



# MARY FELZKOWSKI

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## Assembly Committee on Health

January 7, 2020

### Assembly Bill 546

Chairman Sanfelippo and Committee Members:

Thank you for allowing me to speak today on Assembly Bill 546 relating to complementary health care practitioners and their ability to operate in the state of Wisconsin. Senator Tiffany and I are bringing this bill forward today for two reasons. The first is to allow for practitioners, such as homeopaths, herbalists, nutritional consultants, and many more to provide their services in Wisconsin legally and without fear of being shut down. Our statutes are currently written so broadly that these practitioners can be criminally charged for 'practice of medicine or other medical occupation' without a license, even though the services they offer are not medical.

This bill lays out clear parameters for what the complementary health care practitioners cannot do to be able to operate, such as:

1. Puncturing the skin
2. Diagnosing medical disease
3. Prescribing or dispensing a prescription drug or controlled substance
4. Recommending that a client discontinue treatment described by a medical professional
5. Acting as a health care professional without the applicable certificate, permit, or license.

It also creates a written disclosure requirement from a practitioner to the consumer including:

1. An acknowledgement that they do not hold a medical certificate, permit, or license.
2. A description of the complementary health service(s) offered
3. And a list of credentials, or other qualifications the practitioner has with respect to the services they provide.

It also includes an enforcement provision that will allow for the Department of Safety and Professional Services to investigate any practitioner that has violated any of the prohibitions in the bill.

The second reason for this bill is the meaning behind its namesake of the Consumer Protection for Complementary Health Care Act. Every industry has fraudulent people looking to take advantage of the unsuspecting, and complementary health care is no different. The clear parameters in this bill will protect consumers from those that choose to obfuscate, confuse, or mislead the public with the product or service they provide. A strong majority of complementary health care practitioners offer legitimate care with their customers' best interest at heart, and this bill ultimately gives a pathway for them to continue operating while creating retribution for bad actors.

Wisconsinites are like people all over the United States. They see an enormous value in having access to this type of complementary health care. I say "complementary" because these practitioners work best in conjunction with physicians and medical doctors, not at odds with them. You will hear stories today from people who respect and love working with their doctors when it comes to medicine, but have other non-medical health care needs that can often be better met by one of these practitioners.

As a two-time cancer survivor, I personally understand how medicine can work together with this kind of care. I regularly met with my oncologist for my cancer treatments, but was also really interested in how to give my body its best fighting chance with natural remedies. Ultimately I survived that battle, and I believe it was because both my medical and non-medical care worked together to find what was best for me.

At the end of the day, this bill makes it possible for consumers to access the kind of complementary health care that they have shown they really want and need, while creating clear standards that will protect them. It is time for Wisconsin to join 11 other states to pass this legislation.

I would like to thank Senator Tom Tiffany for being a great partner on this bill that positively impacts health care access in Wisconsin. Thank you again for your time and I would be happy to answer any questions.



# TOM TIFFANY

STATE SENATOR • 12TH SENATE DISTRICT

## **Testimony on Assembly Bill 546 Assembly Committee on Health January 7, 2020**

Thank you, Chairman Sanfelippo, and members for holding a public hearing on Assembly Bill 546. I would like to thank Representative Mary Felzkowski for her leadership on this bill.

Complementary health care practitioners provide services for many constituents across the state. Often times, our constituents are seeking alternatives as a compliment to treatment they are receiving from physicians. Complimentary care is also utilized by those looking to maintain and achieve wellness and to cope with chronic health issues. Nationally, it is estimated that 40 percent of consumers utilize complimentary care options, spending almost \$35 billion annually on out-of-pocket services related to the purchase of products and services.

This legislation provides necessary parameters for complementary health care practitioners to operate, making it easier to uncover bad actors. Assembly Bill 546 prioritizes consumer protection and transparency, requiring that *complimentary care practitioners provide written disclosure that:*

- Acknowledges that they are not practicing under a health care license, certification or registration granted by the State of Wisconsin;
- Describes the services that will be provided; and
- Lists the degrees, training, experience or other qualifications of the practitioner.

