

LEGISLATIVE COMMITTEE MINUTES

SB290

Bill as
Introduced

SB 290-FN - AS INTRODUCED

2022 SESSION

22-2877
04/08

SENATE BILL **290-FN**

AN ACT relative to the practice of auriculotherapy.

SPONSORS: Sen. Reagan, Dist 17; Sen. Soucy, Dist 18; Sen. Avard, Dist 12; Sen. French, Dist 7; Sen. Cavanaugh, Dist 16; Sen. Carson, Dist 14; Rep. McGuire, Merr. 29; Rep. Spillane, Rock. 2

COMMITTEE: Health and Human Services

ANALYSIS

This bill permits, with certain limitations, the practice of auriculotherapy, or the practice of inserting needles into the external human ear.

Explanation: Matter added to current law appears in **bold italics**.
Matter removed from current law appears [~~in brackets and struck through.~~]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty Two

AN ACT relative to the practice of auriculotherapy.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 1 New Section; Auriculotherapy. Amend RSA 328-G by inserting after section 9-a the following
2 new section:

3 328-G:9-b Auriculotherapy.

4 I. Nothing in this chapter shall prohibit an unlicensed person from engaging in
5 auriculotherapy, an unregulated practice in which needles are inserted into the external human ear,
6 provided such person:

7 (a) Has appropriate training in clean needle technique;

8 (b) Employs sterile, single-use needles, without reuse;

9 (c) Does not purport to treat any disease, disorder, infirmity, or affliction;

10 (d) Does not use any letters, words, or insignia indicating or implying that the person is
11 an acupuncturist; and

12 (e) Makes no statement implying that his or her practice of auriculotherapy is licensed,
13 certified, or otherwise overseen by the state.

14 II. Any person who violates the provisions of this section shall be guilty of a class A
15 misdemeanor if a natural person, and a felony if any other person.

16 2 Effective Date. This act shall take effect January 1, 2023.

**SB 290-FN- FISCAL NOTE
AS INTRODUCED**

AN ACT relative to the practice of auriculotherapy.

FISCAL IMPACT: State County Local None

STATE:	Estimated Increase / (Decrease)			
	FY 2022	FY 2023	FY 2024	FY 2025
Appropriation	\$0	\$0	\$0	\$0
Revenue	\$0	\$0	\$0	\$0
Expenditures	\$0	Indeterminable	Indeterminable	Indeterminable
Funding Source:	* <input checked="" type="checkbox"/> General <input type="checkbox"/> Education <input type="checkbox"/> Highway <input type="checkbox"/> Other			

COUNTY:

Revenue	\$0	\$0	\$0	\$0
Expenditures	\$0	Indeterminable	Indeterminable	Indeterminable

METHODOLOGY:

This bill contains penalties that may have an impact on the New Hampshire judicial and correctional systems. There is no method to determine how many charges would be brought as a result of the changes contained in this bill to determine the fiscal impact on expenditures. However, the entities impacted have provided the potential costs associated with these penalties below.

Judicial Council	FY 2022	FY 2023
Public Defender Program	Has contract with State to provide services.	Has contract with State to provide services.
Contract Attorney – Felony	\$825/Case	\$825/Case
Contract Attorney – Misdemeanor	\$300/Case	\$300/Case
Assigned Counsel – Felony	\$60/Hour up to \$4,100	\$60/Hour up to \$4,100
Assigned Counsel – Misdemeanor	\$60/Hour up to \$1,400	\$60/Hour up to \$1,400

It should be noted that a person needs to be found indigent and have the potential of being incarcerated to be eligible for indigent defense services. Historically, approximately 85% of the indigent defense caseload has been handled by the public defender program, with the remaining cases going to contract attorneys (14%) or assigned counsel (1%). Beginning in March of 2021, the public defender program has had to close intake to new cases due to excessive caseloads. Due to these closures, the contract and assigned counsel program have had to absorb significantly more cases. The system is experiencing significant delays in appointing counsel and the costs of representation have increased due to travel time and multiple

appointments.		
Department of Corrections	FY 2022	FY 2023
FY 2021 Average Cost of Incarcerating an Individual	\$54,386	\$54,386
FY 2021 Annual Marginal Cost of a General Population Inmate	\$5,715	\$5,715
FY 2021 Average Cost of Supervising an Individual on Parole/Probation	\$603	\$603
NH Association of Counties	FY 2022	FY 2023
County Prosecution Costs	Indeterminable	Indeterminable
Estimated Average Daily Cost of Incarcerating an Individual	\$105 to \$125	\$105 to \$125

This bill contains penalties that will have an indeterminable impact on the Judicial Branch system. There is no method to determine how many charges would be brought as a result of the changes contained in this bill to determine the fiscal impact on expenditures. In the past the Judicial Branch has used averaged caseload data based on time studies to estimate the fiscal impact of proposed legislation. The per case data on costs for routine criminal cases currently available to the Judicial Branch are based on studies of judicial and clerical weighted caseload times for processing average routine criminal cases that are more than fifteen years old so the data does not have current validity. A new case study is being conducted and updated estimates will be available in the future.

Many offenses are prosecuted by local and county prosecutors. When the Department of Justice has investigative and prosecutorial responsibility or is involved in an appeal, the Department may be able to absorb the cost within its existing budget. However, if the Department needs to prosecute significantly more cases or handle more appeals, then costs will increase by an indeterminable amount.

AGENCIES CONTACTED:

Judicial Branch, Departments of Corrections and Justice, Judicial Council, and New Hampshire Association of Counties

Committee Minutes

SENATE CALENDAR NOTICE
Health and Human Services

Sen Jeb Bradley, Chair
Sen James Gray, Vice Chair
Sen Kevin Avard, Member
Sen Tom Sherman, Member
Sen Rebecca Whitley, Member

Date: December 22, 2021

HEARINGS

Wednesday	01/19/2022
(Day)	(Date)
Health and Human Services	Legislative Office Building 101 9:00 a.m.
(Name of Committee)	(Place) (Time)
9:00 a.m. SB 286-FN	establishing an association health plan pilot program.
9:15 a.m. SB 290-FN	relative to the practice of auriculotherapy.
9:30 a.m. SB 326-FN	establishing the office of early childhood.
9:45 a.m. SB 337-FN	relative to emergency medical and trauma services data sharing to the purposes of analysis.
10:00 a.m. SB 289	relative to glucagon administration.

EXECUTIVE SESSION MAY FOLLOW

Sponsors:

SB 286-FN

Sen. Ricciardi

SB 290-FN

Sen. Reagan

Sen. Cavanaugh

SB 326-FN

Sen. Whitley

Sen. Perkins Kwoka

Rep. Myler

SB 337-FN

Sen. Prentiss

Sen. Gannon

Sen. Sherman

Rep. Murphy

SB 289

Sen. Sherman

Sen. Carson

Sen. Prentiss

Rep. Woods

Sen. Bradley

Sen. Soucy

Sen. Carson

Sen. Hennessey

Sen. Cavanaugh

Rep. Mullen

Sen. Bradley

Sen. Kahn

Rep. Soucy

Rep. Goley

Sen. Rosenwald

Sen. Gray

Sen. Cavanaugh

Rep. Knirk

Rep. Rice

Sen. Avard

Rep. McGuire

Sen. Watters

Sen. Sherman

Rep. McWilliams

Sen. Watters

Sen. Cavanaugh

Rep. McGuire

Sen. Bradley

Sen. D'Allesandro

Rep. Merchant

Rep. Marsh

Rep. Layon

Sen. French

Rep. Spillane

Sen. Soucy

Sen. Prentiss

Rep. Luneau

Sen. Whitley

Sen. Perkins Kwoka

Rep. Merchant

Sen. Watters

Sen. Ward

Rep. Murphy

Cameron Lapine 271-2104

Jeb Bradley
Chairman

Senate Health and Human Services Committee
Cameron Lapine 271-2104

SB 290-FN, relative to the practice of auriculotherapy.

Hearing Date: January 19, 2022

Time Opened: 9:31 a.m. **Time Closed:** 9:59 a.m.

Members of the Committee Present: Senators Bradley, Gray, Avard, Sherman and Whitley

Members of the Committee Absent: None

Bill Analysis: This bill permits, with certain limitations, the practice of auriculotherapy, or the practice of inserting needles into the external human ear.

Sponsors:

Sen. Reagan	Sen. Soucy	Sen. Avard
Sen. French	Sen. Cavanaugh	Sen. Carson
Rep. McGuire	Rep. Spillane	

Who supports the bill: Tracy Brannstrom, Lauren Smith, Robert Mortimer, Elizabeth Repp, Laura Cooley, Senator Sharon Carson (Senate District 14), Senator Kevin Cavanaugh (Senate District 16), Senator Harold French (Senate District 7), Senator Kevin Avard (Senate District 12), Senator Donna Soucy (Senate District 18), and Jake Berry (New Futures).

Who opposes the bill: None.

Who is neutral on the bill: None.

Summary of testimony presented in support:

Senator John Reagan

Senate District 17

- Senator Reagan said that auriculotherapy was essentially ear acupuncture.
- Senator Reagan said that the Senate had passed the contents of SB 290-FN before but it disappeared somewhere along the way.
- Senator Reagan said that SB 290-FN allows people to practice auriculotherapy as long as they follow certain practices.
- Senator Reagan said that he had a phone call with someone who told him that the Army is training people to perform auriculotherapy at the time of battle. He said that he was told that he could be trained in auriculotherapy in five minutes.
- Senator Bradley asked if RSA 328-G was the acupuncture licensure statute.
 - Senator Reagan indicated that he was unsure.

Elizabeth Repp

- Ms. Repp is a licensed acupuncturist. She said that she supports SB 290-FN.
- Ms. Repp spoke about Jeff Davis, the NAMI-NH Provider of the Year in 2019, who used the four-point National Acupuncture Detoxification Association (NADA) protocol on people recovering from substance use disorder.
- Ms. Repp said that while an acupuncturist can perform any ear-related needling, people like Mr. Davis, who are acupuncture detoxification specialists (ADS), can only do the four NADA points.
- Ms. Repp said that auriculotherapy gets people out of their fight or flight instincts and allows them to build inner resilience.
- Ms. Repp cited research showing that 75% of prisons in the United Kingdom provide auriculotherapy. She said that that shows what can happen if communities are able to practice without restrictions.
- Ms. Repp said that, after the first year of practice, an ADS should not need ongoing supervision from an acupuncturist.
- Ms. Repp said that during the COVID-19 pandemic, it was unclear how acupuncturists were supposed to supervise ADSes while they were ordered to close their practices under the various emergency orders.
- Ms. Repp said that the NADA training is enough for the full ear.

Laura Cooley

- Ms. Cooley said that, since New Hampshire is a constitutional carry state, there should also be open carry for needles so that people can use them without becoming criminals.
- Ms. Cooley demonstrated a tool that identifies points on the ear that indicate where pain is. She cited a study from Terry Olson at the University of California, Los Angeles that showed that the device could identify the problem area in 72% of cases with no information on the patient's symptoms.
- Ms. Cooley said that some people do not consider auriculotherapy to be acupuncture because it is built on a different background than the traditional Chinese practices.
- Ms. Cooley said that once someone learns the NADA points, there is no other point that is unsafe.
- Ms. Cooley said that the largest acupuncture malpractice firm in the country has not had a single complaint in New Hampshire.
- Ms. Cooley said that she has been trying to get her own training program approved in New Hampshire but has found the process very slow and burdensome.
- Ms. Cooley asked when the rights of citizens outweigh the rights of a profession to withhold treatment.
- Ms. Cooley said that acupuncture is facing an employee shortage. She said that the four main schools of acupuncture in New Mexico have closed and, of graduates, 85% are not working in the field five years later.
- Ms. Cooley said that the administrative rules put in place to set up training programs were supposed to be simple and are, instead, very complex.
- Ms. Cooley said that she wanted to file a complaint against the Board of Acupuncture to Governor Sununu but Representative Peter Schmidt urged her not to, in order to avoid causing problems.

- Ms. Cooley said that there are 900 auriculotherapy programs in Denmark, which operate outside of the acupuncture system.
- Ms. Cooley said that she is not seeking *carte blanche* authority and that someone could have their right to practice taken away if they do not follow health and safety protocols.
- Ms. Cooley said that the worst-case scenario for an adverse reaction to auriculotherapy is that the patient faints. She said that, after doing 10,000 treatments, she has never seen someone faint.
- Senator Sherman asked, on Line 15, what the difference between a “natural person” and “any other person” is.
 - Ms. Cooley said that she believed it was a reference to an undocumented immigrant.
 - Senator Bradley said that “any other person” means a corporation.
 - Senator Sherman asked what a “natural person” was.
 - Senator Bradley said that Senator Sherman was a “natural person”.
 - Senator Sherman asked what “any other person” was.
 - Senator Gray said that various court decisions have said that corporations can have the benefits of personhood.

Tracy Brannstrom

- Ms. Brannstrom is a PhD candidate at the University of Chicago and has researched the opioid crisis for three years. She said that she is pursuing research on different forms of treatment and has interviewed many clinicians.
- Ms. Brannstrom said that she agrees with what has been said. She said that auriculotherapy is a safe practice that brings relief to people.
- Ms. Brannstrom said that statute poses lots of restrictions. She said to use the context of the opioid crisis and the ability to bring relief to people.

Lauren Smith

- Ms. Smith said that she supports SB 290-FN.

