

# MICROFILM DIVIDER

OMB/RECORDS MANAGEMENT DIVISION

SFN 2053 (2/85) 5M



ROLL NUMBER

DESCRIPTION

2171

2005 SENATE HUMAN SERVICES

SB 2171

2005 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2171

Senate Human Services Committee

Conference Committee

Hearing Date January 19, 2005

Tape Number	Side A	Side B	Meter #
1	x		00-4680
2	x		4,750-5150
Committee Clerk Signature			

Minutes:

Chairman Lee opened the public hearing on SB 2171

All members were present.

**Sen. Ray Holmberg, sponsor of SB 2171**

Senator Holmberg introduced his bill and explained why there was a need for licensure of acupuncturist and why the overseeing of the licensure should be placed with the Board of Medical Examiners. When this bill was drafted, they looked at what other states have done and incorporated that into the bill. (tape 1 side 1 meter 200-960). There would be an exemption on some people, such as chiropractors, who are already licensed.

**Sen. Warner:** What is the default position if this doesn't go through. Would there be a national registry?

**Sen. Holmberg:** No, states have there own licensure, but there is a national test they must take, like nurses.

**Sen. Warner:** Does this sort of applies a state template over a national process?

**Sen. Holmberg:** Not sure, but in many of these professions, national examinations have to be taken.

**Testimony in favor of SB 2171**

**David Magnuson, Masters Degree in Acupuncture from the Minnesota College of Acupuncture and Oriental Medicine in Minneapolis and licensed in state of Minnesota and Massachusetts.**

Mr. Magnuson explained the reasons he supported this bill, and how his education prepared him in his job. He explained that since there is no regulation in the state, there are many unqualified people performing acupuncture. There is a need for regulation due to hazards from the needles and proper practice. Mr. Magnuson then went through his handouts, (Attachments 1, 2, and 2A.

Mr. Magnuson then answered questions on acupuncture in general (tape 1 side A meter 1750-3000). There are not many certified acupuncturist in the state, but many others with little training. Most certified acupuncturist do not even consider practicing in North Dakota because there is no regulation. Chairman Lee made note of the letters of recommendation on his attachments.

**Neutral Testimony**

**Rob St. Augen, Blue Cross Blue Shield of North Dakota**

Some employers offer group health insurance where there is a reserve. If claims are bigger than premiums, the employer pays the difference from a reserve, if claims are less than premiums, the excess goes into the reserve. The other offering is a self-insured plan. The employer funds the

plan themselves and uses a third-party provider to administer the plan. Self-funded are regulated by the federal government, so any statutes adopted by the state legislature do not apply to self-funded plans. There was a company who was self-insured who wanted to offer acupuncture but we could not reimburse for that unless the practitioner was licensed. This bill would have taken care of that problem for this employer.

**Testimony in opposition of SB 2171**

**Rolf Sletten, Director of the Board of Medical Examiners**

See written testimony (Attachment 3)

Chairman Lee closed the public hearing on SB 2171

Chairman Lee continued discussion on SB 2171.

**Sen. Warner:** Maybe the Health Department would be a better place to oversee the licensure of acupuncturist. The Board of Medical Examiners didn't seem open-minded about the issue. It's an issue that needs to be regulated but we need to find a better home for it.

**Chairman Lee:** As a result of this, maybe someone from the health department could come next week.

There was discussion about this and it was agreed to ask the Health Department to address the committee. All agreed that there was a need for licensure.

No action was taken on this bill, and discussion stopped.

Chairman Lee reconvened discussion on SB 2171.

Sen Warner discussed with Mr. Magnuson that maybe the health department is a better place to regulate the acupuncture practice because the medical examiners office did not seem open to the idea. Sen. Lyson agreed that this might be a better place for it and said he thought the practice of

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Senate Human Services Committee  
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acupuncture should be regulated. Chairman Lee suggested that the health department come to talk to the committee about this idea.

05 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2171

Senate Human Services Committee

Conference Committee

Hearing Date January 26, 2005

Tape Number	Side A	Side B	Meter #
3	x		1940-3340
3	x		5030-6225
Committee Clerk Signature <i>Cathy Minard</i>			

Minutes:

Chairman Lee reopened the discussion on SB 2171 and refreshed the committee on the details of the bill. We know the Medical Examiner's office isn't too crazy about having the acupuncturists under their control. A suggestion was to have a national registry under the health department. If someone had the extra training, like Mr. Magnuson, people could check this registry.

**Sen. Warner:** Does registration put them over the threshold so they are covered by third party payers?

**Chairman Lee:** Blue Cross has employer self-funded groups who want to add acupuncture to their plans, but can't because they don't have any licensing in the state.

**Darlene Barnes: Health Department:** Not sure. I've referred to the National Certification commission on Acupuncture and Oriental Medicine to see what the certification requirements were and they were relatively minimal.

**Chairman Lee:** There is concern that people are putting themselves out there as acupuncturists when they aren't certified.

Ms. Barnes went over the modules, classes, ethics, etc., that must be met to become an acupuncturist.

**Chairman Lee** asked Rod St. Aubyn if his organization would be satisfied if the acupuncturist passed the national exam and were put on the national registry. We're trying to accommodate without having the full blown thing.

He wasn't sure but would check immediately with his office.

**Barnes:** I did do some research with other states. Only four come under the health department, 14 are under the medical examiners, and most had their own boards.

**Chairman Lee:** The acupuncturists don't want to be under the chiropractors because of the time spent in learning their craft. Chiropractors receive very little training. Rolf Sletten opinion on this makes sense. We've given this a lot of attention, and we want to accommodate their request, but I'm not sure how to do that.

**Sen. Dever:** By addressing the issue and providing licensure or registration, the state is validating a practice that some people still find questionable.

**Chairman Lee:** Alternative is a better word. There are people who find relief from it and its been around a long time.

**Sen. Lyson:** I'd be uncomfortable giving them validation without anyone governing them. We don't want to put the state in jeopardy.

**Sen. Brown:** Maybe we could pass it out with Minnesota regulations

**Chairman Lee:** Why can't there be joint state agreements where you can do this? That's a good idea.

Mr. St. Aubyn came back into the room and said at this stage it did not look like this would be satisfactory. This is a certification and what we're looking for (Blue Cross Blue Shield) is licensure and an agency who polices.

**Sen. Brown:** Maybe we should study this in the interim. We need to protect the citizens of North Dakota

**Sen. Warner:** Anybody can practice now, because its not mentioned in North Dakota law.

**Sen. Lyson:** If we just certify them it gives them permission to practice without anyone governing them. If it remains as it is, the burden lies with the patient. And if we certify them, the patient can say, "well you guys certified them" so it must be okay.

**Sen. Warner:** But they have permission now because we don't forbid it.

**Chairman Lee:** Do I hear an amendment that we would amend this bill to call for a study of the possibility of licensure for acupuncturists including the possibility of a collaborative agreement with licensing board in adjoining states?

Senator Brown moved that amendment, seconded by Senator Lyson.

**Sen. Dever:** Are we going to hoghouse the bill to do that? Could we issue a license based on a North Dakota resident meeting requirements of the Minnesota licensing board?

It was agreed that it would be a good idea. But would Minnesota police them? This is the type of information that would be brought out in the study. Darlene Barnes shared some more information she pulled off the Internet concerning what other border states do.

