



To: Senate Committee on Public Health & Welfare, Senator Richard Hilderbrand

From: Laura Rues, ND, President of the Kansas Naturopathic Doctors Association,
kansasnaturopathicdoctors@gmail.com | <https://www.kansasnd.org>

Subject: SB274, Amending the scope of practice, discipline by the board, and license renewal procedures for naturopathic doctors

Position: Support

Good Morning Chairman Hilderbrand and other distinguished members of the Public Health & Welfare committee. My name is Laura Rues, I am a licensed naturopathic doctor practicing in Overland Park, KS and president of the Kansas Naturopathic Doctors Association. On behalf of the association, my current and future patients, and as a small business owner, I am here asking for your support of SB 274.

SB 274

This bill includes proposed legislation that seeks to update areas in our current statutes that allow for interpretive confusion, update our disciplinary statutes, and includes scope expansion for naturopathic doctors including prescriptive authority for legend drugs and testosterone.

Naturopathic doctors are in high demand in Kansas, as are all medical providers, and this medical shortage has only worsened over the last two years. The majority of Kansas counties are identified as health professional underserved areas as per the Kansas Department of Health and Environment Health Professional Underserved Areas Report from 2020. Patients are suffering. We regularly see in the news and experience firsthand how hospitals, primary care practices, and specialists are unable to staff their clinics. Kansans, and rural communities, are reaching out for naturopathic medicine to gain access to medical care.

Patients can wait weeks, or more commonly months to get the care they need. An endocrinologist I preferentially refer to is booked out over thirteen months. The current medical system is stressed. COVID is here, physicians and nurses alike are facing burnout. Hospitals are overloaded. But patients still need care. We are asking to be part of the solution.

Naturopathic doctors are licensed to diagnose and treat, we perform physical exams, run lab tests, and treat with interventions to improve health and reduce disease. I am trained to refer when a patient

needs management from a specialist. I am trained to collaborate with medical colleagues when a difficult patient presents (see letters of testimony included). Unfortunately, in Kansas I also must refer when a patient needs a basic prescription medication that I am trained to use and capable of managing. In an already overstrained system, the patient now must find another provider and have a delay in care. This is especially problematic for conditions that require urgency.

I have training in natural therapeutics as well as conventional medical standard of care; I am first and foremost trained in *best patient care*. First Do No Harm. There are instances where the best patient care necessitates pharmaceutical agents. Some examples I have and our members have experienced:

1. A child diagnosed with Streptococcus pharyngitis (“Strep throat”)- Naturopathic doctors are trained that Group A Strep is one of a few causes of “sore throat” for which antibiotic treatment is the first-line intervention. Antibiotics prevent rheumatic fever/rheumatic heart disease, the leading cause of heart disease worldwide. A delay in treatment can have serious consequences.
2. I regularly screen for sexually transmitted diseases. An example problematic case is a young woman diagnosed with chlamydia with routine screening. After diagnosing this disease, contacting the patient with the lab report, and reporting it to the KDHE. I refer her to the nearest walk-in clinic, instructing her to get a prescription for doxycycline, and hoping that she follows my instructions.
3. A patient diagnosed with hypothyroidism. This is one of the most common diseases in the US, basic management is well within the training including medication adjustments as needed. Current wait times for most primary care and endocrinologists are months. So the patient has paid for a visit with their naturopathic doctor, is diagnosed, is recommended a treatment of thyroid medication, and the patient then must wait to receive the recommended care, and pay for two medical visits.
4. A patient needing medication reduction after naturopathic interventions, for example, diabetes. As of 2020 11.1% of Kansans had Type II Diabetes—higher than the national average.¹ Metformin is the most commonly prescribed medication for Type II Diabetes, which naturopathic doctors are trained to manage—this drug may need titration based on how blood sugar control changes with therapeutic exercise and nutritional changes. Lifestyle modifications have been found to be more cost-effective in preventing Type 2 Diabetes compared to Metformin.²³ Tapering off medication is very common when utilizing the lifestyle modifications we prescribe. As we monitor appropriate labs such as fasting glucose and A1c we then need to refer to another provider for a medication adjustment at our recommendation.

I am here asking for your support of SB274 so that naturopathic doctors in Kansas are able to be part of the solution. Kansans need care. We are asking to be able to practice consistent with our training, including limited prescriptive rights so that we can better serve Kansas and alleviate our stressed

¹ <https://www.americashealthrankings.org/explore/annual/measure/Diabetes/state/KS> Published 2021, accessed March 5, 2022.

² Herman WH, Hoerger TJ, Brandle M, etc. The Cost-Effectiveness of Lifestyle Modification or Metformin in Preventing Type 2 Diabetes in Adults with Impaired Glucose Tolerance. *Ann Intern Med* 2005; 142(5): 323-332.

³ Oberg EB, Bradley R, Cooley K, Fritz H, Goldenberg JZ, et al. (2015) Estimated Effects of Whole-system Naturopathic Medicine in Select Chronic Disease Conditions: A Systematic Review. *Altern Integr Med* 4: 192. doi:10.4172/2327-5162.1000192; <http://www.ccnm.edu/research/abstracts/>; and <http://worldnaturopathicfederation.org/naturopathic-research-institutes/>.

healthcare system. We want to expand our ability to provide care for patients when their needs are not currently being met.

As a business owner, I am excited to create jobs in Kansas. We currently have 5 naturopathic doctors and 8 support staff at my clinic. I have goals to expand further west into Kansas, but recruiting and moving further west is quite difficult with the limitations we have. The current statutes in Kansas discourages more NDs to move to this state, which keeps our profession here small, and in extremely high demand. I know that my business can continue to thrive because patients want this type of care, but the current aggressive limitations on practice are driving my colleagues to other states with more expansive scope. I've watched colleagues and employees leave Kansas for other states for this very reason, including our KNDA immediate past president (please see included letters of testimony).

It is strange to me that others will lobby against us, as naturopathic doctors integrate into the current medical system—and health systems are recognizing the value of having naturopathic doctors as part of their care team. Because of the similarities, conventional and naturopathic professions can be efficiently combined in the collaborative process of patient care. Because of the differences, naturopathic doctors can often meet the needs of patients when conventional care cannot. Until recently, the University of Kansas Health System had a naturopathic doctor on staff, and AdventHealth, one of the largest hospital systems in Kansas, currently employs a naturopathic doctor.

