)

DR. ROTH explained that a Nurse Practitioner (NP) has practiced medicine as a nurse, seeing patients and dealing with medications. He said NPs then receive more training in a practice which includes prescribing medication. He opined that they are much more highly trained than naturopaths. He opined PAs do not have the same level of training [as an NP] but they cannot prescribe without a collaborating physician, who is responsible for every single thing they do and for every prescription the PA writes. He concluded that the scope of practice for a PA is much different than for an independently practicing NP.

[2:27:08 PM](#)

SENATOR DUNBAR said his understanding of SB 44 is that it sought to raise the standards [for NPs]. He read from SB 44, Section 11(9), page 10, line 20-21 and asked Dr Roth and Ms. Farr to comment on the examples of practitioners prescribing an onion for cervical cancer or enemas for colorectal cancer. He asked whether that example would be considered malpractice under SB 44.

[2:28:06 PM](#)

DR. ROTH suggested that was what Dr. Mitchell referred to when she questioned who was looking at what the standard of care should be. He opined that if he [as a practicing physician] was doing something that was not considered good medical practice, he would be reprimanded by the State Board of Medicine. He said he didn't know what the board of naturopathic medicine would do. He wondered whether it would be appropriate for naturopaths to police themselves and who would determine the standard. He also opined that it may not be appropriate for physicians [to oversee naturopaths] and said physicians use a different standard. He concluded that he [as a physician] would not be in a position to determine whether naturopaths were appropriately prescribing homeopathic or naturopathic remedies and NPs would probably take umbrage if a physician or physician board said they were going to monitor NP's to see if they were working or prescribing appropriately.

[2:29:23 PM](#)

SENATOR DUNBAR asked whether Ms. Farr could address the question.

[2:29:35 PM](#)

MS. FARR sought to clarify the question.

[2:29:45 PM](#)

SENATOR DUNBAR restated the question. He summarized the examples presented by Dr. Roth and asked whether the treatments described as having been prescribed by naturopaths would have resulted in discipline by the board or a finding of malpractice for the practicing naturopath.

[2:30:07 PM](#)

MS. FARR answered that naturopaths do have standards of care and that they are not fundamentally different from the standards of care of medical doctors. She noted naturopaths may consider modalities of care that are not typically used in [allopathic] medical practices. She said naturopathic medicine has standards of care, a guidance of care developed by a professional association and a code of ethics. She said most of the regulatory boards that she is familiar with refer to those documents. She said the regulatory boards also review disciplinary actions, just as medical boards do, by a panel of peers. She noted that those peers must take every circumstance under consideration, just as a medical board would; and would absolutely discipline a doctor that is considered to be practicing medicine that their naturopathic medicine peers would deem to be outside the standard of care and outside the norm that is taught in Naturopathic Medical School so the processes we use are absolutely the same. She pointed out perhaps the most important thing, that in a court of law the standards are applied in the same way across all medical professions. She said there is not a completely different set of standards for naturopaths.

[2:31:52 PM](#)

SENATOR DUNBAR proposed that SB 44 be amended to hold naturopaths to the same standard of care as other medical professionals, PAs, NPs, medical doctors, and asked whether that would prevent naturopathic doctors from practicing, especially if they were then exposed to malpractice suits.

[2:32:24 PM](#)

MS. FARR said it would depend on the wording of the legislation. She explained that some modalities used by naturopathic doctors are not taught in medical school, for example herbal medicine and botanical medicine and hydrotherapy that are not dangerous therapies and are not typically taught in medical school. She said a peer panel of medical doctors would not be as familiar with those modalities.

[2:33:40 PM](#)

DR. KATHY GALLARDO, MD, Juneau, Alaska, introduced herself and said she was a member of the Alaska State Medical Association (ASMA), American Medical Association (AMA), American Psychiatric Association (APA) and that she is the legislative affairs representative to the APA. She said she has concerns regarding the proposed expansion of Naturopath scope of practice in Alaska and she urged the committee to oppose SB 44.