**Sen. Dever:** Sen. Holmberg said he wanted to talk about the bill if it got in trouble.

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Senate Human Services Committee

Bill/Resolution Number SB 2171

Hearing Date January 26, 2005

Chairman Lee said she could see where the committee was going with this and asked for a vote on the amendment.

Sen. Holmberg arrived and Chairman Lee filled him in on all the issues that had been discussed and how the committee was probably going to go.

Sen. Holmberg say the key element is that there are only a handful of acupuncturists in the state.

He agreed that a study would seem appropriate and the reciprocal agreement idea was interesting.

In the long run, anyone can hang up a shingle so we want to protect the citizens of North Dakota.

**Sen. Brown moved DO PASS as amended to study, seconded by Sen. Lyson**

**Sen. Dever:** We're going to hoghouse it into a study?

**VOTE: 5 YEAS, 0 NAYS, 0 ABSENT CARRIER: SEN. BROWN**

**FISCAL NOTE**  
 Requested by Legislative Council  
 01/12/2005

Bill/Resolution No.: SB 2171

1A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2003-2005 Biennium		2005-2007 Biennium		2007-2009 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
<b>Revenues</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>Expenditures</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>Appropriations</b>	\$0	\$0	\$0	\$0	\$0	\$0

1B. **County, city, and school district fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

2003-2005 Biennium			2005-2007 Biennium			2007-2009 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

2. **Narrative:** *Identify the aspects of the measure which cause fiscal impact and include any comments relevant to your analysis.*

The North Dakota Board of Medical Examiners has no connection with any acupuncturists. We have no information about this bill so it is difficult to provide any meaningful response. It appears there is no fiscal effect on the state because the Board of Medical Examiners receives no funding from the state. If this bill passes there will obviously be a negative impact on the Board's budget as there can't be more than a handful of acupuncturists in the state and therefore their fees will generate almost no funds for the Board.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, of the effect on the biennial appropriation for each agency and fund affected and any amounts included in the executive budget. Indicate the relationship between the amounts shown for expenditures and appropriations.*

<b>Name:</b>	Rolf P. Sletten	<b>Agency:</b>	ND Board of Medical Examiners
<b>Phone Number:</b>	701-328-6500	<b>Date Prepared:</b>	01/14/2005





**REPORT OF STANDING COMMITTEE**

**SB 2171: Human Services Committee (Sen. J. Lee, Chairman) recommends AMENDMENTS AS FOLLOWS and when so amended, recommends DO PASS (5 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2171 was placed on the Sixth order on the calendar.**

Page 1, line 1, after "A BILL" replace the remainder of the bill with "for an Act to provide for a legislative council study of the licensing of acupuncturists."

**BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

**SECTION 1. STATE LICENSING OF ACUPUNCTURISTS - LEGISLATIVE COUNCIL STUDY.** The legislative council shall consider studying, during the 2005-06 interim, the licensure and regulation of acupuncturists practicing in the state, as well as the possibility of multistate joint licensure and regulation programs. The legislative council shall report its findings and recommendations, together with any legislation required to implement the recommendations, to the sixtieth legislative assembly."

Renumber accordingly

2005 HOUSE GOVERNMENT AND VETERANS AFFAIRS

SB 2171

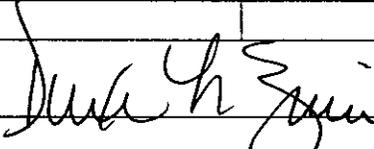
2005 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2171

House Government and Veterans Affairs Committee

Conference Committee

Hearing Date 2/25/05

Tape Number	Side A	Side B	Meter #
1	x		28.6-44.6
Committee Clerk Signature 			

Minutes: SB 2171 Provide for a legislative council study of administration and enforcement of the state building code.

**Chairman Haas:** We will open the hearing on SB 2171 and ask the clerk to read the title please, thank you. Senator Holmberg welcome.

**Senator Holmberg-District 17-Grand Forks-Introducing the bill.** You will note by reading SB 2171 has had some changes when it was introduced some weeks ago. It started out as a bill to license acupuncturists in the state of North Dakota. Anybody can come into the state and be an acupuncturists and there is no assurance from the state of North Dakota that they are legitimate and that they have the proper training, for the safety of the public is one reason, the second one is rather interesting, although, they can be eligible for third party payments under some insurance plans a company might have, they can not receive payments because they are not licensed by the state. There are three or four acupuncturists in the state of North Dakota. Imagine setting up a

license board for three or four acupuncturists. The purpose of the bill is to have a study. The Humane Service Committee in the Senate did quite a bit of study on this and came to this conclusion, I am here urging this committee to do the same and pass this study on to the Legislative Council for their consideration.

**Chairman Haas:** Thank you, are there any questions for Senator Holmberg? Thank you very much. Is there additional testimony to SB 2171, for, neutral, or oppose?

**Rod St. Aubyn-Blue Cross Blue Shield-North Dakota-**What happens we handle two types of health insurance, one is self funded and the other is fully insured. Under self funded, they are regulated by the federal entities, they are not regulated by any of the state. Self-funded plan can design their own benefit package. We had a group, self insured, that wanted to allow acupuncturists as a covered benefit. We would normally be able to do that for them, but the problem is that we will not reimburse unlicensed professionals.

**Rep. Klemin:** Is the whole impetus to get reimbursement.

**Rod:** Not exactly, I think they would like to get reimbursed, but they can't unless they are licensed.

**Chairman Haas:** Anything further, thank you Ron. Is there any additional testimony on SB 2171, is there any opposition testimony to SB 2171. We will close the hearing on SB 2171.

2005 HOUSE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2171

House Government and Veterans Affairs Committee

Conference Committee

Hearing Date 2/25/05

Tape Number	Side A	Side B	Meter #
2	x		11.9
Committee Clerk Signature <i>Dick H. Zywi</i>			

Minutes: SB 2171 Provide for a legislative council study of the licensing of acupuncturists.

**Chairman Haas:** Let us look at SB 2171. The study regarding acupuncturists, what are your wishes? Rep. Sitte moves a DO PASS, seconded by Rep. Meier, is there any discussion, it rather reminds us of the Home Inspectors.

**Rep. Klemin:** It is interesting on the local news, they had acupuncturists sticking needles in peoples ears for smoking sensation. I guess I didn't realize.

**Rep. Conrad:** That is how I quit smoking.

**Chairman Haas:** Is there any further discussion, if not we will have the clerk take the roll.

**VOTE: YES 13 NO 0 ABSENT 1 DO PASS ON SB 2171**

**REP. HORTER WILL CARRY THE BILL.**

Date: 2/25/05  
Roll Call Vote #: 1

2005 HOUSE STANDING COMMITTEE ROLL CALL VOTES  
BILL/RESOLUTION NO. SB 271

House House Government and Veterans Affairs Committee

Check here for Conference Committee

Legislative Council Amendment Number \_\_\_\_\_

Action Taken DO PASS

Motion Made By Rep. Sitte Seconded By Rep. Meier

Representatives	Yes	No	Representatives	Yes	No
Chairman C.B. Haas	✓		Rep. Bill Amerman	✓	
Bette B. Grande - Vice Chairman	✓		Rep. Kari Conrad	✓	
Rep. Randy Boehning	✓		Rep. Louise Potter	✓	
Rep. Glen Froseth	✓		Rep. Sally M. Sandvig	✓	
Rep. Pat Galvin	✓				
Rep. Stacey Horter	✓				
Rep. Jim Kasper	AB				
Rep. Lawrence R. Klemin	✓				
Rep. Lisa Meier	✓				
Rep. Margaret Sitte	✓				

Total (Yes) 13 No 0

Absent 1

Floor Assignment Rep. Horter

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE (410)**  
February 25, 2005 12:47 p.m.

