

MINUTES OF THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES.

The meeting was called to order by Chairperson Garry Boston at 1:30 p.m. on April 1, 2002 in Room 210, Memorial Hall

All members were present except:            Representative Peggy Long, Excused  
   Representative Peggy Palmer, Excused  
   Representative Dale Swenson, Excused  
   Representative Jonathan Wells, Excused

Committee staff present:    Dr. Bill Wolff, Kansas Legislative Research Department  
   Emalene Correll, Kansas Legislative Research Department  
   Renea Jefferies, Revisors of Statute's Office

Conferees appearing before the committee:    John Federico  
   Jane Murray, M.D.  
   Terry Miken  
   Mehdi Khosh, N.D.  
   Dr. Michael J. Randles, M.D.  
   Melva Traiman  
   Robin Goff, R.N.  
   Jeannie Drisko, M.D.  
   Charles Magruder, M.D., MPH, Director/Health  
   Officer, Sedgwick County Health Department

Others attending:    See Attached Sheet

The Chairman stated due to a family emergency Senator Susan Wagle was not here at this time and will try to accommodate her if she does arrive during the meeting. There are 9 conferees speaking in favor of **SB 610** and ask that the testimony be limited to 5 minutes or less. If each of you could be as brief as possible, and not repeat what conferees have said before you, we will try to get through the entire list of conferees. Normally, we allow any number of questions but am going to ask committee members to try to be as brief as possible and keep your questions to their two best and no rolling questions where one leads to a dozen others. Please check with me on each question because am going to be very diligent in trying to make sure everyone is heard.

The Chairman opened the hearing on **SB 610 - Naturopathic doctor licensure act.**

John Federico, a proponent, representing the Kansas Naturopathic Physicians Association, asked the board members to stand up. This is not a large association. Why did we bring **SB 610** forward? We are of the opinion that it is time for licensure of naturopathic physicians practicing in the state of Kansas. They went through the credentialing process. This has been a very long process. They were in front of the Senate public health and welfare committee last year and they required naturopaths go through the credentialing process. It was a long, difficult and costly process. It was recommended by the Secretary of Health and Environment that they be granted licensure. There have been some compromises in **SB 610** where others had concerns. There are still some unresolved issues. The objective is to have a fair hearing and a vote. Some of the concerned parties are: The Kansas Legislature, Kansas Board of Healing Arts, Kansas Public Health Association, Kansas Department of Health and Environment, Health Food Stores/Nutritional Counselors, Health Insurance Industry, Legislative Research/Revisors, Kansas Chiropractors Association, Kansas Association of Osteopathic Medicine and the Kansas Medical Society. The compromises and restrictions are: immunizations, major surgery, minor surgery, obstetrics, use of "physician", closed formulary, emergency medicine, credentialing and "naturopath". The issues unresolved are: scope of practice, formulary and I.V. therapy.

CONTINUATION

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Mr. Federico further stated that the group he represents has met the concerns of the various industries and parties involved including the health insurance industry regarding reimbursement issues and whether licensure required reimbursement. Mr. Federico stated that the proponents are not interested in reimbursement and that this has nothing to do with reimbursement ([Attachment 1](#)).

Jane L. Murray, M.D., a proponent to **SB 610** stated she was a conventionally trained M.D. with over 20 years of clinical, teaching and administrative experience. The American public, including many Kansans, are seeking health care options from many complementary providers. Often, finding quality care and advice from well-educated, trained practitioners is difficult in an environment where standards in the form of licensing and credentialing are not clarified. Currently, many types of individuals refer to themselves as "naturopaths", "traditional naturopaths", "NMD's" and other confusing titles. Some of these individuals are licensed in other health care professions, such as chiropractic and dentistry. Many are self-taught, or have taken weekend seminars or internet courses offering "degrees" in naturopathic medicine. A few have actually graduated from four year, full time schools of naturopathic medicine, with a standardized curriculum, supervised clinical experience and national board examinations. How is a potential patient to distinguish a fully trained naturopath from the others?

Those who have completed the full four years of standardized, graduate, doctoral education in naturopathic medicine deserve to be recognized they be eligible for licensure ([Attachment 2](#)).

Terry Mikan, a patient of Dr. Mehdi Khosh, testified in support of **SB 610**, stating he was diagnosed with dermatomyositis which is a chronic connective tissue and autoimmune disease. A Mayo Clinic rheumatologist determined this was drug induced. He had been prescribed Baycol to lower his cholesterol which possibly triggered his disease. After seeing Dr. Khosh all symptoms improved ([Attachment 3](#)).

Mehdi Khosh, testified as a proponent to **SB 610**, stating naturopathic physicians like allopathic physicians, receive 4 years of post baccalaureate education culminating in a doctoral degree. A licensed naturopathic doctor (N.D.) attends a four-year graduate level naturopathic medical school and is educated in all of the same basic sciences as an M.D., but also studies holistic and nontoxic approaches to therapy with a strong emphasis on disease prevention and optimizing wellness. Licensed naturopathic physicians must fulfill state-mandated continuing education requirements annually, and will have a specific scope of practice defined by their state's law ([Attachment 4](#)).

Michael J. Randles, M.D., testified in support of **SB 610**, stating the healing arts act is only one of many laws in Kansas that authorize the state to examine the credentials of, and monitor the professional activities of highly trained professionals. The real question that the legislature should be considering is why the state is NOT already protecting the citizens of Kansas by verifying the credentials of persons alleging to be so trained, and monitoring their professional activities. M.D.'s who are genuinely concerned about the quality of care of Kansans should not be as concerned about decrying the discipline of naturopathy, but rather should be concerned about the quality of training, credentials, and ongoing quality of practice of both M.D.'s and naturopathy, and work to assist the Board of Healing Arts to monitor both disciplines ([Attachment 5](#)).

Melva Tremaine, testified as a proponent to **SB 610**, stating as a citizen of Kansas, there should be a choice concerning health care. Ms. Tremaine made the choice 7 months ago to seek services of a naturopathic physician after exhausting options in the health care field and has been extremely pleased with the care received from a naturopathic physician ([Attachment 6](#)).

Robin Goff, R.N., BSN, MAV, is a proponent for **SB 610** and a nurse educator which provides education for health care professionals and the general public about the integration of conventional, complementary and alternative medicine (CAM). Health care professionals have not been educated about the use of treatments like herbal remedies, homeopathy and

## CONTINUATION

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acupuncture and how they interface with the use of pharmaceuticals. The licensure of naturopathic physicians would allow the public and health care professionals to identify highly qualified, professional experts in our communities who can provide expertise in the use of CAM modalities ([Attachment 7](#)).