DR. GALLARDO gave an overview of her extensive education and professional experience in medicine, psychiatry, and medical science. She said the training she received prepared her to function as a physician scientist with granular expertise in medicine and science and able to function at a high level in both worlds, for the benefit of patients. She detailed her medical training and said she has lived and worked extensively across the U.S. and abroad and had the privilege of working with, learning from and referring patients to indigenous, complimentary, alternative, functional, integrative, Eastern and Western medicine trained healers. She said she currently collaborates with and refers liberally to complimentary alternative practitioners where appropriate, aligning with patient values and safety. She expressed appreciation and respect for the variety of approaches, systems and belief related to health and wellbeing.

DR. GALLARDO emphasized the importance of ensuring the highest standards of care and expertise in the health care system. She said the public's trust in [the health care industry's] ability to deliver safe and effective treatments relies heavily on rigorous education, training, and experience of health care providers. She said it is in this context that she sought to highlight the profound differences between allopathic and osteopathic physicians as compared to Naturopaths.

[2:36:05 PM](#)

DR. GALLARDO referred to earlier testimony that allopathic and osteopathic physicians undergo extensive and rigorous education. She said the comprehensive didactic, laboratory, clinical and apprenticeship education and training include a deep understanding of human anatomy, physiology, pharmacology, pathology and the latest evidence-based medical practices. She said physicians training is overseen at every level by independent, not-for-profit regulatory bodies and subject to stringent licensing requirements, ensuring that practitioners meet the highest standards of competence and professionalism throughout their careers.

[2:36:56 PM](#)

DR. GALLARDO said, in contrast, the education and training of Naturopathic doctors differs fundamentally in focus and intent. She said Naturopathic doctors use a variety of interventions such as homeopathy, herbology, nutrition and practitioner-guided detoxification to help people maintain health and well-being. Only those Naturopathic medical schools accredited by the Council on Naturopathic Medical Education (CNME) and recognized by the U.S. Department of Education require four years of post-high school, in-person education at their respective school. However, she said, with emphasis on homeopathy and rejection of science and evidence-based medicine, they lack the same level in rigorous, didactic training in the medical sciences. She said the handful of [Naturopathic] residencies that exist are optional. She said in the allopathic and osteopathic systems, a student may complete medical school, but not yet be eligible to practice medicine. In Alaska, physicians must be licensed to practice medicine and to be licensed, the student must successfully complete two years of internship or residency and then apply and pass a state medical examination. She sought to put this into perspective and said, under SB 44, Naturopathic doctors, after four years of studying Naturopathy, will be able to independently practice, providing prescription drugs, ordering tests, and conducting procedures while at the same time Alaska prevents a medical student receiving an M.D. after four years of rigorous allopathic study would be precluded from the same independent practice. She said looking at the Naturopath examination is telling as to the training received through Naturopathic schools. The national [Naturopathic] exam makes pharmacology an optional part of the test. She queried what that says about the importance of the [subject of pharmacology] in the naturopathic education. She said pharmacology for allopathic or osteopathic doctors is certainly not optional. She said Naturopathic marketing efforts to consumers is frankly deceptive and would lead one to believe that a Naturopaths skill set is equivalent to a physician. She characterized this as not factual, irresponsible, and dangerous. She said, for all the pejorative and demeaning rhetoric coming from the Naturopathic field about allopathic and osteopathic physicians, in addition to a fundamentally contradictory belief system which ignores science, she suggests one must stop to consider why that is. She wondered why a discipline based in homeopathy and herbology and on the theory that diseases can be successfully treated or prevented without the use of drugs, want or need prescribing privileges.

[2:39:25 PM](#)

DR. GALLARDO wondered what training equips Naturopaths for invasive office procedures, which procedures [they would need to perform] and why would they need to perform them.

DR. GALLARDO said internship and residency programs of mainstream medicine are integral to the development of clinical expertise and the safe practice of medicine. In their absence, Naturopathic doctors do not possess the same depth of knowledge or clinical experience necessary to diagnose and manage complex medical conditions safely. Furthermore, she said, the lack of transparency, independent oversight and standardization in Naturopathic education and practice raises concern about patient and consumer safety and quality of care. Without the rigorous training and oversight that allopathic and osteopathic physicians undergo, there is a risk of misdiagnosis, inappropriate treatment, harm to patients and death.