Those opposing Kansans' access to naturopathic medicine will likely state that our proposal will create a public safety concern, that our training is inadequate, and that they are the only providers who are capable of delivering safe and proper care. I would like to take a moment to address these concerns.

Background of Naturopathic Medicine in Kansas

Naturopathic doctors (ND) have been practicing naturopathic medicine and regulated by the Board of Healing Arts in Kansas since 2003. ND training is extensive in both natural and pharmaceutical therapeutics. This training provides NDs with the unique ability to recommend appropriate nutrients or herbs alongside medications. (For more information about naturopathic medicine, see Appendix A).

Safety and Efficacy of Naturopathic Medicine

Since initial regulation by the KS Board of Healing Arts in 2003, there have been **zero** board actions against naturopathic doctors involving direct or indirect patient harm. The only incidents have been in regard to issues unrelated to patient care.⁴

The safety record of naturopathic doctors regarding pharmacological substances is well demonstrated—a legal database which records court cases in Washington, Idaho, Alaska, and Oregon, the area of the country with the largest number of naturopathic doctors, shows **no judgments for malpractice against N.D.s since the database was started in 1988 through 2020** (see Appendix B).

⁴<http://www.ksbha.org/boardactions/>

An example state with prescriptive authority, Oregon, recently did a survey of board complaints relative to active licenses (Appendix C). As you can see, NDs have lower rates of board complaints compared to other physicians in that state .

Malpractice rates for naturopathic doctors are almost five times lower than those for conventionally trained medical doctors because insuring an MD is riskier for an insurance company than insuring a naturopathic doctor, due to naturopathic medicine being considered lower risk and safer than conventional physicians. The average annual medical malpractice insurance rate for naturopathic doctors was \$3,802 annually as of January 2017, according to NCMIC, the largest malpractice insurer for naturopathic doctors. By comparison, the average annual rate for conventionally trained MDs was \$18,646.⁵

Few medical therapies are 100% safe for everyone, in all situations. There are 2.7 million serious adverse reactions to legally prescribed prescription drugs each year, resulting in 128,000 deaths.⁶ Naturopathic medicine emphasizes prevention and the self-healing process to treat each person holistically and improve health outcomes.

Numerous research studies of naturopathic treatments for common conditions such as heart disease,⁷ diabetes,⁸ chronic low back pain,⁹ and anxiety¹⁰ have shown that naturopathic medicine is both safe and effective, including in states with full prescriptive rights (see Appendix E) . One study that reviewed the efficacy and cost-effectiveness of integrative medicine estimates that changes in lifestyle and stress reduction – a major focus of naturopathic medicine – could save the US \$10 billion annually in reduced coronary angioplasty procedures and coronary bypass operations alone, and result in an insurance savings of almost \$30,000 per patient. ¹¹

Naturopathic medicine is well-established in the state of Washington, where Naturopathic Doctors serve as primary care providers. A Blue Shield of Washington study found that utilizing Naturopathic Doctors would reduce the cost of treating chronic and stress related illness up to 40 percent and cut costs of specialist utilization by 30 percent. ¹²

⁵ [http://www.naturopathic.org/files/NCMIC%20Letter%20re%20Malpractice%20Risk%201-26-17\(2\).pdf](http://www.naturopathic.org/files/NCMIC%20Letter%20re%20Malpractice%20Risk%201-26-17(2).pdf)

⁶ Light, DW. New prescription drugs: a major health risk with few offsetting advantages. Harvard University Center for Ethics blog. 2014 June 27. Accessed October 24, 2017: <https://ethics.harvard.edu/blog/newprescription-drugs-major-health-risk-few-offsetting-advantages>

⁷ Seely D, Szczurko O, Cooley K, et al. Naturopathic medicine for the prevention of cardiovascular disease: a randomized clinical trial. CMAJ. 2013 Jun 11;185(9):E409-1.

⁸ Oberg EB, Bradley R, Hsu C, Sherman KJ, Catz S, Calabrese C, et al. (2012) Patient-reported experiences with first-time naturopathic care for type-2 diabetes. PLoS One 2012;7:11.

⁹ Szczurko O, Cooley K, Busse JW, et al. Naturopathic care for chronic low back pain: a randomized trial. PLoS One. 2007 Sep 19;2(9):e919.

¹⁰ Cooley K, Szczurko O, Perri D, et al. Naturopathic care for anxiety: a randomized controlled trial. Naturopathic care for anxiety: a randomized controlled trial. PLoS One. 2009 Aug 31;4(8):e6628.

¹¹ Guameri E, Horrigan, BJ, Pechura, CM. 2010. The Efficacy and Cost-Effectiveness of Integrative Medicine: A Review of the Medical and Corporate Literature. Bravewell Collaborative Report. June, 2010

¹² G Henry. 1995. King County Medical Blue Shield Phase I Final Report: Alternative Healthcare Project Steering Committee. August 5, 1995.

Naturopathic Medical Training

Naturopathic medical education is clearly organized a bit differently than that of allopathic and osteopathic medicine - especially in the second two years - but it is no less encompassing or rigorous in its way. It must be emphasized that *naturopathic doctors are differently trained, not insufficiently trained.*

Naturopathic medical training programs are **four-year, in-residence, graduate-level** medical school programs at **accredited naturopathic medicine schools**. Five naturopathic medicine schools in the United States (one with two campuses) and two naturopathic medicine schools in Canada are members of the Association of Accredited Naturopathic Medicine Colleges (AANMC), and have been accredited by one of the regional accrediting agencies approved by the U.S. Department of Education. The naturopathic medical programs of AANMC member schools have also been accredited by the Council on Naturopathic Medical Education (CNME), the recognized accreditor for naturopathic medical programs in North America.

Prerequisites

Like conventional medical schools, naturopathic medicine programs require that applicants meet specified prerequisites. Though the requirements differ slightly from school to school, they all require an **undergraduate degree**; have **minimum GPA requirements**; and have **academic prerequisites**, often encompassing biology, chemistry, physics, algebra, psychology, social sciences, and humanities.

The Curriculum

Licensed Naturopathic Doctors are educated in the same biomedical sciences as MDs. Further, they study holistic and natural approaches with a strong emphasis on disease prevention and optimizing wellness. Naturopathic medicine students learn to treat all aspects of family health and wellness, from pediatrics to geriatrics. Clinical exposure to patients is essential to the education of Naturopathic Doctors – so much so that clinical and hands-on training is introduced during the first and second years of education at several AANMC-member schools.

