

SPECIAL LEGISLATIVE COMMISSION TO STUDY PROSPECTIVE IMPROVEMENTS IN PATIENTS' ACCESSIBILITY TO MEDICAL CARE FROM LICENSED NATUROPATHIC PHYSICIANS

Final Report Submitted December 20, 2023

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Commission Members

- Representative Evan P. Shanley Chair D-District 24, Warwick
- Representative Susan Donovan D-District 69, Bristol, Portsmouth
- Representative Joseph Solomon D-District 22, Warwick
- Representative Lauren Carson D-District 75, Newport
- Ms. Cheryl Greathhouse
- Mr. Victor Woods
- Mr. Shawn Donahue
- Dr. Chrysanthi Kazantzis
- Dr. Angela McCann
- Dr. Kenneth Wood
- Dr. Scott Rivkees/Mr. Neil Hytenin
- Dr. Christopher Ottiano

Dear Speaker Shekarchi:

I am pleased to provide you with the findings and recommendations of The Special Legislative Commission to Study Prospective Improvements In Patients' Accessibility To Medical Care From Licensed Naturopathic Physicians (the "Commission").

The Commission consisted of twelve (12) members and included several dedicated professionals from the medical field, the naturopathic medicine field, and the health insurance regulatory field.

The Commission was convened to make a comprehensive study and provide recommendations for a prospective pathway to making patients' treatment accessibility with naturopathic physicians more affordable through inclusion in health maintenance organization ("*HMO*") networks.

Accordingly, the Commission heard related testimony, and studied written testimony, from the following sources that provided various perspectives regarding the aforementioned issue: licensed naturopathic physicians, the Interim Rhode Island Health Insurance Commissioner, members of the public that have received and support naturopathic treatment, the Chair of the Rhode Island Medical Society Public Laws Committee, and health insurers.

This final report is a culmination of five (5) hearings that began in December, 2022 and ended in June, 2023. It contains information presented by various witnesses who testified before the Commission, as well as presentations made, which the Commission has studied.

I would like to express my gratitude to all members of the Commission for their willingness to take part in this process, and we appreciate the investment of the time and talent that they graciously provided.

Sincerely,

Evan P. Shanley

Chair

Commission Findings

Based on the testimony and information presented to the Commission, the Commission notes the following findings:

- 1. According to the Institute for Natural Medicine, the American Association of Naturopathic Physicians, and Dr. Chrysanthi Kazantzis, naturopathic treatment:
 - Entails a whole health, whole person, and holistic clinical approach to health care.
 - Includes services such as lab testing to determine vitamin and mineral
 deficiencies, determining the best food and supplements for each patient,
 discovering the underlying cause to a patient's health condition, and the
 minimization of taking prescription medication for patients who are sensitive to
 such medications.
 - Is currently not covered by Rhode Island health insurers.
- 2. Naturopathic Physicians are required to complete a four (4) year, in-residence, science-based, post-graduate medical education consisting of four thousand one hundred (4,100) hours of coursework and clinical training at an accredited naturopathic medical school.
- 3. Naturopathic Physicians are licensed by the State of Rhode Island.
- 4. Proponents of mandated coverage of naturopathic treatment assert that such treatment is safe and reference studies that support the contention that patients seen by naturopathic doctors get well and stay well for less cost due to less expensive treatments, lower technology interventions, and naturopathic medicine's emphasis on disease prevention, lifestyle modification, and health promotion.
- 5. Commercial insurers in fourteen (14) states reimburse naturopathic physicians, including Connecticut, New Hampshire, and Maine.
- 6. Several members of the public provided testimony that espoused the benefits of naturopathic treatment and it reflected clear support for increased access to, and insurance health insurance coverage for, such treatment.
- 7. According to the Office of the Health Insurance Commissioner**, with respect to the defrayal of state-required additional benefits, in addition to the ten essential health benefit categories required under federal law:
 - Subject to approval by the U.S. Center for Medicare and Medicaid Services ("CMS"), the State would be required to make payments to an enrollee or directly to the qualified health plan ("QHP") issuer on behalf of the individual.
 - Each QHP issuer shall quantify cost attributable to each additional required benefit and their calculation shall be: (i) based on an analysis performed in accordance with generally accepted actuarial principles and methodologies; (ii) conducted by a member of the American Academy of Actuaries; and (iii) reported to the State. The existence of a benefit defrayal requirement is not a barrier for coverage, but is only one factor to consider.

^{**}Informational Note: With respect to any potential additional benefit mandate for coverage under the Medicaid Program, a special plan amendment would have to be sought through the Executive Office of Health and Human Services for approval from CMS.

Commission Findings (continued)

Also, commercial health plans would be required to participate in the pilot program that is referenced in this report's "Commission Recommendations" section.

- 8. Opponents of mandating coverage for naturopathic treatment assert that:
 - Such mandates tend to raise costs.
 - There is a finite amount of money available in the healthcare system to pay all of the providers.
 - The healthcare system is fragmented and Naturopathy causes more fragmentation, which can cost more money.
 - Naturopathic physicians take an approach to treatment that is different than the approach to treatment that allopathic physicians take; Simply ordering tests can be a waste of money, can be potentially duplicative, and can delay intervention by some other provider.
 - Naturopathy has its place in the healthcare system and can be an appropriate treatment under certain circumstances, however, it is not equivalent to primary care treatment.
- 9. Blue Cross Blue Shield of Rhode Island asserts that:
 - Health insurers are charged with balancing health benefits with premium costs.
 - Health plans must base coverage determinations on thorough scientific research, peer-reviewed and data-driven studies, as well as guidance from governmental authorities such as CMS.
 - Covered services must be clinically effective, which is determined primarily from evidence-based evaluations by national medical professional organizations.
 - Data presented by the American Association of Naturopathic Physicians shows that Maine, Connecticut, New Hampshire and Vermont provide some degree of coverage for Naturopathic services.
 - It is aware of two studies which point to net health care savings after the cost of the naturopathic services was included.
 - Allopathic and naturopathic providers receive different educational training and provide care for patients in substantially different ways.
- 10. Neighborhood Health Plan of Rhode Island asserts that:
 - The State of Rhode Island recognizes Naturopathic Physician licenses for lab tests to be ordered, but not for coverage purposes.
 - Naturopathic physicians need to be appropriately licensed and insured pursuant to state mandates and regulations.
 - With respect to naturopathic treatment being covered, an analysis in increase costs to Medicare, Medicaid, and commercial providers must be done as well as a clinical analysis which requires critical input from the Rhode Island Medical Society.
 - Regulators such as the Rhode Island Executive Office of Health and Human Services, CMS, and the Rhode Island Office of the Health Insurance Commissioner can perform the cost-savings analysis.

Commission Findings (continued)

11. UnitedHealthcare asserts that each UnitedHealthcare plan provides coverage for naturopathic services as directed by the plan sponsor or payor, including CMS and Rhode Island Medicaid, and in accordance with state and federal law governing plan design and benefit requirements.