**Module No: HR-35-3689**  
**Carrier: Horter**  
**Insert LC: . Title: .**

**REPORT OF STANDING COMMITTEE**

**SB 2171: Government and Veterans Affairs Committee (Rep. Haas, Chairman)**  
recommends **DO PASS** (13 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). SB 2171  
was placed on the Fourteenth order on the calendar.

2005 TESTIMONY

SB 2171

TO: HUMAN SERVICES COMMITTEE  
FROM: ROLF SLETTEN, EXECUTIVE SECRETARY  
RE: SB 2171  
DATE: JANUARY 19, 2005

The Board of Medical Examiners strongly urges the Committee to vote "do not pass" on HB 2171. We do so for the following reasons:

1. The primary duty of the Board of Medical Examiners is to regulate physicians, i.e., M.D.'s, D.O.'s, and Physician Assistants. We have been recognized many times by a national consumer group called Public Citizen as one of the 10 best medical boards in the country. No good can come from diluting the Board's focus by forcing us to regulate other professions with different educational standards, different licensing requirements, different licensing examinations and different disciplinary standards, none of which we are familiar with. I won't tell you that we couldn't possibly learn to do the work but as our Board says, it would mean we know "less and less about more and more" and it certainly wouldn't make for a better Board of Medical Examiners. We want to stay focused on the task we were established to perform.

2. Having the acupuncturists regulated by the Board of Medical Examiners would be very confusing to the public. An acupuncturist is not a doctor, at least not within the meaning of the Medical Practice Act. Having them regulated by the medical board would only blur the

distinction. It would imply that these people are physicians. That's not good for anyone. Acupuncture is a distinct discipline with a very different educational curriculum, and very different training. The Legislature should not do anything that leads people to believe that acupuncturists are physicians.

One of the effects of this bill would be to suddenly elevate acupuncture to the status of medicine. First, by having them regulated by the Board of Medical Examiners and secondly by weaving that profession into the Medical Practice Act. At page two (2) line 28 it specifies that anyone who practices acupuncture without a license violates §43-17-34 (practicing medicine without a license). I think that notion would offend many people very deeply.

3. There is a very big issue of fairness here. Making this change would be very expensive. I wasn't able to write a very meaningful fiscal note and I didn't want to exaggerate the cost but if this bill is passed, the Board of Medical Examiners will pay for it, in direct costs, in legal fees, in staff time, and in being distracted from the task of regulating physicians. We don't know how many acupuncturists there are in North Dakota but the number must be very small and consequently these people will pay almost nothing in fees. This bill means that the physicians in this state would need to finance the regulation of someone else's profession. We can be certain that administrative rules would have to be written, statutory changes would have to be proposed and then undoubtedly fought over, new forms developed, application processes devised, and our web site would have to be redone, new procedures would need to be developed, and our staff would need to be trained to understand new licensing standards, new tests and new procedures. It would be a huge investment of effort over a long period of time simply to regulate very few people, all paid for by North Dakota's licensed physicians.

4. We are told that this bill has been introduced in an effort to solve a reimbursement problem for the acupuncturists. Insurance companies apparently won't reimburse them for their services unless they have a license. Licensing boards do not exist to facilitate or improve the income stream for the members of that profession or occupation. Licensing boards exist for just one purpose - to protect the public. If this is about money then the premise upon which the bill is based is fundamentally flawed.

5. It is difficult to raise this point without making it sound like a threat to be uncooperative. That is not our intention but it seems very odd that this group of people who are trained only in acupuncture would want to put their scope of practice statement in the hands of a group of people whose entire education, training, and professional experience recognizes a completely different approach to the treatment of human ailments. If I were an acupuncturist the Medical Board is maybe the last group of people I would want to have controlling my scope of practice.

#### Summary

We don't know anything about acupuncture, nothing about their schools, their training, their testing, etc. Even though there are apparently very, very few of these people in North Dakota a whole practice act will have to be written and a whole set of administrative rules and procedures will have to be developed. The cost will have to be absorbed by the Board of Medical Examiners. In other words, one profession will be forced to pay for the regulation of another profession. That seems unfair.

Over the years there have been proposals to put a number of groups under the regulation of the Board of Medical Examiners. We have always resisted those proposals. We are not telling you this can't be done but we are not trying to build an empire. We would like to stay focused on regulating medicine.

This bill would suddenly elevate acupuncture to the status of the practice of medicine. That's confusing to the public and undoubtedly very disheartening to most doctors. Forcing the Board of Medical Examiners to regulate acupuncture seems like an unhappy fit for everyone.

Thank you. Please don't require the Board of Medical Examiners to regulate acupuncturists.

## **Study: Acupuncture aids arthritis in knee**

**Patients had 40 percent less pain, researchers say**

*Reuters* Dec. 20, 2004 (Reported on MSNBC News)

WASHINGTON - Acupuncture can help the pain of arthritis in the knee and can improve freedom of movement, U.S. researchers reported on Monday.

For the first time, a clinical trial with sufficient rigor, size, and duration has shown that acupuncture reduces the pain and functional impairment of osteoarthritis of the knee, said Dr. Stephen Straus, director of the National Center for Complementary and Alternative Medicine, which helped fund the study.

These results also indicate that acupuncture can serve as an effective addition to a standard regimen of care and improve quality of life for knee osteoarthritis sufferers.

Writing in the *Annals of Internal Medicine*, Dr. Brian Berman of the University of Maryland School of Medicine and colleagues across the country said they studied 570 patients aged 50 or older with osteoarthritis of the knee.

They all had significant pain but had never tried acupuncture, had not had knee surgery in the previous six months, and had not used steroids or similar injections.

### **Decrease in pain, increase in function**

They got either regular acupuncture treatments, sham acupuncture, or a self-help course for managing pain. Everyone also continued to receive standard medical care, including anti-inflammatory drugs and pain relievers.

By the end of the second month, patients who got acupuncture had a significant increase in function and by the 14th week they had significant reduction of pain, compared to the other two groups, the researchers said.

The volunteers given true acupuncture had 40 percent less pain and a nearly 40 percent improvement in function over the course of the study.

“More than 20 million Americans have osteoarthritis. This disease is one of the most frequent causes of physical disability among adults,” said Dr. Stephen Katz, director of the National Institute of Arthritis and Musculoskeletal and Skin Diseases, which also funded the study.

The Centers for Disease Control and Prevention says acupuncture was used by an estimated 2.1 million U.S. adults in 2002.

