

BACKGROUND PAPER FOR The Naturopathic Medicine Committee

**(Oversight Hearing, March 6, 2017, Senate Committee on
Business, Professions and Economic Development and the Assembly
Committee on Business and Professions)**

IDENTIFIED ISSUES, BACKGROUND AND RECOMMENDATIONS REGARDING THE NATUROPATHIC MEDICINE COMMITTEE

BRIEF OVERVIEW OF THE NATUROPATHIC MEDICINE COMMITTEE

The Naturopathic Medicine Committee (NMC or Committee) is charged with licensing and regulating Naturopathic Doctors (NDs). NMC's 2016 Strategic Plan states that its mission is "To protect health care consumers through the proper licensing and regulation of NDs utilizing the vigorous, objective enforcement of the Naturopathic Doctors Act (Act), and to promote access to quality naturopathic medical care."

Naturopathic medicine, as distinguished from allopathic or osteopathic medicine, is a different and comprehensive system of health care that uses natural methods and substances to support and stimulate the body's self-healing process. It is guided by the following principles:

1. The Healing Power of Nature: NDs trust in the body's inherent wisdom to heal itself.
2. Identify and Treat the Cause: Look beyond the symptoms to effectively address the underlying cause of illness.
3. First Do No Harm: Seek to utilize the most natural, least invasive and least toxic therapies first.
4. Doctor as Teacher: The primary role of an ND is a teacher who educates and encourages people to take responsibility for their own health and to take steps to achieve and maintain optimal health.
5. Treat the Whole Person: Total health includes physical, emotional, mental, genetic, environmental, social, spiritual, and other factors.
6. Prevention: Encourage and emphasize disease prevention and focus on promoting health and wellness.

California licensure requires graduation from a school accredited by the Council of Naturopathic Medical Education that offers a graduate degree of Doctor of Naturopathy or Doctor of Naturopathic Medicine. The program requires at least 4,100 hours of training, at least 2,500 hours of which must be academic and at least 1,200 hours must be supervised clinical training. ND license candidates must also pass a licensing exam that is administered by the North American Board of Naturopathic Examiners. There are 9 approved schools in the United States, Canada, and the U.S. territories.

19 states license NDs, and the scope of practice varies in each. California allows a ND to dispense, administer, order, prescribe, and furnish extracts of food, nutraceuticals, vitamins, amino acids, minerals, enzymes, botanicals and their extracts, epinephrine to treat anaphylaxis, hormones, botanical medicines, homeopathic medicines, all dietary supplements and nonprescription drugs. However, a ND may furnish Schedule III – V prescription drugs with a supervising physician and pursuant to standardized procedures or protocols. NDs are also permitted to order durable medical equipment, use IVs, and remove foreign bodies in the top layer of skin, but they are not allowed to perform other minor office procedures.

History of the NMC

NMC was initially established as the Bureau of Naturopathic Medicine (Bureau) in 2003 (SB 907 [Burton], Chapter 485, Statutes of 2003). The Bureau was transformed into the NMC within the Osteopathic Medical Board of California (OMBC) as a result of Governor Arnold Schwarzenegger’s consolidation of healing arts bureaus and boards (AB X4 20 [Audra Strickland, Huber], Chapter 18, Statutes of 2009-10 Fourth Extraordinary Session). Although technically a Committee within OMBC, NMC is functionally independent and is solely responsible for the license and regulation of NDs.

NMC consists of nine members appointed by the Governor: five NDs, two physicians and surgeons, and two public members. Committee members are appointed for four years and may serve up to two consecutive terms.

The following table lists all members of the NMC.