Commission Recommendations

Based on the testimony and information presented to the Commission, and given the varied nature of the Commission's findings, the Commission proposes the following recommendations:

- 1. The General Assembly may consider enacting legislation that would:
 - Enable a three (3) year pilot program.
 - Require insurers to cover treatment for naturopathic physicians that they would otherwise cover for allopathic physicians.
 - Require the collection of data, including data with respect to:
 - o Whether or not the pilot program is cost-neutral or results in cost savings.
 - o Treatment coordination between members' naturopathic physicians and their primary care physicians.
 - Require all insurers to report their data collection findings to the General Assembly.
- 2. Alternatively, the General Assembly may require this Commission to conduct further study regarding a prospective pathway to making patients' treatment accessibility with naturopathic physicians more affordable through inclusion in the managed health care plans and in HMO networks.

Appendix A - Enabling Resolution

(See attached)

• 2022 – H 7562 SUBSTITUTE A

2022 -- H 7562 SUBSTITUTE A

LC004865/SUB A/2

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13

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2022

HOUSE RESOLUTION

CREATING A SPECIAL LEGISLATIVE COMMISSION TO STUDY PROSPECTIVE IMPROVEMENTS IN PATIENTS' ACCESSIBILITY TO MEDICAL CARE FROM LICENSED NATUROPATHIC PHYSICIANS

Introduced By: Representatives Shanley, Phillips, Price, Barros, Solomon, and Cassar

Date Introduced: February 18, 2022

Referred To: House Health & Human Services

1	WHEREAS, Naturopathic medicine is used for a wide range of health issues and practice
2	in settings ranging from private clinics to integrative medical centers, urgent care clinics and
3	hospitals; and
4	WHEREAS, Naturopathic physicians are trained as primary care providers who diagnose,
5	treat and manage patients with acute and chronic conditions; and
6	WHEREAS, Naturopathic medicine utilizes diverse techniques which includes modern
7	and traditional, scientific and empirical methods, addressing disease and dysfunction at the level
8	of body, mind and spirit; and
9	WHEREAS, Naturopathic physicians are often successful at treating chronic conditions
10	that don't respond to conventional medicine; now, therefore be it
11	RESOLVED, That a special legislative commission be and the same is hereby created

consisting of thirteen (13) members: five (5) of whom shall be members of the Rhode Island

House of Representatives, not more than four (4) from the same political party, to be appointed

1	one of whom shall be the Chairperson of the Lifespan board of directors, or designee; one of
2	whom shall be the Director of the Department of Health (RIDOH), or designee; and one of whom
3	shall be the President and CEO of Neighborhood Health Plan of Rhode Island, or designee.
4	In lieu of any appointment of a member of the legislature to a legislative study
5	commission, or any commission created by a General Assembly resolution, the appointing
6	authority may appoint a member of the general public to serve in lieu of a legislator.
7	The purpose of said commission shall be to make a comprehensive study and provide
8	recommendations for a prospective pathway to making patients' treatment accessibility with
9	naturopathic physicians more affordable through inclusion in HMO networks.
10	Forthwith upon passage of this resolution, the members of the commission shall meet at
11	the call of the Speaker of the House and organize and shall select a chairperson from among the
12	legislators.
13	Vacancies in said commission shall be filled in like manner as the original appointment.
14	The membership of said commission shall receive no compensation for their services.
15	All departments and agencies of the state, shall furnish such advice and information,
6	documentary and otherwise, to said commission and its agents as is deemed necessary or
17	desirable by the commission to facilitate the purposes of this resolution.
8	The Speaker of the House is hereby authorized and directed to provide suitable quarters
9	for said commission; and be it further
20	RESOLVED, That the commission shall report its findings and recommendations to the
!1	House of Representatives no later than April 20, 2023, and said commission shall expire on July
2	20, 2023.

LC004865/SUB A/2

EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

HOUSE RESOLUTION

CREATING A SPECIAL LEGISLATIVE COMMISSION TO STUDY PROSPECTIVE IMPROVEMENTS IN PATIENTS' ACCESSIBILITY TO MEDICAL CARE FROM LICENSED NATUROPATHIC PHYSICIANS

I	This resolution would create a thirteen (13) member special legislative study commission
2	whose purpose it would be to make a comprehensive study of prospective improvements in
3	patients accessibility to medical care from licensed naturopathic physicians, and who would
4	report back to the House of Representatives no later than April 20, 2023, and whose life would
5	expire on July 20, 2023.

LC004865/SUB A/2

Appendix B - Meeting Agendas and Presentations

- December 15, 2022
 - o Agenda (See attached)
 - o Presentations:
 - Dr. Angela McCann, ND, DAOM (See attached)
 - Chrysanthi Kazantsis, ND, MS (See attached)
 - Cory King, Interim Health Insurance Commissioner, The Rhode Island
 Office of Health Insurance Commissioner (See attached)
- January 17, 2023
 - o Agenda (See attached)
- March 29, 2023
 - o Agenda (See attached)
- April 19, 2023
 - o Agenda (See attached)
- June 1, 2023
 - o Agenda (See attached)

SPECIAL LEGISLATIVE COMMISSION TO STUDY PROSPECTIVE IMPROVEMENTS IN PATIENTS' ACCESSIBILITY TO MEDICAL CARE FROM LICENSED NATUROPATHIC PHYSICIANS

NOTICE OF MEETING

DATE: Thursday, December 15, 2022

TIME: 3:00 PM

PLACE: House Lounge - State House

AGENDA

- I. Call Meeting to Order.
- II. Election of Chairperson and Vice Chairperson.
- III. Introduction of Commission Members.
- IV. Presentation by Dr. Angela McCann, ND, DAOM and Dr. Chrysanthi Kazantsis, ND, MS.
- V. Presentation by the Rhode Island Office of Health Insurance Commissioner (OHIC).
 - Cory King, Interim Health Insurance Commissioner
 - Victor Woods, OHIC Director of Regulatory Compliance
- VI. Next Meeting Date.
- VII. Adjournment.

*Public comment will not be received at this meeting.