Robert Mortimer

- Mr. Mortimer said that he has seen hundreds or thousands of people in recovery from substance use disorder with cooccurring mental illnesses who received relief time and time again from the auriculotherapy clinic.
- Mr. Mortimer said that auriculotherapy does not cure anything, but provides relief and helps manage symptoms. He said he has heard from many people that it provides a sense of calm.
- Mr. Mortimer said that no one is in the practice to make money. He said that auriculotherapy provides relief to people who may not have any money to spend on other forms of treatment.

Summary of testimony presented in opposition: None.

Neutral Information Presented: None.

cml
Date Hearing Report completed: January 20, 2022

Speakers

Senate Remote Testify

Health and Human Services Committee Testify List for Bill SB290 on 2022-01-
Support: 6 Oppose: 0

<u>Name</u>	<u>Title</u>	<u>Representing</u>	<u>Position</u>
Carson, Senator Sharon	An Elected Official	Myself	Support
Cavanaugh, Senator Kevin	An Elected Official	Myself	Support
French, Senator Harold	An Elected Official	Myself	Support
Avard, Senator Kevin	An Elected Official	SD 12	Support
Soucy, Donna	An Elected Official	SD 18	Support
Berry, Jake	A Lobbyist	New Futures	Support

Testimony

Cameron Lapine

From: Meng, Eana Xuyi <eanameng@hms.harvard.edu>
Sent: Saturday, January 8, 2022 9:52 AM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject: In support of SB290

Dear Senate Health and Human Services Committee,

My name is Eana Meng. I am a medical student at Harvard University in Boston, MA, and a member of the advisory board of an acupuncture school in Portland, Oregon. I am writing in support of SB 290, Relative to the Practice of Auriculotherapy. I plan to integrate acupuncture into my medical practice. I also support short certification courses in ear acupuncture geared towards non-acupuncturist lay practitioners. This will allow more patients to access this treatment option -- many of whom will benefit immensely. I've spoken to hundreds of patients at this point and so many have discussed the benefits of having ear acupuncture as part of their healthcare journey.

I am familiar with the practice of acupuncture through my grandmother in China. In 2018, I came to New Hampshire when I was writing my senior thesis on the use of acupuncture and opioid addiction. I met acupuncturist, Elizabeth Ropp, at Hope for NH Recovery in Manchester. That is how I learned about the standardized five-point ear acupuncture treatment, known as NADA, for the National Acupuncture Detoxification Association. This changed the course of my research.

I earned my Master's Degree in England at the University of Cambridge, where I conducted historical and ethnographic research on the use of auricular acupuncture. I was certified in ear acupuncture through NADA trainers in the United Kingdom. Acupuncture is not regulated as strictly in the United Kingdom as it is in the United States. I was able to learn (and needle!) many ear acupuncture points in addition to the five ear points that NADA teaches for substance use disorder, disaster trauma, and behavioral health.

In the UK, people from a wide range of disciplines practice ear acupuncture and use it in their daily lives for themselves, their families, and their communities. I refer to ear acupuncture in my blog series as "toolkit care," because it should be part of many healthcare providers' toolkits. Ear acupuncture is provided to inmates in over 120 out of 150 prisons in the UK. Auricular therapy is so popular that inmates take classes on Chinese Medicine theory.

At one point I considered going to acupuncture school to become a fully licensed acupuncturist because I wanted to work in the field of integrative medicine. I couldn't justify the cost, which is almost the same as medical school. Acupuncture students are not offered residency programs and very few jobs exist in the field of acupuncture. Harvard Medical School offered me a full scholarship to become a medical doctor. I couldn't turn it down. It made more sense to be an MD than to take on a ***quarter of a million dollars in student loans*** to become an acupuncturist.

It would benefit the acupuncture profession if auricular therapy was part of a toolkit of any competently trained individual since many people still do not understand the benefits. More patients deserve to have auricular therapy as a healthcare option.

Thank you for reading my testimony,

Eana Meng

Cameron Lapine

From: Elizabeth Ropp <arunareiki@gmail.com>
Sent: Sunday, January 9, 2022 8:38 PM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject: Support for SB290

Dear Honorable Members of the Senate Health Human Services Committee,

My name is Elizabeth Ropp. I support SB 290, Relative to the Practice of Auriculotherapy. I am a Licensed Acupuncturist in Manchester and I lead the effort in 2017 to pass an Act Relative to Acupuncture Detoxification Specialists (ADS). It was some of the best work I have ever done. It was humbling to receive unanimous support by the House and the Senate. I got to see the best in a lot of people during that effort.

I did not think that five years later I would be asking lawmakers to update the law. That is essentially what SB 290 does. Under current law, non-acupuncturist lay practitioners can be certified as Acupuncture Detoxification Specialists in a five point ear acupuncture protocol known as NADA, for the National Acupuncture Detoxification Association. Initially developed to support people in the early withdrawal stages of addictive substances, this non-verbal treatment works incredibly well to support behavioral and mental health. I use this treatment regularly in my practice to support my patients with stress and anxiety, which has increased dramatically since the pandemic. Ear acupuncture has an excellent record of safety in the hands of non-acupuncturists. It makes sense to allow ADSes the ability to use more ear protocols and ear points. There are at least 200 points on the ear that correspond to the whole body.

In 2019, Vermont passed a bill similar to SB290. Shortly after, a training session with Dr. Tom Corbin, leading expert in auriculotherapy, was organized in Barre, Vermont. The class was called "German Auriculotherapy for Pain Relief, Stress Disorders, and Addictions." I attended, along with my colleague, Jeffrey Davis, a Licensed Drug Counselor and NAMI-NH's 2019 Behavioral Health Provider of the year. In the back meeting room of a public health clinic, we gathered with other acupuncturists, mental health professionals, social workers, massage therapists, herbology students, from parts of New England and Canada. We were even joined by an academic working on her Ph.D. in anthropology. All of us were looking for ways to provide more complete care. Ear acupuncture is an adjunct that enhances other services and treatments.

As an acupuncturist, I can use all of the point protocols that I learned from Dr. Corbin's training. My colleague, Jeff Davis, can only legally needle the points that are part of the NADA protocol in New Hampshire. NADA is a very good auricular treatment. Some protocols may be more effective adjunct for certain addictions than others. If it is safe for non-acupuncturists to needle the five points of the NADA protocol, then it is safe for them to treat the whole ear.

As the law stands now, the Certified ADSes must be under the general supervision of a NADA, or equivalent, trained licensed acupuncturist. This includes two site visits a year and being available by phone or other electronic means. I am one of only two acupuncturists in New Hampshire who provide the necessary supervision for ADSes. From my experience as a supervisor, ADSes really only need two site visits in the first year of practice. At this point, the ADSes who have been practicing for a while, like Jeff Davis, are just as qualified as I am to provide supervision to newer ADS practitioners. However, the current law does not allow for it. And since I am one of the only people willing to supervise, it is becoming unwieldy.

NADA auricular treatments can happen in any setting in New Hampshire. It's most commonly found in recovery settings. Recovery settings are safe spaces for anonymity. One major problem with the rules of the current law, is that it requires ADSes to keep the names of who they treat and to chart the client response. That requirement violates anonymity. I spent a lot of time watching the acupuncture board write the rules of RSA-328-G:9a. The board did not seem to understand addictions, mental health, or recovery. It would be better that the board not be in charge of regulating the practice of auriculotherapy.

If you have any other questions please feel free to contact me,

The Honorable Elizabeth Ropp, L.Ac.
Manchester, NH
603-703-7871

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"Do the best that you can until you know better. Then when you know better, do better." Maya Angelou

Cameron Lapine

From: Amy Robidoux <blueyedbaby1086@gmail.com>
Sent: Tuesday, January 11, 2022 9:19 AM
To: James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine; Jeb Bradley
Subject: In Support of SB 290, an Act Relative to the Practice of Auriculotherapy

Dear Honorable Members of the Health and Human Services Committee,

I am a Recovery Coach in Manchester, NH. I could not properly manage my stress and when I started receiving ear acupuncture everything started becoming more manageable and I was able to respond appropriately. That's why I applied for the State of NH to pay for my ear acupuncture training. It's a holistic approach to a medical problem. Normally I would have been treated with Zanax, an addictive, anti-anxiety drug. I am all for natural methods to help combat the opiate crisis and give choices besides narcotic replacement.

Being someone who would personally benefit from the nicotine point, and the appetite point to lose weight, I'd really enjoy being able to provide that for people in recovery. Obesity is a major problem and we need all the help we can get. The anxiety points can also help for relief. My sister got through her early recovery with ear acupuncture to calm down withdrawals and also depression. This cause is particularly near and dear to my heart!

There is much more work to be done, please allow us to help. I think it will help my future practice to use more than the 5 points we currently can use.

Thank you,

Amy Robidoux

603 271-2104

Dear Senate HHS Committee,

My name is Mark Proulx. I am the Deputy Chief of the Epping Fire Department and I served on the House E, D, and A committee for 4 terms. I am writing in support of SB 290 Relative to the Practice of Auriculotherapy. I would be at the hearing in person but I have been deployed due to COVID.

SB 290 amends RSA G 328:9a, An Act Relative to Acupuncture Detoxification Specialists. This bill was heard by my committee in 2017. This bill allows New Hampshire citizens extra tools to address the opioid and behavioral health crisis. Our committee gave this bill strong support in the face of strong opposition by the Board of Acupuncture Licensing and the NH trade association. In spite of the fact that private practice acupuncturists have had a negligible response to the opiate crisis, they suggested instead that we give them funds, and then they would step up to provide these services. The group of professionals that initiated this were not asking for any funds.

After the bill was passed, I personally told the Acupuncture Board that the rules need to be simple and straightforward. That is not what they presented to the JLCAR. I worked with JLCAR leadership, Senator Reagan and Representative Schmidt, to remove restricting language and language conflicting with the law. Unfortunately, we did not catch all of the language that conflicts with the law.

The law allows the board to approve ADS trainings that are equivalent to the training provided by the National Acupuncture Detoxification Association (NADA). The board wrote rules that exceed the standards set by NADA. This is not in the spirit of the law. The administrative process is very complicated for this simple technique. It does not need to be and only provides obstacles to bringing services to people who need them.

This bill can remove the obstacles imposed by excessive rules. OPLC has not been able to administer this efficiently or effectively. Ear acupuncture has an excellent safety profile; it is not a threat to the public. Expanded services are warranted.

The Honorable Mark Proulx
Manchester, NH

Cameron Lapine

From: Woullard Lett <woullard.lett@gmail.com>
Sent: Wednesday, January 12, 2022 2:16 PM
To: Cameron Lapine
Subject: SB 290

My name is Woullard Lett. I am a resident of Manchester, NH. I am writing to you in support of SB 290, Relative to the Practice of Ariculotherapy.

I think it is important that you know I am a registered Republican. I have served two terms on the Manchester, NH Police Commission. I have also served a term as President of the Manchester, NH National Association for the Advancement of Colored People (NAACP). I currently am an appointed member of the City of Manchester Conduct Board. I also received my Acupuncture Detoxification Specialist (ADS) certificate from the State of New Hampshire Office of Professional Licensure and Certification on July 10, 2020.

My ADS certificate is based on my National Acupuncture Detoxification Association (NADA) training. I have administered the protocol, often free of charge, to support the health goals of community members. My having access to using the NADA protocol is simple, safe and effective, both physically and financially. This particular protocol is limited to five points on the ear. But the same science that supports the protocol identifies other areas on the ear that is just as simple, safe and effective. Certified NADA specialist having access to the whole ear can provide more effective treatments.

Acupuncture on the ear is safe and benefits to the community can be significant. I am not sure what you can do but I urge you to support SB 290 in support of community based, cost effective treatment for community members. Thank you for your service.

--
"The ax forgets; the tree remembers." African proverb



POCA*
PEOPLE'S ORGANIZATION of
COMMUNITY ACUPUNCTURE

Dear Honorable members of the Senate Health and Human Services Committee,

The People's Organization of Community Acupuncture (POCA) is a member-run 501(c)(6) non-profit organization whose mission is to work cooperatively to increase accessibility to and availability of affordable group acupuncture treatments. We envision a world in which every community has access to local, affordable acupuncture to reduce collective and individual suffering and nurture resilience. We have over 9,000 practitioner and patient members all over the country who provide and receive acupuncture in affordable clinics. We advocate for safe and pragmatic policies on the state and national level that will bring more acupuncture to more people.

We strongly support SB 290, An Act Relative to the Practice of Auriculotherapy because:

- Granite Staters are already permitted by law to be certified as Acupuncture Detoxification Specialists (ADSEs) under RSA-G9-a. This certification is limited to five acupuncture points in the outer ear, the NADA 5NP. Roughly half of US states have an ADS law.
- Ear (auricular) acupuncture has an excellent record for safety, used often as an adjunctive treatment for drug detox, recovery support, stress-related disorders, and pain.
- Acupuncture Detoxification Specialists should be free to pursue further training and specialization in auricular therapy and be able to apply needles to other points on the outer ear.
- The US military trains non-acupuncturists in the practice of auriculotherapy with protocols to prevent opioid dependence and to support people in pain. Those trained by the government could practice in New Hampshire. Why deny the general public, NH citizens, what we provide to the military?
- New Hampshire would not be the first state to adopt a policy like SB290 that allows non-acupuncturists the ability to treat all of the points on the ear. Vermont passed a similar policy in 2019. A bill is currently in process in the State of New York. Removing restrictions and expanding access for ear acupuncture is the national trend.
- It removes the general supervision requirement. Supervision is unwieldy and not necessary after the first year.