Committee Members	Appointment Date	Term Expiration Date	Appointing Authority
<p>David Field, ND, LAC, Chair Dr. Field earned his BA in Biology from Colorado College and his ND at the National College of Naturopathic Medicine in Portland, Oregon. Dr. Field co-founded the California Association of Naturopathic Physicians (now California Naturopathic Doctors Association), and in 2005, Dr. Field became the first licensed Naturopathic Doctor (ND-1) in California.</p>	March 2010	2018	Governor
<p>Tara Levy, ND, Vice Chair Dr. Levy received her BA from Vassar College and her ND and midwifery certificate from Bastyr University in Seattle, WA. She is currently the medical director of Tara Natural Medicine, a family practice with offices in Lafayette and Oakland, California. Dr. Levy is the past-president of the California Naturopathic Doctors Association.</p>	March 2010	2018	Governor
<p>Myles Spar, MD, MPH Dr. Spar directs the Integrative Medicine program at the Simms-Mann Health and Wellness Center at Venice Family Clinic and is a Board Certified Internist in private practice and a clinical Instructor at the UCLA School of Medicine. Dr. Spar is board certified in Internal Medicine and completed a fellowship in Integrative Medicine with the University of Arizona CIM.</p>	October 2014	2018	Governor

<p>Thyonne Gordon, Ph.D. Dr. Gordon is a writer who was featured in Chicken Soup for the African American Soul by Lisa Nichols, Jack Canfield and Mark Victor Hansen and Will I Marry Me? by Chante´ Moore. Gordon holds appointments on various boards and committees including Pacifica University in Santa Barbara and Ultimate Transformations in Los Angeles. She is a member of Delta Sigma Theta Sorority, Inc., A Public Service Sorority, the Black MBA Association and the Association of Fundraising Professionals.</p>	November 2014	2018	Governor
<p>Gregory Weisswasser, ND Dr. Weisswasser earned his BS in Psychology with a specialization in Health and Humanities from Michigan State University and his ND from Bastyr University in 2004. He practices in Grass Valley providing primary care and physical medicine. He is a member of the American Association of Naturopathic Physicians and the California Naturopathic Doctors Association. Dr. Weisswasser previously served on the Osteopathic Medical Board of California.</p>	September 2011	2019	Governor
<p>Michael Hirt, MD Dr. Hirt obtained his medical degree from Harvard Medical School and completed his Internal Medicine training at UCLA. Dr. Hirt pursued specialty training in Nutrition at UCLA's Center for Human Nutrition, and he is board certified in both Internal Medicine and Nutrition. Dr. Hirt's medical practice is The Center for Integrative Medicine, located in the suburbs of Los Angeles, California. Dr. Hirt teaches Nutrition and Internal Medicine to medical students at UCLA.</p>	March 2010	2018	Governor
<p>Alexander Kim, MBA Mr. Kim received his BS in Biology from UC Irvine and his MBA from Pepperdine University. He previously served on the California Board of Optometry from 2011-2015, and is currently a Senior Advisor to the City of Los Angeles Councilmember David E. Ryu (4th District) and volunteers as a Community Advisory Commissioner under the Orange County District Attorney, Tony Rackaukus. Prior to his current position, Alexander was a Community Relations Manager for the Southern California Gas Company from 2011-2015 and served as Deputy Director (L.A. Regional Office) to former California Governor, Arnold Schwarzenegger from 2004 to 2010. He was also Central Area Director to former City of Los Angeles Mayor James K. Hahn from 2001-2004.</p>	May 2015	2019	Governor
<p>Dara Thompson, ND Dr. Thompson received her BS in biology from UC Santa Cruz and her ND from the National College of Naturopathic Medicine in Portland, Oregon. After 5 years of clinical practice she completed a 1-year post-graduate training in Environmental Medicine. Dr. Thompson taught Anatomy and Physiology and Clinical Nutrition and the Hawaii College of Oriental Medicine for 9 years. Dr. Thompson currently practices at Azzolino Chiropractic Neurology and Integrative Wellness in San Francisco.</p>	December 2015	2019	Governor

<p>Greta Hauck D'Amico, ND Dr. D' Amico received her BA in Social Science from UC Berkeley and her ND from the Southwest College of Naturopathic Medicine and Health Sciences. She is currently President of the Four Rivers Naturopathic Clinic in Auburn. Dr. D'Amico has been active in the California Association of Naturopathic Doctors since 2004 and has served the association as Legislative Lead. She is also a member of the American Association of Naturopathic Physicians and P.E.O., a philanthropic organization that raises money for women's education.</p>	December 2015	2019	Governor
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Subcommittees

The NMC is authorized to create subcommittees as needed, but there is one required by law -- a naturopathic formulary advisory subcommittee, which is tasked with devising a naturopathic formulary based upon the review of naturopathic education and training. The subcommittee is required to have an equal number of representatives from the clinical and academic settings of physicians and surgeons, pharmacists, and naturopathic doctors who must opine as to specific recommendations regarding the prescribing, ordering, and furnishing authority of a naturopathic doctor, and corresponding supervision levels and protocols.

