Testimony in Support of House Bill 1472
Rep. Sebastian Ertelt
ND District 26

Chairman Weisz and Members of the House Human Services Committee,

For the record, I am Representative Sebastian Ertelt representing North Dakota District 26, which includes all of Sargent County, the eastern half of Dickey County, the southern half of Ransom County, and the western half of Richland County. This is a heavily rural district with limited access to health care. The two largest cities in the district are Lisbon with a population of approximately 2,154, and Oakes with a population of approximately 1,856. Both of these cities have hospitals that provide limited services.

I am before you today to present House Bill 1472 and ask a unanimous DO PASS recommendation to help improve the health of the citizens of our state by allowing, with restrictions and disclosures, increased access to complementary and alternative care.

You can see that the bill is focused on increasing this access while protecting the consumer with the section on prohibited acts such as medical disease diagnosis or performing surgery, as well as the disclosure section. It leaves in place all other licenses, certifications, or registrations issued by the state and does not limit seeking relief.

I have included with my testimony several charts and commentary regarding health prepared by North Dakota Compass through The Center for Social Research at North Dakota State University. These charts cover the topics of diabetes, obesity, health care coverage, and mental health. As you can see, the trend over the past 25 years is a steady increase in the rate of both diabetes and obesity in adults, more than doubling for both. The percentage of adults experiencing 14 or more mentally unhealthy days per month has only been tracked for the past 4 years, but is also showing an upward trend. This decrease in health among our residents has occurred despite an increase in percentage of residents under age 65 with health insurance over the past 12 years.

If we give an honest evaluation of the data, we will recognize that the health of the citizens of North Dakota is worsening and the mainstream medical community cannot provide the care on their own that our citizens need. The marketplace itself is proving this for us. According to Johns Hopkins, complementary and alternative medicine is used by about 38% of adults and 12% of children in the United States.

I believe that North Dakota should welcome those who wish to share their talents in caring for our citizens, especially if our citizens wish to pursue such care to complement their primary medical care or find alternative care that might offer relief for their suffering. The non-invasive, gentle care provided by such complementary or alternative care providers can be a win-win-win situation, for primary medical providers, our citizens, and the complementary and alternative care providers.