

Rather than submit my testimony as I wrote it, I am responding to some of the many incorrect and misleading statements made in testimony to the Committee on Friday, March 1, 2018. There far more to this story than what I write here. The questions that remains are who is informing OPR on its unusual and ahistorical practices and interpretations, why OPR concluded that an extremely simple and safe technique must be eliminated in a time of crisis when this technique could be so useful, and why cannot we amend the current law to make a good law, this year. I question any resistance of OPR to make amendments that will create a usable and clearly interpreted law. There is no reason why this cannot be accomplished right now and I ask how can OPR justify withholding services from needy Vermonters as "Protecting the Public" when it's actions eliminate needed services?

I would like to suggest we work together and strike the parts of the current law that are creating difficulty, and based on facts. For addiction treatment, it should be used in a therapeutic environment, it does not require government funded programs, as the law states, but it particularly inappropriate to require a "medically supervised treatment program" with "wrap around services", as Mr Gilman testified. The law does not state those requirements, Medical supervision is not even remotely appropriate for his technique, this is a drug free approach, no MDs need be involved. The word "acudetox" is a misnomer. This is a tool used for prevention and relapse prevention. Neither have anything to do with medically supervised treatment for addiction.

I can see that you are receiving letters from the public, the VT Acupuncture Association, individual practitioners, and a 2nd letter from the National Acupuncture Detoxification Association's Executive Director. Please do not move quickly on this, as more want to submit testimony. We have had almost no time to respond. The VT Acupuncture Association was not consulted or warned of these changes, and is completely against this being struck, now that the President of the Board has resigned yesterday. No supervisors were consulted, and no ADTs were consulted. Who is protecting the public from OPR's extreme restrictions on practice? Why is OPR withholding medicine from people who need it in the middle of an opiate crisis- overdoses almost doubled last year? Why cannot Jessilyn Dolan, an addiction nurse working with families for decades do this in her private practice? Nurses do far more dangerous techniques daily. There is an overblown sense of danger here that is **completely** unrealistic.

With no evidence or complaints, no names of who filed complaints, OPR is trying to eliminate services. When asked what the problems were, Mr Gilman offered "a couple people hung a shingle", and there are 2 websites of ADTs that claim uses beyond addiction, including symptoms of PTSD. Mr Gilman said he would send me the links to those web page but he has not. He alleged no safety issues, said he knew of none. He claimed it would take \$10,000 to regulate them effectively. How is that possible? To limit how many people can be supervised with only 3 persons willing to supervise, OPR is acting as a gatekeeper, capping how many can be trained and then testifies that due to the small scale, it can't pay for itself? I urge you to consider this statement critically.

Mr Gilman testified that the training is 40 hour as, and then later that the training is 4 days. This shows a lack basic knowledge about the practice he is attempting to dismantle, and that there has been almost no communication with me, the trainer. Mr Gilman denied there was a 40 mile limit imposed on how far away a supervisor could be, yet in his letter of rejection to an ADT he declined to allow me to supervise him due to this and recommended he find someone within 40 miles. Mr Gilman seemed to not remember he himself set that limit.

Where is OPR getting their information and guidance from? Jennifer Etheridge, who testified on behalf of the Acupuncture Association, complained about the very practitioner Mr Gilman expressed to me "concern" about, Rosalene Bussier, and whom he also denied licensing. Neither Mr Gilman nor Ms Etheridge identified if Ms Etheridge was one of the acupuncturists who had complained. I addressed all Ms Etheridge's questions about ADTs but she was never satisfied and did not want services to occur at Another Way by ADTS, she thought it did not qualify under the law, which explicitly states "or a program working in collaboration with" such a program. Mr Gilman had approved Evelyn Zoeklein to

provide services at Another Way, but once Ms Etheridge complained to me, Mr Gilman changed his approval of Another Way and denied Rosalene Bussier a license, saying Another Way does not qualify under the law, even though we sent him the grant language that dictates they collaborate with The Turning Point Center in Barre. Mr Gilman's "concern" involved a flyer MS Bussier had produced and advertised, for the Tea House Exchange, a program she started with volunteers that eventually became employment for her at Another Way, managing the alternative health offerings. The flyer said acupuncture and other healing modalities. Evelyn Zoeklien and I were providing acupuncture for that program. I worked side by side with MS Bussier, and I note her unusual gifts for interacting with Psychiatric Survivors that attend Another Way. You cannot buy or train those skills into a human, no matter how professional. People who are comfortable and effective with this population are rare.

Mr Gilman brought 2 issues to my attention as the trainer, and I responded with appropriate changes to both. In a letter to the VTAA's lobbyist Mr Gilman stated as a reason this must die, "A tiny handful of people have set themselves up as gatekeepers". OPR, by limiting who and how many can be supervised, is the gatekeeper, and I am very interested in who these tiny handful of people are and what he is implying? What is OPR's responsibility to addressing these concerns and statements that are most surprising to us acupuncturists.

Likewise,, Mr Gilman's notions of supervision are quite distorted and uniformed. He seems to have a perception that their role is important to the practice of ADTs. It is not, it is a concession to acupuncturists, but ear piercers and tattoo artist are not supervised and they are doing a far more dangerous technique. Family members are being trained in administering Narcan, a hypodermic needle plunged into a dying person by a layperson. The law states that a supervisor must be available by electronic means during business hour and site visits as needed. Mr Gilman appears to think the supervisor need be nearby. There is not and he cannot provide justification for this. The role of the supervisor is minimal. If an emergency occurs, they are instructed to call 911.