Jeanne Drisko, M.D., University of Kansas Medical Center, Program in Integrative Medicine, testified as a proponent to **SB 610**. The time has come to acknowledge and license naturopathic doctors. This is a trend, not a fad. It is necessary to protect consumers of these services and products from unscrupulous and untrained providers. Licensing would be a start. Naturopathic doctors attend a four year medical school after obtaining a degree from a recognized college with prerequisites in sciences. First years of Naturopathic Medical School are in core curriculum such as physiology, anatomy, biochemistry, and pharmacology. This is coupled with training in natural products such as medicinal plants, vitamins, minerals, and other therapies such as acupuncture. Naturopathic doctors are trained in the use and administration of medicinal plants, vitamins, and minerals ([Attachment 8](#)).

Charles Magruder, M.D., MPH, Director/Health Officer, Sedgwick County Health Department, supported **SB 610**, as there was an increased demand for alternative medical services and it has become apparent that many in the community may be more willing to seek needed preventive and medical care if appropriate cultural contexts were available. It is clear that many citizens desire greater choice and availability of health care services ([Attachment 9](#)).

The Chairperson said written testimony was distributed from David C. Matteson, Director of Public Affairs, Bastyr University ([Attachment 10](#)), Steven J. Gould, D.C.D.A.C.B.R. ([Attachment 11](#)) and Dr. Richard L. Sarnat, President, Alternative Medicine Integration ([Attachment 12](#)).

The Chairperson closed the hearing on **SB 610** for proponents and stated hearings for opponents would be held April 2. The meeting adjourned at 3:10 p.m.



# HEALTH AND HUMAN SERVICES

DATE April 1, 2002

NAME	REPRESENTING
Farhang Khosh	KNPA
Lawrence S. Shor	Self
Ofelia Alhelous	KNPA
Mehdi Khosh	KNPA
<del>W. S. S.</del>	Self.
Austin Lawrence	Self
Chington Ray Miller	HFF
Kerley Kidd	Veterinarians <sup>Holistic</sup>
Tom Tremaine	Self.
Melba Tremaine	Self
Marla Rhoden	KDHE/HOC
Mark Stafford	Healing Arts
LARRY BUENING	BO OF HEALING ARTS
Chris Collins	KMS
Jerry Slaughter	KMS
Chip Wheeler	Osteopathic Assoc.
Bord Landy	CNH
W. B. Bledsoe	Self
Sherry Megarity	Self
Ronald E. Fisk	Self
Chris Wilson	KS Governmental Connecting
Jessica Letour	KS Dairy Assn.
Phanie Ann Lower	KAHP
Larry Robbis	KS Optometric Assn



# SB 610

## Concerned Parties/ Accommodations

KS Legislature

KS Board of Healing Arts

KS Public Health Association

KS Dept. Health & Environment

Health Food Stores/Nutritional Counselors

Health Insurance Industry

Legislative Research/Revisors

KS Chiropractors Assn.

KS Assn. Osteopathic Medicine

KS Medical Society

## Compromises/ Restrictions

Immunizations

Major Surgery

Minor Surgery

Obstetrics

Use of "Physician"

Closed Formulary

Emrgcy. Medicine

Credentialing

"Naturopath"

## Unresolved Issues?

Scope of Practice?

Formulary?

I. V. Therapy?

## Objective

Fair Hearing and A Vote

H & H S  
4-1-02  
Atch #1

TESTIMONY REGARDING SB610 TO THE  
HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

Jane L. Murray, MD

April 1, 2002

Thank you for allowing me to present testimony today in support of SB610, the licensing of naturopathic physicians. I am a conventionally trained MD with over 20 years of clinical, teaching and administrative experience. I served as Director of Education for the American Academy of Family Physicians, Chair of the Department of Family Medicine at KU and now as medical director of an integrative medicine practice in Mission, Kansas.

As you are well aware, the American public, including many Kansans, are seeking health care options from many complementary providers. Often, finding quality care and advice from well-educated, trained practitioners is difficult in an environment where standards in the form of licensing and credentialing are not clarified. Currently, many types of individuals refer to themselves as “naturopaths”, “traditional naturopaths”, “NMD’s” and other confusing titles. Some of these individuals are licensed in other health care professions, such as chiropractic and dentistry. Many are self-taught, or have taken weekend seminars or internet courses offering “degrees” in naturopathic medicine. A few have actually graduated from four year, full time schools of naturopathic medicine, with a standardized curriculum, supervised clinical experience and national board examinations. How is a potential patient to distinguish a fully trained naturopath from the others?

This is similar to the situation that prevailed in American medicine prior to the Flexner Report of 1910. At that time, there was no standardization for the education of medical doctors, few high quality schools of medicine, and numerous small private, for-profit operations – including one in Parsons, Kansas! After a thorough public evaluation by the Flexner Commission, a standard medical curriculum was designated, and only a few of those many medical programs met the criteria. With that change, the public was assured that if someone claimed to be a medical doctor, they had been appropriately trained and were qualified to be licensed.

The education of naturopathic physicians is not equivalent to that of medical doctors. We have more in-hospital experience, more training in pharmacology and more contact with very ill patients. Naturopaths, on the other hand, are better trained in nutrition, non-pharmacologic therapies, homeopathy and other techniques to manage outpatient, chronic conditions. Those who have completed the full four years of standardized, graduate, doctoral education in naturopathic medicine deserve to be recognized and be eligible for licensure. And SB610 should be clear that others without this type of training should **not** be permitted to call themselves naturopaths in any form. Avoiding confusion for the public is one of the most important reasons to enact this legislation. Health food store personnel, nutritional counselors, health advisors and other well intentioned but differently educated individuals should call themselves what they are, but not naturopaths. Thank you for your consideration of this important issue.

H & HS  
4-1-02  
Atch #2

Good afternoon!

My name is Terry Mikan. I am a patient of Dr. Mehdi Khosh and here today to speak on behalf of Naturopathic medicine.

I was diagnosed with dermatomyositis in late February of 2001. Dermatomyositis is a chronic (long lasting) connective tissue and autoimmune disease. The most common symptom is muscle weakness, usually affecting those muscles that are closest to the trunk of the body (proximal). In an autoimmune disease, the immune system loses its ability to tell the difference between foreign substances and its own cells and tissues. The immune system then makes "auto antibodies" directed against "self". The autoantibodies build up in the tissue and causes inflammation, injury to the muscles, and pain.