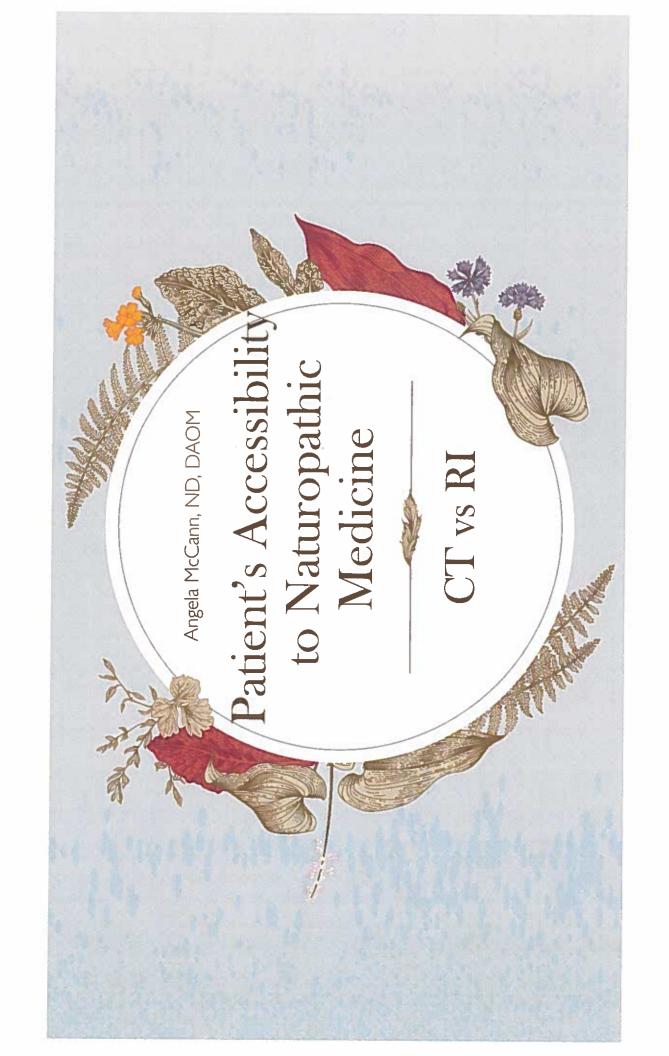
If you have any questions, please contact Robert Millerick, Esq., Deputy Director of House Policy, at 401-528-1764 or at rmillerick@rilegislature.gov

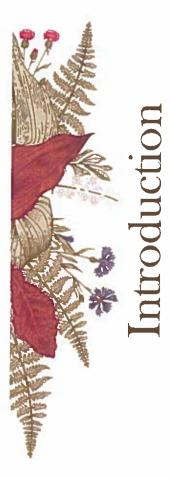
PROCEDURAL INFORMATION:

The meeting will be televised on Capitol Television, which can be seen on Cox Channels 15, and 61, in high definition on Cox Channel 1061, on Full Channel on Channel 15 and on Channel 34 by Verizon subscribers.

It will also be live streamed at https://www.rilegislature.gov/CapTV/Pages/default.aspx

POSTED: FRIDAY, December 9, 2022, 11:50 A.M.





•My name is Angela McCann, and I am a medically-trained Naturopathic Physician licensed in Rhode Island.

• I am the Secretary of the Rhode Island Association of Naturopathic Physicians, a group dedicated to supporting Licensed Naturopathic Physicians here in Rhode Island. I am a member of the AANP.

•I was born and raised in Rhode Island, attending Toll Gate High School and the learned about Naturopathic Medicine, and I am so happy to be bringing this University of Rhode Island. After graduating, I traveled extensively where I medicine back home to Rhode Island.



My Practice and Non Profit Work

 I have been in medical practice as a Naturopathic Physician and Acupuncturist for 8 years.

Prior to moving home to RI, I worked in Connecticut for 6 years as a Naturopathic Physician and licensed acupuncturist.

Greenwich, RI at Opus Total Health and have been here for 2 years. I currently practice naturopathic medicine and acupuncture in West

I am also the Executive Director of Learn and Heal Integrative Health, a small non-profit organization registered in Rhode Island dedicated to expanding access to Naturopathic Medicine and Acupuncture for the underserved.







Whole Person Medicine is:

- Comprehensive in its approach to whole health and the whole person.
- Focused on addressing underlying causes of acute and chronic diseases.
- Dedicated to health promotion, minimally invasive therapies, and reducing healthcare costs.
- Individualized to engage patients
- Supportive to patients as they make lifestyle and behavioral change

Naturopathic Medicine is Cost Saving

Cost Savings come from:

- Prevention and addressing the root causes of illness which decreases the development and progression of disease, and its complications
- Enhancing effectiveness of conventional medical treatments by minimizing side effects through the use of non-invasive treatments
- Improving treatment response
- Decreasing recovery time from invasive procedures

From "Naturopathic Physicians as Whole Health Specialist" Pg 24





- In Connecticut I could see
 more low and middle income
 patients.
- This was due to HMO insurance coverage and Medicaid coverage.
- This means that I was able to see a **broader patient base** and help more people.



- I only see patients who can afford to pay out of pocket costs.
- This **results in turning away** many patients who are seeking care due to inability to pay.
- Additionally, fewer patients are able to continue with care due to costs not covered by insurance.
- These costs include office visit payment and laboratory coverage.



- Ability to use insurance for lab coverage.
- Results allowed me to monitor change as we modified diet, exercise and supplementation.
- Using this information helped to ensure safety and efficacy of my treatment plans.



I can write the lab slip, but the patient must pay out of pocket, or call their PCP and ask if they are willing to run the tests.

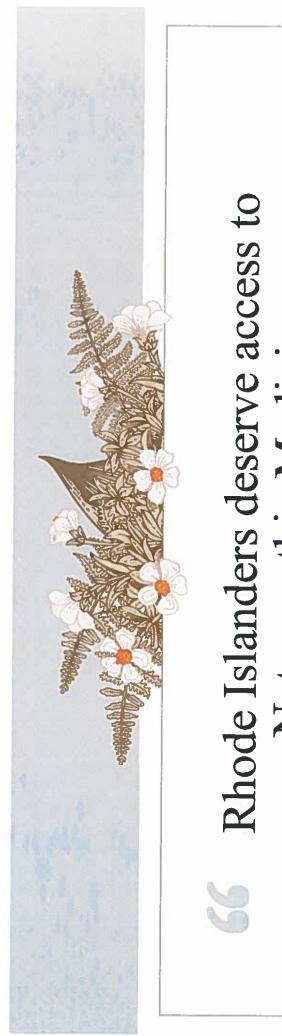
This adds extra work on their PCP and poses a financial barrier for some.



- I could send a patient to the radiology lab to have an X-Ray, Ultrasound, MRI or CT scan as needed for pain management or coordinating care with PCP or Orthopedic.
- Ex. a patient arrives with acute back pain after heavy lifting, I could send him for an X-Ray and refer.
- Ex. Patient with possible blood clot in the leg, could send for US and refer to PCP



- I see many patients with acute pain, some who haven't been to primary care or had any orthopedic assessment.
- In Rhode Island, I refer all patients to PCP and Orthopedic clinics instead of initiating imaging prior to the referral. This slows down the process, and makes the patient wait for care they could have had, If I could just bill insurance.



Naturopathic Medicine.

Thank you for your consideration.



Angela McCann, ND, DAOM

naturalhealthelements@gmail.com

www.opustotalhealth.com

www.learnandheal.org

www.angelamccann.com



Dear Special Legislative Commission Members,

Thank you for reading the Rhode Island Association of Naturopathic Physicians' (RIANP) written testimony in support of improving patients' accessibility to medical care from licensed naturopathic physicians.

My name is Dr. Chrysanthi Kazantzis (Dr. Kaz) and I am a Naturopathic Doctor. I am the President of the Rhode Island Association of Naturopathic Physicians and the owner and founder of Anasa Personalized Medicine, a naturopathic medicine clinic located here in Providence.