In both MD and ND schools, the first two years focus on biomedical science, clinical sciences, and diagnostics. In addition to the biomedical and clinical sciences, ND students are trained in:

- Botanical medicine
- Clinical nutrition
- Counseling, including behavioral change
- Homeopathy
- Laboratory & clinical diagnosis
- Minor surgery
- Naturopathic physical medicine
- Nutritional science

Notably, ND students in U.S. naturopathic medical schools average **approximately 1,330 hours of clinical training**.¹³ All ND students attending AANMC member schools receive **over 4,100 contact hours of instruction** over four or more years, including a minimum of 1,200 hours of clinical training.¹⁴

¹³ Sources: AANMC Member Survey 2017

¹⁴ See page 46, Standard VI Sec C.5 of the CNME Handbook of Accreditation for Naturopathic Medicine Programs.

NDs are the most extensively trained provider type in drug-drug, drug-herb, and drug-nutrient interactions - which is significant at a time when increasing numbers of patients are trying to self-medicate with over the counter products.

Comparison of Credit Hours for Medical School Programs	Southwest College of Naturopathic Medicine 1	UMKC School of Medicine (MD) 2	Michigan State University Doctorate in Osteopathy (DO) 3
Basic & Clinical Sciences Anatomy, Physiology, Microbiology, Histology, Pathology, Physiology, Lab Diagnosis, Neuroscience, Cell Biology, Genetics, Public Health, History & Philosophy, and other coursework	84.3	91	93
Clerkships & Therapeutics Family Medicine, Pediatrics, Psychiatry, Radiology, Urology, Rheumatology, Cardiology, Dermatology, Obstetrics, Gynecology, Neurology, Surgery, Cardiology, Emergency Medicine and Clinical Electives	131.3	112	187
Naturopathic Therapeutics Including Botanical Medicine, Traditional Chinese Medicine, Homeopathy, Hydrotherapy, Physiotherapy and Naturopathic Case Management	23.3	0	0
Pharmacology	6	14	2
Therapeutic Nutrition	6	0	0
Counseling	4.7	5	0
Physical Manipulative Therapies	8	0	5
Total Credit Hours of Training⁴:	263.6	222	287

1- Federally and Regionally Accredited Naturopathic Medical School, SCNM Credits adjusted to Semester hours, 2020-2021 Program of Study (www.scnm.edu)

2- University of Missouri at Kansas City, Federally and Regionally Accredited Medical Doctorate School, Medical Doctorate Curriculum (accessed Jan 2021, catalog.umkc.edu)

3-Michigan State University Graduate Professional Program in Osteopathic Medicine, Federally and Regionally Accredited School of Osteopathy (accessed Jan 2021)

4- Semester Adjusted (SCNM scheduled as Trimesters)

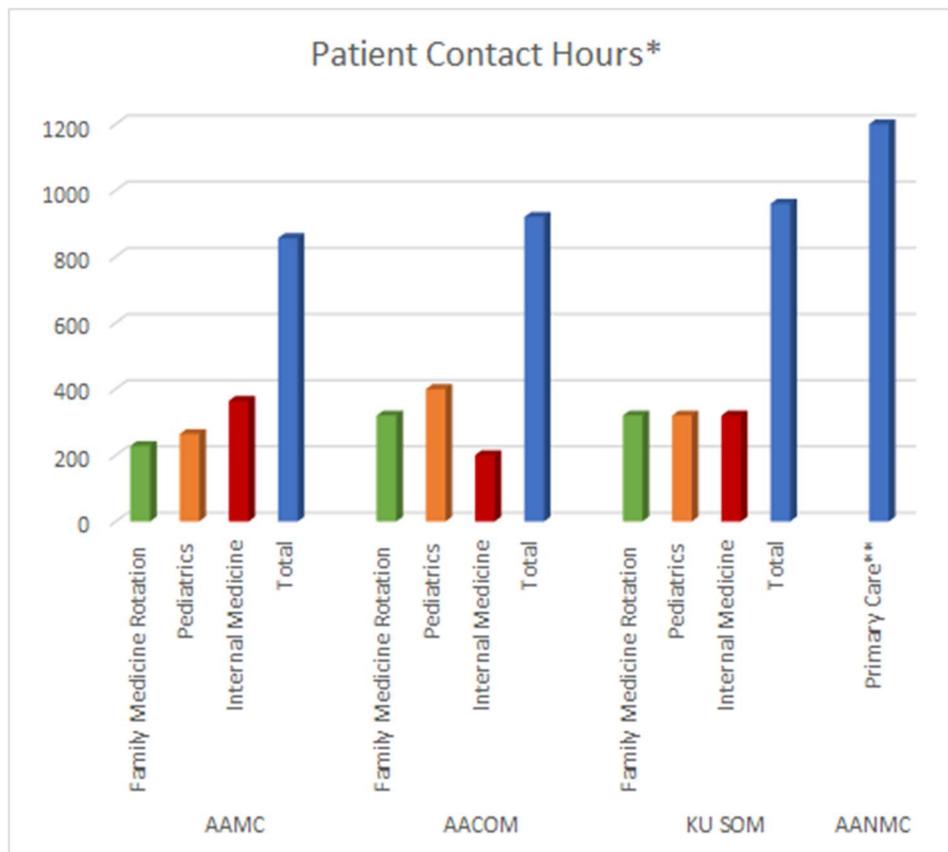
5- SCNM estimated 4410 contact hours, UMKC estimated 3715 contact hours; MSU estimated 4800 contact hours

6- Excluding residency for MD/DO Programs

Patient Interactions

Naturopathic medical programs include extensive patient interaction, far beyond the level of observation which is common in allopathic and osteopathic programs. Third and fourth year ND students are required to complete hands-on clinical training and practice, often at their schools' teaching clinics and off-site clinics, which offer diverse patient populations. Thus, naturopathic medical students graduate prepared to begin practice and to diagnose and treat patients in ambulatory care environments.

During medical school MD and DO students are being exposed to all of the specialties while residencies focus on specialization vs. NDs primary training is general medicine with preparation for practice upon graduation without specialization. As you can see in the table below, ND students get *more* patient contact hours than their counterparts while in their naturopathic medical program, and these contact hours are largely spent managing patient care, not observational.



*Patient Contact hours during clerkships studies in primary care during medical programs. Minimum requirements from the Association of American Medical Colleges (AAMC), American Association of Colleges of Osteopathic Medicine (AACOM), and 2020 curriculum from the KU School of Medicine (KU SOM) compared to the AANMC.