SB 2171

# STATE LICENSURE AND NCCAOM CERTIFICATION

		Practice Act	Require NCCAOM Exam(s)	Require Certification	Use Own Exam(s)	State Board Phone Number	Title Granted*
Alabama	AL						
Alaska	AK	Yes	CWE			907/465-2695	L.Ac./Lic.Ac.
Arizona	AZ	Yes	CWE-PLE	Yes		602/542-3095	L.Ac./Lic.Ac.
Arkansas	AR	Yes	CWE-PLE			501/228-0664	L.Ac./Lic.Ac.
California	CA	Yes			Yes	916/263-2680	L.Ac./Lic.Ac.
Colorado	CO	Yes	CWE-PLE	Yes		303/894-2464	R.Ac.
Connecticut	CT	Yes	CWE-PLE			860/509-7562	Acupuncturist
Delaware	DE						
Florida	FL	Yes	CWE-PLE			850/488-0595	Acupuncture Physician
Georgia	GA	Yes	CWE-PLE	Yes		404/656-3913	L.Ac.
Hawaii	HI	Yes	CWE			808/586-3000	L.Ac./Lic.Ac.
Idaho	ID	Yes	CWE				
Illinois	IL	Yes	CWE-PLE	Yes		217/782-8556	Acupuncturist
Indiana	IN	Yes	CWE-PLE	Yes			
Iowa	IA	Yes	CWE-PLE			515/281-6489	R.Ac.
Kansas	KS						
Kentucky	KY						
Louisiana	LA	Yes				504/524-6763	Acupuncture Assistant
Maine	ME	Yes	CWE			207/624-8603	L.Ac./Lic.Ac.
Maryland	MD	Yes	CWE			410/764-4766	L.Ac./Lic.Ac.
Massachusetts	MA	Yes	CWE-PLE			617/727-3086	L.Ac./Lic.Ac.
Michigan	MI						
Minnesota	MN	Yes	CWE-PLE	Yes		612/617-2130	L.Ac./Lic.Ac.
Mississippi	MS						
Missouri	MO	Yes	CWE-PLE	Yes		573/751-2104	L.Ac./Lic.Ac.
Montana	MT	Yes	CWE			406/444-4284	C.A.
Nebraska	NE	Yes	CWE-PLE			402/471-2118	Acupuncturist
Nevada	NV	Yes	CWE-PLE			702/486-4279	DOM or Acupuncture Assistant
New Hampshire	NH	Yes	CWE-PLE	Yes		603/271-5127	L.Ac./Lic.Ac.
New Jersey	NJ	Yes	CWE-PLE			609/826-7100	C.A.
New Mexico	NM	Yes	CWE-PLE			505/476-7100	Doctor of Oriental Medicine
New York	NY	Yes	CWE-PLE			518/473-0221	L.Ac./Lic.Ac.
North Carolina	NC	Yes	CWE-PLE			919/773-0530	L.Ac./Lic.Ac.
North Dakota	ND						
Ohio	OH	Yes	CWE-PLE	Yes		614/466-3934	R.Ac./C.A./Acupuncturist
Oklahoma	OK						
Oregon	OR	Yes	CWE-PLE	Yes		503/229-5770	L.Ac./Lic.Ac.
Pennsylvania	PA	Yes	CWE			717/783-4858	Acupuncturist
Rhode Island	RI	Yes	CWE			401/222-2827	Doctor of Acupuncture
South Carolina	SC	Yes	CWE-PLE	Yes		803/896-4500	Acupuncturist
South Dakota	SD						
Tennessee	TN	Yes	CWE-PLE	Yes		615/532-4384	Licensed Acupuncturist
Texas	TX	Yes	CWE-PLE			512/305-7067	L.Ac./Lic.Ac.
Utah	UT	Yes	CWE-PLE	Yes		801/530-6740	Acupuncturist
Vermont	VT	Yes	CWE			802/828-2373	L.Ac./Lic.Ac.
Virginia	VA	Yes	CWE-PLE			804/662-9908	L.Ac./Lic.Ac.
Washington	WA	Yes	CWE-PLE			360/664-3230	L.Ac./Lic.Ac.
Washington DC	DC	Yes	CWE			202/727-5365	Acupuncturist
West Virginia	WV	Yes	CWE			304/529-4558	L.Ac./Lic.Ac.
Wisconsin	WI	Yes	CWE			608/266-0070	Acupuncturist
Wyoming	WY						
Totals		41	39	13	1		

As of June 2002

\*L.Ac./Lic.Ac. = Licensed Acupuncturist / R.Ac. = Registered Acupuncturist / C.A. = Certified Acupuncturist

Note: New Mexico and Texas statutes require certification in acupuncture and Chinese herbology for acupuncture licensure.

The National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) is a non-profit organization established in 1982. It currently operates under Section 501(c)(6) of the Internal Revenue code. Its mission is to promote nationally recognized standards of competency and safety in acupuncture and Oriental medicine for the purpose of protecting the public.

All revenue collected by the organization is used to enhance NCCAOM certification programs; improve the quality of its examinations; advance certification research and development; provide services to its Diplomates; and fulfill its responsibility of protecting the public from unsafe practice.

It is a considerable professional achievement to earn the designation "Diplomate in Acupuncture (NCCAOM)." NCCAOM Certification indicates to employers, patients, and peers that one has met national standards for the safe and competent practice of acupuncture as defined by the profession. National board certification in acupuncture has been the mark of excellence in acupuncture since the inception of the Commission.

Nine commissioners who are either voted into office by general election or appointed by the board to fill a vacancy govern the NCCAOM. In making nominations, the Nominating Committee considers diversity in ethnicity, gender, geographic distribution, professional experience, and education.

The NCCAOM is assisted in its examination administration by Applied Measurement Professionals (AMP), one of the leading testing services in the United States. AMP is the professional testing agency contracted by the NCCAOM to assist in the administration, scoring and analysis of the NCCAOM examinations. AMP's services also include the reporting of scores to candidates who take the examinations. AMP is a research and development firm that conducts professional competency assessment research and provides examination services for a number of credentialing programs.

The NCCAOM is a member of the National Organization for Competency Assurance (NOCA). It is also accredited by the National Commission for Certifying Agencies (NCCA), which represents the highest voluntary certification standards in the United States.

The expertise and policies of these three groups – AMP, NOCA, and NCCA – have contributed to NCCAOM's development of a certification process that gives full recognition to the diversity of acupuncture in the U.S., while also providing a unified set of national standards for safe and competent practice.

The first NCCAOM Comprehensive Written Examination (CWE) in Acupuncture (ACP) was given in March 1985. It was developed during a three-year period with the help of leading acupuncturists throughout the nation. Throughout this development period the NCCAOM followed national guidelines for certification and testing in order to ensure a fair, valid, and reliable examination. The administration of the exam was a milestone event in the growth of the profession in the United States.

The Practical Examination of Point Location Skills (PEPLS) was added as a component of NCCAOM's Acupuncture Examination in September 1989. The Clean Needle Technique (CNT) portion was added to the acupuncture written exam two years later. This separately scored CNT exam was merged into the Comprehensive Written Examination in Acupuncture in 1998.

In 1989, the profession asked the NCCAOM to develop a certification program measuring entry-level competency in the practice of Chinese herbology. After three years of research, the organization opened the Credentials Documentation Review (CDR) period for Certification in Chinese Herbology. The first national Comprehensive Written Examination in Chinese Herbology was given in April 1995.