In addition, the bill prohibits practitioners from a number of things including:

- Holding out, stating, or implying that he/she is a health care professional;
- Making a diagnosis of a medical disease;
- Prescribing or dispensing a prescription drug or controlled substance; and
- Recommending to a client that he/she discontinue current medical treatment prescribed by a health care professional.

This bill is modeled after Minnesota and New Mexico law where upfront disclosures are required, prohibited acts are clearly defined, and there is an enforcement mechanism allowing the Department of Safety and Professional Services to investigate violations.

Thank you again, Chairman Sanfelippo, and members for hearing this bill, and I'm happy for follow up questions anytime.

1-7-20

AB 546

In regard to S492, Wisconsin Practitioner Exemption Bill

As a life-long Wisconsin resident I would like to express my support for this bill and urge you to vote for it. My support is based on personal experience: Herbal remedies have on many occasions provided immediate and effective relief for my family and me, at times when we really needed help. The first time was on the recommendation of our doctor's nurse, who advised using an herbal compress to relieve the pain of a clogged duct when my wife was nursing our first baby. It worked like a charm. Later we found success in treating a variety of issues with simple, traditional herbal remedies.

Homeopathic remedies have been helpful in our family on occasion, too: for preventing children's nightmares and for relief from eczema.

I have many friends who have benefited from acupuncture, and I have personally enjoyed benefits from energy healing.

Much of what we call "alternative" medicine is in fact coming to us from traditional healing modalities that have survived not because of superstition, but because they work. In general, the remedies from these modalities are safer and less likely to cause side-effects than the pharmaceutical drugs that have taken their places in modern pharmacies.

I am not opposed to modern medicine, and like most people I have been helped by it. The State does well to enact laws that protect its citizens, but not if the protection is overly restrictive. We each need to take personal responsibility for our health, and to do so requires the freedom to choose the healing treatments we want.

Please vote in support of this important bill.

Sincerely,

A handwritten signature in cursive script that reads "D Waterman". The signature is written in dark ink and is positioned above the typed name and address.

David Waterman  
608 Knickerbocker Street  
Madison WI 53711

To whom it May Concern:

My heart & will being here  
been reported for several years  
through conventional with care  
Nathrapath Katy Wallace.

Recently for several years parameit  
in the realization of my chance  
illness a doctor had labeled  
"incurable". The treatment was  
in coordinated treatment with  
my life (integrative health doctor).

At her suggestion, they called her  
on tests to determine changes of

The illness will as a result of  
opinion to report they cover and  
return my body to health & well being.

I encourage you to support the current  
fee # A5H6/S498

Jeff Smith

6710 Plymouth Ave #320  
Middletown, CT 06457

609-733-7454

Testimony of Elizabeth Rich in favor of AB 546  
Address: W6661 Sumac Road, Plymouth, WI  
Telephone: 920.892.2449  
Assembly District: 59  
Senate District: 20

January 7, 2020

*AB 546 provides important protections for alternative health care providers and has my full support, both as a consumer of alternative health care services and as an attorney who represents several herbalists and other alternative health care providers. In my experience, consumers of such services are extremely well-educated about their health issues and the alternative care they seek out. Their rights and choices must be respected.  
Thank you.*



# Wisconsin Medical Society

**TO:** Assembly Committee on Health  
**FROM:** Nicole T. Hemkes, MD  
**DATE:** January 7, 2020  
**RE:** Opposition to Assembly Bill 546 - Providing complementary and alternative health care practitioners with exemptions from practice protection laws

Good afternoon Mr. Chairman and members of the Health Committee. My name is Dr. Nicole Hemkes. I have been a family physician for over 13 years, and I am the owner and Medical Director of a direct primary care clinic here in Madison. I am here today on behalf of the Wisconsin Medical Society to testify **in opposition to AB 546.**

Complementary and alternative health care (CAHC) practitioners are increasingly becoming a part of the health care landscape in Wisconsin. Patients may choose to utilize CAHCs for themselves and their families. Currently these practitioners operate outside of regulatory authority in the state, creating broader concerns about patient safety. The Society appreciates the effort under AB 546 to bring transparency and clarity to the practices of the CAHCs in Wisconsin. However, the lack of oversight and enforcement parameters in the bill give us significant concern as it puts CAHCs outside of the regulatory framework that applies to all other health care practitioners.