Passage of this bill benefits New Hampshire by:

- Expanding the benefits of ear acupuncture in public health settings.
- Empowering communities to take charge of their own health.
- Increasing access to acupuncture in underserved communities, especially in rural areas.
- Making it easier to conduct research studies on the benefits of auricular therapy.

Thank you for considering this bill. We are continually impressed by the New Hampshire legislature's robust support of auricular acupuncture accessibility.

Sincerely, POCA's General Circle and Board of Directors,

Andrew Wegman, Ellen Vincent, Whitney Thornily, Kelsey Rumpfello, Cris Monteiro, James Lorr,
Steve Kingsbury, Margaret Boyter

Cameron Lapine

From: Andy Wegman <andrew.wegman@gmail.com>
Sent: Wednesday, January 12, 2022 10:36 PM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject: Support for SB 290

Dear Senate HHS Committee,

My name is Andy Wegman. I am a NH licensed acupuncturist who treats patients at a pair of low-cost clinics in Southern New Hampshire that I also manage. I am writing in my support for SB 290: Relative to the Practice of Auriculotherapy.

In 2017, I supported an Act Relative to Acupuncture Detoxification Specialists which passed the House and the Senate with unanimous support.

Ear acupuncture, aka auriculotherapy, has proven exceedingly safe. Risk of adverse effects are quite low in the hands of competently-trained people. Access to ear acupuncture would go a long way to support people in parts of the state who may have limited access to licensed acupuncturists for relief of stress and overwhelm.

Please feel free to reach out with any questions.

Sincerely,
Andy Wegman, L.Ac.

Manchester Acupuncture Studio
Affordable Acupuncture
in Manchester & Nashua, NH
masnh.org

POCA
for Community Acupuncture everywhere else

To the Honorable Members of the Health and Human Service Committee,

I am a Licensed Massage Therapist in NH since 1991. The focus of my practice is Stress and Pain Reduction. The NADA Protocol complements my practice to provide balance to people's lives so they can perform their life's purpose.

Because of the public service you provide in a stressful environment, Representative Ben Baroody has set me up to provide Massage Day at the Statehouse for several years. (Until covid-19)

I became a Licensed ADS in NH in 2019. When I volunteered at Hope 4 Recovery, I witnessed for myself how the "Protocol" calmed the anxiety in the room. The concept is simple and easy to use and effective! The Protocol was developed so it could help many people quickly in a crisis. Each "crisis" is relevant to each person.

The purpose of this letter is to ask you to support SB 290. I am in favor of it. SB 290 expands the "Protocol" to the whole ear. I am looking to build on my skills. We are not replacing the Medical Profession; we are assisting them! Adding these other points will help.

We already know that the NADA Protocol has helped First responders. Please help us to provide more service to them and others.

Thank you for your attention!

Sincerely,

A handwritten signature in cursive script that reads "Patricia Faubert". The signature is written in black ink and is positioned below the word "Sincerely,".

Patricia Faubert, LMT NH-566M, ADS #12
(603) 548-5685
Plaistow, NH 03865

Cameron Lapine

From: richard roberts <richardrobertsnyc@gmail.com>
Sent: Thursday, January 13, 2022 12:05 PM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject: Fwd: I support SB 290, An Act Relative to Auriculotherapy

Jeb.Bradley@leg.state.nh.us,
James.Gray@leg.state.nh.us
Tom.Sherman@leg.state.nh.us
Becky.Whitley@leg.state.nh.us

Kevin.Avard@leg.state.nh.us

cameron.lapine@leg.state.nh.us

To the Honorable members the Health and Human Services Committee,

I am the owner and distributor of an herbal product called Sleepmix DeTox tea, the other half of the NADA's adjunct treatment at Lincoln Detox program in The Bronx for over 40 years. Soothing insomnia, reducing craving extends the benefits of ear acupuncture, developed over a period of years for just this use, and acceptable to that clientele. I have observed the regulation process in the acupuncture profession and the legal but inexplicable suppression of this desperately needed technique.

The Lincoln Detox model in the early 70's was barrier free, the goal was to replicate the model in communities across the US, and in countries around the world. Since then, it has been easier to implement it around the world than in the US. In NH you have the opportunity to achieve this goal through this legislation.

"Barrier free" meant anyone in the community could take advantage of the program. Initially, they walked in, got acupuncture, got the tea... without telling their names, Social Security #s, or address. People with really hard lives, they just came in and this anonymous approach supported the treatment. This was most important for the growth of the program. Anyone with 2 legs could walk in and walk out, no pressure, no name..... giving a name and phone number is pressure.

Barriers are taught in the university system, it's part of the clinical system- no name, no reimbursement. The Veterans Administration has created a no name clinic system to avoid the stigma of reaching out for help. The Veteran's Administration also provides acupuncture for veterans, acknowledging the need and usefulness of ear acupuncture, and is training staff across the country in various protocols.

The program was phenomenally popular in the neighborhood. Lincoln Detox created the very first maternal program in the US in response to the epidemic of premature babies with neonatal abstinence syndrome (NAS) abandoned in

the hospital. These babies cost the city several million each. Because of this program, The Bronx had the lowest foster care rate in NYC, lower than Manhattan. The Lincoln program existed for over 40 years successfully, initiating a social healing wave acknowledging the patient not as morally reprehensible, but as ill.

Developed and delivered by community members, NOT professionals, but in conjunction with professionals, a true collaboration between the community and medical system evolved. Please return ear acupuncture to the community by allowing full access to other ear points and protocols.

Sincerely,

Richard Roberts

1/13/22

Cameron Lapine

From: Gabi Teed <teedster1@gmail.com>
Sent: Friday, January 14, 2022 10:02 AM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Cc: Laura Cooley; arunareiki@gmail.com
Subject: Support of SB290

January 2022

Dear Honorable Members of the Senate Health Human Services Committee,

My name Gabrielle Teed and I am writing to you in support of SB 290, Relative to the Practice of Auriculotherapy. I am a Licensed Acupuncture Detoxification Specialist in Manchester and have been practicing the NADA (National Acupuncture Detoxification Association) five-point ear acupuncture protocol for almost three years. I am also a Certified Recovery Support Worker, yoga teacher and Social Worker in the substance use field and provide ear acupuncture to my coworkers, yoga students and people in recovery from substance use disorders.

Under current law, non-acupuncturist lay practitioners can be certified as Acupuncture Detoxification Specialists. Initially developed to support people in the early withdrawal stages of addictive substances, this non-verbal treatment works incredibly well to support behavioral and mental health. Ear acupuncture has an excellent record of safety in the hands of non-acupuncturists. It makes sense to allow Acupuncture Detoxification Specialists the ability to use more ear protocols and ear points. There are at least 200 points on the ear that correspond to different points in the body.

In 2019, Vermont passed a bill similar to SB290. Like in Vermont, SB290 would allow any competently trained person to take care of their own health, the health of their own families, and immediate community. Ear acupuncture is an adjunct that enhances other services and treatments. If it is safe for non-acupuncturists to needle the five points of the NADA protocol, it is safe for us to treat the whole ear.

As the law stands now, certified Acupuncture Detoxification Specialists must be under the general supervision of a NADA, or equivalent, trained licensed acupuncturist. This includes two site visits a year. In NH, our two NADA trainers and supervisors, as well as those of us who have been certified Acupuncture Detoxification Specialists for several years, feel these two site visits are only needed in the first year of practice. We, and our trainers/supervisors, feel we are just as qualified as they are to provide ear acupuncture and supervision to newer Acupuncture Detoxification Specialists. However, the current law does not allow for this.

NADA auricular treatments can happen in any setting in New Hampshire. It is most commonly found in substance use recovery settings. Recovery settings are safe spaces for confidentiality and acceptance. One major problem with the rules of the current law, is that it requires Acupuncture Detoxification Specialists to keep the names of who they treat and to chart the client response. That requirement can potentially violate confidentiality, which is vital in the substance use and mental health fields.

I sincerely appreciate The Committee's time and attention to this important issue. Providing greater access to auricular acupuncture in our communities will be of great benefit to all, especially in this time of great need for treatment and services for people experiencing mental health and substance use care. If you have any other questions please feel free to contact me,

Gabrielle Teed, BSW, CRSW

New Boston, NH

603-305-5549

Cameron Lapine

From: Travis Beto <opencommunityacupuncture@gmail.com>
Sent: Friday, January 14, 2022 11:48 AM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject: RE: SB290

Dear Honorable members of the Senate Health and Human Services Committee,

As a Vermont licensed acupuncturist, I am writing in support of SB 290, Relative to the Practice of Auriculotherapy. This policy was adopted in 2019 in Vermont, where I live and run two low-cost clinics in Waterbury and Berlin. As you know, Vermont, like New Hampshire, is a very rural state. Healthcare and other services are easy to access in cities. Providing healthcare, especially acupuncture, in rural settings is much more difficult – often nearly impossible. That is why SB 290 is a supreme solution.

Like in Vermont, this bill would allow any competently trained person to take basic care of their own health, the health of their own families, and immediate community. Additionally, and more often, people already in the business of helping others with their healing are taking advantage of the ability to use auriculotherapy. For the last three years many health care professionals have been reaching out requesting information about auriculotherapy training. They need more tools in their tool kits for safe, easy, affordable, non-pharmaceutical wellness options.

Beyond Vermont, another place you can look to see the benefits of auriculotherapy being successfully implemented is the US military. The US military has been using auriculotherapy for decades through its Battlefield Acupuncture Protocol (BFA) to avoid using narcotics for those injured on the battlefield. The McGuire VA Medical Center in Virginia offers group ear acupuncture clinics for veterans. The VA is rolling out the NADA protocol across the country. Those trained in any ear acupuncture protocol through the military or VA should be able to use the skills the government paid for in their local communities. Why deny citizens what we offer to our veterans?

I fully support the increased access of auriculotherapy and have seen no ill effect in my acupuncture business since its passage in Vermont. In fact I have had patients tell me they were introduced to acupuncture through their experiences receiving auriculotherapy outside of traditional acupuncture settings. In that way I can say increasing access has actually helped my acupuncture business.

Thank you for taking my testimony,

Travis Beto, L.Ac

—
OPEN Community Acupuncture
Sliding Scale \$25-50
Affordable Accessible Effective
Waterbury and Berlin
W: opencommunityacupuncture.com
P: [802 552 8187](tel:8025528187)

Dear Honorable Members of the Health and Human Services Committee,

I am a NH LADC, the 6th ADS to be certified in NH with a private practice in Lebanon, NH since 2001. I also work for the Mascoma Valley Regional School District for over 20 years at both Indian River School and Mascoma Valley Regional High School where I am their Student Assistance Professional in Canaan, NH. Prior to establishing my private practice, I was one of the original founders of Headrest where I worked for 31 years. I was the 323rd recipient in 1991 of President George Bush's American Points of Light Award and in 2004 I was presented the Jefferson Award in recognition for my long-term volunteer support of the NH Teen Institute and the Youth of NH. Also, since 1983 I facilitate RESOLVE, a batterer's intervention group here in the Upper Valley.

After 45 years in the addictions' field, I would have retired a while ago if I hadn't discovered the awesome benefits of ear acupuncture and ear acupressure. I see it as the missing link in giving people more control over their lives. When they are less stressed and have less cravings, they make healthier life choices and good things happen. It also saves a lot of time and suffering. Please remove ADSes from this board's burdensome oversight.

The people I counsel for addiction typically have other multiple health issues that can be helped by ear points beyond the 5 in the current law. I have seen ear acupuncture reduce the use of all recreational drugs, but, especially, also nicotine addiction.

COVID has stopped me from Acudetox in my groups and private practice. I can't wait to get back to using needles since I have been limited to using ear acupressure.

In spite of the incredibly safe track record all across the country, the school districts' lawyer was concerned about liability issues and so the students and teachers have to come to my private practice office for acupressure with seeds and magnets.

I have put beads on a Special Ed student who was easily angered, easily distracted, unable to stay focused and was behaviorally disruptive in the classroom. The pandemic only added to his stress levels so when I applied the beads to both his and his mother's ears the effects were immediate. His Special Ed teacher who has known this student since middle school reports that he has been very good, no longer disruptive in the classroom, doing all the work he needs to do and now passing all his courses. His classroom successes have carried over to his interactions with other students. No longer does he accept anger invitations that had in the past lead to lots of fights and suspensions. He feels better about himself, he can focus and not over-react anymore. The Associate Principal has complimented him around his tremendous turnaround in attitude and behavior at the school. Another wonderful side effect for his mother: she quit smoking because wearing the beads on her ear lead to no more cravings.

Last year I had similar results using seeds with an elementary student who was labeled ADHD. The teachers wanted him put on Ritalin because of his disruptive, unfocused behavior in the classroom but fortunately his mother did not. I showed his mother how to apply the seeds and

he no longer needed an assigned paraprofessional to shadow him in the classroom; he does not need Ritalin and he too feels much better about himself as a result.

I whole hardly support SB290 and hopefully you will too. I have encountered lots of problems with the licensing board, with confusing rules, confusing renewal information (they sent me Licensed Acupuncturist renewal requirements), conflicting information (had me resubmit original paperwork after sending me an email that said all original paperwork suffices). Please help me help our NH citizens by simplifying the administration of these simple but profound techniques.