Mr Gilman testified that since he has been at OPR, the Acupuncture Advisors have wanted to eliminate this program. Mr Gilman offered no evidence of improper practice, yet when given a letter of complaint regarding Shane Burras, one of the 2 current Acupuncture Advisors he consults with, Mr Gilman described public verbally abusive behavior by this advisor as 'boorish', and stated that I was the only person that seemed to have a problem with Mr Burras. Opr apparently made no investigation or took any action. I can assure you, I am not the only person that has a problem with MR Burras. When he was Vice President of the VT Acupuncture Association, we passed bylaws to be able to have a board member thrown off the board without cause, and that vote was unanimous, with the express intent to have the authority to remove him from the board. When VTAA members posted they would not post to our list serve due to the hostility and aggression in Mr Burras frequent responses, we developed a code of conduct for our list serve. Mr Burras has already been sanctioned for offensive posts. This sanctioning was for his communications to me. Mr Burras has a distinct problem with me, with ear acupuncture, and many people are acutely aware of this fact. Many years ago Mr Burras stated publicly that I was "eroding standards" of acupuncture by teaching ear acupuncture and then I had ruined decades of the acupuncture professions' hard work to gain credibility as clinicians. He showed up at a VTAA board meeting last year to insist that I, as an elected board member and being literally a national expert on this subject, could not even talk about ear acupuncture issues when the topic came up in board meetings. Last time I checked, Free Speech is valued in our country, and expert input used to be highly valued.

I attach the letter of complaint I sent in on March 6, 2017, along with other concerns and difficulties surrounding Mr Gilman's interpretation of the law and rules, which is very different from previous lawyers at OPR. Since my trainee had related to me that Mr Gilman tried to get her to say I exploited her by taking her money when he refused to license her, and Mr Gilman had expressed a distinct negative bias towards me I hired a lawyer, as I wanted a witness and professional consultation for my dealings with OPR. Unfortunately, I found OPR's response to my letter very disturbing, shaking my faith in this institution abiding by its mission of Protecting the Public, there seemed to be a very different agenda at hand.

You can see from the letter of complaint, an advisor for the state is reported have identified himself as an advisor for the state while screaming abusively at Beau Clark, an ADT in a public place, followed by calling a woman at the gym names that start with a c and a b..... one might expect an investigation by OPR. Beau Clark was waiting for his ADT license, after having been declined by OPR due to Mr Gilman's stance that I was unsuitable as an advisor. Since Mr Burras is an advisor with input on the

approval of Mr Clark's license, we decided it was better for me to send in his report, via a lawyer. He got licensed finally (6 months? later) with the mediation of his disability advocacy legal team thru a very unpleasant process with OPR. The Advocates were quite puzzled by the events. Beau Clark himself filed his formal complaint on Shane Burras on Sept 11, 2017. In early January Mr Clark contacted OPR to see what the status of his complaint was, having feared physical assault by this advisor, Beau was concerned about OPR's due diligence and lack of response. In January the first response he got was that OPR had lost his certified letter. A week later, he was informed they had taken one month to open the case in October, and advised him to check back in early January. When Mr Clark reported this incident to me, I immediately called the gym where it happened and the manager confirmed what Mr Clark reported to me, which was also confirmed by a witness to the event at the time. The Gym informed Mr Clark that if Shane Burras was ever to hassle him at the gym again, he would be escorted out by the police. What I confirmed in 5minutes has taken more than 10 months to investigate.

It is a clear attempt to restrict practice and withhold medicine from people who need it. I am asking that they just remove the parts of the current law and make it usable thru HB 684, the current bill. Any attempt to eliminate it cannot be construed as "protecting the public". OPR is the regulatory agency, they can make it regulatable. The fact that they don't even want to try shows the true agenda is to eliminate the program, as he testified the acupuncturists that serve as advisors for the state have asked for. The profession has not, and supports a further expansion of this practice. Our 11-member Integrative Committee voted unanimously to support all forms of acupuncture practiced by all professions, if it is safe.

Mr Gilman saw no safety issue with Dry Needling performed by physical therapists after taking a 16-hour course. This is inserting acupuncture needles into the body. You can kill a person with body insertion of acupuncture needles. VTAA Vice President Josh Singer says he informed OPR of the Canadian case where a PT had 160 hours of training in Dry Needling and inserted a 2-inch needle under the collarbone of a Canadian Olympic Athlete, punctured her lung, almost killed her and she remains permanently disabled and disfigured. Mr Gilman did not see a safety issue with the practice of dry needling, but wants to eliminate this simple and safe practice. How does this make sense or consistent predictable policy?

Mr Gilman has claimed many complaints by acupuncturists. We know of only 3 acupuncturists disgruntled with ADT practice. They are Shane Burras, Jennifer Etheridge, and Kerry Boyle, former advisor to OPR. Mr Gilman should reveal who his complainants are if there are so many.

We are hoping the OPR will start to take its guidance from informed professionals. ADTs have repeatedly expressed fear of OPR to me, and even when approved will not perform acudetox with the insecurity of understand OPR's policies and the fear of retribution for practicing. Meanwhile we implore you to amend this law so we can provide services in desperate times. I am also bringing to you a copy of my video Unimagined Bridges so that you can see the power and beauty of this tool. It is 17 minutes and documents St Vincent's program after 9/11 in Manhattan and programs around the world. I welcome any opportunity to educate lawmakers on this technique, and there is support in the legislature for our request of expansion of services.

Sincerely and best of luck,

Laura Cooley

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