**Primary care includes family medicine, pediatrics, and internal medicine.

National Exam Required

ND school graduates are required to pass a national exam, the NPLEX, administered by the North American Board of Naturopathic Examiners (NABNE), in order to practice medicine in all of the jurisdictions that currently regulate Naturopathic Doctors. The NPLEX is broken into two parts, much like the USMLE exams for MD students; Part I for biomedical sciences and Part II for clinical sciences proficiency (see Appendix D).

Residency

Residency discrepancies are often compared for naturopathic doctors and allopathic or osteopathic counterparts. The naturopathic medical school programs require earlier exposure to clinical patient management in an outpatient setting including patient management. As stated above, allopathic and osteopathic medical students complete clerkships during their respective medical programs as observational. These students are required to complete residencies (in all states except WA and MO) after graduation to gain direct patient management clinical experience and acquire additional specialty knowledge required to sub-specialize and function in acute care inpatient environments. Naturopathic primary training is general medicine with preparation for practice upon graduation without specialization.

We refer to specialists for surgery, colonoscopies, chemotherapy, and other specialty management. We do not manage a patient in-hospital, on a ventilator, administer anesthesia or radiation, run a resuscitation code, perform a c-section, among the many other specialty training that our allopathic and osteopathic counterparts take years learning in residencies to perform.

This is not the issue at hand, nor are we asking for the ability to do this.

Of note, naturopathic residency opportunities, unlike conventional medical residencies, are not required nor funded by the federal government through CMS and the VA. Nonetheless, there are residency opportunities available, and the naturopathic medical community is dedicated to creating more.

Conclusion

I encourage you to read the letters of testimony included in this packet, including letters from physicians, a pharmacist, patients, and other naturopathic doctors including their support of SB274 and frustrations with the current limitations.

I urge you to support SB274 so that naturopathic doctors can be part of the healthcare solution in Kansas. We have the training, the ability, and the desire to provide care for patients in Kansas who struggle to have their current healthcare needs met. With conviction, confidence and passion, and on behalf of the many patients who will be the true beneficiaries, I encourage and implore you to support this legislation.

Appendix A

Naturopathic Medicine Background

Naturopathic medicine is a distinct branch of medicine that emphasizes prevention, patient-centered care, and treating the underlying cause of disease. The doctors who practice naturopathic medicine, called naturopathic doctors (NDs), are trained to serve as primary care general practitioners who are experts in the prevention, diagnosis, management, and treatment of both acute and chronic health conditions.

Naturopathic doctors are guided by **six principles**:

(1) Do No Harm; (2) The Healing Power of Nature; (3) Find the Cause; (4) Treat the Whole Person; (5) Preventive Medicine; and, (6) Doctor as Teacher.

Naturopathic doctors prioritize a **Therapeutic Order** that begins with minimal intervention, promotes the body's inherent self-healing process, and proceeds to higher intervention including prescription medications and specialist referrals, as needed. The practice of naturopathic medicine combines the wisdom of nature and centuries-old medicine with the rigors of modern science and evidence-based research, using modalities including clinical nutrition, homeopathy, botanical medicine, hydrotherapy, traditional Chinese medicine, physical medicine, pharmacology, and counseling. Naturopathic doctors are also able to function within an integrated framework, and be used to complement treatments used by conventionally trained medical doctors. The result is a patient-centered approach that strives to provide the most appropriate treatment for an individual's needs.

For more information on naturopathic medicine, please refer to our professional organization, the American Association of Naturopathic Physicians at www.naturopathic.org

Appendix B



JURY VERDICTS NORTHWEST

JVN/TRACKING THE TRENDS SINCE 1962

13258 1ST Ave South, Ste B, Burien, WA 98168 · (425) 487-9848 · FAX (425) 482-0527

February 27, 2020

Laura Culberson Farr
Executive Director
American Association of Naturopathic Physicians

Dear Ms. Culberson Farr,

Upon reviewing cases contained in Jury Verdicts Northwest's database from 1988 through today, we found only one case involving a naturopathic physician, however, that verdict was in favor of the defense. A new trial was requested but denied by the Court, finding no basis for a new trial, and judgment was entered in favor of the defendants.

We found no cases in the Jury Verdicts Northwest database against Naturopaths for prescription negligence.

If you have any questions, I can be reached at (425) 487-9848.

Sincerely,

Melissa McCann
President

Appendix C

Table: Oregon Comparative Number of Active Physician Licenses and Disciplinary Actions <i>(Updated by VAANP, August 2020)</i>				
Year	Provider Type	Number of Licensees	Number of Disciplinary Actions	% of Providers
2019	MD	15,927	89	0.559
	DO	1,666	11	0.66
	ND	1,086	1	0.092
2018	MD	11,730	88	0.75
	DO	984	8	0.813
	ND	1,054	10	0.949
2017	MD	15,099	92	0.609
	DO	1,428	21	1.471
	ND	1,030	4	0.388
2016	MD	16,266	101	0.621
	DO	1,537	11	0.716
	ND	1,091	6	0.549
2015	MD	16,266	102	0.627
	DO	1,456	15	1.03
	ND	1,010	5	0.495
2014	MD	15,288	79	0.517
	DO	1,295	6	0.463
	ND	985	3	0.305
2013	MD	14,249	82	0.575
	DO	1,168	11	0.942
	ND	936	0	0
TOTALS	MD	88,559	633	
	DO	9,535	83	
	ND	7,192	29	
AVERAGES	MD	76,346	563	0.737
	DO	8,533	12	0.141
	ND	6,390	4	0.063

MD = Medical Doctor; DO = Osteopathic Doctor; ND = Naturopathic Doctor

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

Appendix D

Licensing Examination Comparison

Accredited Naturopathic Medical School		Conventional Medical Schools	
NPLEX-1	Pathology Physiology Anatomy Microbiology and Immunology Biochemistry Genetics	Pathology Physiology Anatomy Microbiology Biochemistry Behavioral science Epidemiology Interdisciplinary topics (nutrition, aging, genetics, immunology, cell biology)	USMLE-1
NPLEX-2	Case-based questions on: Diagnoses (physical exam, clinical findings, laboratory data, imaging) Pathology Botanical medicine Homeopathy Nutrition Physical medicine Health psychology Pharmacology Medical procedures First aid Public health Jurisprudence	Case-based questions on: Diagnoses (interpreting tables/ laboratory data, imaging, photos of gross and microscopic pathologic specimens) Pathology Pharmacotherapy Clinical interventions Mixed management Surveillance for disease recurrence Patient interaction	USMLE-2 CK
NPLEX-2 Practical	Physical exam and diagnosis Acupuncture (optional) Physical manipulation	Case-based practical clinical skills assessment including: History intake, physical exam, diagnosis Telephone encounter	USMLE-2 CS
*OSCE	*Case-based practical examinations of clinic skills are done with OSCEs (Objective Structured Clinical Examinations)	Foundations of independent practice (FIP) Advanced Clinical Medicine (ACM)	USMLE-3

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

<http://www.usmle.org/>

Appendix E

ND Prescribing Rights by State

As regulation of Naturopathic Doctors varies from state to state, so do the laws and regulations regarding prescribing Legend and Scheduled drugs. Sixteen of the 24 jurisdictions licensing NDs allow prescriptive rights, several require supervision to varying degrees.