The NCCAOM then developed a third certification program in response to requests from the profession. NCCAOM Certification in Asian Bodywork Therapy (ABT) was offered in 1996 through Credentials Documentation Review. CDR for certification in Asian Bodywork Therapy closed in December 1997. The first Comprehensive Written Examination in ABT was given in October 2000.

In an effort to fully represent the expanding roster of its certification programs, the NCCAOM changed its name from the National Commission for the Certification of Acupuncturists (NCCA) to the National Certification Commission for Acupuncture and Oriental Medicine. A new logo was also adopted symbolizing the now-global nature of the Oriental healing professions.

The logo depicts a globe displaying a point of light centered beneath Asia. This representation indicates the birthplace of these ancient healing art forms. The logo's light shines across the ocean toward North America as a symbol of the universal practice and worldwide acceptance of Oriental medicine.

The mission of the NCCAOM is to establish, assess, and promote recognized standards of competence and safety in acupuncture and Oriental medicine for the protection and benefit of the public. Since its inception, the NCCAOM has certified close to 13,000 Diplomates in Acupuncture, Chinese Herbology and Asian Bodywork Therapy.

*Medical Practice. The council expires on June 30, 2001, unless reauthorized by the Legislature. Appointing Authority: Board of Medical Practice. Compensation: \$55 per diem plus expenses. Minnesota Statutes 147A.27. Board of Medical Practice, 2829 University Ave. SE, #400, Minneapolis, MN 55414-3246. (612) 617-2130.*

*RESPIRATORY CARE PRACTITIONERS' ADVISORY COUNCIL - The council advises the Board of Medical Practice on respiratory care practitioner standards, applications for registration, complaints and disciplinary actions, continuing education programs and enforcement of respiratory care practitioner rules. The council consists of seven members including two public members; three registered respiratory care practitioners and two physicians with expertise in respiratory care. Bi-monthly meetings for two hours at the Board of Medical Practice. The council expires on June 30, 2001, unless reauthorized by the Legislature. Appointing Authority: Board of Medical Practice. Compensation: \$55 per diem plus expenses. Minnesota Statutes 147C.35. Board of Medical Practice, 2829 University Ave. SE, #400, Minneapolis, MN 55414-3246. (612) 617-2130.*

*ACUPUNCTURE ADVISORY COUNCIL - (Minnesota Statutes 147B.05) advises the Board of Medical Practice regarding acupuncture licensure standards and disciplinary issues, and provides for distribution of information regarding standards. The council consists of seven members that include 4 acupuncture practitioners who meet licensure requirements and have practiced acupuncture at least 3 years, 1 licensed physician who also practices acupuncture, 1 licensed chiropractor who is NCCA certified, 1 public member who has received acupuncture treatment as primary therapy from NCCA certified acupuncturist. Bimonthly meetings for one hour at the Board of Medical Practice Office. The council expires on June 30, 2003, unless reauthorized by the Legislature. Appointing Authority: Board of Medical Practice. Compensation: \$55 per diem plus expenses.*

*ATHLETIC TRAINER'S ADVISORY COUNCIL - The council advises the Board of Medical Practice regarding athletic trainer standards, registration issues, complaint matters and disciplinary issues, and provides for distribution of information regarding standards. The council consists of eight members including two public members; three members who except for initial appointees, are registered athletic trainers, one being both a registered physical therapist and registered athletic trainers as submitted by the Minnesota American Physical Therapy Association; two members who are medical physicians licensed by the state and have experience with athletic training and sports medicine; and one member who is doctor of chiropractic licensed by the state and has experience with athletic training and sports injuries. Meetings are held bi-monthly for one hour at the Board of Medical Practice. Does not expire. Appointing Authority: Board of Medical Practice. Compensation: \$55 per diem plus mileage. Minnesota Statutes 148.7805, Laws of 1993, Chapter 232. 2829 University Ave. SE, #400, Minneapolis, MN 55414-3246. (612) 617-2130.*

*ADVISORY COUNCIL ON LICENSED TRADITIONAL MIDWIFERY - Council advises the Board of Medical Practice regarding traditional midwifery licensure, practice standards, complaints/discipline, and*



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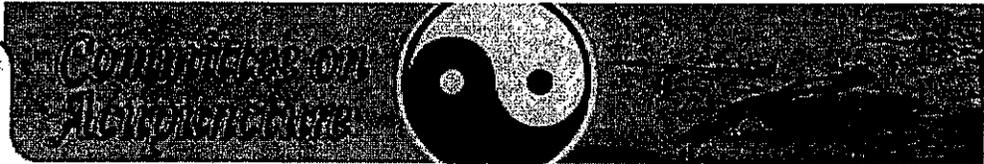


Commonwealth of Massachusetts

BOARD OF REGISTRATION IN MEDICINE

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Wednesday, 09/08/04 07:24PM



- Home
- Physician Profiles
- Consumer Information
- Physician Information

Home > Acupuncture

**Standing Committees:**

- Acupuncture
- Complaint Committee
- Data Repository
- Licensing Committee
- Patient Care Assessment

In June of 1987 the Board of Registration in Medicine appointed for the first time a Committee on Acupuncture, composed of four acupuncturists, one physician with acupuncture experience, one public member and one physician member of the Board. The Committee works in cooperation with the Board to regulate the practice of acupuncture in Massachusetts. The Committee's functions include: (1) licensing acupuncturists, (2) disciplining acupuncturists who engage in malpractice or misconduct, and (3) conducting licensure examinations and other regulatory activities which ensure the safe practice of acupuncture in Massachusetts.

**Other Board Information:**

- Public Information
- Regulations & Policies
- Board Members
- Links
- Site Map
- Privacy Policy
- Contact

The Committee on Acupuncture is aided in its work by the Acupuncture Unit. The unit which was created in January of 1987 handles problems and issues relating to acupuncture raised by the public and by the acupuncture community, and works with other units within the Board, notably the Disciplinary and Legal Units, on matters involving acupuncture.

**Acupuncture Links**

- ▶ Members of the Acupuncture
- ▶ Calendar Year 2004 Meeting:
- ▶ Requirements for Licensure
- ▶ COA Regulations
- ▶ Contact Acupuncture
- ▶ Download Acupuncture Form
- ▶ Guidebook to the Practice of in MA
- ▶ Professional Societies
- ▶ Complaint Process
- ▶ Definition of the Practice of A

**Address:**

Commonwealth of Massachusetts  
 Board of Registration in Medicine  
 560 Harrison Avenue, Suite G-4  
 Boston, MA 02118  
 (617) 654-9800

Acupuncturists were first allowed to practice in Massachusetts in 1973 under a Board regulation which required an acupuncturist to be a physician or in the employ of a physician. In 1977, this regulation was amended to allow acupuncturists registered with the Board to practice in conjunction with supervising physicians; the supervising physician's role was to give preliminary examinations to patients and written referrals for acupuncture treatment.

**Downloads:**

- Internet Explorer
- Netscape
- Adobe Acrobat (PDF)

The Committee on Acupuncture's most significant accomplishment for 1988 was the promulgation of regulations (243 CMR 4.00 and 5.00) allowing acupuncturists to become licensed in Massachusetts for the first time. These regulations, which are among the most comprehensive acupuncture regulations in the country, include such topics as: disciplinary actions against acupuncturists, educational and examination requirements for licensure, approval of acupuncture schools, the safe practice of acupuncture, truthful advertising, continuing education, and the use of acupuncture assistants.