I am a Rhode Island native, having attended Barrington public schools and the University of Rhode Island. I continued my education at the University of Bridgeport in Connecticut and graduated from their Naturopathic Medical School program in May of 2016. After graduation, I practiced for two years in Connecticut. Once Rhode Island became licensed, I joined the oldest naturopathic clinic in Rhode Island and practiced there for two years. Two years ago, I opened my own naturopathic clinic in Providence and have hired another Naturopathic Doctor who works in my office.

Naturopathic doctors have been licensed in Rhode Island since 2017 and since then we have seen a dramatic increase in interest in our services. We are experts in evidence based and effective natural medicine and many patients are seeking this type of medicine to support their overall health. Patients are interested in lab testing to determine vitamin and mineral deficiencies. They are interested in determining what is the best food to eat for their body, what the best supplements are for them and discovering the underlying cause to their health conditions. Many people are sensitive to medications and want to minimize taking prescriptions or avoid surgeries and would like to utilize a natural approach to support their health. By providing these types of services, we are providing the patients and citizens of Rhode Island an alternative option to support their overall health.

Currently, patients have to pay out of pocket for these services which prohibits many people from accessing this type of healthcare and for many this is unaffordable. Many patients are seeking this type of medicine and travel out of state to find a naturopathic doctor who is covered by their health insurance for office visits and lab testing. I witnessed this firsthand while practicing in Connecticut, as I had many patients who traveled from Rhode Island to see me, as their health insurance covered their visits and lab tests.

At this time in New England, there is full insurance coverage in four states, Connecticut, New Hampshire, Maine and Vermont and patients are very willing to travel outside of the state. This negatively impacts the clinics in Rhode Island and the taxes collected by the state. This is a disservice to the citizens of Rhode Island as many people would like to access this healthcare, but do not have the appropriate funds. Acquiring insurance coverage would allow all citizens to have access to this desired healthcare.

Naturopathic medicine is safe, effective and cost saving and should be an option provided to all Rhode Islanders to maintain their health and prevent disease. According to the CDC, chronic



disease such as heart disease and stroke, cancer and diabetes are the top causes of death in the United States. Currently 6 in 10 adults in the US have a chronic disease which is costing the healthcare system \$3.8 trillion dollars annually. The key lifestyle risks for chronic disease include poor nutrition, lack of physical activity, excessive alcohol use and tobacco use. These chronic diseases lead to a significant burden on the healthcare system by leading to hospitalizations, long term medication use and continued doctors' visits.

Naturopathic doctors are trained to diagnose and treat all health conditions using natural therapies. We all know that prevention is more cost effective than treatment. With naturopathic medicine, we utilize nutrition, diet and food recommendations, lifestyle recommendations and supplement recommendations including herbs, vitamins and minerals. These are all cost saving ways compared to surgeries, hospitalizations and medications which is a greater expense to the insurance companies.

Studies repeatedly show that naturopathic medicine is effective and that utilizing this medicine is cost-effective. In fact, corporate health management programs associated with prevention and wellness demonstrate a 26 percent reduction in health care costs and a \$6 return for every \$1 invested. In a country with ever-increasing rates of chronic disease and preventable illnesses, investing in naturopathic medicine is a smart choice. It is wise to invest in prevention and wellness-based models, in addition to the established allopathic model of symptom management.

One study that reviewed the efficacy and cost-effectiveness of integrative medicine estimates that changes in lifestyle and stress reduction – a major focus of naturopathic medicine – could save the US \$10 billion annually in reduced coronary angioplasty procedures and coronary bypass operations alone, and result in an insurance savings of almost \$30,000 per patient. I have attached additional studies on cost effectiveness on diabetes, lower back pain, anxiety and cardiovascular disease.

Many patients seek our services for thyroid conditions, digestive conditions such as Crohns disease, ulcerative colitis and acid reflux, high cholesterol, high blood pressure, diabetes, migraines, chronic pain and arthritis, Lyme disease, anxiety and depression, autoimmune diseases, osteoporosis, hormone imbalances, obesity and much more. All of these health conditions can be expensive to treat with medications that are usually prescribed for many years and some conditions eventually requiring expensive surgeries. By having insurance coverage for naturopathic doctors, patients will have access to the appropriate lab testing including vitamin and mineral tests, will be able to determine the appropriate diet and have guidance for lifestyle changes to focus on prevention and or treatment of chronic health conditions. With this, many expensive treatments can be avoided, which ultimately saves the insurance companies thousands of dollars.

In addition, naturopathic doctors work closely with primary care providers and other health specialists to discuss the best treatment options for their patients. Many medical doctors are grateful for this collaboration as they have many patients seeking this type of healthcare, but they



are unable to provide the appropriate recommendations as they are not trained in natural evidence-based medicine. I have personally felt welcomed by the medical community as they embrace naturopathic doctors as a collaborative member of the integrated healthcare team to provide all options to their patients for the best healthcare outcomes.

We currently have a petition that has over 600 signatures of concerned and hopeful RI citizens to acquire insurance coverage. Rhode Islanders deserve accessibility to this natural health care option.

Thank you very much for your time and consideration.

Sincerely,

Dr. Chrysanthi Kazantzis ND, MS

President of RIANP

Owner of Anasa Personalized Medicine

401-263-4005 10 River Oak Rd Barrington, RI 02806



Naturopathic Medicine is Effective and Cost-Effective

Naturopathic medicine excels in addressing the root cause of illness, preventing serious chronic ailments, and improving overall patient wellness by enhancing the body's inherent ability to heal.

Studies repeatedly show that naturopathic medicine is effective and that utilizing it is cost- effective. In fact, corporate health management programs associated with prevention and wellness demonstrate a 26 percent reduction in health care costs and a \$6 return for every \$1 invested. In a country with ever-increasing rates of chronic disease and preventable illnesses, investing in naturopathic medicine is a smart choice. It is wise to invest in prevention and wellness based models, in addition to the established allopathic model of symptom management.

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See Guarneri E, Horringan, BJ, Pechura, CM. 2010. The Efficacy and Cost-Effectiveness of Integrative Medicine: A Review of the Medical and Corporate Literature. Bravewell Collaborative Report. June, 2010.

Naturopathic medicine is well-established in the state of Washington, where Naturopathic Doctors serve as primary care providers. A Blue Shield of Washington study found that utilizing Naturopathic Doctors would reduce the cost of treating chronic and stress related illness up to 40 percent and cut costs of specialist utilization by 30 percent.

See Henry. 1995. King County Medical Blue Shield Phase I Final Report: Alternative Healthcare Project Steering Committee. August 5, 1995.

A comparison among insured patients in Washington state revealed a \$356 annual health cost savings for each user of Complementary and Alternative Medicine (CAM) when compared to CAM nonusers. This analysis indicates that among insured patients those who use CAM will have lower insurance expenditures than those who do not use CAM.

See Lind, BK, Lafferty WE, Tyree We, Diehr, PK. 2010. Comparison of Heatlh Care Expenditures Among Insured and Nonusers of CAM Medicine in Washington State: A Cost Minimization Analysis. J. of Alt. and Comp. Med. 16(4) 411-417.