Without sufficient oversight patients may be at risk to receive care and advice from providers unqualified to do so.

AB 546 does not create appropriate conditions or requirements for CAHCs to operate in the state, nor does it provide for minimum standards for education, certifications, or credentials for CAHCs to hold and maintain. As a point of comparison, I would like to tell you about my education and training background as a Family physician. I completed a four-year Bachelors degree in Biology/Chemistry at the University of North Carolina-Chapel Hill, a four-year Degree of Medicine at the University of South Florida, as well as a three-year residency program in Family Medicine at Wake Forest University. I also have a Masters of Public Health from the University of North Carolina. In addition to my education I am required by law to be licensed to practice medicine in Wisconsin and adhere to regulatory, ethical, and professional standards. This includes requirements to carry malpractice insurance.

Further, AB 546 does not create a sufficient mechanism for proper oversight of CAHCs, or provide a fee for operating, under which all other health care providers in the state practice. Such a provision would be necessary to oversee a CAHC's professional conduct and help offset the cost of conducting investigations should the need arise.

We believe additional oversight not included in this bill is necessary to ensure and maintain safety for patients who seek services from CAHCs. The requirements for CAHCs are overly permissive and broad by stating what CAHCs may not do, rather than clearly stating what would be included in their scope of practice. In addition, CAHCs would not be required to carry any form of malpractice insurance similar to other

providers that are regulated and overseen by the state. Other states have regulated CAHCs by creating well-defined parameters under which CAHCs can operate as well as oversight entities to ensure that CAHCs operate safely.

Lastly, I am not opposed to the use of alternative and complementary medicine. I think there is a place for this and that patients should have a choice of what type of medical treatment and therapies they seek. I myself am operating a somewhat “alternative” model of healthcare that is a cash-based membership model. I frequently will send my patients to complementary therapies such as acupuncture, or massage therapy for the treatment. It is worth mentioning that these are licensed and certified providers under Wisconsin statutes operating safely within well-defined parameters.

The Society and I thank the Committee for the opportunity to provide feedback and concerns on AB 546.





Meanwhile, the original medical problems are progressing affecting other systems in the body until nothing more can be done to help.

For example, I personally developed hypertension (high blood pressure). Perhaps, if you have some basic knowledge or maybe your primary physician will suggest, stress reduction, better diet, or weight loss. These will not be more than usual lip service to this disease. Primarily you will be prescribed a medication (a pill) or maybe a gun, to take care of this. You will not know that this only temporarily reduces your blood pressure or perhaps all the side effects; complications, and perhaps <sup>the</sup> more time will create in your life.

So the pill is the fix, temporary fix, which then may cause you to need another pill to fix the side effects of the first pill, the road to plan your life around the nearest water or the road to have lab work - bloodwork to determine you are not developing other side-effects. Then you will need to come in and have your blood pressure checked with regularity and possibly medications changes or additions. Yet the end result has not cured the heart pressure problem. Go off that pill and you make yourself open to heart problems, or a stroke. You might find yourself on a new generic form of this pill, which doesn't work as well or has other side-effects too.

In reality your high blood pressure is a response

by your body that is a clear signal that <sup>address</sup> you have some issues that need to be ~~address~~ <sup>address</sup>.  
<sup>To be clear,</sup> your body is not "missing" a pill. It needs some readjustment, and this is when complimentary/alternative practitioners can help by addressing the issues in your lifestyle that lead to your blood pressure problem. Maybe it's stress, nutrition, exercise, education, or other things you can do to help yourself.

Traditional medicine is not addressing these issues and perhaps you have an idea you should, but don't know where or how to begin. By assessing alternative/complimentary practitioners a person can begin to help themselves.

I know we can want a healthy lifestyle, but what is this, and how do we get there? With alternative/complimentary medicine I have worked to understand more and address the issues to improve my health and that of my family.