In my case, I experienced severe muscle weakness and pain initially in the large muscles about the hips, legs and shoulders. The weakness in my muscles made it difficult to walk, lift my arms and getting up from sitting and lying down positions. In fact, in order to get up from either position, I needed assistance from my wife. My right arm became frozen against my body. If I wanted to use my right hand and arm to eat or brush my teeth, I would have to place my left hand under my right arm's elbow and lift. The left arm itself could go no higher than my mouth. Even more frightening was the muscle weakness and inflammation in my throat area that made swallowing difficult at times. To round it off my neck muscles were affected to the point where my head was tilted to the right.

There are two ways in which one can develop dermatomyositis. The first is a genetic defect exists in your immune system and something triggers the disease, and the second is it can be drug induced after taking certain lipid lowering drugs, (i.e. Cholesterol medication). It is the opinion of the rheumatologist I visited at the Mayo Clinic in Rochester, MN that mine is drug-induced. Both my primary care physician and local rheumatologist have stated to me that I will never be allowed to go back on statin drugs to treat my cholesterol. Which brings me to why I am here today speaking on behalf of Naturopathic medicine.

To begin with my cholesterol was at 225 when my primary care physician put me on a statin drug. I was given no other options by him to treat this condition. The drug he put me on, Baycol, has recently been taken off of the market by its manufacturer, Bayer, after 31 deaths in the USA were linked to an unusual side effect, the breakdown of muscle. In all likelihood, Baycol was the trigger resulting in the dermatomyositis I have today. A small percentage of adults do get well within 2 years. For most it is a case of living with the disease and understanding as much about your illness as possible, so that even during the periods of increased pain and weakness a nearly normal life can be led.

H & HS  
4-1-02  
Atch #3



In early April, the Lawrence rheumatologist strongly recommended I seek a second opinion from a major medical center that does research on myositis because she wasn't happy with my progress. My condition, described earlier, seemed to be getting worse than better. The rheumatologist at the Mayo Clinic had done research on the medication that I was now taking. He confirmed the diagnosis and treatment strategy prescribed by my Lawrence doctor. I told him I was looking at alternative medicine to deal with my high cholesterol and possibly other problems associated with my disease. He said five years ago he would strongly disagree with me on following anyone else's advice, but the rheumatologist's. Today, he said he had no problem with his patients seeking reputable alternative care providers.

I headed home from Rochester determined to find a naturopath, hopefully located in Lawrence, if not Kansas City. While on extremely high dosages of prednisone and methotrexate, I wanted to begin formulating and following a plan to lower my cholesterol and possibly deal with some of the side effects I currently had (loss of weight - 35 lbs., loss of muscle in my legs and arms, hair loss and elevated liver enzyme AST/SGOT at 600.)

I had my initial consultation with Dr. Mehdi Khosh on 5/18/01. He began treating me for dermatomyositis and hyperlipidemia. Dr. Khosh also applied a variety of procedures on me ranging from acupuncture, electronic pulsing, cupping and red clay to help bring the inflammation down in my legs, neck and shoulders. I went from being unable to lift myself from both a sitting and laying position to raising myself alone within 30 days after beginning treatment from Dr. Khosh. By Mid-August I was playing 9 holes of golf again.

My liver enzyme was restored to the normal range and remains there today. Everything began to improve after I started treatment with Dr. Khosh. My hair has grown back, I've put on 20 lbs., the muscles in my legs have come back and the pain and muscle weakness has been greatly reduced. I believe meeting Dr. Khosh has changed my life. I have a proactive plan that I believe will allow me to lead a normal, healthy life. Because naturopaths are not licensed in Kansas, most if not all, insurance plans do not cover this treatment. I petitioned our company's carrier to consider paying for the treatment I receive from Dr. Khosh. I am happy to report they approved Dr. Khosh's treatment and are covering it under our plan today.

I am CEO of Regulatory Consultants, Inc., employing 45 people, 35 located in Kansas. I bring this up only to share with you my understanding and experience dealing with rising medical costs.

First, let's look at my situation starting with my doctor's recommendation I begin using cholesterol medication when my cholesterol was at 225.

The insurance plan will pay for this medication for the rest of my life. No questions asked! What is the cost of a consultation with a naturopath, who lays out a wellness program incorporating supplements, diet and exercise? From a cost standpoint this is not even close to as expensive as lifelong medication. More importantly, the possible side effects of cholesterol medication, which by the way are clearly not yet understood, are eliminated. The supplements can be funded through your health care flexible spending account, which is a recent ruling by the IRS. (Please see the Informational Letter 2001-0297).

The IRS recognizes that the actual treatment of the disorder could be directed by a naturopathic physician, rather than a traditional doctor. Is this not a clear message that naturopathic medicine is moving into the mainstream?

Dr.'s Mehdi and Farhang Khosh already are a valuable assets to the Lawrence community. Credentialing helps remove many of the obstacles they face today. Being accepted by insurance plans being foremost. I hope my story provides you with just another compelling reason why recommending credentialing by your committee to the legislature is the right things to do.

Thank you for this opportunity to speak here today.

Enclosure: IRS Informational Letter 2001-0297

The pool would be set up by health plans, which would chip in roughly 2% of premium increases associated with capitation payments annually for the next three years.

The concept of rewarding physicians for providing quality care—rather than for holding down costs—has gained momentum in recent years, partly because several Institute of Medicine reports have documented shocking defects in the way the nation's health care is delivered (*BI*, June 11, 2001). But until now, most efforts have come from individual health plans, each using its own performance measures and incentive scale.

three years, the value of the net-aside would grow as premiums rise.

Premium increases "will remain in the high single digits or more for at least another three years," the IHA said on its Web site. "There is, therefore, a window of opportunity in the next 12 to 18 months to build a 'pay for performance' system that can be funded out of those coming increases."

The initiative is being spearheaded by six health plans: Aetna U.S. Healthcare of California, Blue Cross of California, Blue Shield of

# IRS rules cayenne a valid medical expense in some circumstances

By JERRY GEISEL

## WASHINGTON—A spicy tale?

A recent Internal Revenue Service information letter says the cost of cayenne pepper recommended by a patient's naturopathic physician to treat Raynaud's disease, a circulatory problem affecting the blood vessels in fingers and toes in cold weather, qualifies as a bona fide tax-deductible medical expense. That determination is important to employers and employees because, for example, only tax-deductible medical care expenses can be funded through health care flexible spending accounts.