Naturopathic medicine has proven effective for specific conditions, including:

Cardiovascular Disease (CVD)

In a study to evaluate the naturopathic approach to CVD prevention and to determine the costeffectiveness of such an approach, researchers found that after a single year of naturopathic care, the 10-year CVD event risk was reduced by 3.3 percent, based on equations developed in the



Framingham heart study. This resulted in an average net reduction in societal costs by \$1,138 per participant and a reduction in employer costs by \$1,187 per participant compared to usual care alone. The majority of cost savings were attributed to reductions in losses due to reduced productivity while at work. The only CVD intervention known to be of lower cost is daily aspirin.

See Seely, Dugard. American Association of Naturopathic Physicians 2010 Convention Proceedings; Herman PM, Szczurko O, Cooley K, Seely D. A naturopathic approach to the prevention of cardiovascular disease: A cost-effectiveness analysis of a pragmatic multi-worksite randomized clinical trial. J Occup Environ Med 2014 56(2): 171-6; D'Agostino RB, Vasan RS, Pencina MJ, et al. General cardiovascular risk profile for use in primary care: the Framingham Heart Study. Circulation 2008; 117:743-53; Greving JP, Buskins E, Koffijberg H, Algra A. Cost effectiveness of aspirin treatment in the primary prevention of cardiovascular disease events in subgroups based on age, gender and varying cardiovascular risk. Circulation 2008; 117: 2875-2883; and Franco OH, der Kinderen AJ, De Laet C, Peeters A, Bonneux L. Primary prevention of cardiovascular disease: cost-effectiveness comparison. Int J Technol Assess Health Care 2007; 23(1): 71-79.

Diabetes

Lifestyle modifications were found to be more cost-effective in preventing type 2 diabetes in adults with impaired glucose intolerance than metformin, a diabetes medicine that helps control blood sugar levels. In a study, 3,234 adults with impaired glucose tolerance were randomly assigned to receive metformin twice daily, to participate in a lifestyle medication program (which included reducing fat intake and adding 150 minutes of exercise per week), or to receive a placebo. When compared to placebo, metformin reduced the incidence of diabetes by 31 percent. Lifestyle modifications reduced the incidence of diabetes by 58 percent. Researchers also estimated that compared with placebo, lifestyle interventions delayed the onset of diabetes by 11 years while metformin therapy delays the onset of diabetes by three years in those with impaired glucose tolerance. The lifestyle modification program would cost \$8,800 while metformin therapy would cost \$29,000 per quality adjusted life year saved. Finally, the lifestyle modification program was shown to be cost-effective in all adults, while metformin was not cost-effective after age 65.

See Herman WH, Hoerger TJ, Brandle M, etc. The Cost-Effectiveness of Lifestyle Modification or Metformin in Preventing Type 2 Diabetes in Adults with Impaired Glucose Tolerance. Ann Intern Med 2005; 142(5): 323-332.

Lower Back Pain

Researchers conducted a small cost-effectiveness analysis of naturopathic treatment for chronic lower back pain in 75 warehouse workers in a large American corporation. Naturopathic treatment consisted of a specific 3-month protocol of acupuncture, relaxation training, exercise, dietary advice, and written education on back care. It was compared to a 3-month standard physiotherapy program consisting of written education on back care. Participants who received naturopathic care enjoyed a statistically significant improvement in symptoms and quality of life, as employers and insurers enjoyed a decrease in costs by \$1,212 per study participant. Workplace absenteeism was also reduced by an average of 6.7 days. The authors concluded that naturopathic care is more cost-effective than a standard physiotherapy plan and produces a return on investment of 7.9 percent.

See Szczurko O, Cooley K, Busse JW, Seely D, Bernhardt B, et al (2007) Naturopathic Care for Chronic Low Back Pain: A Randomized Trial.

See Szczurko O, Cooley K, Busse JW, Seely D, Bernhardt B, et al (2007) Naturopathic Care for Chronic Low Back Pain: A Randomized Trial. PLoS ONE 2(9): e919. doi:10.1371/journal.pone.0000919.

^{*}For further information and research, see Oberg EB, Bradley R, Cooley K, Fritz H, Goldenberg JZ, et al. (2015) Estimated Effects of Wholesystem Naturopathic Medicine in Select Chronic Disease Conditions: A Systematic Review. Altern Integr Med 4: 192. doi:10.4172/2327-5162.1000192; http://www.ccnm.edu/research/abstracts; and http://www.ccnm.edu/research/abstracts; and http://worldnaturopathicfederation.org/naturopathic-research-institutes/.



Anxiety

One study explored the effectiveness of naturopathic care on anxiety symptoms using a randomized trial. Employees with moderate to severe anxiety lasting longer than 6 weeks were randomized based on age and gender to receive naturopathic care (NC) or standardized psychotherapy intervention (PT) in a blind study over a 12-week period. Participants in the NC group received dietary counseling, deep breathing relaxation techniques, a standard multi-vitamin, and the herbal medicine ashwagandha. The PT group received psychotherapy, and matched deep breathing relaxation techniques, and placebo. The primary outcome measure was the Beck Anxiety Inventory (BAI). Seventy-five participants (93 percent) were followed for eight or more weeks on the trial. Final BAI scores decreased by 56.5 percent in the NC group and 30.5 percent in the PT group. BAI group scores were significantly decreased in the NC group compared to PT group. Both treatments led to significant improvements in patients' anxiety but a group comparison demonstrated a significant decrease in anxiety levels in the NC group over the PT group. Significant improvements in secondary quality of life measures were also observed in the NC group. The study concluded that the whole system of naturopathic care for anxiety deserves to be investigated further.

See Cooley K, Szczurko O, Perri D, Mills EJ, Bernhardt B, et al. (2009) Naturopathic Care for Anxiety: A Randomized Controlled Trial ISRCTN78958974. PLoS ONE 4(8): e6628. doi:10.1371/journal.pone.0006628.



Naturopathic Care is Cost Effective: Treatment

Naturopathic doctors (NDs) are specialists in cost-effective, safe, evidence-based natural medicine treatment approaches. Multiple studies find those patients seen by naturopathic doctors get well and stay well for less cost, due to less expensive treatments, lower technology interventions, and naturopathic medicine's emphasis on disease prevention, lifestyle modification and health promotion.

A few treatment studies include:

Among Canadian postal employees with cardiovascular disease, naturopathic patients needed fewer medications, had better blood pressure and cholesterol levels, better mood, less fatigue and better productivity at work. Total societal cost savings estimated at \$1,025/year per employee. (Weeks J. Model Whole Practice Study Finds Treatment by Naturopathic Doctors Effective & Cost-Saving for Canada Post Employees with Cardiovascular Disease. 2010; http://theintegratorblog.com/index.php?option=com_content&task=vicw&id=682<emid=189. Accessed July 25, 2015)

Postal workers are at increased risk of rotator cuff injuries that may settle into chronic inflammation and pain. In one trial, conventional treatment for these injuries was compared to naturopathic treatment. While both arms improved, the ND arm improved to a greater and faster rate, with better function, and better quality of life measures than conventional treatment. (Naturopathic Treatment of Rotator Cuff Tendinitis Among Canadian Postal Workers: A Randomized Controlled Trial. Arthritis & Rheumatism (Arthritis Care & Research), Vol. 61, No. 8, August 15, 2009, pp 1037–1045.)