Over time different ~~as~~ I have seen many different practitioners as my needs change, my need for different practitioners has led to a great variety of knowledge gained and greater health.

I believe I am doing everything I can to be as healthy as possible, I have peace of mind that I am not missing parts of the healthcare puzzle. I believe the right to obtain various forms of healthcare and become as healthy as possible is not something to be taken from us.

I support Proposal A18546 (2022) for all maternal health care providers (patients) and to protect access to those providers and services for all. In closing I want to be clear there are my own personal views and are not the views of my employers or my professional memberships..

Francine Hoop

Testimony from:  
Barbara Hillestad  
2809 Richardson Street  
Fitchburg, WI 53711

Members of the Committee, I support A546 and I want you to please VOTE YES on A546, the "Consumer Protection for Complementary Healthcare" bill. This bill is important to me because I depend on complementary and alternative health care and I want Wisconsin law to protect my rights as a consumer to a free and educated choice in health care providers. Complementary and alternative health care provided me relief when nothing else worked.

### **My Story:**

**Although I have always depended on doctors of western medicine most of my life, there are times when I have needed an alternative. In 2007 I had to quit my job as a teacher after 3 doctors told me there was little more they could do to help me. I had chronic sinus infections and my immune system was no longer able to keep me healthy. There were only a couple antibiotics my body could tolerate because of allergies. In addition to retiring, I needed to find a way to stay healthy, and although I had depended on traditional medicine and had a healthy respect for doctors, I needed an alternative. Most traditional doctors generally aren't taught about food and vitamins, and treatments other than drugs and my doctor told me to eat in moderation and exercise.**

**Fortunately, a friend was a naturopath. I asked her for help and she told me how to change my diet and suggested herbal tinctures I could take to boost my immune system. I followed her recommendations, and today I am healthy and never even get a cold. Because my body doesn't tolerate drugs well, I only take natural remedies and no medicinal drugs. At age 70, I am healthier than I've been in 20 years.**

**The one time I have been sick recently was last June when I got a tick bite while on vacation in Northern Wisconsin. I found out how fortunate I was that I had access to alternative medicine and doctors. While still on vacation, I sought out a doctor immediately who told me there was no test for Lyme disease so I should simply wait to see if I started feeling sick and then see my regular doctor. I started feeling sick, went home, and my doctor prescribed an antibiotic to which I wasn't allergic, and I took a medical test which read negative, but often doesn't show accurate results I was told. Uneasy about how little the traditional doctors knew, I made an appointment with a naturopath who told me about an herbal remedy which would heal me of the fungal infection also from the Lyme, which was a side effect of the Doxycycline. It healed the rash on my arm, and the itch went away, which gave me confidence that I was now healthy again. This naturopath was also able to send in my blood thereby confirming I had Lyme, as yes, there IS a test for it, which the two allopathic doctors I saw first knew nothing about. I'm so glad I had the option of seeking out someone who knew the disease, because if not treated in the first month, Lyme can be a horrible disease to cure.**



## NATIONAL HEALTH FREEDOM ACTION

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**To:** Representative Sanfelippo, Chair, and Members of the Wisconsin Assembly Committee on Health, and Representative Felzkowski, Sponsor of AB546

**From:** Diane Miller JD, Director of Law and Public Policy  
National Health Freedom Action

**Date:** January 3, 2020

**Re:** Assembly Bill 546 regarding Complementary and Alternative Health Care Practices

### **Dear Representatives:**

Thank you for the opportunity to provide written testimony to the Wisconsin Assembly Committee on Health in support of AB546, a bill relating to access to complementary and alternative health care practitioners.

**My name is Diane Miller. I am an attorney and the Director of Law and Public Policy** for National Health Freedom Action (NHFA) and its sister educational organization National Health Freedom Coalition (NHFC).

**National Health Freedom Action (NHFA) is a 501(c)4 non-profit corporation** working to protect maximum health care options for consumers. NHFA works to protect the right of people to access the health care practitioners, health care products, and the broad range of healing arts that resonate with his or her own decisions regarding health and wellness.