In Informational Letter 2001-0297, the IRS says that an expense is considered to be for medical care if its primary purpose is the diagnosis, cure, mitigation, treatment or prevention of disease.

Under tax regulations, medical care expenses are tax-deductible to the extent that they are limited to those incurred for the prevention or alleviation of physical or mental defects or illnesses. An expenditure for treatment that is merely beneficial to the general health of an individual would not be considered an expense for medical care, the IRS said.

An individual could prove that an expense of a "peculiarly" personal nature is for medical care by meeting several objec-

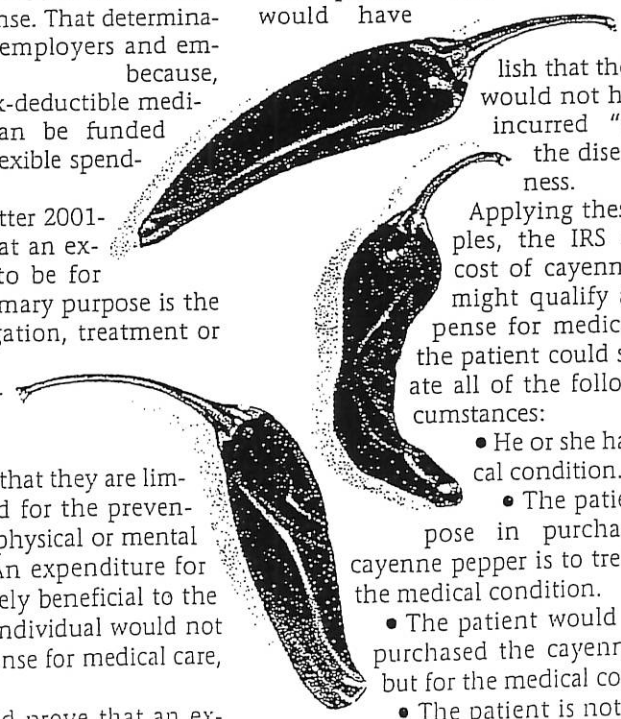
tive criteria, the IRS said. Those criteria include the diagnosis of a doctor, a link between the treatment and the disease, the effectiveness of the treatment, and the proximity in time to the onset or recurrence of the disease. The actual treatment of the disorder, though, could be directed by a naturopathic physician rather than a traditional doctor.

A patient also would have

to establish that the expense would not have been incurred "but for" the disease or illness.

Applying these principles, the IRS said, the cost of cayenne pepper might qualify as an expense for medical care if the patient could substantiate all of the following circumstances:

- He or she has a medical condition.
- The patient's purpose in purchasing the cayenne pepper is to treat or ease the medical condition.
- The patient would not have purchased the cayenne pepper but for the medical condition.
- The patient is not consuming the cayenne pepper to satisfy normal nutritional requirements.





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## **Education**

“Naturopathic physicians, like allopathic physicians, receive 4 years of post baccalaureate education culminating in a doctoral degree. They are broadly trained in the pre-clinical sciences and the clinical disciplines, with an emphasis on health promotion, disease prevention, and treatment based on the stimulation or support of natural processes. Their clinical education, which is entirely outpatient based, is designed to prepare them to be primary care providers.”

Quote from *The Journal of the American Medical Association (JAMA)* in 1998.

Modern naturopathic medicine is a distinct system of primary health care, an art, science, philosophy and practice of diagnosis, treatment and prevention of illness. Naturopathic medicine is distinguished by the principles upon which its practice is based. These principles are continually reexamined in the light of scientific advances. The techniques of naturopathic medicine include modern and traditional, scientific and empirical methods.

A licensed naturopathic doctor (N.D.) attends a four-year graduate level naturopathic medical school and is educated in all of the same basic sciences as an M.D. but also studies holistic and nontoxic approaches to therapy with a strong emphasis on disease prevention and optimizing wellness. In addition to a standard medical curriculum, the naturopathic doctors is required to complete four years of training in clinical nutrition, acupuncture, homeopathic medicine, botanical medicine, psychology, and counseling. A naturopathic doctor takes rigorous professional Naturopathic Physicians Licensing Examination (NPLEX). NPLEX is the standard examination used by all licensing jurisdictions for Naturopathic doctors in North America. It is administered by an independent agency, the North American Board of Naturopathic Examiners (NABNE). It includes all basic science exams (anatomy, physiology, pathology, biochemistry, microbiology, immunology, and etc.), which are taken after the first 2 years of medical school. The clinical science examinations are taken following graduation after the 4th year of school. They include: clinical and physical diagnosis, laboratory diagnosis and diagnostic imaging, botanical medicine, pharmacology, nutrition, physical medicine, homeopathy, minor surgery, psychology and lifestyle counseling, and emergency medicine. Individual jurisdictions may give additional examinations in jurisprudence. Licensed naturopathic physicians must fulfill state-mandated continuing education requirements annually, and will have a specific scope of practice defined by their state's law.

## **Why Naturopathic Medicine Licensing is needed in Kansas now?**

Licensing of naturopathic doctors in Kansas is in the best interest of the consuming public for many reasons:

- Licensing of naturopathic doctors protects the public by establishing educational, training, testing and accountability standards and procedures;
- The integration of naturopathic doctors into the established medical system is proceeding rapidly; licensing will properly establish the scope of practice for naturopathic physicians while providing the public with alternatives;
- Licensing naturopathic doctors is consistent with the laws and identification of the profession on state and federal levels;
- Natural medicine health care consumers deserve the same regulation of their health care professionals as their counterparts in the mainstream medical community; and
- As an emerging profession, the highest available standards of the naturopathic medical profession should be incorporated into statutory language.
- Licensing of naturopathic doctors is to protect the integrity of a profession against charlatans and unqualified persons. When states license naturopathic doctors, they require practitioners to have graduated from an accredited program and to have completed all appropriate tests and clinical training.

Without licensure, anyone can "hang out a shingle" and practice with nothing more than a "mail-order" degree or a home study course. Because naturopathic medicine is not regulated in state of Kansas, some individuals call themselves "naturopaths" who do not meet the historical standards of the profession. Such individuals sometimes have degrees or diplomas from correspondence schools, weekend seminar programs without supervised clinical training, extremely abbreviated courses, "certifying" agencies that confer naturopathic credentials based on other kinds of health education, "home study" schools without state authority to grant degrees, or schools without naturopathic programs or faculty. None of these programs qualify a candidate to sit for board exams or to receive licensure in any state. In some states, individuals call themselves "naturopaths" simply by paying a fee for a business license requiring no evidence of education at all.