Thanks for taking my sharing into your consideration around this important bill,

Donlon Wade, LADC, ADS

47 Kimball Hill Road
Canaan, NH 03741-7460
(603) 252-6430 (cell #)

Cameron Lapine

From: Phil Wells <Phil.Wells@wcmhs.org>
Sent: Friday, January 14, 2022 2:59 PM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Cc: Laura Cooley (laura@acuaid.net)
Subject: SB290

To whom it may concern,

I'm writing in support of the New Hampshire all ear access bill. My name is Phil Wells M.A. I work for Washington County Mental Health Services running "WellSpace" a wellness center that provides wellness options for residents of Washington County Vermont. In addition, I'm an adjunct professor at Northern Vermont University and formerly taught as an adjunct professor at Southern New Hampshire University in the Clinical Mental Health Program for 20 years.

WellSpace has provided ear acupuncture clinics weekly for our staff and community prior to the pandemic. Clinics will continue when in-person activities are safe. Several agency staff are trained in five-point ear acupuncture. We provide ear treatments upon request and at meetings if requested by participants. Feedback from staff and consumers has been fabulous, participants returning weekly for treatments report feeling less stress, sleeping better, experiencing a sense of calm. Vermont has allowed those trained in NADA to use the whole ear, as this is safe, and proven been effective and is inexpensive to deliver.

At the Washington County Mental Health WellSpace Wellness Center, ear acupuncture is one of many complimentary services provided for low or no cost, so the community can access strategies to cope in these troubling times.

Regards,
Phil Wells M.A.

WellSpace Director
Washington County Mental Health services

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Cameron Lapine

From: Elissa Elliott <e.elliott.lcmhc@gmail.com>
Sent: Saturday, January 15, 2022 12:03 PM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject: SB-290 I Support It

Dear Honorable Members of the Senate Health Human Services Committee:

My name is Elissa Elliott, and I am a Licensed Clinical Mental Health Counselor and Acupuncture Detoxification Specialist currently practicing out of Somersworth, NH and residing in Middleton, NH. I have been trained in the 5-point ear acupuncture NADA protocol and have been using it for approximately two and a half years. I am a proponent of holistic wellness strategies, and ear acupuncture has been a tremendous addition to my skill set. Since my training, I have offered this service in both a volunteer setting and as a complementary practice to my clinical work, with populations ranging from individuals with co-occurring disorders to those seeking general stress management, all from very different walks of life. The feedback that I have received from recipients has been positive with regards to both the immediate relaxation and the cumulative effect of improved sleep and sense of decreased physical tension.

As such, I am writing to you in strong support of SB 290, Relative to the Practice of Auriculotherapy and thus the opportunity to expand upon how this service is offered. Under current law, non-acupuncturist lay practitioners can be certified as Acupuncture Detoxification Specialists (ADS) using the 5 point protocol. As such, ADS's are limited to only those 5 points. There are at least 200 points in the ear that would lend themselves to promoting well-being and overall health, and I support the law that would allow for ADS's to be able to provide expanded ear acupuncture services. During a time when the country is experiencing both a health and mental health crisis, and there is a shortage of mental health professionals in NH, it makes sense to promote a service that can support overall health management that can be administered in any setting by competently trained lay practitioners. There is no cure. This is strictly a management issue for those with chronic mental health challenges. This includes accessibility of services to parts of the state where services may be stretched thin, such as rural NH. VT passed a similar bill in 2019 which has empowered trained practitioners to provide competent care within their respective communities and thus relieve some of the burden on their respective healthcare systems.

Currently, though, there is a complete credentialing process for a certification in NH to practice ear acupuncture which is excessive to those who have completed the training. I can say that as a clinician having attended various trainings and certification courses, my training in the safe practices for ear acupuncture has been straightforward and comprehensive. Competence is key in administering any helping service, and I have seen that to be the case with how auricular acupuncture training is offered. Speaking from the standpoint of a mental health clinician, if a therapist or social worker receives a specialty certificate, there is no formal credentialing process with the State, one needs no state approval to practice. For example, a mental health provider does not need State level credentialing to practice the following:

- Cognitive Behavioral Therapy (CBT)
- Cognitive Behavioral Therapy for Insomnia (CBT-I)
- Cognitive Processing Therapy (CPT)
- Dialectical Behavioral Therapy (DBT)
- Eye Movement Desensitization and Reprocessing (EMDR)
- Emotional Freedom Technique (EFT)

The aforementioned modalities require competency to ethically practice, and without appropriate training, a provider can risk client safety and do more harm than good. I have not heard of any emotional or physical risk associated with use of ear acupuncture to help manage symptoms. As such, I don't think there should be formal credentialing for the certification of Acupuncture Detoxification Specialist, either. This would allow for increased access to much needed service in the state.

Again, I am in support of SB 290, Relative to the Practice of Auriculotherapy. I implore you to also support this bill and promote increased access to ear acupuncture, for both practitioners and potential recipients in the state of NH. Thank you.

Sincerely,

Elissa Elliott, MS, LCMHC, ADS
Middleton, NH 03887
(603) 512-6643

Elissa Elliott, MS, LCMHC, ADS

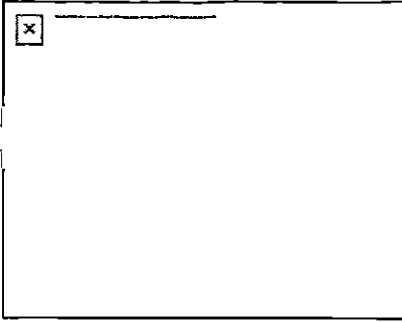
Licensed Clinical Mental Health Counselor

AcuDetox Specialist

Fruition Counseling & Wellness

(603) 515-6549

www.fruitioncounseling.org



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Cameron Lapine

From: Ellen Willis <ellen@indigomoonfarm.net>
Sent: Saturday, January 15, 2022 2:15 PM
To: Cameron Lapine
Subject: I support SB 290

Dear Senate Health and Human Services Committee,

My name is Ellen Willis. I am a candidate for Licensed Clinical Mental Health Counselor and MLADC in New Hampshire. I support SB 290, Relative to the Practice of Auriculotherapy. Ear acupuncture is safe and is an additional tool that can address the opioid and behavioral health crisis. I was trained in the NADA five-point ear acupuncture protocol in 2019 and have been able to provide ear treatments as a complimentary service for low or no cost, so that people in the community struggling with addiction and mental health concerns can experience less stress, better sleep, and have an experience of calm. I plan to integrate ear acupuncture in my private practice upon licensure and I support SB 290 because it can remove the obstacles imposed by excessive rules.

--
Ellen Willis
Indigo Moon Farm
Equine Specialist and EAGALA certified
NH EAGALA Networking Coordinator

1st Crown Point Road
Strafford NH 03884
603-905-9705
ellen@indigomoonfarm.net
indigomoonfarm.net

Cameron Lapine

From: Daisy J. Goodman <Daisy.J.Goodman@hitchcock.org>
Sent: Sunday, January 16, 2022 12:54 AM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject: Support for Senate Bill SB290, An Act Relative to Auriculotherapy

Dear Senators,

I am writing to express my support for Senate bill SB290, An Act Relative to Auriculotherapy. This bill will expand the ability of appropriately trained practitioners who are not licensed acupuncturists, to provide acupuncture treatment using the full range of points on the ear.

I am an advanced practice nurse in New Hampshire who is trained in the NADA Detox protocol, which uses 5 points on the ear to reduce distress for people experiencing drug withdrawal. This powerful tool has benefited many within our state and I am grateful that non-acupuncturists like myself may train and apply for licensure in NH to provide these supportive treatments for people struggling with substance use disorders.

There are other, equally powerful protocols which can be used as complementary therapies for other conditions. Most notably, an alternate protocol has been developed to help health care providers and others who are suffering from fatigue and burnout during the COVID-19 pandemic. Similar protocols have also been utilized to support first responders after 911 and in the Veteran's Administration.

Unfortunately, under current NH licensure rules, I am only able to perform the NADA protocol, and cannot provide treatments using other points that would provide relief for a larger range of conditions and more people. This limitation does not make sense as the needle technique is the same, and only the location where the needles are placed is different.

We are living in unprecedented times that call us to use all the tools at our disposal to provide relief from both physical and emotional distress for our patients and colleagues. I urge you to pass SB290 to make this helpful, inexpensive, complementary therapy available widely to those who need it.

Sincerely yours,

Daisy Goodman, DNP, APRN, CNM, CARN-AP
Department of Obstetrics and Gynecology
Dartmouth-Hitchcock Medical Center
Lebanon, NH 03756
(603)653-1860/653-9300

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Cameron Lapine

From: Rapsca1lion617 <rapsca1lion617@gmail.com>
Sent: Sunday, January 16, 2022 6:29 PM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avar; Cameron Lapine
Cc: laura@acuaid.net
Subject: I support SB 290, An Act Relative to Auriculartherapy

To members of the Senate Health and Human Services Committee,

My name is Rob Dalrymple and I have received both the NADA protocol and extra ear points for the pain I experience. In 2006 I had a partial foot amputation, and I wear an uncomfortable brace. I have constant phantom pain, and pain from the awkward way I now walk. The couple times I have had the extra ear points for my feet and leg, the pain went away for at least a week. Life is much better without chronic pain.

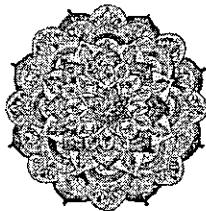
I cannot afford acupuncture, not even in a sliding scale community clinic. I had these treatments at HOPE For NH, but it is rarely available because the acupuncturists who come here can only volunteer sometimes. I could greatly benefit from weekly treatments, and there are others at Hope NADA trained that could also provide this service for me.

There are many people who come to HOPE that have chronic pain. I plan to be NADA trained myself, so I can help people.

Please pass SB290 so that I can have regular treatments and life can be pain free.

Sincerely,

Rob Dalrymple



Irene Ryan, LICSW
152 Northampton Street
Easthampton, MA 01027
(413) 531-1943; ireneryanlicsw.com

January 14, 2022

Dear: Jeb Bradley, James Gray, Tom Sherman, Rebecca Whitley, and Kevin Avard,

I am writing to express my support for Senate bill SB290, An Act Relative to Auriculotherapy. This bill will expand the ability of appropriately trained practitioners who are not licensed acupuncturists, to provide acupuncture treatment using the full range of points on the ear.

I am a clinical social worker, licensed in Massachusetts where I have a private psychotherapy practice. I help teens, adults, families and couples to overcome a variety of medical illnesses, such as: substance abuse, anxiety, depression, grief, eating disorders, obsessive compulsive disorder, trauma, chronic pain, suicidal and homicidal ideation. Most clients require a combination of therapeutic approaches and adjunct treatments in order to make progress and reduce symptoms. Acupuncture is one of the adjunct treatments that is very helpful for symptom reduction and improved functioning. Supporting this SB 290 will make Auriculotherapy available to more people.

We are living through unprecedented times. Our healthcare workers, teachers and first responders are critical to our communities are suffering from burnout and leaving their jobs in record numbers. Auriculotherapy has helped many people recover from substance abuse, mass shootings, natural disasters and other traumatic events.

Please use your position to support SB 290, an Act Relative to the Practice of Auriculotherapy so that more people can be trained and subsequently will be able to bring Auriculotherapy to many people so they can improve their lives. Healthy people are able to work, be productive citizens and be better parents. Healthy people use fewer community resources and are less likely to be incarcerated. In general healthy people contribute to society and are less of a burden to tax payers. Please support this Bill so more people can access Auriculotherapy so we can be a healthier society.

Thank you for your consideration.

Respectfully submitted,
Irene H. Ryan

Irene H. Ryan, LICSW
MA LICSW: 1018742;
NPI: #1679038145

1/17/2022

Dear Honorable members of the Senate Health and Human Services Committee,

My name is Robert Mortimer and I am writing in strong support of SB 290. This bill would amend RSA G 328:9a, an act relative to Acupuncture Detoxification Specialists in the Practice of Auriculotherapy. I am a Licensed Acupuncture Detoxification Specialist and a Licensed Certified Recovery Support Worker in the State of New Hampshire. Prior to my departure on 9/1/2021 to pursue other interests, I was working as the Front End Manager and as a Recovery Coach for Hope for New Hampshire Recovery in Manchester. This brought me in contact with hundreds of individuals on a weekly basis who sought help in recovery from Substance Use Disorder. As a non-profit Recovery Community Center, Hope endorses and provides space for many pathways of recovery and offers individual recovery coaching.

For several years now, outside Licensed ADS volunteers have been providing Ear Acupuncture treatments for the community on a weekly basis at the Hope Center free of any charge. These treatments are limited to the NADA {National Acupuncture Detoxification Association} 5 point protocol. I have personally witnessed innumerable testimonials about the calming effects of these treatments. And how the individuals felt it was effective in helping to manage their afflictions as an adjunct to more mainstream methods. While receiving treatments it is common for individuals to ask about other points in the ear that can help manage additional symptoms of co-occurring disorders. It is known there are at least 200 other points in the ear that can be treated. In fact, when a Licensed Acupuncturist is present among the volunteers in a recovery center setting, they can, and do, provide this service while working alongside ADS providers that are limited to the NADA 5-point protocol. It makes complete sense that the ADS should be able to treat the whole ear. I wholeheartedly ask you to pass SB 290.