**NHFA responds to calls year-round from individuals and groups throughout the country** who wish to promote legal reform in occupational laws and regulations having to do with health care on the state level. We have been in touch with citizens of Wisconsin who requested our support and guidance because they would like to have a safe harbor practitioner exemption law for unlicensed healers and practitioners who are providing non-invasive methods of healing and health care services in Wisconsin similar to other states that we have been involved in. NHFA has enjoyed working with these citizens and we have worked to empower them to take action to address their concerns. NHFA educates and trains citizens on how to develop and pass proactive legislation that will ensure the rights of consumers to have access to products, practitioners, and

#### Mission Statement

*To promote access to all health care information, services, treatments and products that the people deem beneficial for their own health and survival; to promote legislative reform of the laws impacting the right to access; and to promote the health of the people of this nation.*

information of their choice, as well as the rights of health care practitioners to offer their services.

**NHFA supports AB546 because:** it will protect access to hundreds of traditional, complementary, and alternative health care practitioners such as traditional naturopaths, homeopaths, and herbalists, providing their services to health seekers in Wisconsin and who are not licensed under medical health care occupation laws. AB546 provides guidelines for the use of an exemption from state occupational licensing and registration requirements for those non-invasive complementary and alternative health care practitioners who (1) avoid a specific list of prohibited conduct, such as puncturing the skin and, (2) who give out the disclosure information for unlicensed practitioners listed in the bill, such as contact information, education and training, and the nature of the services to be provided.

**The use of complementary and alternative practitioners is prevalent in the United States.**

Based on a February 2015 National Health Statistics Report, the percentage of U.S. adults aged 18 and over who used any complementary health approach according to the most recent statistics from 2012 was 33.2%.<sup>i</sup> And based on the 2012 National Institute of Health's NHIS Survey from the National Center for Complementary and Alternative Medicine (NCCAM), it was found that about 59 million Americans spend money out-of-pocket on complementary health approaches, and their total spending adds up to \$30.2 billion a year. This means that thousands of Wisconsin citizens are using complementary and alternative health care and spending millions of dollars in the State of Wisconsin for that care.

**Clients find that alternative practitioners offer approaches** that are often either more natural or may help them address their health concerns by lifestyle changes or non-invasive healing techniques from a broad variety of methods that the consumer has become aware of through their own research and networking. Many practitioners are not licensed to practice a conventional health care profession and do not have a desire or plan to become conventionally licensed in a medical profession. Because NHFA wants to assure consumers their broadest access to information and services, we support Wisconsin's AB546 and are glad that it is before this committee.

We have observed that state safe harbor practitioner exemption laws provide a practical way for states to assure continued consumer access to and the availability of wellness practitioners and modalities while also retaining the avenues that state governments have to process complaints for unlicensed practice when the need arises.

**Currently eleven states have passed safe harbor exemption laws** in some form, including: Minnesota, Rhode Island, California, Louisiana, Idaho, Oklahoma, Arizona (for homeopaths), New Mexico, Colorado, Nevada, and, most recently, Maine. Additional states have introduced and are working to pass similar legislation.

**Safe harbor laws do not change the regulation of licensed professionals.** Complementary and alternative methods of treatment are also provided by many licensed professionals but they practice under the jurisdiction of their own licensing Boards.

**Mission Statement**

*To promote access to all health care information, services, treatments and products that the people deem beneficial for their own health and survival; to promote legislative reform of the laws impacting the right to access; and to promote the health of the people of this nation.*

We believe that safe harbor laws are a common sense way of addressing how to manage the thousands of practitioners and businesses providing services in the public domain. These laws provide practitioners and the state with guidance parameters on how to proceed in the event of a complaint while assuring the continued availability of these services to consumers who enjoy them.

NHFA believes that AB546 goes a long way in protecting consumer access to the broad domain of healing modalities practiced by practitioners currently not licensed by the state of Wisconsin.

NHFA respectfully urges you to support AB546 and we hope this letter is helpful in answering any of your questions about this type of legislation.