The subcommittee presented its initial report in 2007 and, in addition to formulary recommendations, questioned the present physician supervisory requirements. The report stated that there were a limited number of physicians who had training in naturopathic philosophy or practice, or who have had the extensive clinical experience in naturopathic modalities to make them appropriate supervisors for NDs. Further, the few physicians who were willing and well-trained to supervise NDs had difficulty getting malpractice coverage. This was frustrating for practitioners, and the subcommittee noted the contradiction that “malpractice companies routinely insure MDs who supervise other medical professionals such as nurse practitioners and physician assistants, [who] have a lesser entry-level training and education requirement than NDs.” The subcommittee concluded that “the supervision provision is untenable,” and recommended independent prescribing privileges.

The subcommittee updated its report on January 1, 2014, unanimously agreeing that the formulary should be defined by an exclusionary rather than an inclusionary list, and that it should be maintained in regulations, rather than in statute. It last met in February 2015. NMC also convened a minor office procedures subcommittee, which was tasked with presenting a tandem report to the Legislature regarding the potential development of scope and supervision requirements in order to perform minor office procedures. There are no records on the NMC’s website of the committee’s meetings, but the minor office procedures subcommittee published a report in 2015 recommending that NDs be allowed to perform the following additional procedures: 1) prescribe and administer local anesthetic solutions, their adjuncts and diluents; 2) removal of clinically benign skin lesions; 3) repair of skin lacerations, including suturing; and 4) incision and drainage of abscess/trephination of subungual hematoma.

The Committee has not itself pursued legislation implementing these recommendations, but SB 538 (Block, 2016) was supported by the NMC in an attempt to legislate a version of the findings; however, the bill ultimately failed. The NMC has recently restarted conversations to expand the NDs scope of practice to align with the formulary and minor procedure reports.

The NMC's website indicates that it has also had a Naturopathic Childbirth Attendance Committee Meeting which met five times in 2006. This Committee is not discussed in the Sunset Report NMC submitted to the Legislature.

License Processing

The NMC processes licenses well within performance targets. There are presently 678 active California NDs and 131 licensed NDs practicing out of state. It is unclear why the Committee did not submit data for FY 13/14 and FY 14/15 in its Sunset Report to the Legislature.

Continuing Education (CE)

The Act requires every licensee to complete a minimum of 60 CE hours for each two-year license period. The Act further specifies the following:

- (1) At least 20 hours shall be in pharmacotherapeutics.
- (2) No more than 15 hours may be in naturopathic medical journals or osteopathic or allopathic medical journals, or audio or videotaped presentations, slides, programmed instruction, or computer-assisted instruction or preceptorships. (Non-interactive)
- (3) No more than 20 hours may be in any single topic.
- (4) No more than 15 hours of the requirements for the specialty certificate in naturopathic childbirth attendance shall apply to the 60 hours of CE requirements.

CE courses may be approved by

- NMC;
- California Naturopathic Doctors Association;
- American Association of Naturopathic Physicians;
- California State Board of Pharmacy;
- State Board of Chiropractic Examiners; or,
- Other courses meeting the CE standards for physicians and surgeons in California.

NDs must sign a CE certification for license renewal. While the Committee occasionally contacts individual NDs or course providers for CE confirmation, there is no formalized audit process, despite recommendations in the prior Sunset Report. The Committee is pursuing authorization for random audits and has implemented a random audit module within its IT system.

Budget

The NMC is a special fund program supported wholly by revenue from its licensing and regulatory functions. Present law limits fund reserves to no more than 24 months, and the NMC has a healthy 18.3 months in reserve. However, due to the addition of personnel, significant pro rata increases, and greater enforcement costs, expenses are outpacing revenue and NMC's reserve is projected to decrease to 10.6 months in FY 2017/18. The Committee is aware of this situation and plans to pursue additional fees and other initiatives in order to secure its budget future.