A public hearing was held in October, 1987 on these regulations and they became law on January 22, 1988. The first licenses were issued on July 7, 1988.

# BOARD OF ACUPUNCTURE

Robert L. Ehrlich, Jr., Governor  
Michael S. Steele, Lt. Governor  
S. Anthony McCann, Secretary

---

## DIRECTORY OF OTHER STATE ACUPUNCTURE BOARDS

### ALASKA

P.J. Gingras (907) 465-2695  
Department of Commerce and Economic Development  
Division of Occupational Licensing - Acupuncture  
P.O. Box 110806  
Juneau, Alaska 99811-0806

### CALIFORNIA

Ms. Marilyn Nielsen (916) 263-2680  
Department of Consumer Affairs  
Medical Board, Acupuncture Committee  
1424 Howe Avenue, Suite 37  
Sacramento, California 95825-3233

### COLORADO

Ms. Deborah Fajen (303) 894-7758 ext. 301  
Department of Regulatory Agencies  
Office of Acupuncture Registration  
1560 Broadway, Suite 680  
Denver, Colorado 80202-5140

### CONNECTICUT

Norma Shea (860) 509-7562  
Department of Public Health  
Division of Medical Quality Assurance  
150 Washington Street  
Hartford, Connecticut 06106

### DISTRICT OF COLUMBIA

Yvonne Crawford (202) 727-5365  
Advisory Committee on Acupuncture

D.C. Board of Medicine  
614 H Street, NW, Room 108  
Washington, DC 20001

## FLORIDA

Penny Perkins (904) 488-6016  
Division of Medical Quality Assurance  
Board of Acupuncture  
Northwood Centre  
1940 North Monroe Street  
Tallahassee, Florida 32399-0761

## HAWAII

Ben Tilan (808) 586-2704  
Department of Commerce and Consumer Affairs  
Professional and Vocational Licensing Division  
Board of Acupuncture  
P.O. Box 3469  
Honolulu, Hawaii 96801

## IOWA

Jennifer Hart, Management Analyst (515) 281-5171  
Iowa Board of Medical Examiners  
1209 E. Court Avenue  
Des Moines, Iowa 50319-0180

## LOUISIANA

Ms. M. Glasper (504) 524-6763  
Louisiana State Board of Medical Examiners  
830 Union Street, Suite 100  
New Orleans, Louisiana 70112-1449

## MAINE

Geraldine L. Betts, Administrator (207) 624-8603/TDD (207) 624-8563 [jeri.l.betts@state.me.us](mailto:jeri.l.betts@state.me.us)  
Diane J. Bradstreet, Clerk  
Department of Professional and Financial Regulation  
Office of Licensing and Registration  
#35 State House Station  
Augusta, Maine 04333

## MASSACHUSETTS

Ann Marie Casey (617) 727-3086 ext. 363  
Board of Registration in Medicine, Acupuncture Unit  
10 West Street, 3rd Floor

Boston, Massachusetts 02111

**MINNESOTA**

Jeanne Hoffman (612) 642-0533  
Minnesota Board of Medical Practice  
2700 University Avenue West, #106  
St. Paul, Minnesota 55114-1080

**MONTANA**

Patricia England (406) 444-1088  
Department of Commerce  
Board of Medical Examiners  
111 N. Jackson, P.O. Box 200513  
Helena, Montana 59620-0513

**NEVADA**

Mr. Brent Hardy (702) 642-3322  
Nevada State Board of Oriental Medicine  
1860 Renada Circle  
North Las Vegas, Nevada 89030

**NEW JERSEY**

Mr. Kevin B. Earle (609) 826-7100  
Board of Medical Examiners  
Department of Law and Public Safety  
Acupuncture Examining Board  
140 East Front Street, 2nd Floor  
Trenton, New Jersey 08608

**NEW MEXICO**

Lynne Schmolke (505) 827-7554  
New Mexico Board of Acupuncture and Oriental Medicine  
P.O. Box 25101  
Santa Fe, New Mexico 87504

**NEW YORK**

Ms. Ronnie Hausherr (518) 473-0221  
NY State Board of Acupuncture  
Room 3103 Cultural Educational Center  
Albany, New York 12230

**NORTH CAROLINA**

Diana Mills (919) 773-0530

North Carolina Acupuncture Licensing Board  
1418 Aversboro Road  
Garner, North Carolina 27529-4547

### **OREGON**

Diana Dolstra (503) 229-5770  
Board of Medical Examiners  
620 Crown Plaza  
1500 SW First Avenue  
Portland, Oregon 97201-5770

### **PENNSYLVANIA**

Gina Bittner (717) 783-4858  
Board of Osteopathic Examiners / Board of Medical Examiners  
P.O. Box 2649  
Harrisburg, Pennsylvania 17105

### **RHODE ISLAND**

Russell J. Spaight (401) 222-2827  
State of Rhode Island & Providence Plantations  
Department of Health, Cannon Building  
Three Capitol Hill  
Providence, Rhode Island 02908

### **SOUTH CAROLINA**

Carole Chauvin (803) 737-9300  
Department of Labor, Licensing and Regulation  
Board of Medical Examiners  
3600 Forest Drive  
P.O. Box 11289  
Columbia, South Carolina 29211-1289

### **TEXAS**

Susie Tacchi (512) 305-7021  
Texas State Board of Medical Examiners  
P.O. Box 2018, MC-231  
Austin, Texas 78768-2018

### **UTAH**

Karen Reimherr (801) 530-6740  
Division of Occupational and Professional Licensing  
160 East 300th South, Box 146741  
Salt Lake City, Utah 84114-6741

**VERMONT**

Peggy Atkins, Staff Assistant (802) 828-2373  
Office of Professional Regulation  
109 State Street  
Montpelier, Vermont 05609-1106

**VIRGINIA**

Ola Powers/Sandy McGuire (804) 662-9908  
Virginia Board of Medicine  
6606 W. Broad Street, 4th Floor  
Richmond, Virginia 23230-1717

**WASHINGTON**

Vicki Brown (360) 586-7759  
Department of Health  
1300 SE Quince Street  
P.O. Box 47868  
Olympia, Washington 98504-7868

**WEST VIRGINIA**

C.P. Negri (304) 291-5053  
Board President  
364 High Street, #203  
Morgantown, West Virginia 26505

**WISCONSIN**

Pam Mickelson, Program Assistant (608) 266-0070  
Department of Regulation and Licensing  
Bureau of Health Service Professions  
Acupuncture Certification  
P.O. Box 8935  
1400 E. Washington Avenue  
Madison, Wisconsin 53708

Updated: 11/08/04

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Board of Acupuncture  
4201 Patterson Ave., Room 320  
Baltimore, MD. 21215  
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Fax (410) 358-7258  
TDD (800) 542-4964

Email contact: [heislerp@dhmh.state.md.us](mailto:heislerp@dhmh.state.md.us)

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HONORED MEMBERS OF THE NORTH DAKOTA HOUSE AND SENATE:

DEC. 20, 2004

SUBJECT: ACUPUNCTURE AND ORIENTAL MEDICINE.

I AM Mr RICH AANDERUD, R.N. , C.R.N.A., CST. . I was born in Maddock, and raised in Jamestown.