My Very Best Regards,

Diane M. Miller JD  
Director of Law and Public Policy NHFA

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<sup>i</sup> (“Trends in the Use of Complementary Health Approaches Among Adults: United States, 2002–2012”, by Tainya C. Clarke, Ph.D., M.P.H., Lindsey I. Black, M.P.H., National Center for Health Statistics; Barbara J. Stussman, B.A., National Institutes of Health; Patricia M. Barnes, M.A., National Center for Health Statistics; and Richard L. Nahin, Ph.D., M.P.H., National Institutes of Health).

**Mission Statement**

*To promote access to all health care information, services, treatments and products that the people deem beneficial for their own health and survival; to promote legislative reform of the laws impacting the right to access; and to promote the health of the people of this nation.*





**N A S W** · WISCONSIN CHAPTER

National Association of Social Workers

**NASW WI TESTIMONY IN OPPOSITION TO ASSEMBLY BILL 546 BEFORE THE ASSEMBLY COMMITTEE ON HEALTH ON JANUARY 7, 2020**

Chairperson Sanfelippo and members of the Assembly Committee on Health.

I appreciate this opportunity to speak on Assembly Bill 546. We oppose this bill in its current form.

Our major concern is that AB 546 exempts complementary and alternative health care practitioners from the practice acts of clinical social work and the other mental health professions listed in the bill (psychology, psychotherapy, marriage and family therapy and professional counseling). Although the bill prohibits complementary and alternative health care practitioners from representing themselves as clinical social workers or the other mental health professions, by exempting them from the practice acts of these mental health professions, it would allow these individuals to practice clinical social work or psychotherapy.

Licensed clinical social workers and other mental health professionals provide services to extremely vulnerable clients. These clients can be suicidal, experience bi-polar mental illness, schizophrenia, have an eating disorder, be a victim or perpetrator of sexual abuse or domestic violence, or have a diagnosis of obsessive compulsive disorder or some other mental illness. Improper or inappropriate treatment can lead to suicide, serious mental or physical harm to the client or another individual or serious family or work conflict. Whether we are considering the needs of a Veteran with PTSD, a depressed and suicidal farmer about to lose his family farm or an extremely troubled adolescent, improper or inappropriate treatment can have deadly consequences.

Complementary and alternative health care practitioners do provide beneficial services but these services whether they be coaching, nutritional counseling, homeopathy, herbology, aroma therapy or other services should never be used as treatment for serious mental illness. Several of the complementary and alternative health care laws I examined specifically state that these practitioners cannot practice psychotherapy. Other provisions the authors might consider adding which are found in the Minnesota bill include; requiring practitioners to make referrals when appropriate to health care providers (including mental health providers), creating a conduct code and a regulatory body and requiring these providers to make child abuse and neglect referrals. None of the laws I examined exempted complementary and alternative health care providers

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# N A S W • WISCONSIN CHAPTER

National Association of Social Workers

from the practice acts of the health and mental health care professions listed in the Wisconsin bill.

In terms of the impact of this bill on the provision of psychotherapy in Wisconsin, I would strongly recommend that the bill drop the exemptions from the practice acts for clinical social work, marriage and family therapy, professional counseling, psychology and psychotherapy. I would also recommend that the bill specifically state that these complementary and alternative practitioners cannot engage in the diagnosis and treatment of mental and emotional disorders, including the provision of psychotherapy.

I am happy to answer any questions.

Marc Herstand, MSW CISW

Executive Director

National Association of Social Workers, Wisconsin Chapter

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(608) 257-6334

Mherstand.naswwi@socialworkers.org

To: Assembly Health Committee members  
From: Chiropractic Society of Wisconsin  
RE: Opposition to AB 546

The chiropractic society of Wisconsin is registering in opposition to AB 546. Unlike all of the health professional statutes specifically designed to identify the scope and training of the healthcare professional, AB 546 is attempting to create a new subset of healthcare practitioners that are not defined by a named profession, specific levels of accredited training or even what specific health services they will provide to the public.

Please note this opposition is not based on any perceived turf protection, but based primarily on three important aspects of public protection related to healthcare services.

