Formulary Subcommittee Report to the Naturopathic Medicine Committee

There are three main points in the following update:

1) MD supervision should be eliminated;

2) The Formulary for licensed Naturopathic Doctors in California should be defined by an exclusionary list rather than an inclusionary list;

3) The Formulary should be "included and maintained in the California Code of Regulations, rather than in the statute."

The Naturopathic Formulary Sub-committee has unanimously agreed to support elimination of MD supervision. Since the original report we have had almost another 7 years of experience with the public receiving Naturopathic medical care in the state of California. The current scope does not put any restrictions on medications prescribed other than those listed in statute (exclusion of schedule 1 & 2) or those agreed upon between the MD/ND in their supervision agreement. We have seen in the last years an excellent safety record with no reports of patient harm or disciplinary action.

Elimination of the MD supervision would remove barriers to access to care for patients of NDs unable to secure a supervising MD. The previous formulary report discussed NDs who are having difficulty finding an MD supervisor and MDs experiencing difficulty in securing malpractice coverage to do the supervision. They concluded the supervision provision is untenable with which we agree.

The Naturopathic Formulary Sub-committee has unanimously agreed to support institution of an exclusionary formulary. This recommendation does diverge from the recommendation of an inclusionary formulary made by the Naturopathic Formulary committee in their 2007 report for several important reasons.

As previously discussed, California naturopathic doctors currently have an excellent safety record with a formulary scope that is only limited by exclusion of schedule 1 & 2 in statute and the individually agreed upon formulary between each MD/ND in their supervision agreement. This broad formulary with excellent safety supports the recommendation of an exclusionary formulary.

An exclusionary formulary is simpler for patients, pharmacists NDs and other heath professionals. Furthermore this removes the burden from the pharmacist



Formulary subcommittee report to the Naturopathic committee | Rev. 1/27/2014

to know the specific drugs on the ND formulary and places that burden on the ND themselves and the regulating naturopathic committee.

The original formulary committee's inclusionary formulary is outdated and does not represent current ND training or practice. NDs are trained as primary care doctors. For a ND to operate as a primary care doctor they need to be able to assist their patients with basic medical needs. An example of a basic medical need would be the initiation, change of medication or discontinuation of antihypertensives. Anti-hypertensives were not included on the list of medications by the previous report. This omission would limit the ability of an ND to operate as a primary doctor and provide that basic medical need of their patient.

It has been brought to our attention that several medications were inadvertently omitted from the original report. An exclusionary formulary would prevent these inadvertent omissions that would restrict an ND operating as a primary care doctor.

The Naturopathic Formulary Sub-Committee concurs with the previous report which recommends the "formulary be included and maintained in the California Code of Regulations, rather than in the stature." This is appropriate in a changing field of medicine where new and safer medications become available replacing older outdated pharmaceuticals. A naturopathic formulary committee that meets on an annual basis to review and update the formulary through regulation will keep it current rather then a more time consuming and costly statutory change. This will be in the best interest of public safety as the naturopathic formulary will stay current enabling naturopathic doctors to give their patients the best treatment choices.