DR. GALLARDO said it is essential to recognize the role of complimentary and alternative perspectives and interventions in the healing arts. Wholistic approaches to health care are very important and include extensive science-based approaches. She said, as physicians, there is respect and support for rational and science-based healing, however it is equally important to ensure these interventions are provided by qualified health care professionals within the bounds of evidence-based medicine and patient safety.

DR. GALLARDO wondered what standard of care Naturopaths would be held to if they are allowed to practice allopathic care in addition to their Naturopathic practice. She noted testimony that Naturopathic training is equivalent to allopathic training and wondered whether Naturopaths would be held to the same standard of care when:

- deciding to write a prescription or not write a prescription
- ordering diagnostic tests and interpreting the results

DR. GALLARDO surmised that, under SB 44 Naturopaths prescribing drugs would be held to the same standard as other Naturopaths. If the claim is that training is equivalent, she proposed that protections to the patient should be equivalent. If Naturopaths object to being held to the same standard of care as primary care MDs, she suggests the legislature should spend time to understand the differences and the way constituents would be protected.

[2:41:37 PM](#)

DR. GALLARDO concluded SB 44 is wrong in both intent and proposed execution. She said the ability of professions to circumvent quality and safety mechanisms to achieve their desire for expanded scope of practice while placing patients at risk, erode our well-delineated and accepted processes. She urged the committee to consider the profound differences in education, training and responsibility between allopathic and osteopathic physicians as compared to Naturopathic doctors. She also asked for consideration of the confusion SB 44 would introduce. She said SB 44 would convey to patients that Naturopaths are equivalent to allopathic and osteopathic doctors which, she said, they are not. The safety and well-being of our citizens should always remain our top priority and we must hold the highest standard of care in our health care system.

[2:44:05 PM](#)

CHAIR BJORKMAN wondered whether there existed reliable data or documentation of compromised patient safety related to or caused by naturopathic care.

CHAIR BJORKMAN also wondered whether there are or could be more conversations around the development of formularies and defined prescribing authority and clearly defined parameters for surgeries or procedures. He commented that the concerns expressed by doctors are valid based on what is reported to be happening in other states. He advocated a collaborative approach to mitigate those concerns as and if SB 44 moves forward.

[2:46:01 PM](#)

SENATOR BISHOP concurred.

[2:46:37 PM](#)

JANE CONWAY, Staff, Senator Cathy Giessel, Alaska State Legislature, Juneau, Alaska, said she had written down the questions that were asked and said that her recollection with regard to developing a formulary was that Senator Kawasaki had had ongoing conversations with a group prior to handing the bill to Senator Giessel. She said the idea of a formulary is that it should not be required of Naturopaths when for decades it has not been required of APRNs in Alaska and wondered why there would be a different standard.

MS. CONWAY noted the testimony regarding education and rules and patient safety and, she suggested, we forget about the patient. She said more and more patients are looking to find the root causes of their illness. They want to find the "why". They want

to do preventative care, how they can eat better, for example, or how to change their lifestyle. She said these are reasons people seek out Naturopaths. She said it is an inconvenience for patients to have to go to the doctor of their choice and be told that they must make an appointment and try to get on the schedule for a primary care doctor to get a simple antibiotic. She said that is not improving access for patients and it creates a double billing for insurance. She said that is not reducing health care costs and it's not providing the best patient choice for the care they are seeking.

[2:49:07 PM](#)

SENATOR BISHOP asked if Ms. Conway was aware of any Naturopaths that share an office with an MD.

[2:49:32 PM](#)

MS. CONWAY said Senator Giessel has spoken to her experience working in an Anchorage office where she worked with MDs and NDs and various other providers and experienced a positive collaborative working situation. She also said there were a couple of Emergency Room doctors who work with Naturopaths frequently and have the utmost respect and confidence in Naturopathic education and service.

[2:50:26 PM](#)

CHAIR BJORKMAN held SB 44 in committee.

[2:50:46 PM](#)

There being no further business to come before the committee, Chair Bjorkman adjourned the Senate Labor and Commerce Standing Committee meeting at 2:50 p.m.