A study in poorly controlled diabetic patients found that in those treated by NDs, improvements were noted in self-monitoring of glucose, diet, self-efficacy, motivation and mood. Participants also had reductions in blood glucose that exceeded those for similar patients who did not receive ND care. (Bradley RD, Sherman KJ. "Adjunctive naturopathic care for type 2 diabetes: patient-reported and clinical outcomes after one year." BMC Complementary and Alternative Medicine 2012, Apr 18;12:44)

An internal Blue Shield study in King County, WA, presented evidence showing naturopathic doctors treated 7 of the top 10 most expensive health conditions more cost effectively than MDs or other conventional providers, and estimated that a naturopathic-centered managed care program could cut the costs of chronic and stress related illness by up to 40% and lower the costs of specialist utilization by 30%.

(Ĥenny, GC, Alternative Health Care Consultant, King County Medical Blue Shield (KCMBS), Phase I Final Report: AlternativeHealthcare Project, 1995)

Back pain is one of the most common complaints doctors see. In one trial, those treated by NDs experienced less pain, more weight loss, and importantly, fewer days off work.

(Szczurko O, Cooley K, Busse JW, et al. Naturopathic care for chronic low back pain: a randomized trial. PLoS One. 2007;2(9):e919.)

A second trial on back pain found effectiveness to be similar between NDs and conventional treatment, yet QALY was better for the ND arm, and medical cost of ND was \$629 per person versus \$700 for conventional arm. Importantly, there was a total cost benefit of \$188 per person for the ND arm, versus total cost spending of \$1,212 for standard care if absenteeism was included.

(Herman PM, et al. Cost-effectiveness of naturopathic care for chronic low back pain. Alt Ther Heal Med 2008; 14(2): 32-39.) As one example in women's health, and regarding menopausal symptoms, naturopathic



patients smoked less, exercised more, and were seven times more likely to report improvement in insomnia and increased energy than those receiving conventional treatment.

(Cramer EH, Jones P, Keenan NL, Thompson BL. Is naturopathy as effective as conventional therapy for treatment of menopausal symptoms? J Altern Complement Med. Aug 2003;9(4):529-538.)

As an example of benefits of whole body treatment, significant improvements in anxiety, fatigue, mental health, concentration, social functioning, vitality, and overall quality of life than by conventional psychotherapy alone.

(Cooley K, Szczurko O, Perri D, et al. Naturopathic care for anxiety: a randomized controlled trial ISRCTN78958974. PLoS One. 2009;4(8):e6628.)

An example of a study demonstrating that for insured patients, approaches used by NDs lower insurance expenditures, at the time lowering it from \$4,153 to \$3,797 p=0.0001.

(Lind BK, Lafferty WE, Tyree PT, Diehr PK. Comparison of health care expenditures among insured users and nonusers of complementary and alternative medicine in Washington State: a cost minimization analysis. J Altern Complement Med. 2010;16(4):411-17.)

Naturopathic doctors delivering the same Medicaid services in Oregon are 57.5% more cost effective than MD/DO/NP PCPs providing the same services.

(Lafferty, et al. Insurance Coverage and Subsequent Utilization of Complementary and Alternative Medicine Providers. Journal of Managed Care. July 2006.)

Aside from patient satisfaction in these treatments, patients that see CAM practitioners have a reduction of conventional drug use.

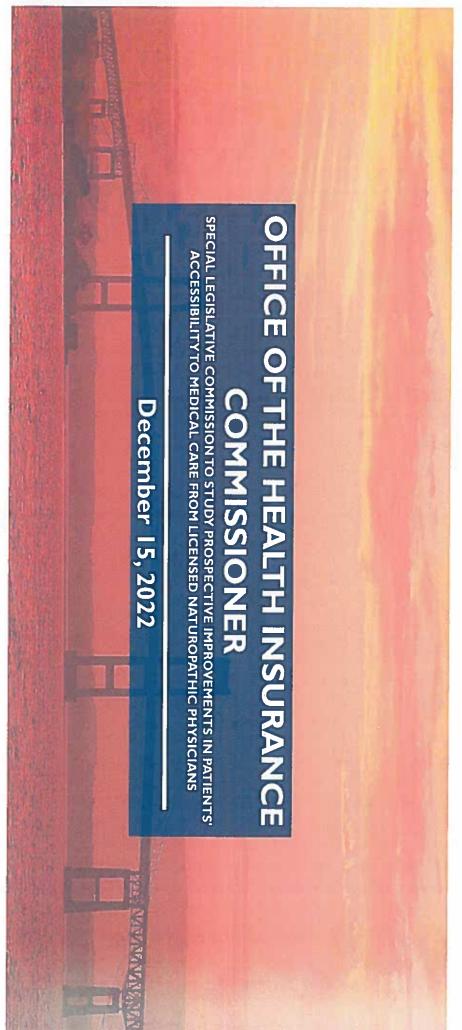
(Stewart D, Weeks J, Bent S. Utilization, patient satisfaction, and cost implications of acupuncture, massage, and naturopathic medicine offered as covered health benefits: a comparison of two delivery models. Alternative Therapies in Health & Medicine. 2001;7:66-70)

As an example of perception of clinical care, Bastyr Center for Natural Health, the teaching clinic of the naturopathic medical school Bastyr University in Seattle, ranked in the top 3 among 46 Seattle-area primary care clinics for overall patient satisfaction.

(Your Voice Matters: Patient Experience with Primary Care Providers in the Puget Sound Region. 2012; http://www.wacommunitycheckup.org/Media/Default/Documents/psha_your_voice_matters_patient_experience_report_5_2012.pdf. Accessed July 28, 2015.)

A Washington study found that in a majority of cases naturopathic care is not "add-on" medical care.

(Cherkin DC, Deyo RA, Sherman KJ et al. Characteristics of visits to licensed acupuncturists, chiropractors, massage therapists, and naturopathic physicians. J Am Board Fam Pract. 2002; 15:463-472.)





OFFICE OF THE HEALTH INSURANCE COMMISSIONER

STATE OF RHODE ISLAND

TABLE OF CONTENTS

- . About OHIC
- Understanding the Universe of State-Regulated Commercial Health Plans
- Essential Health Benefits
- Defrayal of State-Required Additional Benefits Beyond EHB
- Exclusions in Commercial Certificates of Coverage (COCs)
- Appendix Extracts from COCs

About OHIC

improve health care access, affordability, and quality. The office does policy reform and regulatory enforcement agency. OHIC seeks to Created in 2004, OHIC is the state's commercial health insurance

- protects the interests of consumers of commercial health insurance
- encourages fair treatment of health care providers by commercial health insurers,
- improves the health care system as a whole, and
- guards the solvency of commercial health insurers.



