

Federation of Naturopathic Medicine Regulatory Authorities

Letter of Support for Regulation of the Practice of Naturopathic Medicine in Virginia

August 7, 2020

Dear Members of the Virginia Board of Health Professions Regulatory Research Committee,

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

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

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

Risk of Harm to Consumers:

The Virginia BHP has identified seven criteria to evaluate if a health profession requires licensure. The FNMRA will address the primary criterion of Risk of Harm to the Consumer.

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

Risk of Harm to Consumers: (cont.)

Regulation of naturopathic doctors provides consumer protections against harmful behavior

Risk of Harm can be objectively demonstrated by the number of disciplinary actions taken against licensed NDs in currently regulated states. Naturopathic doctors have fewer disciplinary actions taken against them compared to MDs and DOs (see addendum A). Anytime a consumer enters into a doctor-patient relationship, there is an inherent power imbalance that places the patient at risk of harm. Regulation helps to minimize the risk of harm

The FNMRA has tallied the number of disciplinary actions taken the U.S. against licensed naturopathic doctors from 2010 to August 2020 (see Addendum B). The disciplinary actions are grouped by type. For example, "Physician acts that (directly) harm patients physically or emotionally". This category includes sexual boundary violations. It is essential for a regulatory structure to be in place so that patients can file complaints of sexual violations. Although disciplinary actions of this type are rare, in the last 10 years there has been only 12 licensed NDs disciplined for sexual boundary violations, out of an estimated 6,000 active licensees (0.2 % of licensed NDs). This is consistent with the percentage of sexual boundary violations by MDs. ¹

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

• Regulation provides consumer protection against lay naturopaths

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

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

In Conclusion:

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

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

We thank you for the opportunity to share our comments and hope this information, and any future dialogue between the Federation of Naturopathic Medicine Regulatory Authorities and the Virginia Board of Health Professions, will lead to the establishment of regulations that promote the safe practice of naturopathic medicine.

If you have any questions, please call me at 503-244-7189 or email me at ShannonBraden@fnmra.org.

Sincerely,

Shannon Braden, ND

Program Director FNMRA

Addendum A

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

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

 $\textbf{REFERENCES:} \qquad \text{http://www.oregon.gov/omb/board/Pages/Board-Actions.aspx}$

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

Addendum B – page 1

Disciplinary Actions Taken by States from 2010 to July 2020 Physician Acts Related to the Administration of Naturopathic Medical Practice

	Disciplinary Actions taken by States from 2010 to July 2020										
	PHYSICIAN A	PHYSICIAN ACTS RELATED TO THE ADMINISTRATION OF A NATUROPATHIC MEDICINE PRACTICE									
	Practicing without a	Providing false information to obtain or maintain a license (e.g. failure to disclose information on	Using false or misleading advertising, or misrepresen ting	Engaging in discriminatory behavior regarding which patients are seen or how they are	Failing to obtain appropriate patient consent to examine or	keeping	Engaging in fraudulent insurance/bill ing procedures and/or financially exploiting	Breaching patient confidentialit		Failing to report disciplinary action in another	Failing to meet CE
State	license	renewal)	credentials	treated	treat	standards	patients	У	action	jurisdiction	requirements
Alaska											
Arizona	1		1			3			1	1	5
California											
Colorado	1										
Connecticut											
Dist. of Columbia											
Hawaii			1								
Kansas											1
Maine											
Maryland	2										
Minnesota											
Montana											
New Hampshire											
North Dakota											
Oregon		3				3					
Puerto Rico											
Rhode Island											
Utah											
Vermont											
Virgin Islands											
Washington	1	1	3			1	4		3	1	
TOTAL	5	4	5	0	0	7	4	0	4	2	6

Addendum B – page 2

Disciplinary Actions Taken by States from 2010 to July 2020 Physician Acts that Directly Harm Patients Physically or Emotionally

	PHYSICIAN ACTS THAT (DIRECTLY) HARM PATIENTS PHYSICALLY OR EMOTIONALLY								
	Providing substandard patient care (e.g., mis- diagnosing, failing to use standard care	Performing an inappropriate procedure that is not in the jurisdiction's scope of		Neglecting or abandoning	Inappropria tely prescribing drugs (opioids and		Engaging in	Violating appropriate doctor- patient	Exhibiting physical impairment (e.g., alcohol or substance abuse, mental/emotional
State	protocols)	practice	abuse	the patient	drugs)	of Cannabis	patient	boundaries	impairment)
Alaska									
Arizona	6	2			17	14	1	1	9
California	1								
Colorado		1							
Connecticut									
Dist. of Columbia									
Hawaii									
Kansas									
Maine									
Maryland									
Minnesota									
Montana									
New Hampshire									
North Dakota									
Oregon			1	2	11	2	1	3	2
Puerto Rico									
Rhode Island									
Utah	1								
Vermont									
Virgin Islands									
Washington	6			1	32	10	4	2	2
TOTAL	14	3	1	3	60	26	6	6	13

Disciplinary Actions Taken by States from 2010 to July 2020 Physician Acts that Potentially (Indirectly) Harm Patients

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