Respectfully,

Robert N. Mortimer CRSW, ADS
{603}-490-3408

Cameron Lapine

From: yarberry.megan@gmail.com
Sent: Monday, January 17, 2022 8:44 PM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Subject: in support of SB 290

To the Honorable members of the Senate Health and Human Services Committee,

I am a licensed acupuncturist and former Academic Dean and instructor for an acupuncture Master's program writing in support of SB 290 Relative to the Practice of Auriculotherapy.

I have taken special interest in auriculotherapy because it reduces barriers to healthcare, especially for high-needs and marginalized communities. It is an effective and efficient modality that can be offered at low cost. In my 20+ years of practice I have offered ear treatments in a variety of settings, including for those affected by lava flows in Hawai'i, victims of natural disasters in Bahamas and Haiti, immigrants in South Africa, as well as addicts and prison inmates in East Africa. In 2008 a colleague and I trained 21 community health workers at a UNHCR refugee camp in Uganda on simple auricular protocols to promote well-being. Over the course of the next six months these workers provided over 18,000 treatments to their fellow refugees, and reported such outcomes as reduced pain, improved sleep, less suicidal ideation, reduced cravings for addictive substances, and many other remarkable improvements. While the treatment protocol does not claim to treat specific conditions, it improves patient resilience to physical and psychological stressors.

Those against loosening of regulations around this therapy commonly cite safety concerns, but the simple fact is that this is a supremely safe treatment, as scientific literature can confirm. I've provided trainings for people as diverse as medical doctors and nurses in the US to youth leadership members on a remote island off Kenya, and have never seen or heard about notable adverse effects. What is less often voiced is concern about lost business for practicing acupuncturists. I've found this position to have no standing, as many people who receive auriculotherapy have never had acupuncture before, and once they've experienced this 'gateway' treatment and recognize the benefits, they are more likely to seek out more tailored treatments for specific conditions.

The restrictions on this type of treatment in the US is a missed opportunity. By passing SB 290, you will expand healthcare options and care in New Hampshire at a time when our healthcare system is under tremendous strain.

Thanks so much for your consideration, and in hopes of the passage of SB 290.

Megan Yarberry, LAc, MAOM
626 253 4447
yarberry.megan@gmail.com

Cameron Lapine

From: Lars Wiinblad <lars@nada-danmark.dk>
Sent: Tuesday, January 18, 2022 2:03 AM
To: Jeb Bradley; James Gray; Tom Sherman; Becky Whitley; Kevin Avard; Cameron Lapine
Cc: Laura Cooley
Subject: National Acupuncture Detoxification Association

Dear members of the Health and Human Services Committee,

NADA-Denmark was founded in 2000. I have been the head of the organization from the very beginning. I have been training and teaching the NADA protocol in Denmark since 1999. I became a certified NADA trainer after my stay in Lincoln Recovery Center training with Carlos Alvarez and supervised by Dr. Michael Smith.

We have a group of 10 trainers guided by me. I am the only licensed acupuncturist in the organization. According to Danish law acupuncture can be practiced most people. There are rules for safety, but you do not have to be a doctor or a licensed acupuncturist. Supervision from a doctor or licensed acupuncturist is not required. This was enabled by legislation in 2007. I train our staff in acupuncture and other skills when needed.

We have since 2000 trained more than 20,000 people using the NADA-protocol, employees from the public healthcare system as well as clinics, substance abuse centers, shelters, social workers, relatives in community programs, hospice, schools, hospitals and many more.

NADA-Denmark is not associated with the Acupuncturist Organizations in Denmark. The NADA-protocol is not looked at a medical treatment and we do not carry out any diagnostic work. NADA is a complementary method in Denmark and accepted as such at the Danish National Health Board.

The success and the results of ear acupuncture has increased during the last 10 years. One of the reasons are probably that our trainers are professionals that can cope with the background of the trainees. We chose our trainers from their spirit as a person, knowledge of the NADA-protocol in practice and their professional background, among other qualifications. When we, for instance, train people from the healthcare system our trainer must know this field from their own career. When we train staff from a psychiatric unit our trainer will be a licensed psychiatric nurse. This goes for every training. Our group of trainers are a collective of nurses, midwives, social advisors, substance abuse professionals, psychiatric nurses and more. Being a licensed acupuncturist is not the main qualification.

We have many kinds of programs running. Many people work alone in community settings. On our website you will find around 400 of such programs where people can go to get treatments at low cost (around \$4US). Some programs are for free. Beside the programs run by volunteers you can find more than 500 programs in the public health care system or similar programs.

We have not had any problems with safety since the beginning in 2000. Today it is common that administrators ask for NADA-trained people advertising for new employees. I support the passage of SB 290.

Sincerely
Lars Wiinblad
Head of NADA-Denmark

Letter of Support for SB290 Relative to the Practice of Auriculotherapy

Jan 17, 2022

Dear members of the Senate Health and Human Services Committee,

My name is Sara Bursac, and I am the former executive director of the National Acupuncture Detoxification Association (NADA). I am in full support of SB290, making it possible for anyone to get trained in the NADA protocol, and other auricular protocols that bring great health benefits to people, safely and affordably.

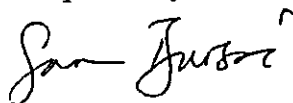
During my tenure as NADA's executive director I served as the chair of the legislative advocacy committee. I have seen seven states pass laws allowing the practice of this protocol by non-medical and non-acupuncturist personnel. The legislative trend in all states is towards greater flexibility and deregulation.

If SB290 passes, New Hampshire will be the third state to successfully deregulate the practice of this simple and effective ear acupuncture treatment. What a blessing that will be for the New Hampshire community! The health and safety risks in administering this treatment are incredibly low, the potential side effects fit in a sentence or two, versus pages of small print for any medication, and the necessities of a space to provide a treatment are as simple as a place to sit and spacious enough for social distancing.

In 2021 the U.S. had more than 100,000 die of drug overdose. There are close to 160 people dying by suicide each day. Our healthcare workforce and first responders are physically and emotionally tapped by the pandemic. **There is no time like the present to increase access to simple treatments that help people cope with stress and trauma.**

Thank you for taking right action to support the citizens of New Hampshire, and pass SB290 in the 2022 legislative session.

Respectfully,



Sara Bursac

sarabursac@gmail.com

(573) 673-0062

Cecilia B. Howard
136 Powder Hill Road
Bedford, NH 03110

January 17, 2022

Dear Honorable Members of the Senate Health Human Services Committee:

My name is Cecilia Bokan Howard, and I am writing to you in support of SB 290, Relative to the Practice of Auriculotherapy. I am a proud Licensed Acupuncture Detoxification Specialist in the state of NH having been the 3rd one to be certified and a member of the first training class. I have been practicing the NADA (National Acupuncture Detoxification Association) five-point ear acupuncture protocol for about three years. I am also a fully trained Recovery Coach, mindfulness and meditation teacher, REIKI certified practitioner and prior to Covid was actively assisting those in my private practice in Milford, NH as well as at Recovery Centers in NH. In addition to this, I am the mother of a son diagnosed with a substance use disorder who has greatly benefited from this incredibly impactful ear protocol.

Under current law, non-acupuncturist lay practitioners can be certified as Acupuncture Detoxification Specialists. Initially developed to support people in the early withdrawal stages of addictive substances, this non-verbal treatment works incredibly well to support behavioral and mental health. Ear acupuncture has an excellent record of safety in the hands of non-acupuncturists. It makes sense to allow Acupuncture Detoxification Specialists the ability to use more ear protocols and ear points. There are at least 200 points on the ear that correspond to different points in the body. Let's make this VERY safe practice, in the hands of ADS certified and licensed individuals possible!

I was very active after the initial launch of ear acupuncture in this state. I saw two tireless individuals work hard to bring this practice into being in NH: Laura Cooley and Elizabeth Ropp. Without their help, guidance, and support, along with some very key political figures, this would NEVER have come into being. I trust their judgment and guidance implicitly and would love to see the current members of the licensing board for Acupuncture support their efforts as well. It always seems to be an adversarial relationship in that the Licensing Board is not trained in or experts in the field of substance use disorders, recovery, or the safe and excellent record behind every ADS. This is not something to fear or discourage, but to celebrate and allow.

Please, it is time to follow Vermont in passing a bill similar to SB290. We are hoping this bill will pass here to expand our efforts to help the many who need something extra to help them succeed in their recovery and life!

Much appreciation for all you do,

Cecilia Bokan Howard

ADS Certified and Licensed



THE UNIVERSITY OF CHICAGO

University of Chicago
1101 E. 58th St.
Chicago, Illinois
60637

Dear Senate Health and Human Services Committee,

I am writing in support of SB.290 – an act that proposes several changes regarding how ear acupuncture (auricular therapy) is practiced across the state. The passing of this act is consequential for the health and wellbeing of New Hampshire residents. It would remove barriers to a service that can be deeply healing.

I am a PhD student in the social sciences at the University of Chicago, and a resident of Warren, Vermont. My research looks at the evolution of auricular therapy in the context of the US opioid crisis in the Northeastern US. I have been following auricular therapy practitioners as part of my fieldwork for the past three years, attending the free clinics that they host in recovery centers and others locations across New England. Initially, I completed a training in New Hampshire for a standardized 5-point protocol that has become associated with addiction recovery (“NADA” protocol), and was then certified. Following that, I focused my volunteer work in Vermont, where the practice was deregulated, and the law posed less restrictions. (Attached is an article I reported and wrote for a VT newspaper, that explores Vermont’s 2019 deregulation.)

Passing SB.290 would mean, in part, that anyone who has been trained to understand the basics of auricular therapy and safe needle handling technique, can utilize any of the 100+ points on the outer ears. It would mean that those practicing would be not confined to the standardized 5-point addiction recovery protocol. Expanding access to the entire ear would expand access to therapeutic possibilities for people suffering with complicated, overlapping health issues. The act also proposes removing unnecessary and restrictive supervision and documentation requirements.

I have witnessed many people receiving this service – those in recovery from substances, from mental health issues, from chronic pain, and other conditions – and I have seen their distress, tension, and feelings of alienation transform into restfulness, self-awareness, and presence. The practice has an impressive safety profile, with no complaints filed against auricular therapy practitioners in New Hampshire. I can confidently say that auricular therapy is a beautiful and crucial form of body-work, especially in light of the many social problems we face today.

Please consider passing this act and expanding access to a much-needed therapy.

Tracy Brannstrom
tbrannstrom@uchicago.edu
773-982-1342

Change in Law Expands Access To Ear Acupuncture Services

By TRACY BRANNSTROM

MONTPELIER — The legislature voted this year to allow individuals to practice ear acupuncture (auriculotherapy) in their communities without the special license that was previously required, and providers say it will make it more accessible to those with mental health and substance use disorders.

Ear acupuncture involves the shallow placement of thin, sterilized disposable needles into specific sites on the surface of the outer ear.

Waitsfield resident Chris Bordonaro said that ear acupuncture was one of the more helpful interventions he has experienced during more than three decades of problems with alcohol.

He said that he was only recently evaluated by mental health clinicians and began to see that he was using alcohol as a means to cope with his severe anxiety.

Bordonaro said that the co-occurrence of substance use disorder and psychiatric diagnosis, or dual diagnosis, is important to recognize when designing interventions.

Origins in 1970s

Ear acupuncture has targeted substance use and mental health issues in the United States since the early 1970s when community members and activists created a drug detoxification program in a Bronx hospital at the height of a heroin epidemic.

They offered ear acupuncture in combination with methadone, a medication-assisted treatment, in the psychiatric unit of Lincoln Memorial Hospital, according to Laura Cooley, a licensed acupuncturist, trainer of auriculotherapy and legislative advocate.

It was “developed by community members to save their communities,” said Cooley.

Community health workers, nurses, counselors and other community members in Vermont have sought to provide the service in drug and alcohol recovery centers, community centers and clinical settings, offering it at low or no cost to make it accessible for those who would not ordinarily be able to afford acupuncture, according to Katie Whittaker, RN.

However, the previous licensing criteria under state law created obstacles for those who wanted to practice ear acupuncture in their communities, said Gabe Gilman, general counsel to the Vermont Office of Professional Regulation.

“There was a great deal of red tape and cost,” Gilman said. The state law amendment that took effect in July removed ear acupuncture from the oversight and licensing required for other forms of acupuncture.

As a result, it eliminated the requirement



Ear acupuncture involves placement of thin needles into specific sites on the surface of the outer ear. (Counterpoint Photo: Tracy Brannstrom)

that a licensed acupuncturist be available to talk in person, by phone or electronically when a person is providing the service. It also eliminated the license application fee of \$100, with \$200 due at each biennial renewal.

“The state is in the business of regulating marketplace activities, and this is a community-level practice,” Gilman explained. “Very few people derive primary income from ear acupuncture. It’s more of a part-time activity. It exists on the level of popular folk therapy and peer assistance.”

The amendment also removed the requirement that individuals practice only in state or federally funded addiction programs. Previously, the law referred to those approved for a license as an acupuncture detox specialist.

Feeling Better

Whittaker, who works in a rural, federally qualified health care center in northeastern Vermont, offers free ear acupuncture to patients as an add-on to their primary care appointments.