State	Schedule	Supervised/Independent
Alaska	None	
Arizona	Sch. I-V and Legend Drugs	Independent
California	Sch. III-V and Legend Drugs	Hormones, independent Sch. III-V and Legend Drugs, with supervision
Colorado	Limited	Independent
Connecticut	None	
Hawaii	Sch. III and Legend Drugs	Independent
Idaho	Legend Drugs and Testosterone	Independent
Kansas	None	
Maine	Legend Drugs	Independent, one-year supervision required
Maryland	Limited	Independent
Massachusetts	None	
Minnesota	None	
Montana	Sch. II-V and Legend Drugs	Independent
New Hampshire	Sch. III and Legend Drugs	Independent
New Mexico	Sch. III-V and Legend Drugs	Independent
North Dakota	None	
Oregon	Sch. II-V and Legend Drugs	Independent
Pennsylvania	None	
Puerto Rico	None	Independent
Rhode Island	None	
Utah	Sch. III and Legend Drugs	Independent
Vermont	Sch. II-V and Legend Drugs	Independent, one-year supervision required
Washington	Sch. III-V and Legend Drugs	Independent
Washington D.C.	Legend Drugs and Testosterone	Independent
Wisconsin	Non-narcotic Sch. III Sch IV-V and Legend drugs	Independent

Source: individual state's acts

Appendix F

US DEPARTMENT OF EDUCATION DECISION LETTER

In 2016, the US Department of Education renewed the recognition of the CNME as a nationally recognized accrediting agency with the scope of recognition as “The accreditation and pre-accreditation throughout the United States of graduate-level, four year naturopathic medical education programs leading to the Doctor of Naturopathic Medicine (NMD) or Doctor of Naturopathy (ND).”



UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF POSTSECONDARY EDUCATION

THE ASSISTANT SECRETARY

March 10, 2016

Daniel Seitz
Executive Director
Council on Naturopathic Medical Education
P.O. Box 178
Great Barrington, Massachusetts 01230

Dear Dr. Seitz:

I am writing to inform you of my decision on the renewal of the recognition of the Council on Naturopathic Medical Education (CNME). U.S. Department of Education staff and the National Advisory Committee on Institutional Quality and Integrity (NACIQI) have each made recommendations to me. These recommendations were made under Sections 114 and 496 of the Higher Education Act of 1965, as amended (HEA), and pursuant to relevant statutory and regulatory provisions.

Both the staff and the NACIQI recommended that I renew CNME's recognition for five years.

I am satisfied that accreditation by CNME is a required element in enabling the institutions the agency accredits to establish eligibility to participate in non-HEA federal programs, and I concur with the recommendations of Department staff and of the NACIQI. Accordingly, I renew the Department's recognition of CNME as a nationally recognized accrediting agency with the scope of recognition as detailed below for five years from the date of this letter.

Scope of recognition: The accreditation and preaccreditation throughout the United States of graduate-level, four-year naturopathic medical education programs leading to the Doctor of Naturopathic Medicine (NMD) or Doctor of Naturopathy (ND).

We appreciate the work of CNME to improve the quality and success of U.S. postsecondary education. Feel free to contact me if you have any questions.

Sincerely,

A handwritten signature in blue ink, appearing to read "Lynn B. Mahaffie".

Lynn B. Mahaffie
Deputy Assistant Secretary for
Policy, Planning, and Innovation
Delegated the Duties of Assistant Secretary
for Postsecondary Education

400 MARYLAND AVENUE, S.W., WASHINGTON, DC 20202
www.ed.gov

The Department of Education's mission is to promote student achievement and preparation for global competitiveness by fostering educational excellence and ensuring equal access.

March 3, 2022

RE: SB539/SB274

Chairman Hilderbrand, members of the committee:

My name is Jane Murray, MD and I am a family physician in Overland Park . Thank you for allowing me the opportunity to submit this testimony to you in support of SB539 and SB274. SB539 allows NDs to collaborate with other licensed healthcare providers, while SB274 expands the scope of practice for Naturopathic Doctors in Kansas, enabling them the ability to use more of their education to help the citizens of this state.

I have worked closely with a number of naturopathic doctors over the years, and am very familiar with their breadth of education and knowledge base. I ran an integrative medicine center for over 20 years in Overland Park, with 2 naturopaths directly involved in our practice. I am very familiar with the kind of care given patients by these well-trained and dedicated professionals. They added a great deal to the care of our patients, increasing the scope of options available for healing. Their training includes extensive understanding of botanical medicine, lifestyle and nutrition, the appropriate use of non-prescription supplements, pharmaceuticals, homeopathic remedies, and acupuncture for those with additional training.

I have had close working relationships with many other naturopathic doctors outside my own practice and have referred many patients over the years for their excellent, ethical and professional care in areas where their expertise is far greater than my own.

I have been a physician in Kansas for 35 years. I believe in ND's and what they do. Thank you for allowing me to comment on SB539 and SB274, and I ask that you support ND's as I do, and pass SB539 and SB274 favorably out of committee. I believe these bills will not only help the people of Kansas but will help the medical profession in Kansas by providing Kansans more medical support that is needed in our State. My contact information is below. If you have any questions, please do not hesitate to contact me.