- State regulated fully insured health benefit plans cover approximately 140,000 Rhode Islanders (as of 1/1/2022).
- benefits insurance companies as third parties for the administration of under employer health plans that are self-insured and utilize Another approximately 170,000 Rhode Islanders are covered
- OHIC does not regulate self-insured groups and state benefit mandates do not bind their plan design decisions
- Medicare. OHIC also does not regulate Medicaid Managed Care plans or

Essential Health Benefits

There are 10 essential health benefits categories:

- 1. Ambulatory patient services
- Emergency services
- Hospitalization
- Maternity and newborn care
- Mental health and substance use services including behavioral health treatment
- Prescription drugs
- 7. Rehabilitative and habilitative services and devices
- Laboratory services
- Preventive and wellness services and chronic disease management
- 10. Pediatric services including oral and vision care

Defrayal of State-Required Additional Benefits

- § 155.170 Additional required benefits.
- (a) Additional required benefits.
- (1) A State may require a QHP to offer benefits in addition to the essential health benefits.
- the essential health benefits. other than for purposes of compliance with Federal requirements, is considered in addition to considered an EHB. A benefit required by State action taking place on or after January 1, 2012, (2) A benefit required by State action taking place on or before December 31, 2011 is
- (3) The State will identify which State-required benefits are in addition to the EHB
- (b) Payments. The State must make payments to defray the cost of additional required benefits specified in paragraph (a) of this section to one of the following:
- (1) To an enrollee, as defined in § 155.20 of this subchapter; or
- (2) Directly to the QHP issuer on behalf of the individual described in paragraph (b)(1) of this

Defrayal of State-Required Additional Benefits (cont'd)

- (c) Cost of additional required benefits.
- benefit specified in paragraph (a) of this section. (1) Each QHP issuer in the State shall quantify cost attributable to each additional required
- (2) A QHP issuer's calculation shall be:
- principles and methodologies; (i) Based on an analysis performed in accordance with generally accepted actuarial
- (ii) Conducted by a member of the American Academy of Actuaries; and
- (iii) Reported to the State.

Current Fully Insured Benefit Exclusions

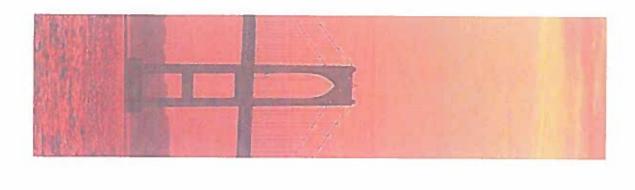
"alternative therapies", "non-conventional medicine," etc. health benefit plans exclude coverage for a host of services termed Using various forms of language existing fully insured commercial

Certificate of Coverage Exclusion Language

Blue Cross & Blue Shield of Rhode Island (COC Exclusions)

Providers

- maintained by the U.S. General Services Administration (https://www.sam.gov/). Services performed by a provider who has been excluded or debarred from (https://exclusions.oig.hhs.gov/) or the Excluded Parties List System website Department of Human Services Office of Inspector General website whether a provider has been excluded from a federal program, visit the U.S. participation in federal programs, such as Medicare and Medicaid. To determine
- who are not legally qualified or licensed, according to relevant sections of Rhode Services provided by facilities, dentists, physicians, surgeons, or other providers requirements. Island Law or other governing bodies, or who have not met our credentialing
- Services provided by a non-network provider, unless listed as covered in the Summary of Medical Benefits.
- Services provided by naturopaths, homeopaths, or Christian Science practitioners.



Therapies

DN: Remove for plans that do not cover acupuncture

- Acupuncture and acupuncturist services, including x-ray and laboratory services
- condition. Biofeedback, biofeedback training, and biofeedback by any other modality for any
- Recreational therapy services and programs, including wilderness programs
- are not limited to, Tai Chi, yoga, personal training, meditation. medical self-care, self-help programs, or non-clinical services. Examples include, but including wilderness programs, educational services, complimentary services, non-Services provided in any covered program that are recreational therapy services,
- Computer/internet/social media based services and/or programs.
- Recreational therapy.
- Aqua therapy unless provided by a physical therapist
- Maintenance therapy services unless it is a habilitative service that helps a person keep, learn or improve skills and functioning for daily living.
- Aromatherapy.
- Hippotherapy.
- Massage therapy rendered by a massage therapist.
- Therapies, procedures, and services for the purpose of relieving stress.
- through a home care program. Physical, occupational, speech, or respiratory therapy provided in your home, unless
- Pelvic floor electrical and magnetic stimulation, and pelvic floor exercises
- Educational classes and services for speech impairments that are self-correcting.
- Speech therapy services related to food aversion or texture disorders
- Exercise therapy.
- orders or provides the services. Naturopathic, homeopathic, and Christian Science services, regardless of who

Neighborhood Health Plan of Rhode Island (COC Exclusions)

SECTION 4 SERVICES NOT COVERED BY THE PLAN

Alternative, Holistic, Naturopathic, and/or Functional Health

covered except for the treatment of urinary incontinence. Hypnotherapy is not covered. Alternative medicine services, supplies or procedures are not covered. Biofeedback is not

- purposes including vocational rehabilitation and retraining services Examinations, evaluations or services for educational or developmental
- Exercise classes
- Relaxation and massage therapies

Neighborhood Health Plan of Rhode Island (COC Exclusions)

Section 1.2 **Basic Rules for Getting Medical Care Covered**

- The care you receive is a covered service included in the plan's Medical and Prescription Drug Benefits (see Chapter 4).
- supplies, or drugs needed for the prevention, diagnosis, or treatment of your medical condition, meet accepted standards of medical practice. The care you receive is deemed medically necessary. This means that the services,

United Healthcare (COC Exclusions)

A. Alternative Treatments

- Acupressure.
- Aromatherapy.
- Hypnotism.
- Massage therapy.
- Rolfing.
- တ Adventure-based therapy, wildemess therapy, outdoor therapy, or similar programs.
- Health Care Services. manipulative osteopathic care for which Benefits are provided as described in Section 1: Covered the National Institutes of Health. This exclusion does not apply to Manipulative Treatment and nontreatment as defined by the National Center for Complementary and Integrative Health (NCCIH) of Art therapy, music therapy, dance therapy, animal-assisted therapy, and other forms of alternative

Tufts Insurance Company (COC Exclusions)

Non-Conventional Medicine

payment up front because health insurance typically does not cover these services. offered in connection with a traditional office visit. Providers of Non-Conventional Medicine services often request on scientific evidence, they do not meet the definition of Medical Necessity and are not covered. Providers of these non-covered services may be contracting or non-contracting traditional medical providers. These services may be part of conventional medicine and are generally not based on scientific evidence. Since these services are not based A group of diverse medical and health care systems, practices, and products that are not presently considered to be

causes that lead to bodily dysfunction. Examples of Non-Conventional Medicine and related services include, but an Common terminology used to refer to these types of services include, but are not limited to, "alternative medicine", "whole person", the "entire individual", or the "inner self", and may refer to re-balancing hormones or finding underly i "complementary medicine", "integrative medicine", "functional health medicine", and may be described as treating the

- holistic, naturopathic, energy medicine (e.g., Reiki, Ayurvedic, magnetic fields);
- manipulative and body-based practices (e.g., reflexology, yoga, exercise therapy, tai chi);
- mind-body medicine (e.g., hypnotherapy, meditation, stress management);
- whole medicine systems (e.g., naturopathy, homeopathy);
- biologically based practices (e.g., herbal medicine, dietary supplements, probiotics); and
- other related practices when provided in connection with Non-Conventional Medicine services (e.g., animal therapy, art therapy, dance therapy, sleep therapy, light therapy, energy-balancing, breathing exercises).