Fund Condition						
(Dollars in Thousands)	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	FY 2017/18
*Beginning Balance	362	478	577	588	510	404
Revenues and Transfers	259	250	298	295	228	244
Total Revenue	621	728	875	883	738	648
Budget Authority	171	177	314	378	334	341
**Expenditures	141	151	286	372	334	341
Loans to General Fund	0	0	0	0	0	0
Accrued Interest, Loans to General Fund	0	0	0	0	0	0
Loans Repaid From General Fund	0	0	0	0	0	0
Fund Balance	480	577	589	510	404	307
Months in Reserve	38.1	24.2	18.9	18.3	14.2	10.6

*Includes prior year adjustments.

**Includes direct draws from FISCAL.

Interestingly, the NMC has no statutory cap on fees. License fees have not been changed since they were established by emergency regulation in 2004. Applications, licenses, and permits range from \$400 - \$800 for a biennial term. The Committee is presently developing regulations to establish a retired license.

Enforcement

The NMC's enforcement program is fairly limited, due to the profession's restricted scope and minimal staff. The majority of the NMC's enforcement efforts focus on unlicensed practice. In handling these matters, NMC is largely meeting its performance targets for intake (30 days), investigations (12 months), and formal discipline (18 months). Enforcement efforts were enhanced by the addition of an enforcement analyst in July 2014.

PRIOR SUNSET REVIEW: CHANGES AND IMPROVEMENTS

NMC was last reviewed by the Legislature through sunset review in 2012-13. During the previous sunset review, 17 issues were raised. In December 2016, NMC submitted its required sunset report to the Senate Committee on Business, Professions and Economic Development and Assembly Committee on Business and Professions (Committees). In this report, NMC described actions it has taken since its prior review to address the recommendations made. The following are some of the more important programmatic and operational changes, enhancements and other important policy decisions or regulatory changes made. For those which were not addressed and which may still be of concern to the Committees, they are addressed and more fully discussed under "Current Sunset Review Issues."

Reorganization, Relocation and Leadership

- Rebecca Mitchell was appointed as the new Executive Officer in August 2013

- David Field, ND, LAc, was elected as the Chair of the Committee.
- Tara Levy, ND, was elected as the Vice-Chair of the Committee.

Strategic Plan

- The committee developed a new Strategic Plan in June 2016.

Legislation Sponsored by or Affecting the NMC

- SB 538 (Block/Hueso, 2016) would have expanded the scope of practice to allow NDs to practice to the fuller extent of their training and education. SB 538 failed on the Assembly Floor.
- SB 809 (DeSaulnier, Chapter 400, Statutes of 2013) establishes a funding mechanism to update and maintain the Controlled Substance Utilization Review and Evaluation System (CURES) and Prescription Drug Monitoring Program (PDMP), requires all prescribing health care practitioners to apply to access CURES information, and establishes processes and procedures for regulating prescribing licensees through CURES and securing private information.
- AB 2711 (Gordon, Chapter 360, Statutes of 2016) establishes that payment for advertising, where a licensee sells services through a third party advertiser, shall not constitute a referral of patients when the third party advertiser does not recommend, endorse, or otherwise select a licensee itself. Additionally, this bill entitles the purchaser of services to a full refund in the event the licensee determines, after consultation with the purchaser, that the service is not appropriate, or if the purchaser elects not to receive the service for any reason and requests a refund.
- AB 2859 (Low, Chapter 473, Statutes 2016) allows boards, bureaus, commissions, or programs within DCA to establish a regulatory framework for retired license category, if the program does not currently have the statutory authority.
- SB 482 (Lara, Chapter 708, Statutes of 2016) requires health care practitioners to consult the CURES PDMP prior to prescribing a Schedule II, Schedule III, or Schedule IV controlled substance to a patient for the first time, and at least every four months thereafter if the patient continues using the medication as part of his or her treatment. This bill allows for certain exemptions and limited quantities in specific situations. Additionally, this bill prohibits a regulatory board whose licensees do not prescribe or dispense controlled substances from obtaining data from CURES.