Jane L. Murray, MD
8600 Riley Street
Overland Park, KS 66212
816-830-0040
jmurraymd@sastuncenter.com



March 7, 2022

To Whom It May Concern,

I serve as the medical director for a Naturopathic Doctor and have had the occasion to interact with the Naturopathic profession for the last 13 years. I am very familiar with their level of training and feel that they are competent to serve as primary care providers on their own as well as under the supervision of an MD. The Naturopathic community is well trained to treat common conditions naturally, as well as intervene with conventional medications when it is medically necessary. They are trained to refer to specialists, emergency medicine, or for a second opinion as needed just like any other primary care provider. Naturopathic doctors are able to handle time consuming conditions that are difficult to manage in the conventional system like IBS, type II diabetes, and many other conditions that require dietary and lifestyle changes. In addition, these providers are able to provide extra time and assistance to conditions like chronic cystitis, otitis, or sinusitis rather than repeatedly prescribing antibiotics. They are also trained to know when these conditions have progressed to a level that requires conventional intervention. I support the expansion of scope of practice for ND's as well as the corporate practice of medicine bill that would allow them to collaborate with other providers as they are well trained to do.

Respectfully yours,

Cristyn Watkins, MD

Friday, March 4, 2022

From: Bradley Dyer, DO

To: Members of the Kansas State Legislature, Senate Committee of Public Health & Welfare

RE: SB274

To Whom It May Concern,

Dear Legislators,

Thank you for allowing me the opportunity to submit this testimony in support of SB274.

I have worked collaboratively with numerous naturopathic doctors over the past several years and I can attest to their knowledge and training when it comes to the management of complex chronic disease particularly on ambulatory care, and a range of treatment modalities encompassing pharmacotherapy, nutraceuticals, lifestyle interventions, body medicine, and hands-on treatment methods.

Expanding my practice by adding a naturopathic doctor to my team has allowed our practice to impact so many more lives in Kansas and Missouri. I have learned quite a bit about women's health and environmental medicine with the addition of this physician as it pertains to both natural and pharmaceutical treatment strategies.

As I see it, their four-year medical curriculum is largely in line with traditional MD/DO curriculum. I believe their focus on preventive, integrative, and lifestyle therapies provide a much needed adjunct to standard medications and surgical interventions.

I wish to offer my sincere endorsement of the proposed legislation that would give properly trained Naturopathic Doctors the ability to better serve our Kansas communities.

Sincerely,

Bradley Dyer, DO ABIM, IFMCP

Premier Integrative Health

Friday, March 4, 2022

From: Damon Heybrock, MD

To: Members of the Kansas State Legislature, Senate Committee of Public Health & Welfare

RE: SB274

To Whom It May Concern,

Dear Legislators,

Thank you for allowing me the opportunity to submit this testimony in support of S274.

I have worked collaboratively with naturopathic doctors and I can attest to their knowledge and training particularly on ambulatory care, and a range of treatment modalities encompassing pharmacotherapy, nutraceuticals, lifestyle interventions, body medicine, and hands-on treatment methods.

In collaboration, I have experienced thorough, considerate, passionate, cautious and caring treatment of patients.

To my understanding, their four-year medical curriculum parallels the MD curriculum, and with a focus in preventive, integrative, and lifestyle therapies which are taught as effective adjuncts to standard medications and surgical interventions.

I wish to offer my sincere endorsement of the proposed legislation that would give properly trained Naturopathic Doctors the ability to better serve our Kansas communities.

Sincerely,

A handwritten signature in black ink, appearing to read 'Damon Heybrock', with a long, sweeping horizontal line extending to the right.

Damon Heybrock MD

March 2, 2022

To Whom It May Concern:

In this short letter I would like to strongly endorse the increased scope of practice for Naturopathic Doctors, currently being considered by the Kansas Legislature.

During my 44-year career as a Kansas MD and Family Physician, I have served in many Kansas communities of varying sizes: Minneapolis, Salina, Hays and Wichita.

As a native of Seneca, Kansas, I recall how important it was for our small community to have a fully trained physician available to us in our time of medical need.

Now many of our small towns in Kansas are medically underserved. In the last two decades, there has been a dramatic rise in the incidence of complex chronic illnesses such as obesity, diabetes, heart disease, autoimmune disease, mental illness, and cancer. Added to this burden are the typical acute care issues that must also be cared for, such as minor trauma and acute infections, etc. This also includes the complex issues of the recent Covid pandemic. Together, these important medical needs are all too often going unmet in smaller Kansas communities.

Over the past 10 years or so, I have had the privilege to supervise four very talented and competent Naturopathic Doctors. They have served under my supervision in small and medium sized Kansas communities. To my understanding, their four-year medical curriculum matches the standard MD curriculum, and exceeds it in so much as they are well versed in more integrative, lifestyle therapies which are taught as effective adjuncts to standard medications and surgical interventions. Lifestyle education is sorely needed here in Kansas.

Thank you,

Ronald Hunninghake, MD

KUMC Class of '76



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Hays, KS 67601

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March 5, 2022

The Honorable Richard Hilderbrand
Kansas State Senate
Room 445-S
SW 8th & SW Van Buren
Topeka, KS 66612

Re: Support for Senate Bill No. 274

Dear Senator Hilderbrand,

My name is Jan Gerber. I am a pharmacist in Wichita. I am writing to request your support for Senate Bill No. 274 which would broaden the scope of practice of naturopathic doctors.

My pharmacy, Custom Rx, provides compounded, personalized medicine for patients throughout the state of Kansas. Custom Rx, founded in 2000, is licensed in 46 states and employs 42 people. Many of our Kansas patients we provide personalized medicine for also utilize the services of Kansas licensed naturopathic doctors. My staff and I hear from these patients on a regular basis about the exceptional care they receive from their naturopathic doctor. We also hear their frustrations about their naturopathic doctor not being allowed to prescribe medications for which they know will benefit them.

Naturopathic doctors are experts in the field of lifestyle medicine and preventative care. It is critical in a time of skyrocketing healthcare costs, along with difficult or limited access to a medical practitioner, that these highly educated and skilled practitioners be allowed to practice the type of medicine for which they were trained for. In a time when the entire U.S. healthcare system is under tremendous pressure and strain, expanding the scope of practice for naturopathic doctors and increasing patient options will help improve health outcomes.

I ask you to support SB274 to improve the health care options and outcomes for the citizens of Kansas. Please contact me with any additional questions you may have.

