

MedChi

The Maryland State Medical Society

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TO: The Honorable Peter A. Hammen, Chairman
Members, House Health & Government Operations Committee
The Honorable Nathaniel Oaks

FROM: Joseph A. Schwartz, III
Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman

DATE: February 4, 2014

RE: **OPPOSE** – House Bill 402 – *Health Occupations – State Board of Naturopathic Medicine*

The Maryland State Medical Society (MedChi), which represents more than 8,000 Maryland physicians and their patients, opposes House Bill 402.

House Bill 402 would license the practice of naturopathy in the State, allowing naturopaths to “prevent, diagnose and treat” diseases just as licensed medical doctors do, yet without having completed the 3 to 7 year residency that a physician has. This legislation has been proposed in various forms over the last four or more years, and each time it has been rejected by the General Assembly.

Many medical doctors continue to question the lack of evidence-based science supporting the treatments offered by naturopaths. MedChi is not alone in these concerns. Even the American Cancer Society states that “[a]vailable scientific evidence does not support claims that naturopathic medicine is effective for most health problems.” See www.cancer.org. Other authorities have also called its effectiveness into question. See Exh. 2 and 3 hereto. Moreover, the Maryland courts long ago determined that the acts involved constitute the practice of medicine, reserved to a licensed physician. See Atchison v. State, 204 Md. 538, 105 A.2d 495, *cert. denied*, 348 U.S. 880 (1954).

Despite these concerns and in response to Health & Government Operations Chairman Peter Hammen’s request, MedChi clearly stated in a December 5, 2012 letter its concerns with this legislation and laid out reasonable changes to the bill that would remove MedChi’s objections. See Exh. 1 hereto. However, several of these concerns remain, as follows:

1. Scope of practice is too broad. The bill would allow naturopaths to “prevent, diagnose and treat” human health conditions” (P.6, line 15), perform “minor office procedures”, and order and interpret laboratory and diagnostic images (pp.14-15). These all constitute the practice of medicine and should only be performed by a medical doctor who has completed a residency. The naturopathic scope should be limited to that recommended by the Board of Physicians in its October 31, 2013 Report, which in summary included:
 - a. Dispensing, ordering and administering natural medicines and the like via oral, nasal and auricular administration;
 - b. Administering hydrotherapy and performing therapeutic exercise;
 - c. Health education and counseling; and
 - d. Performing naturopathic musculoskeletal mobilization.
2. The Practice Should Be Governed by the Board of Physicians. In 2013, the advocates of this measure supported being governed by a Naturopathic Advisory Committee within the Board of Physicians, but now seek an independent board. MedChi believes the appropriate method for oversight is within the Board of Physicians, as is the case in the District of Columbia. It is clear from the proposed legislation that much of what the naturopaths ultimately seek to do is the practice of medicine, and as such there should be oversight by those licensed to practice medicine in the State. Even with the limited scope recommended by the Board of Physicians, MedChi believes this oversight is imperative to ensure that traditional medicine is not practiced by those who are not licensed as medical doctors and that public safety is ensured.
3. Naturopaths should not be called “physicians” or “medical doctors.” MedChi remains firm in its position that allowing the use of the term “physician” by naturopaths will create confusion and unclear expectations on behalf of the public. In the ever-expanding world of health care, the term “physician” and “medical doctor” should be reserved to those individuals licensed under Title 14 of the Health Occupations Article. The following terms should be prohibited from use by anyone licensed as a naturopath: “Physician”, “Naturopathic Medical Doctor”, “N.M.D” or “NMD”, as is the case in Colorado.
4. Collaboration. In 2013, the legislation included a requirement of a written attestation stating that the applicant will refer patients to physicians and other providers as needed, and that patients of naturopaths will sign a consent form evidencing that they understand the role of the naturopath. This requirement is absent here, although

MedChi has been advised an amendment is forthcoming. This requirement is essential.

5. Standard of Care. The standard for discipline set out in the bill (See page 20, line 15) does little for public safety. Requiring that a naturopath “grossly or repeatedly commit malpractice”, and basing action on the judgment of a “reasonably prudent” naturopath is not in accord with many other practice acts in MD or with naturopath statutes in other states. Other professions like doctors and nurses are judged on the accepted standards of practice borne out in evidence-based studies and practice. The same should be true for naturopaths.

In sum, MedChi has spent considerable time and effort and gone directly against the considered opinion of some of its members in setting out a structure under which naturopathy might be legalized in Maryland. Our organization has worked with other health professions with respect to licensure, and consistent with our approach in those instances, has been reasonable and deliberative in its approach here. However, we have reached our final position with respect to this legislation. Simply put, it is the Legislature’s decision on how to proceed and MedChi respects that judgment, but if this legislation is not amended to conform to the principles outlined, MedChi will continue to oppose it.

For more information call:

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