### **Freedom of choice of health care provider.**

You may never make the choice to use naturopathic care. Many of your constituents do. The number of Americans using alternative therapies rose from 33% in 1990 to 42% in 1997 and over 50% today. Over 83% of patients surveyed at M.D. Anderson Cancer Hospital had used at least one complementary and alternative medicine modality. In 1990 the number of visits to alternative practitioners was an estimated 425 million and exceeded the 386 million visits to conventional physicians. Consumers pay more for visits to alternative practitioners than are paid out of pocket for hospitalization expenses.

Without standardized licensing laws, people lack the basic freedom of health care of their choice. Despite the fact that conventional treatments are often ineffective, simply mask symptoms and are subject to troubling side effects, Americans who seek better and more effective health care must struggle to win the right of open access to complementary practitioners and treatments. Those seeking alternative treatments have difficulty finding licensed providers because of resistance by those already licensed to new licenses. They confront obstacles from insurance companies that won't pay for effective treatments because they fall outside of the conventional "standards of care."

Licensing of naturopathic doctors promotes freedom of choice of health care providers for consumers by providing them with more options so that they may find the care best suited to their needs. Freedom of choice also is promoted when providers are licensed. Consumers are allowed to make their choices knowing that their health care providers are required to meet regulated standards of education and training.

We believe people need access to safe and effective naturopathic treatments provided by professional practitioners. In 1986 the legislature implemented, by statute, the credentialing process to recognize legitimate new health care professions. Our naturopathic association has complied with those statutes. The credentialing committee and the Secretary of Kansas Department of Health and Environment have approved all ten criteria of our application and recommended the licensing of naturopathic doctors.

In the process of trying to get a licensing bill passed we have entered negotiations with our opponents. In order to gain their cooperation, we have conceded on numerous issues. We conceded on using the title "physician," on performing obstetrics, on performing minor surgery, an open ended formulary, and having a separate board as common in other licensed states. Our opponents have conceded nothing. Dr. Benjamin Rush, signer of the Declaration of Independence, personal physician to George Washington, made the following statement: "Unless we put medical freedom into the Constitution, the time will come when medicine will organize into an undercover dictatorship. To restrict the art of healing to one class of men and deny privileges to others will constitute the Bastille of medical science. All such laws are un-American and despotic and have no place in a republic. The Constitution of this republic should make a special privilege for medical freedom."



### **Oregon Office of Educational Policy and Planning Study**

In studying the scientific basis of naturopathic medical education, the Oregon Office of Educational Policy and Planning (OEPP), which is responsible for regulating academic degrees in Oregon, tested the quality of board examinations in that state. In a letter to the National Council Against Health Fraud, OEPP Administrator David Young describes the evaluation thus:

...We had 17 sections of the state (naturopathic medical board) examinations subjected to a blind review by 17 specialists, senior clinical and basic science faculty at a conventional school of medicine. Their evaluations showed that it would not be possible for an individual to pass all of the tests - which is necessary for licensure - without having a comprehensive foundation in the biological and biomedical sciences . . . In other words . . . [a naturopathic college] has no choice but to prepare N.D.s with a biological and biomedical education of the same breadth and depth that prepares an M.D. to be a primary care physician. Naturopathic medicine, under state regulation in Oregon, diverges from other forms of primary medical care at that point where professions in common possession of scientific fact conscientiously disagree on how best to use their shared knowledge in treating patients.

DATE: April 1, 2002

TO: Rep. Garry Boston, Chairman, and  
Members, House Health and Human Services Committee

FROM: Michael J. Randles, MD

SUBJECT: Support for SB 610

The healing arts act is only one of many laws in Kansas that authorize the state to examine the credentials of, and monitor the professional activities of highly trained professionals. The real question that the legislature should be considering is why the state is NOT already protecting the citizens of Kansas by verifying the credentials of persons alleging to be so trained, and monitoring their professional activities. At one time, the only persons covered under this act were Doctors of Medicine. They have historically opposed addition of any other discipline to those ranks, and consistently use the argument that quality of care would suffer if another discipline were included. In spite of those dire predictions, the addition of Doctors of Osteopathy and Doctors of Chiropractic were added, but the predicted dire results did not follow. Objective and scientific rational examination of the outcomes of treatment have shown significantly better outcomes for some conditions treated by Chiropractic than by MD's, but many MD's would still call chiropractic treatments alternative treatments rather than complementary. The term Complimentary, as applied to this subject by the National Institutes of Health, imply a peer to peer relationship between practitioners of a variety of disciplines, including Naturopathy. Naturopathy is not a fad or whim of public demand, but a discipline that invites and encourages rigorous scientific inquiry and is just as interested in understanding the mechanisms of disease and the results of interventions. I am firmly convinced that Naturopathy is much more willing to accept and recommend evaluation and treatment by MDs, and therefore embrace complementary care, than vice versa. The expressed attitudes of MD's are not those of peers, but condescending and arrogant superiors, a characteristic that they far too often present to the patients that they are supposed to serve, and an attitude that is hostile to helping patients understand the nature of their illness and their obligations as a patient in their self care. The holistic approach to care espoused by Naturopathy is much more likely to be effective for many conditions for which the typical approach of MD's has been to prescribe potent medications with serious adverse effects, occasionally injury and death, but with no change in the underlying disease process, otherwise described as "symptomatic" treatment. MD's frequently describe