Sincerely,
Jan R. Gerber, R.Ph.
Custom Rx Pharmacy and Wellness Concepts
3510 N. Ridge Rd
Wichita, KS 67205



Aspire Health

March 7, 2022

To Whom It May Concern,

I began practicing in Kansas in 2008 as a Naturopathic Doctor. As an ND, I am trained in Primary Care which means I am trained to diagnose and treat conditions that any other primary care provider would encounter. I am also trained to know when to use conventional medicine rather than a holistic approach. In Kansas, I was able to diagnose conditions using imaging and blood tests. However, there were times that I encountered a condition that required conventional intervention. This caused serious ethical and patient safety concerns. Without being able to prescribe, or legally develop a relationship with a prescriber, I was left in a position that felt unsafe for my patients. For example, I might diagnose Strep Throat, which needs to be treated immediately to avoid serious complications. After the patient paid to see me, paid for testing, and waited for the results, I would then have to tell them to seek care with another provider. This would lead to a delay in treatment, double the expense, increased risk for the patient, and increased suffering. This was exceptionally concerning in my rural outreach practice where the patients were underserved, underinsured, and lacked the funding or resources to see a second provider. As a result, parents of children with severe ear infections, tonsillitis, or other infections that I believed required immediate treatment, were left with no choice but to treat with the wrong therapy or incur emergency room expenses. Adults without insurance simply didn't get care for communicable diseases. Without being able to legally practice with other providers, I felt that I had no choice but to relocate, work in a gray area of the law, or practice in a way that felt unsafe to me. I chose to relocate rather than continue to operate in a way that wasn't consistent with my training or with what I believe is the safe and ethical practice of medicine.

Respectfully yours,

Alicia Johnson, ND

A handwritten signature in black ink, appearing to be 'Alicia Johnson', written in a cursive style.

Jan 21, 2021

To Whom it May Concern,

My name is Stephanie Nichols, NMD. I was a practicing naturopathic doctor in Leawood, Kansas, for approximately one year in 2018. While my time in Kansas seeing patients was fulfilling, I decided to leave the state due to the limited scope and the challenges faced due to this limited scope. When people would come to my office who needed thyroid replacement, antibiotics, or bio-identical hormones, I could not prescribe them despite my extensive training. As a result, they would have to see other doctors, which would cost them more money and they did not get the comprehensive, cohesive care they deserved. I did not feel as though I could practice as a doctor but more as a wellness coach in many cases, which is well below my training.

I am now in private practice in Arizona. Arizona has a wide scope of practice that includes prescriptions, vitamin IVs, joint injections, acupuncture, and more. I find that I can serve my patients more thoroughly and include medications when required, or medication tapering when we work together to heal their bodies and no longer require certain prescriptions.

I am grateful for my time in Kansas, but the care that I can give patients since returning to Arizona has been much more fulfilling both for me and patients. I hope Kansas will reconsider its current restrictive scope so that Naturopathic Doctors can serve patients to their fullest potential.

Dr. Stephanie Nichols NMD

1450 W Guadalupe Rd. Suite 115 Gilbert AZ 85233

P: 480-531-2557 | F: 913-945-1383

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& AESTHETICS

March 7, 2022

Dear Members of the Public Health and Welfare Committee,

My name is Dr. Jacqueline Arnold, ND. I recently moved to Miami County to be near my family who have lived in Miami County since 1973. I was born and raised in Concordia, KS and graduated from Wichita State University with a BSN. Before attending medical school, I was a licensed nurse in Kansas where I worked in a Wichita VA Hospital and have also been an administrator of a home-health agency.

As a naturopathic doctor, I attended a four-year medical school and have been licensed to practice naturopathic medicine in the states of Arizona, Alaska, and Montana. I recently applied for my Kansas naturopathic license, which is pending and look forward to providing medical care to Kansas patients in my home state.

I believe a lifelong career of providing medical care in a variety of venues and my 22 year experience with scope of practice issues in all four states is reflective of why Kansas has only 26 actively licensed naturopathic physicians. After medical school I chose not to return to my home state to provide medical care to Kansans, due to the limitation of the scope of practice existing in Kansas statutes

Kansas naturopathic doctors are a small group at present. Yet in a time of shortage of care providers, additional naturopathic doctors are available to provide supplemental medical care—which is currently prohibited. I urge you to ask—why am I prohibited from managing IV therapies in Kansas, (used by naturopathic doctors in other states), yet I have been giving IV care since I was in nursing school (1970 in critical care).

My training includes a four-year doctorate degree from a recognized medical school. I have been writing prescriptions subject to scheduled drug regulations for over 13 years in Montana. But cannot write ANY prescriptions in Kansas. We can be an important part of caring for Kansans, we are asking for that opportunity.

I urge you to support SB274, the need in Kansans, and expand the scope of practice of naturopathic doctor to encourage others like me to return to Kansas and render needed medical service.

Respectfully,

Dr. Jacque Arnold

Audrey Schenewerk, ND, MS
Kansas City Integrative Health
11791 W 112th St Ste 100
Overland Park, KS 66210
P: 913-214-6536

March 2nd, 2022

Re: Testimony in support of SB 274

To: Senate Committee on Public Health and Welfare

I am Audrey Schenewerk a licensed naturopathic doctor in the state of Kansas, and a licensed naturopathic physician in the state of Montana, for the past four years located in Overland Park, KS. I have previously been licensed as a naturopathic physician in Washington state. During my practice of naturopathic medicine in Washington and Montana I was licensed and able to practice as a primary care physician, this allowed me the opportunity to both diagnose and appropriately treat patients for a variety of acute and chronic health needs. This treatment included using natural therapeutics, prescription medications, minor office procedures, IV therapy, and referrals to specialists whenever necessary. These are all skills that are taught in accredited naturopathic medical schools and reinforced in accredited naturopathic residencies, like the one I completed in Montana and have created in Kansas. Throughout our training we have the opportunity to learn with licensed MD, DO, DC, PAC, NP provider types. Naturopathic residency training is a limited opportunity due to the lack of funds for post-graduate naturopathic medical education.

The majority of our medical schools and residency opportunities are in states with full scope of practice, providing the trainee with hands-on experience managing pharmaceuticals including scheduled substances, additionally, we are the experts in drug-herb and drug-nutrient interactions, ensuring safe and effective prescribing. Today, we are requesting scope expansion to match our medical training with exclusion of all Schedule IV drugs EXCEPT Testosterone, as many of our patients need hormone replacement therapy, an area we have received extensive training.

After many years away from Kansas for education and training I have returned to spend time with my family and join the local naturopathic medical community. However, I have maintained my license in Montana for several reasons, including provide telehealth for Montana patients and maintain the skills I learned in training. I believe that by expanding the scope of practice in Kansas to be consistent with our naturopathic medical training, more naturopathic doctors will return to Kansas and help provide much needed care to the many Kansans who do not have access to ANY medical care which has been magnified in the last two years.