I am a NURSE ANESTHETIST, and practiced Anesthesia for thirty years. I practiced Anesthesia in the following states : North Dakota, Washington, Washington D.C., New Mexico, Oregon, Idaho , and Wyoming. I was Self-Employed from 1995 to 2000 . I am presently employed full time at ALTRU Hospital, in Grand Forks . I learned something from every Hospital and every physician whom I had the privilege to work with. In 1992 , I learned how Powerful and Effective, Chinese Medicine and Acupuncture is.

During the last twelve years, I received about sixty Acupuncture Treatments from some of the best Oriental Physicians in America. Dr. Xue-Zhi Wang, O. M. D. ,C.A. , from Seattle, who also teaches at the University of Washington. Dr. Chen Chang, O. M. D. , from Washington D. C., who has treated many Governors, and other Professionals . Dr. Zhuoling Ren, T.C.M.D., from Minneapolis. Dr. Ted Tang , T.C.M.D., from Fargo, who practices Acupressure. These are some of the best physicians, who helped me, and who I have tremendous respect for. Tendonitis of the elbow, knees, back pain, and increased blood pressure. I have read hundreds of case histories of very successful treatments, of many different diseases and medical problems., using Acupuncture.

Remember, Oriental Medicine has been used and perfected , for the last four thousand years.

I received three Acupuncture treatments from David Magnuson, L.Ac. Ac. , during the last month. He is an excellent Professional Practioner. All three treatments worked very well. Oriental Medicine and Acupuncture are very important Health Care choices for the citizens of Grand Forks and North Dakota.

We administer Anesthesia for patients having Open Heart Surgery , at Altru Hospital , who are only fifty two years old. We do several of these patients every week. This means there are thousands and thousands of patients who are 50 to 55 who have Open Heart Surgery every year in the USA. It is also totally amazing the numbers of patients who have Total Joint Surgery, in the USA ever year , who are only fifty to sixty years old. Oriental Medicine and Acupuncture , could help to reduce these numbers . The list of medical problems which Acupuncture can successfully treat is very long.

I ask the Members of the North Dakota House and Senate, to help implement the Licensing of the Practice of Oriental Medicine and Acupuncture. Just as we License other physicians, nurses , attorneys etc..

Thank you very much for your time and effort. I wish you success in helping our citizens to improve their health care problems with Oriental Medicine and Acupuncture. If I can be of any further help, please feel free to contact me.



RICH AANDERUD, R.N. , C.R.N.A., CST.

3004 CHESTNUT ST.  
GRAND FORKS , ND. 58201

701-787-5675

RAANDERUD@YAHOO.COM

# St. Paul's Episcopal Church



319 South 5th Street  
Grand Forks, ND 58201  
Phone 701.775.7955

December 2, 2004

David Magnuson  
117 North Washington  
Grand Forks, ND 58201

Dear David:

I was in such severe pain from throwing my back out when I came to you for help. The acupuncture experience brought relief from pain and helped in the process of healing.

I could hardly walk, but after the first treatment I was walking fine. After three more treatments my back was 100% better.

Thank you for your skill in acupuncture and for its benefit. I would and have recommended acupuncture to other people.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Shannon".

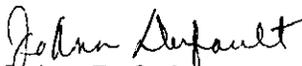
The Rev. Dr. James M. Shannon, Rector  
St. Paul's Episcopal Church

December 6, 2004

### MY EXPERIENCE WITH ACUPUNCTURE

I'm writing to inform the legislators of North Dakota my experiences in receiving acupuncture. I wanted to try this form of treatment for my skin problems and also neck stiffness which has been ongoing for 6 months. I have been on the pathway to promote healing without using drugs and surgery. I'm very pleased with the outcome of acupuncture, skin problems much improved and neck stiffness is gone. Besides this modality helping my symptoms, this is another avenue of treatment for people looking for alternative treatments. I'm hearing more people wanting to get away from using all the drugs. I would definitely recommend this modality of healing to others in this community.

I hope this one voice gives the message that this is one more choice of healing for anyone who wants to try it.

  
Sincerely, JoAnn Dufault

Dec 1, 2004  
Re; Acupuncture

To Whom It May Concern:

My wife and I have been getting acupuncture treatments since August 2004. I went for a constant ringing in my ears, after the first treatment I noticed that it had gotten better and after a couple of more visits it went away. I plan on having a maintenance treatment to keep it from coming back. I also received treatment for a sore back, from a fall, and that is better as well.

My wife originally went in for sleep and relaxation and it helped. She came down with a bad case of shingles and received treatment (cupping along with acupuncture) and that improved right away.

We believe in acupuncture whole-heartedly and believe it would help a lot of different people.

Yours truly, Phil & Sandy LaVoi.

*Phil LaVoi*  
*Sandy LaVoi*

**CHAPTER 43-51**  
**PROFESSIONAL AND OCCUPATIONAL LICENSING**

**43-51-01. Definitions.** As used in this chapter, unless the context indicates otherwise:

1. "Board" means a board, commission, or other agency of state government created or identified in this title to regulate a particular occupation or profession, except for the:
  - a. State board of accountancy;
  - b. State electrical board;
  - c. North Dakota real estate appraiser qualifications and ethics board;
  - d. State real estate commission;
  - e. Secretary of state with respect to contractor licensing;
  - f. State board of medical examiners; and
  - g. State board of dental examiners.

"Board" also includes any agency of state government which is created or identified outside this title to regulate a particular occupation or profession if the agency elects, by administrative rule, to invoke the authority in this chapter.

2. ~~"Foreign practitioner" means an individual who currently holds and maintains a license in good standing to engage in an occupation or profession in a state or jurisdiction other than this state and who is not the subject of a pending disciplinary action in any state or jurisdiction.~~
3. "Good standing" means a foreign practitioner holds a current license that is not issued on a temporary or restricted basis, is not encumbered or on probation, and is not suspended or revoked.
4. ~~"License" means a license, certificate, permit, or similar authorization to practice an occupation or profession which is issued by a government agency in another state or jurisdiction that imposes requirements for obtaining and maintaining a license which are at least as stringent as the requirements imposed in this state to obtain and maintain a license to practice the same profession or occupation.~~
5. "Occupation or profession" means activity for which a license is required from a board or similar activity for which a license is required in another state or jurisdiction.

**43-51-02. Location of practice of an occupation or profession.** The provision of services to an individual in this state which fall within the standard of practice of a profession or occupation regulated by a board, regardless of the means by which the services are provided or the physical location of the person providing those services, constitutes the practice of that occupation or profession in this state and is subject to regulation by the appropriate board in this state.

**43-51-03. Indirect practice without a license.**

1. A foreign practitioner may provide services in this state which fall within the scope of practice designated by the foreign practitioner's license and by this title without obtaining a license from the appropriate board if the services are provided through consultation with the person licensed by the board and if the foreign practitioner has

no direct communication in this state with the individual receiving the services except in the presence of the individual who is licensed by the board. Both the foreign practitioner and the individual licensed by the board are responsible for the services provided under this subsection.

2. A foreign practitioner may provide services in this state which fall within the scope of practice designated by the foreign practitioner's license and by this title without obtaining a license from the appropriate board if the services are provided through a remote means and are a continuation of an existing relationship between the foreign practitioner and the individual receiving the services which was formed in the state or jurisdiction in which the foreign practitioner is currently licensed.