Adopted and Pending Regulations

- Regulations to implement disciplinary guidelines and sponsored free healthcare events are both in process.

CURRENT SUNSET REVIEW ISSUES

The following are unresolved issues pertaining to the Naturopathic Medicine Committee or areas of concern that should be considered, along with background information for each issue. There are also recommendations Committee staff have made regarding particular issues or problem areas NMC needs to address. NMC and other interested parties have been provided with this Background Paper and NMC will respond to the issues presented and the recommendations of staff.

DATA COLLECTION

ISSUE #1: (DATA REPORTED) There are concerns about the ability of the NMC to provide accurate and comprehensive information and data as requested.

Background: NMC submitted its Sunset Report to the Legislature with significant omissions and inconsistencies, which was also a problem in the prior Sunset Report. While some data may have been unavailable at some point due to technology transitions, it is important for program governance to reassemble such information in order to detect trends and manage its program governance. Staff was able to provide some information after further clarity was requested; it is unclear why this was unavailable initially.

For example:

- There was no data on out of state licenses for 2013-2015.
- Consumer comments table did not show results for FY 2015/16.
- License cycle time data is incomplete.
- There is no indication of how long enforcement cases take to investigate, whether they are done by desk investigation or sworn investigators, or if the cases opened were ever closed.
- Enforcement data show no source of complaints.
- While one segment of the report indicates that unlicensed activity accounted for 91% of the workload in FY 2013/14, there were no recorded investigations, compliance actions, or cite and fines issued.
 - In response, staff indicated that the 91% represented 126 cases that were addressed by cease and desist letters (C&D), which staff later clarified were not all C&D, but rather “educational letters,” which are not indicated anywhere in the report. Staff clarified that there were only two C&Ds issued, but Table 9c does not report any C&Ds issued for that or subsequent years.
- A “new issues” section was initially blank, but then NMC provided a “new issues” addendum.

The omission of this data raises concerns about the NMCs ability to effectively track data, and thus manage its resources. While this program has very few staff working on many issues, it is incumbent upon the Chair and other Committee members, who signed off on the report’s contents, to ensure that the information presented to the Legislature is accurate and comprehensive.

Staff Recommendation: *The Committee should ensure it has processes and technologies in place to collect accurate and relevant data so that it can manage the administration of and reporting about its program. Committee members should be vigilant about ensuring staff has and uses current metrics.*

ISSUE #2: (CONSUMER SATISFACTION SURVEY) The NMC’s current method for assessing consumer satisfaction appears to be inadequate.

Background: The NMC presently sends a consumer satisfaction survey by mail, with prepaid postage, to consumers at the close of their respective enforcement cases. The NMC has received 21 responses in 5 years, with data lacking for FYI 15/16. NMC did not indicate how many surveys were initially mailed.

This appears to be an inadequate and expensive means of assessing consumer satisfaction. While NMC interprets the lack unfavorable reviews to general satisfaction, the insufficient returns may also be seen as an ineffective way to solicit feedback. NMC’s limited dissemination of the satisfaction survey to complainants automatically limits the pool and nature of the responses. Consumers of the NMC’s services are any individual who interacts with the Committee in person, by telephone, or via website, and their interactions may be as varied as submitting a complaint, researching a doctor’s disciplinary record, or obtaining a license.

Staff Recommendation: *NMC should work with DCA to develop an online survey tool to capture a wider range of consumer feedback.*

ENFORCEMENT

ISSUE #3: (“NATUROPATH” TITLE PROTECTION). Should the use of the term “naturopathic,” “naturopath” and other similar terms be reserved for use only by a ND?

Background: NMC staff report the majority of enforcement time is spent policing unlicensed practice. Individuals who misuse the title of ND, or practice within the protected scope of an ND without a license are either issued a C&D or an “educational letter.”

Staff indicates that it would be clarifying to consumers if only licensed naturopathic doctors could use the term “naturopath,” or derivations of that term, because many consumers are being misled. However, current law allows non-NDs to use those terms. NMC believes that it would be clearer to consumers and practitioners alike if all forms of the term “naturopathic” were reserved for only licensed NDs.

It is unclear what an “educational letter” is and why a C&D is not used.