Tufts Insurance Company (COC Exclusions)

of medicine, are excluded. All Non-Conventional medicine services, (a) provided independently or together with conventional medicine, AND (b) all related testing, laboratory testing, services, supplies, procedures, and supplements associated with this type

NOTICE OF MEETING

DATE: Tuesday, January 17, 2023

TIME: 3:00 PM

PLACE: Room 101 - State House

AGENDA

- I. Call Meeting to Order.
- II. Public Testimony.
- III. Next Meeting Date.
- IV. Adjournment.

If you have any questions, please contact Robert Millerick, Esq., Deputy Director of House Policy, at 401-528-1764 or at rmillerick@rilegislature.gov

PROCEDURAL INFORMATION:

The meeting will be televised on Capitol Television, which can be seen on Cox Channels 15, and 61, in high definition on Cox Channel 1061, on Full Channel on Channel 15 and on Channel 34 by Verizon subscribers.

It will also be live streamed at https://www.rilegislature.gov/CapTV/Pages/default.aspx

POSTED: THURSDAY, January 12, 2023, 1:05 P.M.

NOTICE OF MEETING

DATE: Wednesday, March 29, 2023

TIME: 2:30 PM

PLACE: Room 101 - State House

AGENDA

- I. Call Meeting to Order.
- II. Rhode Island Medical Society Presentation.
- III. Public Testimony.
- IV. Next Meeting Date.
- V. Adjournment.

If you have any questions, please contact Robert Millerick, Esq., Deputy Director of House Policy, at 401-528-1764 or at rmillerick@rilegislature.gov

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PUBLIC TESTIMONY PROCEDURAL INFORMATION

WRITTEN TESTIMONY

- Written testimony is strongly encouraged and may be submitted to Robert Millerick, Esq., Deputy Director of House Policy at rmillerick@rilegislature.gov.
- Indicate your name and organization when applicable.
- <u>DEADLINE</u>: Written testimony should be submitted no later than three (3) hours prior to the posted meeting time. Every effort will be made to share written testimony submitted before the deadline with commission members prior to the hearing. Testimony received after deadline will be posted to the website as soon as possible.

NOTICE OF MEETING

DATE: Wednesday, April 19, 2023

TIME: 3:00 PM

PLACE: Room 101 - State House

AGENDA

I. Call Meeting to Order

- II. Discussion of the Commission's potential/proposed findings and suggested next steps/recommendations.
- III. Next Meeting Date.
- V. Adjournment.

If you have any questions, please contact Robert Millerick, Esq., Deputy Director of House Policy, at 401-528-1764 or at rmillerick@rilegislature.gov

TELEVISION AND LIVESTREAM INFORMATION

The meeting will be televised on Capitol Television, which can be seen on Cox Channels 15, and 61, in high definition on Cox Channel 1061, on Full Channel on Channel 15 and on Channel 34 by Verizon subscribers.

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- For faster processing, it is recommended that testimony is submitted as a PDF file.
- Written testimony submitted to any commission of the House of Representatives is

NOTICE OF MEETING

DATE: Thursday, June 1, 2023

TIME: 2:00 P.M.

PLACE: Room 135 - State House

AGENDA:

- I. Call Meeting to Order.
- II. Discussion of the Commission's draft report.
- III. Adjournment.

No public testimony will be accepted at this meeting.

If you have any questions, please contact Robert Millerick, Esq., Deputy Director of House Policy, at 401-528-1764 or at millerick@rilegislature.gov

TELEVISION AND LIVESTREAM INFORMATION

The meeting will be televised on Capitol Television, which can be seen on Cox Channels 15, and 61, in high definition on Cox Channel 1061, on Full Channel on Channel 15 and on Channel 34 by Verizon subscribers.

It will also be live streamed at https://www.rilegislature.gov/CapTV/Pages/default.aspx

POSTED: FRIDAY, MAY 19, 2023, 11:45 AM

Appendix C - Written Testimony and Material

(These documents have been posted in the Naturopathic Physicians section of the Commission/Task Forces tab of the State of Rhode Island General Assembly website: https://www.rilegislature.gov)

- 1. Alisa Ferreira
- 2. American Association of Naturopathic Physicians
- 3. Catherine DeOrsey, Integrative Healthcare Solutions
- 4. Chrissy Mellinger
- 5. Christine Carr
- 6. Chrystal Tyson
- 7. Danielle Phenix
- 8. David Mitchell
- 9. Deb DeOrsey
- 10. Dr. Angela McCann, The American Association of Naturopathic Physicians ("AANP")
- 11. Dr. Bridget Casey, Rhode Island Natural Medicine, LLC
- 12. Dr. Chrysanthi Kazantzis
- 13. Dr. Kazantzis Recommendations document
- 14. Dr. Kazantzis Response to Questions from Dr. Ottiano
- 15. Dr. Marcus Greene
- 16. Dr. McCann Recommendations document
- 17. Emily Sorlien
- 18. Erika Moore
- 19. Gale Stone
- 20. Gene Ripa
- 21. Genevieve St. Pierre
- 22. Helen Cheryl Volpini
- 23. Helen Ripa
- 24. James Lovinsky
- 25. Joanne Bilotta
- 26. Joseph DeOrsey
- 27. Judith Lospaluto
- 28. Karlo Berger
- 29. Kathy Goulding
- 30. Kerrie Slattery
- 31. Kevin Colman
- 32. Kevin Wishart
- 33. Kimberly Oliveira
- 34. Laura Culberson, AANP
- 35. Lauren Morroe
- 36. Leonard Berkowitz
- 37. Linn Wheeling and Laura Culberson Farr, AANP
- 38. Marcia Lake
- 39. Marios Gkosios
- 40. Mark Gallagher, United Healthcare
- 41. Mary Beth Petrucci
- 42. Melissa Buckheit Dodge

Appendix C - Written Testimony and Material (Continued)

(These documents have been posted in the Naturopathic Physicians section of the Commission/Task Forces tab of the State of Rhode Island General Assembly website: https://www.rilegislature.gov)

- 43. Michelle Petrone
- 44. Monica Colman
- 45. Office of the Health Insurance Commissioner Presentation
- 46. Rebecca Morris
- 47. Roka Francis
- 48. Shawn Donahue, Blue Cross Blue Shield of Rhode Island
- 49. Sheridan Duffy
- 50. Sue Sullivan
- 51. Susan Curzio
- 52. Sydney Dufort
- 53. The Naturopathic Physicians as Whole Health Specialist document