**43-51-04. Emergency practice without a license.** Upon prior written notice to the appropriate board, a foreign practitioner may provide services in this state which fall within the scope of practice designated by the foreign practitioner's license and by this title without obtaining a license from the board, if the services are provided for a period of time not to exceed sixty consecutive days in a calendar year and are provided in response to a disaster declared by the appropriate authority in this state. The notice provided by a foreign practitioner under this section must include verified documentation from the appropriate licensing authority which identifies the requirements for licensure in that jurisdiction and which confirms that the practitioner is licensed and in good standing in that jurisdiction and any other information requested by the board. A notice provided under this section, if accompanied by sufficient documentation, is deemed to be accepted unless denied by the board. If a notice under this section is denied, the foreign practitioner immediately shall cease providing services under this section and may not resume providing services until after a successful appeal of the board's decision under chapter 28-32 or after an application for privileges under this section is reviewed and approved by the board.

**43-51-05. Limited practice without a license.** Upon prior written application to the appropriate board, a foreign practitioner may provide services in this state which fall within the scope of practice designated by the foreign practitioner's license and by this title without obtaining a license from the board if the services are provided for no more than thirty full or partial days per year. The one-year period commences on the date the written application is approved by the board. An application from a foreign practitioner under this section must include verified documentation from the appropriate licensing authority which identifies the requirements for licensure in that jurisdiction and which confirms that the practitioner is licensed and in good standing in that jurisdiction and any other information requested by the board. The board may require payment of a fee of twenty-five dollars or other fee established by the board by administrative rule, not to exceed the higher of twenty-five dollars or one-tenth of the fee for an annual license from the board, as a condition of approving an application under this section.

**43-51-06. Licensure without examination.** A board may issue a license, without examination, to any foreign practitioner who has practiced the occupation or profession for which the practitioner is licensed at least two years prior to submitting the application to the board, or for any shorter period of time provided in this title or established by the board by administrative rule, and who meets the other requirements for a license. A board is not prohibited from issuing a license under this section to a foreign practitioner if the state or jurisdiction in which the individual is licensed does not extend similar privileges to individuals licensed in this state. This section does not prohibit a board from requiring a foreign practitioner to take an examination regarding the laws of this state and the rules established by the board.

**43-51-07. License compacts.** A board may establish, by administrative rule, conditions and procedures for foreign practitioners to practice in this state pursuant to written compacts or agreements between the board and one or more other states or jurisdictions or pursuant to any other method of license recognition that ensures the health, safety, and welfare of the public. Any compact or agreement by a board does not become binding on this state until implemented by administrative rules under this section.

**43-51-08. Discipline.** A foreign practitioner's authority to practice an occupation or profession under this chapter is subject to denial, probation, suspension, revocation, or other form of discipline for the same grounds as individuals licensed by the appropriate board in this state. In addition to other grounds for disciplinary action authorized by law, a person who holds a license issued by a board may be subject to disciplinary action in this state for:

1. Failing to adequately review services provided by a foreign practitioner under this chapter;
2. Unauthorized practice of the person's occupation or profession in another state or jurisdiction, including the delivery of services by a licenseholder in this state to a recipient of services in another state or jurisdiction;
3. Acts occurring in another state or jurisdiction which could subject the person to disciplinary action if those acts occurred in this state; or
4. Acts occurring in another state or jurisdiction which could subject the person to disciplinary action if the person held a license in that state or jurisdiction.

A disciplinary action under this section against a foreign practitioner is subject to chapter 28-32.

**43-51-09. Jurisdiction - Service of process.** A foreign practitioner who provides services in this state without a license as permitted in this chapter shall be deemed to have consented to the jurisdiction of this state and the appropriate board, to be bound by the laws of this state and the rules established by the appropriate board, and to have appointed the secretary of state as the foreign practitioner's agent upon whom process may be served in any action or proceeding against the practitioner arising out of the practitioner's activities in this state.

Service on the secretary of state of any process, notice, or demand is deemed personal service upon the foreign practitioner and must be made by filing with the secretary of state an original and two copies of the process, notice, or demand, with the filing fee of twenty-five dollars. A member of the legislative assembly or a state or county officer may not be charged for filing any process, notice, or demand for service. The secretary of state shall immediately forward a copy of the process, notice, or demand by registered mail, addressed to the foreign practitioner at the address provided by the filer.

**43-51-10. Application with other laws.** This chapter applies notwithstanding any other limitation in state law on the practice of an occupation or profession. This chapter supplements and does not repeal the authority provided to each board. Nothing in this chapter prohibits a board from imposing conditions on foreign practitioners by administrative rule or compact which are more restrictive than those imposed in this chapter, if those restrictions are enacted to ensure the health, safety, and welfare of the public. Rules under this section may be adopted as emergency rules under chapter 28-32. Nothing in this chapter alters the scope of practice of a particular occupation or profession as defined by law.

Acupuncture is a licensed and regulated health care profession in over 40 states in the U.S. In addition, the National Commission for the Certification of Acupuncture & Oriental Medicine (NCCAOM) certifies both acupuncturists and Chinese herbal practitioners. Acupuncturists who have passed the NCCAOM exam are entitled to add Dipl. Ac. (Diplomate of Acupuncture) after their name.

**Q: What should I know about the proposed treatments?**

A: Your practitioner will explain the nature of your problem in Oriental medical terms and what treatment he or she is recommending. Your practitioner will tell you what benefits and risks there are to the proposed treatment and what other treatment options are available to you through this practitioner or by referral to another practitioner or physician.

**Q: Is there anything I need to do before receiving an acupuncture treatment?**

A: The following suggestions will help you get the maximum benefits from your treatment.

1. Wear loose clothing. Women should not wear one piece dresses. Avoid wearing tight stockings.
2. Avoid treatment when excessively fatigued, hungry, full, emotionally upset, or shortly after sex.

**Q: Is there anything I need to do while receiving acupuncture?**

1. Relax. There is no need to be frightened. Ask your practitioner any questions you have along the way so that you can get the most benefit possible from treatment.

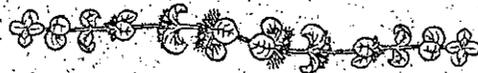
2. Do not change your position or move suddenly. If you are uncomfortable, tell your practitioner.

**Q: What can I expect after treatment?**

A: Patients often experience dramatic results in the first treatment. Some patients experience an immediate total or partial relief of their pain or other symptoms. This relief may last or some pain may return. In a few cases, there may be no immediate relief only to notice the pain diminish over the next couple of days. Generally, you should expect to feel better.

**ACUPUNCTURE WORKS!**

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**Questions & Answers**

*About Acupuncture*

Information  
for  
Patients



**Q: What is acupuncture?**

A: Acupuncture is one of the modalities of Oriental medicine. Although what is called acupuncture in the West comprises several different therapies (such as moxibustion and cupping), mostly it consists of the insertion of fine needles into the body at specific points shown to be effective in the treatment of specific health problems. These points have been mapped by the Chinese over a period of two thousand years, and there are more than a thousand known acupoints. In the past three decades, electromagnetic research has confirmed the existence and location of these po