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their treatments as directed by rigorous scientific inquiry, but then prescribe potent medications in a manner neither approved by the FDA, supported by study, or even as advised by the drug manufacturer based on studies. None of these activities (off label use of legend drugs) are even monitored or regulated by the Healing Arts Board, with a few exceptions where the misuse of drugs by MD's have been so egregious as to demand intervention for the public good. An excellent example of this are the amphetamine derivatives that were initially outlawed for long term use by the Board after well documented widespread complications from misuse by MD's. When Phen-Fen became popular as a treatment it was not supported by controlled clinical trials, or even recommended for use in combination by the drug manufacturers. The same group decrying the professionalism of Naturopathy (MD's) were the ones that petitioned for the Board to relax those regulations, at least until the problems caused by Phen-fen were so abundantly obvious that the result were lawsuits which will cost billions. Objective, well conducted studies have shown that there are serious quality of medical care problems in the US, and that obvious errors alone are responsible for thousands of deaths. I was a practicing physician for over twenty years in Ohio, Michigan, and Kansas. Particularly in my last few years of practice, I saw patients on a daily basis that were suffering from symptoms caused by potent medications that were not necessary to their underlying disease process. Every week, I saw patients that were hospitalized all or in a significant part due to adverse effects of medications, and on a monthly basis I saw patients that died as a consequence of complications more of their treatments than the direct effect of their illness. In every instance the record reflected death due to the disease rather than the treatment, even when the medication complication was obvious. Every example of alleged mistreatment attributed to Naturopathy I have reviewed began with a patient who felt ill served by the existing "licensed" practitioners, and sought hope through a practitioner that would listen to them and take them seriously. To blame the practitioner for the outcome of the disease is intellectually dishonest. A fair comparison would be to blame a family practice MD, who provided palliative care to a cancer patient unwilling to undergo the side effects of chemotherapy, for not demanding that the patient suffer the effects of "proven treatment". The best way to make sure that a high quality of Naturopathy advise is available to Kansans, is to liscense Naturopathy. The quality issues of the MD's are not an argument for the licensure of Naturopathy, but are cogent to the discussion in this way. MD's who are genuinely concerned about the quality of care of Kansas's should not be as concerned about decrying the discipline of Naturopathy, but rather should be concerned about the quality of training , credentials, and ongoing quality of practice of both MD's and Naturopathy, and work to assist the Board of Healing Arts to monitor both disciplines. I encourage the legislature to pass SB 610. Thank you for your atention ,Michael J. Randles MD (ret.)(316) 733-4238

Melva Tremaine

To Whom It May Concern:

I strongly support Bill No. 610-Naturopathic Doctor Licensure Act because I believe the citizens of Kansas should have a choice concerning their health care. I made this choice seven months ago and chose to seek the services of a Naturopathic Physician after exhausting my options in the health care field. I had suffered with migraine headaches, severe abdominal cramping, insomnia, elevated cholesterol, and depression for over 10 years. For my migraine headaches I was taking up to 9 Imitrex tablets per month and 6 Excedrin tablets per day and was still having frequent headaches which were incapacitating at times. I had tried special diets and medication for my abdominal cramping and elevated cholesterol but continued to experience these problems.

Out of my desperation because the medical community had failed to help me with my medical problems I sought help in the alternative health care field. I had not done this before and really did not know where to start because I did not know anyone who was seeking help from a naturopathic physician. At a particularly low time in my mental state I decided to search on the Internet and located information for the naturopathic physicians in Lawrence, Kansas, since this location was nearest me. I called and made an appointment with one of the physicians and later called and canceled the appointment because I became unsure about this type of health care. After thinking about it for a few more weeks I called and made an appointment with Dr. Farhang Khosh.

On my first visit to him he spent over an hour with my husband and I listening to my concerns and outlining my treatment plan. He was very understanding. He addressed my concerns in a very thorough manner which consisted basal body temperatures, vitamins, and an allergy elimination diet. I saw him once a month for the next few months and he always took the time to listen and to explain his plan of care for me in great detail. After following the allergy elimination diet for 3 1/2 weeks, it was determined that my migraine headaches and irritable bowel syndrome were diet related. I was allergic to wheat, dairy products and egg yolks. For the next six months I followed this diet and have not experienced a migraine headache and my abdominal cramping has stopped. My chronic sinus infections may have been diet related also because for the first time in approximately 15 years I did not experience an acute sinus infection this winter.

I had also experienced a bitter taste in my mouth for years. This has also stopped.

With natural supplements at bedtime I no longer suffer from severe insomnia.

For the past year and a half I had been experiencing depression with frequent bouts of crying which was very unusual for me. I finally got up the courage to mention this to my medical physician who prescribed an antidepressant which made me so dizzy I could not function. I took it for 10 days and then stopped. At my next appointment I discussed my depression with Dr. Knosh and he asked me to take a Homeopathic Medication which I did and my depression was much better the next day. This was three months ago and I continue to feel great with no adverse reactions from the homeopathic medication.

Another concern that I had was elevated cholesterol. From July to December, 2001, my Total Cholesterol decreased from 283 to 217; HDL Risk Factor decreased from 3.68 to 3.19. I had not experienced this much decrease in the past while being on medication or special diet.

Overall, I am extremely pleased with the care that I have received from my naturopathic physician. I really appreciate the way that he has allowed me to be involved in my own health care.

I continue to see my medical physician once a year for my annual physical exam.

Passage of this bill would also protect the citizens of Kansas against unlicensed practitioners. When one begins to search for alternative health care sometimes their state of mind is such that they may not search for a practitioner that has extensive training but just someone to help them in their present state.

I strongly urge you to pass Bill 610!

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## **Testimony by Robin Goff, RN, BSN, MAV**

SB 610

March 31, 2002

### **Background**

I am a nurse educator and run my own center which provides education for health care professionals and the general public about the integration of conventional medicine and complementary and alternative medicine (CAM). I have been teaching Continuing Education for nurses for over ten years and serve as the networker for the state of Kansas for the American Holistic Nurses' Association. I teach nurses from all over eastern Kansas on a regular basis and hear a great deal of concern from them about the current crisis in health care related to the lack of education about CAM. Research findings (David Eisenberg's studies at Harvard Medical Center) have been telling us for years now that rates of usage of CAM modalities have been escalating steadily. The number of visits to CAM practitioners has surpassed the number of office visits to primary care physicians in the U.S. The National Center for Complementary and Alternative Medicine is putting millions of dollars now into not only research about CAM therapies but also into the integration of information about CAM into educational programs for health care professionals.

### **The problem**

Health care professionals have not been educated about the use treatments like herbal remedies, homeopathy and acupuncture and how they interface with the use of pharmaceuticals. Patients are typically not consulting with their medical doctors about the use of CAM modalities (Eisenberg's studies) so we have a huge challenge on our hands, whereby consumers are self-treating and mixing herbal remedies for example with prescription drugs. Both health care professionals and the citizens of Kansas need expert, professional guidance about the safe use of herbs and supplements. Patients are not consulting with their physicians often because they do not see these potent herbal remedies as medicine, they do not believe their physician will respect their choice to use such remedies and in some cases they do not believe their physician is well informed about many CAM therapies. The public is seeking information from the internet and their friends and neighbors so that they are getting varying degrees of factual information. The safety of the consumer is at stake when some very potent remedies are mixed in ways that are contraindicated, often creating serious problems.

