



## MINNESOTA MEDICAL ASSOCIATION

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October 7, 1980

Edith R. Davis, President  
Acupuncture Society of Minnesota  
4421 Fourth Avenue South  
Minneapolis, MN 55409

Dear Ms. Davis:

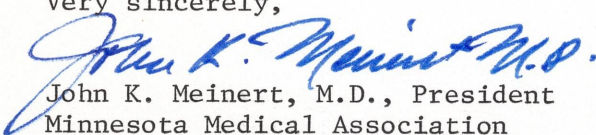
Thank you for your letter of September 16, 1980 in which you asked the Minnesota Medical Association to review and reconsider our current position with respect to the credentialing of lay acupuncturists.

The MMA Board of Trustees on Saturday, October 4, 1980 discussed at length your letter, the various issues involved in credentialing and the practice of acupuncture generally. The MMA Board of Trustees then voted unanimously to reaffirm the MMA previous position which states, "The credentialing of lay acupuncturists by any means, whether licensure or registration, is inappropriate, unnecessary and unwise since the practice of acupuncture is still generally considered to be an experimental procedure which should be performed in a controlled setting only by or under the direction and supervision of a physician." The MMA Board further stated that, "Since acupuncture is still considered experimental, MMA recognizes that it should be used only for experimental purposes and that acupuncture treatment by non-physicians without a proper medical diagnosis could create serious hazards to the patient."

Inasmuch as the AMA also holds the view that acupuncture should be considered an experimental medical procedure, but has not re-evaluated its position since 1974, the MMA Board of Trustees will request the AMA through a resolution to be presented to the AMA House of Delegates in December, 1980 to conduct a thorough study and re-evaluation of acupuncture as a part of medical practice.

In view of the foregoing position taken by the MMA and until such time that more current information is available, MMA will continue to oppose the credentialing of lay acupuncturists and the practice itself where performed by non-physicians in independent settings. I trust this answers the questions posed in your September 16, 1980 letter.

Very sincerely,

  
John K. Meinert, M.D., President  
Minnesota Medical Association

JKM:acs

cc: James F. Knapp, M.D.  
George R. Pettersen, M.D.  
William E. Jacott, M.D.

Arthur Poore  
Mary Culver



# Acupuncture Society of Minnesota

4421 4th Avenue South  
Minneapolis, Minnesota 55409

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September 16, 1980

Minnesota Medical Association  
American National Bank Bldg.  
St. Paul, MN 55101

Dear Friends,

In 1978 The Acupuncture Society of Minnesota (ASM) filed an application with the Minnesota Department of Health (MDH) for credentialing of acupuncturists who were not otherwise-regulated health practitioners. In June 1979 a public forum was held at which health professionals and members of the public testified for and against the practice of acupuncture by non-physicians.

At that time it became apparent that, despite support from some individual physicians, the organized medical community, as represented by the Board of Medical Examiners, the Minnesota Medical Association (MMA) and some individual physicians, was opposed to the credentialing of non-physician acupuncturists. Obviously, the ASM held to its position that well trained acupuncturists meeting high professional standards should be authorized to practice under state regulation.

Differences go beyond the local MMA and the ASM. Attitudes in Minnesota reflect the variety of attitudes nationwide. Acupuncture by non-physician acupuncturists is now legally established in 13 states, with more being added every year. In six states non-physician acupuncturists are licensed for independent practice, and in seven states they are authorized to practice under medical supervision. In only two states is the practice of acupuncture limited by law to MDs, and in several others it has been specifically ruled to be not the practice of medicine. In several states there are no regulations or restrictions on the practice of acupuncture, without specific permissive legislation.

In this setting nationwide, it should be clear that the differences between the MMA and the ASM will not go away. We feel that the issue can only be resolved through open deliberation and negotiation among interested parties.

History has shown that when the public desires a particular type of health care it will find ways to obtain it, regardless of the prevailing law or custom. In our society the general attitude is that quality can best be assured through public regulation. The ASM feels that in making our application we did a public service in bringing non-physician acupuncturists out from underground and placing the issue under public scrutiny. We have made it possible for the state to consider whether it will establish standards and provide regulation for public protection.

It has been asserted by the organized medical community that the medical practice act provides adequate public protection by restricting acupuncture to MDs. This was reinforced by the Attorney General's opinion of 1975 that acupuncture is the practice of medicine. However, in actual experience this interpretation has not prevented a substantial number of non-MDs to include acupuncture in their health care practices. And numerous courts throughout the country have in the past few years ruled that acupuncture is not the practice of medicine.

Without considering the question of legality, the fact is that acupuncturists are active in the state of Minnesota. The ASM is concerned that some are active without any public assurance that they meet high professional standards. The MMA is concerned that they are practicing medicine without a license. Both groups are basically concerned with public protection.

We, the ASM, urge you to consider whether the public would be better served by a "we will--you shan't" stalemate, or by a conciliatory position in which the two groups can explore ways that will provide adequate public protection at the same time that it permits the orderly emergence of a new occupational group in the spectrum of health care in Minnesota.

A further assertion has been made by the medical community that the medical practice act provides for the activity of non-physician acupuncturists under the prevailing understanding that a physician may legally hire and supervise assistants who are not MDs to provide specified services that fall under the general definition of the practice of medicine. Thus, it has been said that the the occupation of non-physician acupuncturist can emerge with no change in present laws or regulations.

In actual fact, this is unfortunately not feasible. Numerous physicians who are supportive of non-physician acupuncturists have been engaged in discussions regarding supervision. The prevailing attitudes are either a feeling of inadequacy to supervise because of ignorance of the acupuncture system, or anxiety about incurring disapproval of their peers for engaging in unorthodox procedures.

We realize that the resolution of this issue is outside of the hands of either group (the MMA or the ASM). The disposition lies with the State Commissioner of Health, with advice from the Human Service Occupations Advisory Council, and from the Commissioner's Health Manpower staff. However, we feel that the MMA's attitude is still a significant factor. We therefore urge you to adopt a publicly stated position on each of the issues that emerge out of this presentation:

1. That the MMA is willing to facilitate the reasonable consideration of non-physician acupuncture practice, by developing its own criteria for protection of the public, as part of an ongoing dialogue that would lead to a constructive resolution of present differences;
2. That the MMA recognizes the public service of the ASM in bringing the issue of non-physician acupuncture practice out into the open,

and is opposed to the imposition of punitive measures on the applicants during this period of open discussion of the issue.

3. That in order to allow non-physician acupuncturists to demonstrate whether or not they can provide safe and effective services, the MMA encourages its members to provide necessary supervision of non-physician acupuncturists, with controls adequate to protect the health of their patients.

We make these proposals as a group representing professionals who have a strong code of ethics, and whose concern for public protection is equally strong as their own desire to be able to practice legitimately. We urge that you, from your own ethical position, adopt these positions as an expression of joint interest in the public welfare.

Yours truly,

Edith R. Davis, President  
Acupuncture Society of Minnesota

cc: Dr. Petterson  
Arthur Poore  
Mary Culver  
Glen Clover  
Walter Mackey  
Debra Stenseth  
J.L. De Rusha