Staff Recommendation: *The Committee should clarify what an “educational letter” is and why it is used instead of a C&D. The Committee should record its use of both letters and report accordingly. NMC should work with Legislative staff to update title use.*

PUBLIC ACCESS

ISSUE #4: (WEBCASTING MEETINGS) NMC does not webcast meetings, despite repeated requests from the Legislature that NMC use this technology.

Background: The NMC reported that it attempted to webcast two meetings in 2011 and has not webcast any since, despite stating in the previous Sunset Report that it planned to do so. NMC asserts that it does offer teleconferences, however, which make its meetings somewhat more accessible.

It would be helpful for the Committees to understand what barriers exist to NMC providing greater public access to its meetings through webcasting.

Staff Recommendation: *The NMC should webcast meetings. For each meeting it does not webcast it should record all steps taken in its attempt to do so and why they failed.*

SCHOOL APPROVAL

ISSUE #5: (CONSIDERATION OF MILITARY EDUCATION, TRAINING, AND EXPERIENCE) The NMC currently does not require schools to evaluate veterans' military education, experience, and training toward meeting the requirements for an ND degree in compliance with state law.

Background: The NMC does not itself evaluate schools for approval, but rather is required to approve schools that are evaluated and accredited by the Council on Naturopathic Medical Education (CNME) or other equivalent accrediting body that meets certain minimum requirements.

Current law requires boards and bureaus to provide for methods of evaluating military education, training, and experience towards licensure (BPC 35):

It is the policy of this state that, consistent with the provision of high-quality services, persons with skills, knowledge, and experience obtained in the armed services of the United States should be permitted to apply this learning and contribute to the employment needs of the state at the maximum level of responsibility and skill for which they are qualified. To this end, rules and regulations of boards provided for in this code shall provide for methods of evaluating education, training, and experience obtained in the armed services, if applicable to the requirements of the business, occupation, or profession regulated. These rules and regulations shall also specify how this education, training, and experience may be used to meet the licensure requirements for the particular business, occupation, or profession regulated. Each board shall consult with the Department of Veterans Affairs and the Military Department before adopting these rules and regulations. Each board shall perform the duties required by this section within existing budgetary resources of the agency within which the board operates.

The NMC asserts that it has not made any regulatory changes to conform to this law because “the military does not offer educational credits which can be applied towards obtaining a Naturopathic Doctor’s degree; therefore regulatory changes are not necessary.” It is unclear whether the Committee

has evaluated every military educational program available, especially those that train personnel toward licensure as physician assistants, and come to the conclusion that not a single credit for academic or experiential experience is transferable.

The intent of this law is not to merely inquire as to whether the military issues a naturopathic degree, but to what extent basic biology or anatomy courses, or clinical training or experience may contribute to the transfer or credits earned in beginning a ND program.

Staff Recommendation: *The NMC should explain to the Legislature how it came to the conclusion that no military credits can be used towards a ND degree. If it is determined that certain courses and credits are transferrable, the Naturopathic Act should be amended to require that ND school approval is also contingent on programs evaluating and applying military applicants' experiential and academic history.*

INTERSTATE REGULATORY FORUM PARTICIPATION

ISSUE #6: (INTERSTATE CONFERENCES) The NMC is unable at times to participate in discussions with the Federation of Naturopathic Medicine Regulatory Authorities (FNMRA); an important interstate regulatory body.

Background: The NMC has a small licensee population compared to other DCA boards, and faces strains on its fund due to its narrow base. There are 678 active California NDs and 129 California-licensed NDs practicing out of state. The NMC conducted a study in 2015 to determine how many potential licensees California is losing to neighboring states because of CA's restrictive scope, and estimated that they could increase their license population by at least 10% if California allowed NDs to practice to a greater extent of their training and education. The rigor of this study is unclear, however, for the NMC does not detail how they determined the population of potential applicants to survey, nor the questions asked – the top three reasons for not practicing in California were 1) restrictive prescribing; 2) inability to perform minor office procedures; and 3) narrow scope of practice. It should be noted that the third answer includes the first two.