1. Definition of the scope of practice of the health care professional
2. Accredited Educational and training institutions
3. Regulatory oversight by a DSPS Appointed Board

**Definition of the scope of practice of the health care professional:**

The name of the profession or practice is important, but the real issue is the definition of the scope of services provided by the named healthcare professional. The chiropractic scope of practice is defined in statute and provides the necessary boundaries that correlate to the accredited education and training of the chiropractor. It is the same for MDs/ DOs, optometrists, Podiatrist, Nurses, PA and the list of healthcare professions goes on. Each health care professional's scope of practice is specifically defined in the statutes by the educational and training received.

AB 546 not only fails to name a health care practice, but attempts to define the new scope not by what education or training the person has but by simply stating the scope will be a generic "practice method of healing therapy or modality other than one that a complementary and alternative health care practitioner is prohibited from providing." Please note that "healing therapy" is not defined in AB 546 or in the statutes.

It is our opinion that it would be irresponsible for the State of Wisconsin to create an entire health care professional scope of practice solely defined by stating it could be anything other than a current fully regulated healthcare profession.

Thus, our opinion is that AB 546 fails to protect the public by not defining a specific scope of practice. The proposed statute needs to fully define the named profession and the specifically define the scope of practice of the profession based on accredited educational standards.

**2. Accredited Educational and training standards**

This section is the most concerning for our members. AB 546 does not define or require any standardized education or training of the proposed healthcare practitioner prior to providing the proposed health care services to the public.

The educational and training standards set for an individual who seeks to provide healthcare services to the public are well defined for a reason. We are dealing with public safety at a very personal level-their health.

Each healthcare profession has a specific and well-defined path of education at accredited institutions with examination and testing to ensure the student has obtained the necessary educational and practical skills to perform the healthcare service to the public. The State of Wisconsin has specific educational and training standards that have to be met prior to licensure in Wisconsin. The State also has specific professional examining boards that oversee the granting of the license and provide oversight for any disciplinary actions that may be necessary should the healthcare professional not fulfill the duties of the healthcare professional license.

Even if the new healthcare practitioner lists a certificate, there is no requirement in AB 546 that it has to be a legitimate certificate from an accredited source. Under the current language of AB 546 any online or purchased certificate can be obtained and used to deceive the public as a legitimate healthcare training program.

Since AB 546 doesn't require any education or allows any certification or experience there is no standardization or protection to the public that the new healthcare practitioner has the necessary skills to be treating patients.

### **3. DSPS oversight**

The final concern lies with the lack of regulatory oversight by DSPS. All other healthcare professions have a form of oversight through an appointed board. These boards grant the license and more importantly monitor the services provided by the health care professionals to ensure they are at a competent level to protect the public. AB 546 only allows DSPS extremely limited enforcement under section 461.06.

#### **Example:**

Case in point and why this is important to my members. In NorthCentral Wisconsin a person claimed to be a Spineologist. She received her Spineology certificate by attending a weekend course put on by an entrepreneur who was not associated with any college or accredited educational institution. She had documents and advertisement that specifically stated that she was a Spineologist not a chiropractor or a certified massage therapist. Her forms specifically stated that she was not a chiropractor or massage therapist and would not be providing chiropractic adjustments to the spine. The actual services she provided in her "clinic" were spinal manipulation and massage therapy services.

This person would fit under the current proposed AB 546 language. She had no degree, she correctly stated her "certificate" and her documents correctly stated that she was not a healthcare professional.

Wisconsin cannot simply allow a person to state that they have a certificate of training from an unknown or unregulated source, have a patient sign a form telling them that the person is not a chiropractor and then proceed to provide chiropractic services to a patient.

In summary: We are opposed to AB 546 due to the fact it fails to adequately protect the public by allowing anyone with no required accredited education or training the ability to state they are a healthcare practitioner and provide undefined "healing therapy" health care services to patients with no regulatory oversight by DSPS.