Previously, when it was legally permitted only for substance use treatment, she said her patients reported reduced cravings, and some told her that they felt good for the first time without the aid of a substance.

Since the law’s amendment, Whittaker has provided the intervention for those working through a variety of health and mental health issues.

“I see this as a nervous system reset,” she said. “It can drop you into a place of rest, relaxation and safety. And what comes out of that is, people can manage stress better, they sleep better and they feel better in their bodies.”

Whittaker added that while clinical interventions focus on urine screenings, medication adherence and other monitoring techniques, ear acupuncture creates a space in which “people can just be who they are.”

Despite potential benefits, the law stipulates that individuals who practice cannot “purport to treat any disease, disorder, infirmity, or affliction.”

More Are Trained

Although just 12 individuals have been licensed through the state, the National Acupuncture Detoxification Association said that 67 individuals in Vermont have filed a certificate that shows they underwent the organization’s 70-hour training, according to Sara Bursac, the executive director of NADA.

The amendment to the statute still requires “appropriate training” for those who practice ear acupuncture.

The NADA training teaches participants to place needles in five points on each ear. These target the liver, kidney, lungs, parasympathetic nervous system and shen, or spirit.

The five-point protocol can provide relief for addiction, stress and trauma, according to the organization’s website.

In his 1975 book “The Ear: Gateway to Balancing the Body,” acupuncturist Mario Wexu wrote that research in China and Europe has shown “a close physiological relationship between specific areas of the ear to specific areas of the body.”

“When stimulated,” he wrote, “they send a signal to the brain, which in turn sends a signal to the corresponding areas or functions of the body.”

Health outcomes for mental health issues are also possible, according to Victoria Taylor, who provides ear acupuncture at an inpatient recovery program in rural Virginia, because the premise underlying acupuncture is that “mind and body are in the same place.”

Dual Diagnosis

Those diagnosed with substance use disorder show elevated risk for almost all psychiatric diagnoses, with the correlations for depression and bipolar disorder ranking highest, according to a 1990 study by Darrel Regier and colleagues published in the *Journal of the American Medical Association*.

Kurt White, who oversees outpatient programs at the Brattleboro Retreat, said that as a society, “we’ve made such a weird separation of these problems, when the norm is probably that people are dealing with both at the same time.”

Cooley said that one of the largest obstacles for those who wanted to provide the intervention was its restriction to drug and alcohol treatment and recovery programs.

Using the term “detox,” she said, can give the impression that benefits are limited to those undergoing substance withdrawal.

“It’s not just detox,” she said. “It gets people back in shape for facing life.”

PSYCHIATRIC STUDY BRIEFS

Symptoms Hidden Due to Stigma

A study published online in August reported finding that nearly half of all patients withhold critical information about their mental health out of embarrassment and fear both of stigmatization and the possible long-term implications of sharing such information.

“These findings suggest that concerns about potential negative repercussions may lead many patients who experience imminent threats to avoid disclosing this information to their clinician,” the study concluded. Assessment

of Patient Nondisclosures to Clinicians of Experiencing Imminent Threats, *JAMA Netw Open*. 2019;2(8):e199277.

Depression as Adverse Effect

More than a third of all the prescription medications Americans use have depression as a potential side effect, and there is an increase in rate of diagnoses of depression among those individuals, according to a new study. A cross-sectional study of adults showed that 37 percent of Americans take at least one medication that

has depression as a listed potential adverse effect, according to the study, which was reported in the *Journal of the American Medical Society* in 2018.

Those using three or more of such prescriptions were three times more likely to experience depression than people who did not use any, it said — 15% versus 5%. The original investigation was titled “Prevalence of Prescription Medications With Depression as a Potential Adverse Effect Among Adults in the United States.”

Dear Honorable Members of the Senate Health Human Services Committee,

My name is Elizabeth Ropp. I support SB 290, Relative to the Practice of Auriculotherapy. I am a Licensed Acupuncturist in Manchester and I lead the effort in 2017 to pass an Act Relative to Acupuncture Detoxification Specialists (ADS). It was some of the best work I have ever done. It was humbling to receive unanimous support by the House and the Senate. I got to see the best in a lot of people during that effort.

I did not think that five years later I would be asking lawmakers to update the law. That is essentially what SB 290 does. Under current law, non-acupuncturist lay practitioners can be certified as Acupuncture Detoxification Specialists in a five point ear acupuncture protocol known as NADA, for the National Acupuncture Detoxification Association. Initially developed to support people in the early withdrawal stages of addictive substances, this non-verbal treatment works incredibly well to support behavioral and mental health. I use this treatment regularly in my practice to support my patients with stress and anxiety, which has increased dramatically since the pandemic. Ear acupuncture has an excellent record of safety in the hands of non-acupuncturists. It makes sense to allow ADSes the ability to use more ear protocols and ear points. There are at least 200 points on the ear that correspond to the whole body.

In 2019, Vermont passed a bill similar to SB290. Shortly after, a training session with Dr. Tom Corbin, leading expert in auriculotherapist, was organized in Barre, Vermont. The class was called "German Auriculotherapy for Pain Relief, Stress Disorders, and Addictions." I attended, along with my colleague, Jeffrey Davis, a Licensed Drug Counselor and NAMI-NH's 2019 Behavioral Health Provider of the year. In the back meeting room of a public health clinic, we gathered with other acupuncturists, mental health professionals, social workers, massage therapists, herbology students, from parts of New England and Canada. We were even joined by an academic working on her Ph.D. in anthropology. All of us were looking for ways to provide more complete care. Ear acupuncture is an adjunct that enhances other services and treatments.

As an acupuncturist, I can use all of the point protocols that I learned from Dr. Corbin's training. My colleague, Jeff Davis, can only legally needle the points that are part of the NADA protocol in New Hampshire. NADA is a very good auricular treatment. Some protocols may be more effective adjunct for certain addictions than others. If it is safe for non-acupuncturists to needle the five points of the NADA protocol, then it is safe for them to treat the whole ear.

As the law stands now, the Certified ADSes must be under the general supervision of a NADA, or equivalent, trained licensed acupuncturist. This includes two site visits a year and being available by phone or other electronic means. I am one of only two acupuncturists in New Hampshire who provide the necessary supervision for ADSes. From my experience as a supervisor, ADSes really only need two site visits in the first year of practice. At this point, the ADSes who have been practicing for a while, like Jeff Davis, are just as qualified as I am to provide supervision to newer ADS practitioners. However, the current law does not allow for it. And since I am one of the only people willing to supervise, it is becoming unwieldy.

NADA auricular treatments can happen in any setting in New Hampshire. It's most commonly found in recovery settings. Recovery settings are safe spaces for anonymity. One major problem with the rules of the current law, is that it requires ADSes to keep the names of who they treat and to chart the client response. That requirement violates anonymity. I spent a lot of time watching the acupuncture board write the rules of RSA-328-G:9a. The board did not seem

Thank you for considering this bill. We are continually impressed by the New Hampshire legislature's robust support of auricular acupuncture accessibility.

Sincerely, POCA's General Circle and Board of Directors,

Andrew Wegman, Ellen Vincent, Whitney Thornily, Kelsey Rumfello, Cris Monteiro, James Lorr,
Steve Kingsbury, Margaret Boyter



POCA*
PEOPLE'S ORGANIZATION of
COMMUNITY ACUPUNCTURE

Dear Honorable members of the Senate Health and Human Services Committee,

The People's Organization of Community Acupuncture (POCA) is a member-run 501(c)(6) non-profit organization whose mission is to work cooperatively to increase accessibility to and availability of affordable group acupuncture treatments. We envision a world in which every community has access to local, affordable acupuncture to reduce collective and individual suffering and nurture resilience. We have over 9,000 practitioner and patient members all over the country who provide and receive acupuncture in affordable clinics. We advocate for safe and pragmatic policies on the state and national level that will bring more acupuncture to more people.

We strongly support SB 290, An Act Relative to the Practice of Auriculotherapy because:

- Granite Staters are already permitted by law to be certified as Acupuncture Detoxification Specialists (ADSes) under RSA-G9-a. This certification is limited to five acupuncture points in the outer ear, the NADA 5NP. Roughly half of US states have an ADS law.
- Ear (auricular) acupuncture has an excellent record for safety, used often as an adjunctive treatment for drug detox, recovery support, stress-related disorders, and pain.
- Acupuncture Detoxification Specialists should be free to pursue further training and specialization in auricular therapy and be able to apply needles to other points on the outer ear.
- The US military trains non-acupuncturists in the practice of auriculotherapy with protocols to prevent opioid dependence and to support people in pain. Those trained by the government could practice in New Hampshire. Why deny the general public, NH citizens, what we provide to the military?
- New Hampshire would not be the first state to adopt a policy like SB290 that allows non-acupuncturists the ability to treat all of the points on the ear. Vermont passed a similar policy in 2019. A bill is currently in process in the State of New York. Removing restrictions and expanding access for ear acupuncture is the national trend.
- It removes the general supervision requirement. Supervision is unwieldy and not necessary after the first year.

Passage of this bill benefits New Hampshire by:

- Expanding the benefits of ear acupuncture in public health settings.
- Empowering communities to take charge of their own health.
- Increasing access to acupuncture in underserved communities, especially in rural areas.
- Making it easier to conduct research studies on the benefits of auricular therapy.

Thank you for considering this bill. We are continually impressed by the New Hampshire legislature's robust support of auricular acupuncture accessibility.

Sincerely, POCA's General Circle and Board of Directors,

Andrew Wegman, Ellen Vincent, Whitney Thornily, Kelsey Rumpfello, Cris Monteiro, James Lorr,
Steve Kingsbury, Margaret Boyter

Dear Honorable Members of the Senate Health Human Services Committee:

My name is Elissa Elliott, and I am a Licensed Clinical Mental Health Counselor and Acupuncture Detoxification Specialist currently practicing out of Somersworth, NH and residing in Middleton, NH. I have been trained in the 5-point ear acupuncture NADA protocol and have been using it for approximately two and a half years. I am a proponent of holistic wellness strategies, and ear acupuncture has been a tremendous addition to my skill set. Since my training, I have offered this service in both a volunteer setting and as a complementary practice to my clinical work, with populations ranging from individuals with co-occurring disorders to those seeking general stress management, all from very different walks of life. The feedback that I have received from recipients has been positive with regards to both the immediate relaxation and the cumulative effect of improved sleep and sense of decreased physical tension.

As such, I am writing to you in strong support of SB 290, Relative to the Practice of Auriculotherapy and thus the opportunity to expand upon how this service is offered. Under current law, non-acupuncturist lay practitioners can be certified as Acupuncture Detoxification Specialists (ADS) using the 5 point protocol. As such, ADS's are limited to only those 5 points. There are at least 200 points in the ear that would lend themselves to promoting well-being and overall health, and I support the law that would allow for ADS's to be able to provide expanded ear acupuncture services. During a time when the country is experiencing both a health and mental health crisis, and there is a shortage of mental health professionals in NH, it makes sense to promote a service that can support overall health management that can be administered in any setting by competently trained lay practitioners. There is no cure. This is strictly a management issue for those with chronic mental health challenges. This includes accessibility of services to parts of the state where services may be stretched thin, such as rural NH. VT passed a similar bill in 2019 which has empowered trained practitioners to provide competent care within their respective communities and thus relieve some of the burden on their respective healthcare systems.

Currently, though, there is a complete credentialing process for a certification in NH to practice ear acupuncture which is excessive to those who have completed the training. I can say that as a clinician having attended various trainings and certification courses, my training in the safe practices for ear acupuncture has been straightforward and comprehensive. Competence is key in administering any helping service, and I have seen that to be the case with how auricular acupuncture training is offered. Speaking from the standpoint of a mental health clinician, if a therapist or social worker receives a specialty certificate, there is no formal credentialing process with the State, one needs no state approval to practice. For example, a mental health provider does not need State level credentialing to practice the following:

- Cognitive Behavioral Therapy (CBT)
- Cognitive Behavioral Therapy for Insomnia (CBT-I)
- Cognitive Processing Therapy (CPT)

- Dialectical Behavioral Therapy (DBT)
- Eye Movement Desensitization and Reprocessing (EMDR)
- Emotional Freedom Technique (EFT)

The aforementioned modalities require competency to ethically practice, and without appropriate training, a provide can risk client safety and do more harm than good. I have not heard of any emotional or physical risk associated with use of ear acupuncture to help manage symptoms. As such, I don't think there should be formal credentialing for the certification of Acupuncture Detoxification Specialist, either. This would allow for increased access to much needed service in the state.

Again, I am in support of SB 290, Relative to the Practice of Auriculotherapy. I implore you to also support this bill and promote increased access to ear acupuncture, for both practitioners and potential recipients in the state of NH. Thank you.

Sincerely,

Elissa Elliott, MS, LCMHC, ADS

Middleton, NH 03887

(603) 512-6643

Dear Honorable Members of the Health and Human Services Committee,

I am a NH LADC, the 6th ADS to be certified in NH with a private practice in Lebanon, NH since 2001. I also work for the Mascoma Valley Regional School District for over 20 years at both Indian River School and Mascoma Valley Regional High School where I am their Student Assistance Professional in Canaan, NH. Prior to establishing my private practice, I was one of the original founders of Headrest where I worked for 31 years. I was the 323rd recipient in 1991 of President George Bush's American Points of Light Award and in 2004 I was presented the Jefferson Award in recognition for my long-term volunteer support of the NH Teen Institute and the Youth of NH. Since 1983 I also facilitate RESOLVE, a batterer's intervention group here in the Upper Valley.