### **Naturopathic Physicians**

The licensure of naturopathic physicians can allow the public and health care professionals to identify highly qualified, professional experts in our communities who can provide expertise in the use of CAM modalities. Refusing licensure holds the N.D. back from the practice of the profession for which they have trained extensively. Kansas will lose these experts to other states where licensure is available, if after years of effort licensure is not granted. We need this resource in our state immediately. This situation is

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not new and the problem is increasing rapidly. Having a basic education comparable to a medical doctor, these N.D.'s specialize in nutrition, herbs, homeopathy, acupuncture and some manipulation. They know the science, conduct their own research projects and serve as a resource for many doctors and nurses in our communities. I do not see the licensure of this profession as a threat to any other health profession; rather I see it as providing a valuable resource, which is urgently needed. I personally see both my internist and N.D. and they work cooperatively with each other. This model is the integrative one being advocated by NIH and the passage of this bill would put Kansas on the cutting edge of the new trends in medical care. Slowing the process down is not in the best interest of the Kansas public. Qualified Naturopathic Physicians, who can clearly be identified by that title; will only enhance safe care for Kansans and provide a much-needed resource for health care professionals. I work closely with the Khosh brothers, N.D.'s, and they are already providing education for nurses and the general public, on a regular basis, often without pay. They are here in Kansas because they genuinely want to be of service. They deserve the licensure they are entitled to and Kansans deserve this expert resource for our communities.

Robin Goff, Director  
The Light Center  
1542 Woodson Rd.  
Baldwin, KS 66006  
785 255 4583

Jeanne Drisko, MD, University of Kansas Medical Center, Program in Integrative Medicine (913) 588-6208 jdrisko@kumc.edu

**Background:**

1979 KU Medical Center, MD degree  
1995-1997 Complementary and Alternative Medicine Training culminating in with a year at the Garvey Center in Wichita, Kansas  
1998 Hired by the Dean of the School of Medicine to develop a Program in Integrative Medicine

**3-Pronged Program:**

- \* Educate
- \* Research
- \* Patient Care

- **Time has come to acknowledge and license naturopathic doctors.**
- The health care consumer seeking services of Complementary and Alternative Medicine (CAM). Increased prevalence of use reported to be 42.1%-83% (Eisenberg, 1998; Richardson, 2000).
  - \* Total visits to CAM providers (1997) estimated to be 629 million, exceeding all visits to primary care physicians, which were estimated to be 386 million visits (Eisenberg, 1998)
  - \* Out-of-pocket expenditures for all CAM professionals at 12.2 billion dollars and total out-of-pocket expenditures for all CAM therapy services at 27.0 billion dollars
- 15 million adults estimated to use prescription medications with nutritional supplements setting them up for adverse reactions; few trained professionals to counsel consumers. The majority of physicians have no training or understanding of the potential uses or interactions. Naturopathic doctors have this expertise.
- Conversation about CAM between physicians and patients is low. Only 23-40% of patients are reported to inform their physicians about the CAM therapies.
- Increasing research and publications in both the medical and lay literature will only increase the use by the consumer.
  - \* **“This is a trend, not a fad”** (Eisenberg, 2000).
  - \* NIH consensus paper on acupuncture, Columbia Presbyterian Medical Center: CME course on the use of medicinal plants)
- Necessary to protect consumers of these services and products from unscrupulous and untrained providers. Licensing would be a start.
- **The time has come to license and acknowledge the naturopathic profession.**
  - \* Four-year medical school after obtaining a degree from a recognized college with prerequisites in sciences
  - \* First years of Naturopathic Medical School are in core curriculum such as physiology, anatomy, biochemistry, and pharmacology.
  - \* This is coupled with training in natural products such as medicinal plants, vitamins, minerals, and other therapies such as acupuncture.
- Naturopathic doctors are trained in the use and administration of medicinal plants, vitamins, and minerals.
- **Time has come to partner with naturopathic doctors and increase communication between all types of health care providers for the best care and protection of Kansas patients.**

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## *Sedgwick County Health Department*

1900 E. Ninth Street  
Wichita, KS 67214-3115  
TEL: (316) 268-8441 \* FAX: (316) 268-8348

DATE: April 1, 2002

TO: Rep., Garry Boston, Chairman, and  
Members, House Health and Human Services Committee

FROM: Charles Magruder, MD, MPH

SUBJECT: Proponent Testimony for SB610

I am writing to request your support for Senate Bill 610. Enactment of this bill could result in expanded health care capabilities for many of our citizens.

Over the past several years, Kansas communities have become more diverse and cultural perspectives are more varied. As a result, health care professionals at the Sedgwick County Health Department have noted an increased demand for alternative medical services, and it has become apparent that many in our community may be more willing to seek needed preventive and medical care if appropriate cultural contexts were available. As many citizens from various cultures are experiencing serious and costly health problems, we would be remiss in our responsibilities as health care providers if we failed to account for these desires and preferences.

In this light, the Sedgwick County Health Department has invested time over the past few years to learn of the activities and potential benefits of alternative medical practices. I believe there are aspects of this arena that merit support as there is considerable potential to uniquely address essential medical needs in our communities.

It is clear that many of our citizens desire greater choice and availability of health care services. Passage of Senate Bill 610 will help address this situation. Thank you for taking the time to address this issue. Please contact me with any questions.

Sincerely,

Charles Magruder, MD, MPH  
Director/Health Officer

# BASTYR UNIVERSITY

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www.bastyr.edu

March 13, 2002

Honorable Gwen Welshimer  
State Capital  
Topeka, Kansas 66512

VIA FACSIMILE

Re: Accreditation of Naturopathic Medical Colleges

Dear Representative Welshimer:

Dr. Khosh asked that I convey to you the accreditation status of Bastyr University.

The Northwest Association of Schools and Colleges has accredited Bastyr University since the late 1980's. This is the same regional accrediting body that accredits major universities in the Northwest states, including the University of Washington.

For more information on Bastyr University, please visit our website, [www.bastyr.edu](http://www.bastyr.edu). We are the largest and leading natural health sciences university in North America, with over 1100 students and 11 degree and certificate programs, both undergraduate and graduate.

Please feel free to contact me if you have any additional questions.