We recommend that those wishing to provide these proposed healing therapy health related services to do the following:

1. Fully define the scope of practice related to the proposed healthcare services
2. Fully define the accredited education and training necessary to safely provide the proposed healthcare services
3. Create a DSPS board for proper oversight and public protection.



January 7, 2020

To: Assembly Chairman Representative Sanfelippo  
Members of the Assembly Committee on Health

RE: Opposition to AB 546

The Wisconsin Podiatric Medical Association appreciates the opportunity to submit comments in opposition to AB 546.

Unlike all of the health professional statutes specifically designed to identify the scope and training of the healthcare professional, AB 546 is attempting to create a new subset of healthcare practitioners that are not defined by a named profession, specific levels of accredited training or even what specific health services they will provide to the public.

Please note this opposition is not based on any perceived turf protection but based primarily on three important aspects of public protection related to healthcare services:

1. Definition of the scope of practice of the health care professional
2. Accredited Educational and training institutions
3. Regulatory oversight by a DSPS Appointed Board

#### **1. Definition of the scope of practice of the health care professional**

The name of the profession or practice is important, but the real issue is the definition of the scope of services provided by the named healthcare professional. The Podiatric scope of practice is defined in statute and provides the necessary boundaries that correlate to the accredited education and training of the Podiatrist. It is the same for MDs/ DOs, optometrists, chiropractors, nurses, physician assistants and the list of healthcare professions goes on. Each health care professional's scope of practice is specifically defined in the statutes by the educational and training received.

AB 546 not only fails to name a health care practice but attempts to define the new scope not by what education or training the person has but by simply stating the scope will be a generic "practice method of healing therapy or modality other than one that a complementary and alternative health care practitioner is prohibited from providing." Please note that "healing therapy" is not defined in AB 546 or in the statutes.

It is our opinion that it would be irresponsible for the State of Wisconsin to create an entire healthcare professional scope of practice solely defined by stating it could be anything other than a current fully regulated healthcare profession.

Thus, our opinion is that AB 546 fails to protect the public by not defining a specific scope of practice. The proposed statute needs to fully define the named profession and specifically define the scope of practice of the profession based on accredited educational standards.

## **2. Accredited Educational and training standards**

This section is the most concerning for our members. AB 546 does not define or require any standardized education or training of the proposed healthcare practitioner prior to providing the proposed health care services to the public.

The educational and training standards set for an individual who seeks to provide healthcare services to the public are well defined for a reason. We are dealing with public safety at a very personal level – their health.

Each healthcare profession has a specific and well-defined path of education at accredited institutions with examination and testing to ensure the student has obtained the necessary educational and practical skills to perform the healthcare service to the public. The State of Wisconsin has specific educational and training standards that must be met prior to licensure in Wisconsin. The State also specific professional examining boards that oversee the granting of the license and provide oversight for any disciplinary actions that may be necessary should the healthcare professional not fulfill the duties of the healthcare professional license.

Even if the new healthcare practitioner lists a certificate, there is no requirement in AB 546 that it has to be a legitimate certificate from an accredited source. Under the current language of AB 546 any online or purchased certificate can be obtained and used to deceive the public as a legitimate healthcare training program.

Since AB 546 doesn't require any education or allows any certification or experience, there is no standardization or protection to the public that the new healthcare practitioner has the necessary skills to be treating patients.

## **3. DSPS oversight**

The final concern lies with the lack of regulatory oversight by DSPS. All other healthcare professions have a form of oversight through an appointed board. These boards grant the license and more importantly monitor the services provided by the health care professionals to ensure they are at a competent level to protect the public. AB 546 only allows DSPS extremely limited enforcement under section 461.06.

In summary: We are opposed to AB 546 due to the fact it fails to adequately protect the public by allowing anyone with no required accredited education or training the ability to state they are a healthcare practitioner and provide undefined "healing therapy" health care services to patients with no regulatory oversight by DSPS.

We recommend that those wishing to provide these proposed healing therapy health related services to do the following:

1. Fully define the scope of practice related to the propose healthcare services.
2. Fully define the accredited education and training necessary to safely provide the proposed healthcare services.
3. Create a DSPS board for proper oversight and public protection.