After 45 years in the addictions' field I would have retired a while ago if I hadn't discovered the awesome benefits of ear acupuncture and ear acupressure. I see it as the missing link in giving people more control over their lives. When they are less stressed and have less cravings, they make healthier life choices and good things happen. It also saves a lot of time and suffering. Please remove ADSes from this board's burdensome oversight.

The people I counsel for addiction typically have other multiple health issues that can be helped by ear points beyond the 5 in the current law. I have seen ear acupuncture reduce the use of all recreational drugs, but, especially, also nicotine addiction.

COVID has stopped me from Acudetox in my groups and private practice. I can't wait to get back to using needles since I have been limited to using ear acupressure.

In spite of the incredibly safe track record all across the country, the school districts' lawyer was concerned about liability issues and so the students and teachers have to come to my private practice office for acupressure with seeds and magnets.

I have put beads on a Special Ed student who was easily angered, easily distracted, unable to stay focused and was behaviorally disruptive in the classroom. The pandemic only added to his stress levels so when I applied the beads to both his and his mother's ears the effects were immediate. His Special Ed teacher who has known this student since middle school reports that he has been very good, no longer disruptive in the classroom, doing all the work he needs to do and now passing all his courses. His classroom successes have carried over to his interactions with other students. No longer does he accept anger invitations that had in the past lead to lots of fights and suspensions. He feels better about himself, he can focus and not over-react anymore. The Associate Principal has complimented him around his tremendous turnaround in attitude and behavior at the school. Another wonderful side effect for his mother: she quit smoking because wearing the beads on her ear lead to no more cravings.

Last year I had similar results using seeds with an elementary student who was labeled ADHD. The teachers wanted him put on Ritalin because of his disruptive, unfocused behavior in the classroom but fortunately his mother did not. I showed his mother how to apply the seeds and

to understand addictions, mental health, or recovery. It would be better that the board not be in charge of regulating the practice of auriculotherapy.

If you have any other questions please feel free to contact me,

The Honorable Elizabeth Ropp, L.Ac.
Manchester, NH
603-703-7871

My name is Woullard Lett. I am a resident of Manchester, NH. I am writing to you in support of SB 290, Relative to the Practice of Auriculotherapy.

I think it is important that you know I am a registered Republican. I have served two terms on the Manchester, NH Police Commission. I have also served a term as President of the Manchester, NH National Association for the Advancement of Colored People (NAACP). I currently am an appointed member of the City of Manchester Conduct Board. I also received my Acupuncture Detoxification Specialist (ADS) certificate from the State of New Hampshire Office of Professional Licensure and Certification on July 10, 2020.

My ADS certificate is based on my National Acupuncture Detoxification Association (NADA) training. I have administered the protocol, often free of charge, to support the health goals of community members. My having access to using the NADA protocol is simple, safe and effective, both physically and financially. This particular protocol is limited to five points on the ear. But the same science that supports the protocol identifies other areas on the ear that is just as simple, safe and effective. Certified NADA specialist having access to the whole ear can provide more effective treatments.

Acupuncture on the ear is safe and benefits to the community can be significant. I urge you to support the citizens of New Hampshire by voting for SB 290 .

--
"The ax forgets; the tree remembers." African proverb

Dear Honorable members of the Senate Health and Human Services Committee,

As a Vermont licensed acupuncturist, I am writing in support of SB 290, Relative to the Practice of Auriculotherapy. This policy was adopted in 2019 in Vermont, where I live and run two low-cost clinics in Waterbury and Berlin. As you know, Vermont, like New Hampshire, is a very rural state. Healthcare and other services are easy to access in cities. Providing healthcare, especially acupuncture, in rural settings is much more difficult – often nearly impossible. That is why SB 290 is a supreme solution.

Like in Vermont, this bill would allow any competently trained person to take basic care of their own health, the health of their own families, and immediate community. Additionally, and more often, people already in the business of helping others with their healing are taking advantage of the ability to use auriculotherapy. For the last three years many health care professionals have been reaching out requesting information about auriculotherapy training. They need more tools in their tool kits for safe, easy, affordable, non-pharmaceutical wellness options.

Beyond Vermont, another place you can look to see the benefits of auriculotherapy being successfully implemented is the US military. The US military has been using auriculotherapy for decades through its Battlefield Acupuncture Protocol (BFA) to avoid using narcotics for those injured on the battlefield. The McGuire VA Medical Center in Virginia offers group ear acupuncture clinics for veterans. The VA is rolling out the NADA protocol across the country. Those trained in any ear acupuncture protocol through the military or VA should be able to use the skills the government paid for in their local communities. Why deny citizens what we offer to our veterans?

I fully support the increased access of auriculotherapy and have seen no ill effect in my acupuncture business since its passage in Vermont. In fact I have had patients tell me they were introduced to acupuncture through their experiences receiving auriculotherapy outside of traditional acupuncture settings. In that way I can say increasing access has actually helped my acupuncture business.

Thank you for taking my testimony,

Travis Beto, L.Ac

Dear Health and Human Services Committee Members,

My name is Rob Dalrymple and I have received both the NADA protocol and extra ear points for the pain I experience. In 2006 I had a partial foot amputation, and I wear an uncomfortable brace. I have constant phantom pain, and pain from the awkward way I now walk. The couple times I have had the extra ear points for my feet and leg, the pain went away for at least a week. Life is much better without chronic pain.

I cannot afford acupuncture, not even in a sliding scale community clinic. I had these treatments at HOPE For NH, but it is rarely available because the acupuncturists who come here can only volunteer sometimes. I could greatly benefit from weekly treatments, and there are others at Hope NADA trained that could also provide this service for me.

There are many people who come to HOPE that have chronic pain. I plan to be NADA trained myself, so I can help people.

Please pass SB290 so that in can have regular treatments and life can be pain free.

Sincerely,
Rob Dalrymple

To the Members of the Health And Human Services committee,

My name is Richard Roberts. I am the owner and distributor of an herbal product called Sleepmix DeTox tea, the other half of the NADA's adjunct treatment at Lincoln Detox program in The Bronx for over 40 years. Soothing insomnia, reducing craving extends the benefits of ear acupuncture, developed over a period of years for just this use, and acceptable to that clientele. I have observed the regulation process in the acupuncture profession and the legal but inexplicable suppression of this desperately needed technique.

The Lincoln Detox model in the early 70's was barrier free, the goal was to replicate the model in communities across the US, and in countries around the world. Since then, it has been easier to implement it around the world than in the US. In NH you have the opportunity to achieve this goal through this legislation.

"Barrier free" meant anyone in the community could take advantage of the program. Initially, they walked in, got acupuncture, got the tea.... without telling their names, Social Security #s, or address. People with really hard lives, they just came in and this anonymous approach supported the treatment. This was most important for the growth of the program. Anyone with 2 legs could walk in and walk out, no pressure, no name..... giving a name and phone number is pressure.

Barriers are taught in the university system, it's part of the clinical system- no name, no reimbursement. The Veterans Administration has created a no name clinic system to avoid the stigma of reaching out for help. The Veteran's Administration also provides acupuncture for veterans, acknowledging the need and usefulness of ear acupuncture, and is training staff across the country in various protocols.

The program was phenomenally popular in the neighborhood. Lincoln Detox created the very first maternal program in the US in response to the epidemic of premature babies with neonatal abstinence syndrome (NAS) abandoned in the hospital. These babies cost the city several million each. Because of this program, The Bronx had the lowest foster care rate in NYC, lower than Manhattan. The Lincoln program existed for over 40 years successfully, initiating a social healing wave acknowledging the patient not as morally reprehensible, but as ill.

Developed and delivered by community members, NOT professionals, but in conjunction with professionals, a true collaboration between the community and medical system evolved. Please return ear acupuncture to the community by allowing full access to other ear points and protocols.

Sincerely,

Richard Roberts

To the Honorable Members of the Health and Human Service Committee,

My name is Randy Stevens. I support SB290. I am 31 years old and have over 3 years of sobriety and active recovery. That is important to me because I spent over 17 years living in active addiction and did not know that such a blessed life as I have now existed. In November of 2018, I was meeting with my recovery coach in Portsmouth NH. She told me about something I could try that might help to alleviate some of the symptoms I was experiencing like stress, anxiety, and depression. I do not remember all the details that were spoken to me about the NADA treatment then, but I do remember the lasting effect that the treatment had on me. In adjunction with my more traditional recovery program, I was able to maintain my sobriety and now live and work in Manchester NH as the Integrated Peer Support Specialist with the ProHealth Integrated Care Program at The Mental Health Center of Greater Manchester. I am now a Certified Recovery Support Worker, a Certified Peer Specialist, and an Acupuncture Detoxification Specialist. I use ear acupuncture as a regular part of my recovery process as well as for friends and colleagues. Numerous individuals receive the NADA protocol from me and feel that it works for them. Many of the individuals that receive treatment often report that they sleep better, they become less symptomatic, they feel a reduction in chronic pain.

My best friend and spiritual mentor, Deacon David Skerry, had been experiencing chronic neck pain for months and when he began receiving ear treatments, he began to feel a serious reduction in that pain. When my trainer used some neck points on his ear as well, he began experiencing an even more robust effect. Many people who are not in recovery receive the NADA protocol and feel that it helps ground them and allows them to focus so that they are able to be more effective at their work. Some also report an increase in energy and stamina as well.

As someone who has experienced multiple adverse childhood experiences and trauma as a child and adult, I can attest to the healing effect of auriculotherapy. Many people cannot afford the cost of traditional acupuncture or do not have a health insurance policy to cover it. Expanding scope for Acu-Detox Specialists, like me, to be able to treat points anywhere on the ear could make non-pharmaceutical more affordable and easier to access. It is an egregious injustice that this incredibly healing, safe, and inexpensive form of medicine is not more accessible for those in our communities who cannot otherwise afford traditional western medicine. I encourage all who are reading this letter to consider the positive and lasting effects that this treatment can have on our homeless and actively addicted population. Everyone deserves the opportunity to improve their quality of life, and ear acupuncture certainly can support that.

I hope that this letter will help this state become a state where this therapy is more accessible and less restricted so that everyone may have the opportunity to experience it. We have a choice to allow our New Hampshire citizens the chance to be better today than they were yesterday. Reducing the restrictions on ear acupuncture will be a big step in that direction.

With loving kindness,

Randy Stevens CRSW, ADS, CPS
1/11/2022



WASHINGTON COUNTY

M E N T A L H E A L T H

Mailing Address:
PO BOX 647
Montpelier, VT 05601-0647

Administration Telephone:
(802) 229-1399
FAX (802) 223-8623

Summer St. Office Phone:
(802) 479-4055
FAX (802) 661-5699



1/14/22

To whom it may concern,

I'm writing in support of the New Hampshire all ear access bill. My name is Phil Wells M.A. I work for Washington county Mental Health Services running "WellSpace" a wellness center that provides wellness options for residents of Washington county Vermont. In addition, I'm an adjunct professor at Northern Vermont University and formerly taught at Southern New Hampshire University in the Clinical Mental Health Program for 20 years.

WellSpace has provided ear acupuncture clinics weekly for our staff and community prior to the pandemic. Clinics will continue when in-person activities are safe. Several agency staff are trained in five-point ear acupuncture. We provide ear treatments upon request and at meetings if requested by participants. Feedback from staff and consumers has been fabulous, participants returning weekly for treatments report feeling less stress, sleeping better, experiencing a sense of calm. Vermont has allowed those trained in NADA to use the whole ear, as this is safe, and proven been effective and is inexpensive to deliver. At the Washington County Mental Health WellSpace Wellness Center, ear acupuncture is one of many complimentary services provided for low or no cost, so the community can access strategies to cope in theses troubling times.

Regards,
Phil Wells M.A.
WellSpace Director
Washington County Mental Health services

To the Honorable Members of the Health and Human Service Committee,

I am a Licensed Massage Therapist in NH since 1991. The focus of my practice is Stress and Pain Reduction. The NADA Protocol complements my practice to provide balance to people's lives so they can perform their life's purpose.

Because of the public service you provide in a stressful environment, Representative Ben Baroody has set me up to provide Massage Day at the Statehouse for several years. (Until covid-19)

I became a Licensed ADS in NH in 2019. When I volunteered at Hope 4 Recovery, I witnessed for myself how the "Protocol" calmed the anxiety in the room. The concept is simple and easy to use and effective! The Protocol was developed so it could help many people quickly in a crisis. Each "crisis" is relevant to each person.

The purpose of this letter is to ask you to support SB 290. I am in favor of it. SB 290 expands the "Protocol" to the whole ear. I am looking to build on my skills. We are not replacing the Medical Profession; we are assisting them! Adding these other points will help.

We already know that the NADA Protocol has helped First responders. Please help us to provide more service to them and others.

Thank you for your attention!

Sincerely,

Patricia Faubert, LMT NH-566M, ADS #12
(603) 548-5685
Plaistow, NH 03865

To the Honorable members of the Senate Health and Human Services Committee,

I am a licensed acupuncturist and former Academic Dean and instructor for an acupuncture Master's program writing in support of SB 290 Relative to the Practice of Auriculotherapy.