With great respect,

  
David C. Matteson  
Director of Public Affairs

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**White House Commission on  
Complementary and Alternative Medicine Policy**

**FINAL REPORT**

**March 2002**

**Chapter 10: Recommendations and Actions**

**Recommendation 20: States should evaluate and review their regulation of CAM practitioners and ensure their accountability to the public. States should, as appropriate, implement provisions for licensure, registration, and exemption consistent with the practitioners' education, training, and scope of practice.**

**Action**

20.1 The Department of Health and Human Services' policy advisory committee, in partnership with state legislatures, regulatory boards, and CAM practitioners, should develop model guidelines or other guidance for the regulation and oversight of licensed and registered practitioners who use CAM services and products. This guidance should balance concerns regarding protection of the public from the inappropriate practice of health care, provide opportunities for appropriately trained and qualified health practitioners to offer the full range of services in which they are trained and competent, maintain competition in the provision of CAM and other health services, preserve CAM styles and traditions that have been valued by both practitioners and consumers, and determine the extent of the public's choice among health care modalities.



March 26, 2002

Representative Garry Boston  
Chairman House Health & Human Services Committee

Re: Senate Bill 610 (Naturopathy Licensure bill)

Dear Mr. Chairman,

I am writing this letter in support of Senate Bill 610 and the licensure of Doctors of Naturopathy in the State of Kansas. Let me explain my position and some qualifications.

I am a Chiropractor and a residency trained, Board Certified Chiropractic Radiologist. I see clinical patients as a chiropractor and I have a radiology practice in which I read x-rays, and MRI scans, that have been referred to me by other chiropractors. I have been in practice in Wichita for 10 years. Dr. Beyrle, a naturopath here in Wichita refers patients to our office when radiographs are indicated. He has always sent patients that were in clinical need of radiographs, in short his clinical judgement has always been sound. I have no problems accepting referrals from the naturopaths, as they are trained in differential diagnosis and are aware of when imaging may be needed.

The naturopathic doctors that have completed a four year program from an accredited college/university should be allowed to practice their trade. Chiropractic Colleges, and medical schools are also accredited through the US government. If a naturopathic college is accredited, then the standard of the curriculum has been approved by the US government. (I do not want persons that have only completed a correspondence course to be able to practice, they must complete a full program, just as any chiropractor, osteopath, or medical doctor has had to do). Their scope of practice should reflect the education that they had through their accredited college. An example, is that Chiropractors in the state of Kansas can evaluate, diagnose and treat the whole body. Chiropractors in the state of Michigan can only deal with a patient's spine. We are taught in college to evaluate, diagnose and treat the whole body, the whole person. Naturopaths have a similar broad-based curriculum.

Naturopaths are really the only healthcare providers that are trained in the use of botanicals while in college. Plant medicines, as you are probably aware, can be powerful agents. The professional using them should have appropriate training. Chiropractic college does not provide much coverage in this area, neither do osteopathic or medical

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programs. Chiropractors, osteopaths and medical doctors have had to obtain this  
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knowledge in post-graduate courses. With public demand changing and requesting alternatives to pharmaceuticals, colleges are starting the slow process of incorporating this information.

The use of homeopathic agents is controversial. However, I have seen no information on complications from homeopathic agents. I can not say the same for information on vaccinations provided by osteopaths and medical doctors.

Public safety: The public at large would be safer with licensed Naturopathic doctors. If a serious error were to be made now, then the only recourse for the patient would be to file a civil law suit. This action would do nothing to stop the naturopath from practicing and possibly making another error. The Licensure of naturopaths would provide greater public safety because the naturopathic doctors would have to answer to a board and their license could be revoked and they would have to leave the state. They would also be required to carry malpractice insurance, not a requirement while they are not licensed.

Please consider my comments, If you have any questions I would be glad to speak with you or your committee members.

Steven J. Gould, D.C. D.A.C.B.R.

cc.

Committee Vice-Chairman; Representative Jim Morrison  
Ranking Democate; Representative Judy Showalter  
Representative Gwen Welshimer



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March 11, 2002

Rep. Garry Boston, Chairman  
House Health and Human Services Committee  
KANSAS STATE LEGISLATURE  
State Capital Building, Room 156-E  
Topeka, Kansas 66612

**Subject: Proponent Testimony on SB610**

Dear Chairman Boston and Committee Members,

In lieu of my personal presentation, I have outlined a very quick sketch of the problem with our current health care system. I draw your attention to the new report just published from the Institute of Medicine to best summarize.

The Institute of Medicine is a branch of the National Academy of Sciences, a congressionally mandated body. They have recently published a book called *Crossing the Quality Chasm*. In this document, they clearly outline the problems that our current health care system faces.

“The committee is confident that Americans can have a health care system of the quality they need, want, and deserve. But we are also confident that this higher level of quality cannot be achieved by further stressing current systems of care. The current care systems cannot do the job. Trying harder will not work. Changing systems of care will.” (IOM, 4)

“The Institute of Medicine’s (IOM) National Roundtable on Health Care Quality documents three types of quality problems – overuse, underuse, and misuse.” (IOM, 23)

“We need a new vehicle or perhaps, many new vehicles. The only unacceptable alternative is not to change.” (Chassin et al, 1998 as quoted by IOM, 24)

We, at AMI, agree with our esteemed colleagues at the Institute of Medicine. To this end, we began a scientific pilot project approximately five years ago to build an entirely new health care system based on integrative medicine and test its efficacy. I am happy to report that we now have three-year outcomes, which show that a properly designed and

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executed integrative health care system can reduce total medical expenditures by well over 50%. Every key managed care benchmark has been reduced by over 50%:

- Hospital admissions reduced over 50%
- Total hospital days reduced 50%
- Pharmaceutical usage reduced over 50%, and
- Outpatient surgery and procedures reduced over 50%.

We expect to publish this data in a major peer review allopathic journal in the coming year. We have rigorously looked at our data with the assistance of an independent actuary. All of our data has been sex/age adjusted. We have matching control groups that indicate the AMI population studied has at least equal, if not a greater, overall medical burden of chronic illnesses than the controls.

The key to changing the current health care system is to alter the utilization of pharmaceuticals and surgery as a first line treatment option. While our model certainly contracts with all specialties in the allopathic world, we attempt to utilize physicians who practice primary care without the use of pharmaceuticals and/or surgery as a first line treatment modality.

To the best of my knowledge, AMI is the only company in this country that has built such an integrative medicine system encompassing over 70 complementary/alternative medicine (CAM) physicians, over 3000 conventional allopathic specialists, and over 15 hospitals all in the Chicago metro area. We believe these initial results warrant licensing of naturopathic doctors in all states that have not already done so. We are experiencing rapid expansion and duplication of this model nationwide.

I would be happy to answer any further questions regarding our outcomes.

Sincerely,



Richard L. Sarnat, M.D.  
President  
Alternative Medicine Integration  
rsarnat@alternativemedicineint.com

RLS/amm