The NMC is a voting member of the Federation of Naturopathic Medicine Regulatory Authorities (FNMRA), which is comprised of membership of naturopathic medical boards from the United States and territories and Canada. The NMC discusses such topics as telemedicine and the Interstate Licensing Compact – critical issues that relate to California's limited scope. Due to out-of-state travel restrictions, the NMC has participated only by teleconference, and not to all meetings. It would be beneficial for the NMC to continue conversations with other states in its efforts to increase California's licensing population, discuss scope of practice issues, and refine its enforcement.

Staff Recommendation: *The NMC should make best efforts to participate in all FNMRA events and request travel waivers to attend in person.*

NMC ISSUES AND REQUESTED CHANGES

ISSUE #7: (STATUTORY UPDATES) The NMC has requested the following statutory updates to the Act.

Background: The NMC is seeking the following legislative changes to facilitate the administration of the Naturopathic Act:

Update licensee registration to determine which NDs must register for CURES. Current law requires all licensees who furnish or prescribe certain controlled substances to register with CURES. While all NMC licensees are qualified to furnish these drugs, CURES registration is only required for those licensees with physician oversight contracts. NMC does not currently track this information, so it does not know whether the appropriate licensees have registered. NMC argues it needs statutory authority to do this.

Allow for submission of an online license application. NMC believes that because current law requires the submission of a written application, it precludes the availability of online applications.

Establish a fictitious name permit. NMC wants authority to create a Fictitious Name Permit (FNP) Program for, NMC asserts, reasons of public protection and to avoid violations of the Moscone-Knox Act. A FNP would require a ND to submit the name of the ND's company, if the company is not the name of the ND him/herself, and shareholders to the NMC and pay a fee. NMC argues that this will also stop confusion between practices that use names too similar to other existing naturopathic practices.

This is insufficient justification for a new license category and fee for several reasons. First, all of the information found on a FNP would be duplicated from articles of incorporation, which are required to be filed with the Secretary of State. Second, the the aim of informing consumers and the NMC where NDs are practicing could be most efficiently achieved by requiring NDs to disclose their place of business on their license application and renewal forms. This would eliminate the information gap of NDs employed by other NDs, as well. Requiring any changes be reported to NMC within 30 days, with a threat of a monetary penalty, would further ensure accurate information is provided without additional paperwork, and provide a revenue source from delinquent licensees. The NMC could also use this information to cross-check shareholders with the Secretary of State to ensure compliance with Moscone-Knox. Finally, BPED committee staff have contacted several other boards with FNPs (not all healing arts boards have FNP programs), and it was confirmed such programs are of little utility to consumers or the boards themselves.

Conduct random CE audits. The NMC believes it needs statutory authority to conduct random CE audits. Because the Committee is tasked with enforcing the provisions of the Naturopathic Act, which clearly includes ensuring NDs complete CE courses, it is unclear why this additional authority is necessary.

Diversion Program. NMC seeks legislative authority to establish a diversion program to seek ways and means to identify and rehabilitate naturopathic doctors whose competency may be impaired due to abuse of dangerous drugs and alcohol, so that NDs may be treated and returned to practice safely. Several other healing arts boards have diversion programs, and recently the Medical Board of California was authorized to establish a physician wellness program. NMC should explain why private programs are insufficient to meet the needs of impaired NDs, and how NDs would better benefit from a state-sponsored program.

Staff Recommendation: *The Committee should work with Senate Committee legislative staff to determine which issues are appropriate for inclusion in the Sunset Bill.*

CONTINUED REGULATION OF NATUROPATHIC DOCTORS
BY THE NATUROPATHIC MEDICINE COMMITTEE

ISSUE #8: (CONTINUED REGULATION) **Should the licensing and regulation of naturopathic doctors be continued and be regulated by the current NMC membership?**

Background: The health and safety of consumers is protected by well-regulated professions. The NMC has made progress in its program regulation and is encouraged to follow its 2016 Strategic Plan to resolve concerns explained above. The NMC should be continued with a 4-year extension of its sunset date so that the Legislature may once again review whether the issues and recommendations in this Background Paper have been addressed.

Staff Recommendation: *The licensing and regulation of naturopathic doctors should continue to be regulated by the current members of the Naturopathic Medicine Committee in order to protect the interests of the public. NMC should be reviewed again in four years.*