I have taken special interest in auriculotherapy because it reduces barriers to healthcare, especially for high-needs and marginalized communities. It is an effective and efficient modality that can be offered at low cost. In my 20+ years of practice I have offered ear treatments in a variety of settings, including for those affected by lava flows in Hawai'i, victims of natural disasters in Bahamas and Haiti, immigrants in South Africa, as well as addicts and prison inmates in East Africa.

In 2008 a colleague and I trained 21 community health workers at a UNHCR refugee camp in Uganda on simple auricular protocols to promote well-being. Over the course of the next six months these workers provided over 18,000 treatments to their fellow refugees, and reported such outcomes as reduced pain, improved sleep, less suicidal ideation, reduced cravings for addictive substances, and many other remarkable improvements. While the treatment protocol does not claim to treat specific conditions, it improves patient resilience to physical and psychological stressors.

Those against loosening of regulations around this therapy commonly cite safety concerns, but the simple fact is that this is a supremely safe treatment, as scientific literature can confirm. I've provided trainings for people as diverse as medical doctors and nurses in the US to youth leadership members on a remote island off Kenya, and have never seen or heard about notable adverse effects. What is less often voiced is concern about lost business for practicing acupuncturists. I've found this position to have no standing, as many people who receive auriculotherapy have never had acupuncture before, and once they've experienced this 'gateway' treatment and recognize the benefits, they are more likely to seek out more tailored treatments for specific conditions.

The restrictions on this type of treatment in the US is a missed opportunity. By passing SB 290, you will expand healthcare options and care in New Hampshire at a time when our healthcare system is under tremendous strain.

Thanks so much for your consideration, and in hopes of the passage of SB 290.

Megan Yarberry, LAc, MAOM
626 253 4447
yarberry.megan@gmail.com

Dear Senate HHS Committee,

My name is Mark Proulx. I am the Deputy Chief of the Epping Fire Department and I served on the House E, D, and A committee for four terms. I am writing in support of SB 290 Relative to the Practice of Auriculotherapy. I would be at the hearing in person but I have been deployed due to COVID.

SB 290 amends RSA G 328:9a, An Act Relative to Acupuncture Detoxification Specialists. This bill was heard by my committee in 2017. This bill allows New Hampshire citizens extra tools to address the opioid and behavioral health crisis. Our committee gave this bill strong support in the face of strong opposition by the Board of Acupuncture Licensing and the NH trade association. In spite of the fact that private practice acupuncturists have had a negligible response to the opiate crisis, they suggested instead that we give them funds, and then they would step up to provide these services. The group of professionals that initiated this were not asking for any funds.

After the bill was passed, I personally told the Acupuncture Board that the rules need to be simple and straightforward. That is not what they presented to the JLCAR. I worked with JLCAR leadership, Senator Reagan and Representative Schmidt, to remove restricting language and language conflicting with the law. Unfortunately, we did not catch all of the language that conflicts with the law.

The law allows the board to approve ADS trainings that are equivalent to the training provided by the National Acupuncture Detoxification Association (NADA). The board wrote rules that exceed the standards set by NADA. This is not in the spirit of the law. The administrative process is very complicated for this simple technique. It does not need to be and only provides obstacles to bringing services to people who need them.

This bill can remove the obstacles imposed by excessive rules. OPLC has not been able to administer this efficiently or effectively. Ear acupuncture has an excellent safety profile; it is not a threat to the public. Expanded services are warranted.

The Honorable Mark Proulx
Manchester, NH

Dear Senator Gray,

I am writing to you hoping to encourage you to vote for SB 290, which will expand the practice of auricular acupuncture, AKA ear acupuncture, to rural and underserved communities. It is a very effective way, alone or with other medical procedures, to treat a variety of problems, such as anxiety, depression, chronic pain, substance use disorder, and more. Thank you for considering this, I am sure you will see the benefits of this treatment and the need to expand it to rural and underserved communities.

Yours, Lew Henry

Dear members of the Health and Human Services Committee,

NADA-Denmark was founded in 2000. I have been the head of the organization from the very beginning. I have been training and teaching the NADA protocol in Denmark since 1999. I became a certified NADA trainer after my stay in Lincoln Recovery Center training with Carlos Alvarez and supervised by Dr. Michael Smith.

We have a group of 10 trainers guided by me. I am the only licensed acupuncturist in the organization. According to Danish law acupuncture can be practiced most people. There are rules for safety, but you do not have to be a doctor or a licensed acupuncturist. Supervision from a doctor or licensed acupuncturist is not required. This was enabled by legislation in 2007. I train our staff in acupuncture and other skills when needed.

We have since 2000 trained more than 20,000 people using the NADA-protocol, employees from the public healthcare system as well as clinics, substance abuse centers, shelters, social workers, relatives in community programs, hospice, schools, hospitals and many more.

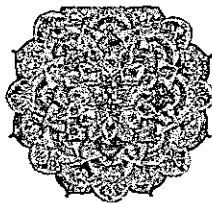
NADA-Denmark is not associated with the Acupuncturist Organizations in Denmark. The NADA-protocol is not looked at a medical treatment and we do not carry out any diagnostic work. NADA is a complementary method in Denmark and accepted as such at the Danish National Health Board.

The success and the results of ear acupuncture has increased during the last 10 years. One of the reasons are probably that our trainers are professionals that can cope with the background of the trainees. We chose our trainers from their spirit as a person, knowledge of the NADA-protocol in practice and their professional background, among other qualifications. When we, for instance, train people from the healthcare system our trainer must know this field from their own career. When we train staff from a psychiatric unit our trainer will be a licensed psychiatric nurse. This goes for every training. Our group of trainers are a collective of nurses, midwives, social advisors, substance abuse professionals, psychiatric nurses and more. Being a licensed acupuncturist is not the main qualification.

We have many kinds of programs running. Many people work alone in community settings. On our website you will find around 400 of such programs where people can go to get treatments at low cost (around \$4US). Some programs are for free. Beside the programs run by volunteers you can find more than 500 programs in the public health care system or similar programs.

We have not had any problems with safety since the beginning in 2000. Today it is common that administrators ask for NADA-trained people advertising for new employees. I support the passage of SB 290.

Sincerely
Lars Wiinblad
Head of NADA-Denmark



Irene Ryan, LICSW
152 Northampton Street
Easthampton, MA 01027
(413) 531-1943; ireneryanlicsw.com

January 14, 2022

Dear: Jeb Bradley, James Gray, Tom Sherman, Rebecca Whitley, and Kevin Avard,

I am writing to express my support for Senate bill SB290, An Act Relative to Auriculotherapy. This bill will expand the ability of appropriately trained practitioners who are not licensed acupuncturists, to provide acupuncture treatment using the full range of points on the ear.

I am a clinical social worker, licensed in Massachusetts where I have a private psychotherapy practice. I help teens, adults, families and couples to overcome a variety of medical illnesses, such as: substance abuse, anxiety, depression, grief, eating disorders, obsessive compulsive disorder, trauma, chronic pain, suicidal and homicidal ideation. Most clients require a combination of therapeutic approaches and adjunct treatments in order to make progress and reduce symptoms. Acupuncture is one of the adjunct treatments that is very helpful for symptom reduction and improved functioning. Supporting this SB 290 will make Auriculotherapy available to more people.

We are living through unprecedented times. Our healthcare workers, teachers and first responders are critical to our communities are suffering from burnout and leaving their jobs in record numbers. Auriculotherapy has helped many people recover from substance abuse, mass shootings, natural disasters and other traumatic events.

Please use your position to support SB 290, an Act Relative to the Practice of Auriculotherapy so that more people can be trained and subsequently will be able to bring Auriculotherapy to many people so they can improve their lives. Healthy people are able to work, be productive citizens and be better parents. Healthy people use fewer community resources and are less likely to be incarcerated. In general healthy people contribute to society and are less of a burden to tax payers. Please support this Bill so more people can access Auriculotherapy so we can be a healthier society.

Thank you for your consideration.

Respectfully submitted,
Irene H. Ryan

Irene H. Ryan, LICSW
MA LICSW: 1018742;
NPI: #1679038145

Dear Honorable Members of the Health and Human Services Committee,

I am a Recovery Coach in Manchester, NH. I could not properly manage my stress and when I started receiving ear acupuncture everything started becoming more manageable and I was able to respond appropriately. That's why I applied for the State of NH to pay for my ear acupuncture training. It's a holistic approach to a medical problem. Normally I would have been treated with Zanax, an addictive, anti-anxiety drug. I am all for natural methods to help combat the opiate crisis and give choices besides narcotic replacement.

Being someone who would personally benefit from the nicotine point, and the appetite point to lose weight, I'd really enjoy being able to provide that for people in recovery. Obesity is a major problem and we need all the help we can get. The anxiety points can also help for relief. My sister got through her early recovery with ear acupuncture to calm down withdrawals and also depression. This cause is particularly near and dear to my heart!

There is much more work to be done, please allow us to help. I think it will help my future practice to use more than the 5 points we currently can use.

Thank you,

Amy Robidoux

603 271-2104

Voting Sheets

Senate Health and Human Services Committee

EXECUTIVE SESSION RECORD

2021-2022 Session

Bill # SB 290 -FN

Hearing date: 1/19/22

Executive Session date: 1/19/22

Motion of: OPP Vote: 5-0

Committee Member	Present	Made by	Second	Yes	No
Sen. Bradley, Chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sen. Gray, Vice Chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sen. Avard	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sen. Sherman	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sen. Whitley	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Motion of: Consent Vote: 5-0

Committee Member	Present	Made by	Second	Yes	No
Sen. Bradley, Chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sen. Gray, Vice Chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sen. Avard	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sen. Sherman	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sen. Whitley	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Motion of: _____ Vote: _____

Committee Member	Present	Made by	Second	Yes	No
Sen. Bradley, Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Gray, Vice Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Avard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Sherman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sen. Whitley	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reported out by: Sen. Bradley

Notes: _____

Committee Report

FOR THE CONSENT CALENDAR

HEALTH AND HUMAN SERVICES

SB 290-FN, relative to the practice of auriculotherapy.

Ought to Pass, Vote 5-0.

Senator Jeb Bradley for the committee.

SB 290-FN permits, with certain limitations, the practice of auriculotherapy, or the practice of inserting needles into the external human ear. The Committee heard extensive testimony that this is a safe, low-cost treatment for a variety of conditions and ailments, including anxiety, mental health problems, and substance use disorder, that brings serious relief to people in pain and discomfort. SB 290-FN does retain some limitations to ensure the safety of the patients.

SB290-FN

Bill Details

Title: relative to the practice of auriculotherapy.

Sponsors: (Prime) Reagan (R), Donna Soucy (D), Avard (R), French (R), Cavanaugh (D), Carson (R), McGuire (R), Spillane (R)

LSR Number: **22-2877**

General Status: **HOUSE**

House:

Committee: Health, Human Services and Elderly Affairs

Due Out: 4/28/2022

Status: INTERIM STUDY

Senate:

Committee: Health and Human Services

Floor Date: 2/3/2022

Status: PASSED/ADOPTED

Bill Docket

Body	Description
S	To Be Introduced 01/05/2022 and Referred to Health and Human Services: <u>SJ 1</u>
S	Hearing: 01/19/2022, Room 101, LOB, 09:15 am: <u>SC 50</u>
S	Committee Report: Ought to Pass, 02/03/2022: Vote 5-0: CC: <u>SC 5</u>
S	Ought to Pass: MA, VV; OT3rdg; 02/03/2022: <u>SJ 2</u>
H	Introduced 03/17/2022 and referred to Health, Human Services and Elderly Affairs
H	Public Hearing: 04/12/2022 03:30 pm LOB 205-207
H	Executive Session: 04/12/2022 03:30 pm LOB 205-207
H	Committee Report: Refer for Interim Study (Vote 20-0: CC)
H	Refer for Interim Study: MA VV 05/04/2022 <u>HJ 11</u>
H	Interim Study Work Session: 06/06/2022 09:30 am LOB 201-203

Other Referrals

Senate Inventory Checklist for Archives

Bill Number: SB 290-FN

Senate Committee: HHS

Please include all documents in the order listed below and indicate the documents which have been included with an "X" beside

Final docket found on Bill Status

Bill Hearing Documents: (Legislative Aides)

- Bill version as it came to the committee
- All Calendar Notices
- Hearing Sign-up sheet(s)
- Prepared testimony, presentations, & other submissions handed in at the public hearing
- Hearing Report
- Revised/Amended Fiscal Notes provided by the Senate Clerk's Office

Committee Action Documents: (Legislative Aides)

All amendments considered in committee (including those not adopted):

___ - amendment # _____ ___ - amendment # _____
 ___ - amendment # _____ ___ - amendment # _____

- Executive Session Sheet
- Committee Report

Floor Action Documents: (Clerk's Office)

All floor amendments considered by the body during session (only if they are offered to the senate):

___ - amendment # _____ ___ - amendment # _____
 ___ - amendment # _____ ___ - amendment # _____

Post Floor Action: (if applicable) (Clerk's Office)

- ___ Committee of Conference Report (if signed off by all members. Include any new language proposed by the committee of conference):
- ___ Enrolled Bill Amendment(s)
- ___ Governor's Veto Message

All available versions of the bill: (Clerk's Office)

___ as amended by the senate ___ as amended by the house
 ___ final version

Completed Committee Report File Delivered to the Senate Clerk's Office By:

Cameron M. Lafine
Committee Aide

6-23-24
Date

Senate Clerk's Office AR