I ask you to support Naturopathic Doctors and SB274. Thank you.

Sincerely,

Audrey Schenewerk, ND, MS
Secretary of Kansas Naturopathic Doctors Association
Board of Directors, American Association of Naturopathic Physicians

March 7, 2022

Re: Naturopathic Scope Expansion
Bill Number: SB274

To Whom It May Concern,

I am writing today to ask for your full support of scope expansion for Naturopathic Doctors in the state of Kansas.

Naturopathic doctors (NDs) are trained as general practitioners who specialize in natural therapies as well as training and a background in conventional care.

Naturopathic doctors are required to have completed undergraduate pre-medicine training, and an additional 4 years of post-graduate naturopathic medical training at one of the U.S. Department of Education accredited schools. Naturopathic doctors are required to pass national board exams, be held accountable to the Board of Healing Arts, maintain malpractice insurance, and are required to take ongoing continuing education to maintain their license.

The naturopathic doctor I am seeing completed pre-med prerequisites and four years of training at a naturopathic medical school accredited by a U.S. Department of Education approved accrediting agency. The training included extensive experience seeing patients in an out-patient clinic while supervised by licensed doctors. This training prepared my naturopathic doctor manage patient care in the outpatient setting, advise on medication recommendations as well as natural therapies, as well as know when to refer to other practitioners as appropriate.

Personally, my life has been completely altered by my ND (Dr. Laura Rues). I was suspected to have an autoimmune condition since I was 18 years old. I spent 18 years there after seeking treatment for a disease I was never diagnosed with, nor taught to manage. I had to make frequent visits and medication adjustments with my MD. I began talking with a nurse at HealthQuest and she recommended I complete some specific testing to confirm or rule out autoimmune disease. When I requested the testing from my MD, she refused asking what difference it would make. When I relayed to the HealthQuest Nurse that my MD refused to do the autoimmune testing, she recommended I see Dr. Rues (ND). Previously, I struggled with my weight since my late teens. Dr. Rues (ND) made specific changes in my diet and lifestyle. Then ordered specific lab testing which confirmed my autoimmune diagnosis. These changes resulted in the loss of 90lbs, plus the stability of my health. Since 2019, when I first visited with Dr. Rues I have maintained the weight loss, reduced my intake of prescription medications, lowered my autoimmune antibodies. Now my life is so much richer because of her treatment. Naturopathic doctors are recognized community resources for medical information regarding drug, nutrient, herb and supplement interactions. In this way they provide a valuable resource for the health and wellness of Kansans.

Prescriptive authority for naturopathic doctors would benefit me because I will have the best of both worlds, a natural medicine approach combined with conservative medication therapy when needed.

Currently, if I need a prescriptive medication at the advisement of my naturopathic doctor, I am required to see another provider, which is a barrier to care as well as an increased cost. Naturopathic doctors are trained, and often review and/or refer me currently for prescription medications when needed, however they are trained and capable of managing these medications. I am asking you to support access to do so, such that I can receive comprehensive and best care.

NDs are comprehensively trained to utilize prescriptive medications when necessary. Other states have had prescriptive authority for NDs years and have benefited greatly, so why not here in Kansas?

I am asking you to give your full support of SB274 for the Expansion of Scope of Practice for Naturopathic Doctors in Kansas. Thank you for your attention to this matter.

Thank you for your service to our state.

Sincerely,

Carissa Dormer

Carissa Dormer

March 6, 2022

Re: Naturopathic Scope Expansion
Bill Number: SB274

To Whom It May Concern,

I am writing today to ask for your full support of scope expansion for Naturopathic Doctors in the state of Kansas.

The naturopathic doctor I am seeing completed pre-med prerequisites and four years of training at a naturopathic medical school accredited by a U.S. Department of Education approved accrediting agency. The training included extensive experience seeing patients in an out-patient clinic while supervised by licensed doctors. This training prepared my naturopathic doctor to manage patient care in the outpatient setting, advise on medication recommendations as well as natural therapies, as well as know when to refer to other practitioners as appropriate.

Naturopathic doctors are recognized community resources for medical information regarding drug, nutrient, herb and supplement interactions. In this way they provide a valuable resource for the health and wellness of Kansans.

Prescriptive authority for naturopathic doctors would benefit me because I will have the best of both worlds, a natural medicine approach combined with conservative medication therapy when needed.

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NDs are comprehensively trained to utilize prescriptive medications when necessary. Other states have had prescriptive authority for NDs years and have benefited greatly, so why not here in Kansas?

I am asking you to give your full support of SB274 for the Expansion of Scope of Practice for Naturopathic Doctors in Kansas. Thank you for your attention to this matter.

Thank you for your service to our state.

Sincerely,

Megan d Kohrs

Megan d Kohrs

March 5, 2022

To: Senate Committee on Public Health & Welfare

Re: SB 274

To Whom It May Concern,

I am a naturopathic doctor currently completing my second year of residency at Kansas City Integrative Health. I am the first naturopathic resident in the state of Kansas, and Kansas City Integrative Health is only the 3rd residency site in the Midwest. I am writing today in support of SB274 which would allow scope expansion for naturopathic doctors.

Residency is a requirement to gain licensure in allopathic medicine, however it is not in naturopathic medicine. Allopathic residencies are set up to train providers in the specialty they decide; naturopathic residencies are meant to support new doctors as they are transitioning into primary care. Residencies in all fields are sought-after positions upon graduation, but due to the lack of funding and support, naturopathic residencies are harder to come by. I chose to apply to a residency to receive continuing education from my supervisors and to support the growth of future doctors such as myself.

I went to Naturopathic Medical School in San Diego, CA, where prescription management is allowed, and we learned to support management of medications for our patients. Upon relocating to Kansas for my residency, I didn't fully understand the implications of a limited scope of practice. My goal as a naturopathic doctor is to choose the best intervention for my patients, which sometimes involves medications. In my 2 years of practice alone I have referred numerous patients to other providers that have the scope to prescribe or manage medications, which in turn directly changes my treatment of said patients. I feel the biggest limitation to providing proper care for my patients is the difficulty of interdisciplinary management.

I urge you to support SB274 to allow naturopathic doctors like myself to provide better overall care to current and future patients.

Katelyn Janssen, ND
Naturopathic Doctor
Kansas City Integrative Health