



Oregon

Tina Kotek, Governor

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Oregon Board of Naturopathic Medicine –Bi-Monthly Board Public Meeting Agenda
April 13, 2026 – opened at 12:27pm, adjourned at 2:44pm
Zoom

The Board Chair has the discretion to change the agenda.

1. Roll Call: Members Present: Board Chair Ryan Minarik, ND; Board Co-Chair Meghan Larivee, ND, Zia Robles-Hernandez, ND, Ryan Martin, ND, Shehab El-Hashemy, ND, BSc, HBSc, MBChB, MEd; Public Members: Kate Watkinson Wright, JDA, Josh Luper, DAc, LAc, BCSI Staff Mary-Beth Baptista, Executive Director. Public attending: Addison from DAS. No members of the media were present.
2. Case Resolution Update / Discipline Recommendations
 - (24-10-26) No finding of violation of statute or rule – Board Vote: Dismiss –7-0
 - (25-01-06) – OAR 850-050-0010(1)(a)(B) Inadequate Charting. Board Vote to Propose Discipline – 7-0
 - (25-03-13) No finding of violation of statute or rule – Board Vote: Dismiss –7-0
3. Continue Investigations over 120 days. No discussion: Board Vote Approved 7-0
4. Approval of February 9, 2026, Executive & Public Meeting Minutes. No discussion: Board Vote Approved 7-0
5. Draft Administrative Rules for Review:
 - MB ED Discussion regarding approach to writing the revised discipline rules: For years now, we have been waiting for the discipline statute revisions to finally be approved by the legislature, so that we can revise the discipline rules. If anyone has spent any time in the OARs looking at the discipline rules it is a hodgepodge, there are certain areas in the discipline rule Division 50 that say, what are violations that lead to discipline, certain areas that talk about what are practice areas, certain areas that talk about what discipline can be. It was all mixed up together, and we've all been kind of working with those and through those the best that we can. My goal was to take out everything extraneous that wasn't actually a cause for discipline, and anything that was in the discipline statute that should have been elsewhere, right? I went through the rules to separate out discipline sanctions, list of violations from general practice rules. I worked through and took out practice rules and moved them to general rules Division 10 of the OARs. The second thing I did is I looked at what the basis for violations are. And those were mixed in with discipline and connected to discipline in ways that did not make sense. So I took out everything that could be a grounds for discipline, in one rule in division 50, and then discipline sanctions in a separate rule in Division 50. When I went through the rules, it actually shocked me, that there are a few things that we had grounds for discipline for, for finding a violation that we did not understand or know that we had. One was that we do have the authority to request or require a drug and alcohol evaluation and treatment as a discipline sanction.

a. General Administrative Rules: Sections of discipline administrative rules were incongruously placed in the discipline section and are more appropriate in general division chapter than the discipline division chapter.

- MB ED Discussion: I was going to send you the track changes to the rules, however, it would have been strike through lines, with few words in between because so many things were moved, it would not have made any sense. I know that it will look like I completely deleted all of the discipline rules and wrote new ones, but that is not the case. I just took out so much, rewrote other things that we already had authority for, and put them in different places, that it's going to look like I completely created new grounds for discipline, and that is not the case. At all. I know I'm going to have to do some good messaging around that when I send these out for public comment.

Drafts for the following are attached:

- i. 850-010-XXXX Unlicensed Practice of Naturopathic Medicine Prohibited
- ii. 850-010-XXXX Permissible professional designations and credentials
- iii. 850-010-XXXX Licensee Duty to Self-Report.
- iv. 850-010-XXXX Advertising, marketing related to naturopathic medicine and licensee credentials
- v. 850-010-XXXX Duty to Maintain Accurate Contact and Required Information with the Board
- vi. 850-010-XXXX Public Health Laws

b. Revised Discipline Administrative Rules: The “current” discipline rules form the basis for most of the “revised” drafts rules. There are few “new” rules in the drafts that add or expand to discipline restrictions or basis for discipline under the recently adopted statutory revisions. The majority of the “revised” discipline rules are clarifications for enforceability and transparency.

- i. 850-050-0010 Grounds for Discipline
 - ii. 850-050-0120 Discipline
 - iii. 850-050-0200 Reapplication
- Board discussion re: concern regarding language in the draft rules related to “standard of care” and “deviates from standard of care” because standard of care gets defined so differently among people in the ND profession, and across the medical profession. Discussion how to craft the rules to show that it isn’t the “MD standard of care” or the “nursing standard of care” is the fact that these rules regulate the naturopathic profession and the Board regulates the naturopathic doctors enough to ease ND fears / concerns that they are going to be held to the MD standard of care, that these rules will curtail ND practice / scope of practice? ED MB agreed to put in the rule the clarifying language “naturopathic standard of care”

c. Revised Continuing Education Rule 850-040-0230(3) Activities Eligible and Criteria for Board Approval for Continuing Education for Volunteer Work

- ED MBB discussion: OANP reached out to ask if we would consider allowing pro bono clinical work as CE up to a limited amount of hours annually. E.g. if an ND volunteered for the day on a Sunday to give measles shots all day, could they apply for CE for those hours? I worked with with OANP to come up language to ensure approval criteria - non-profit organization, actually doing pro bono work, in scope of practice. Not going to your child's school and telling kids to wash their hands, what they / we came up with has clear, parameters. Since OANP requested that change to the rule, I thought, this would be a good moment to deal with the budgetary issues and my concern around the non-qualified Board member stipends being cut or reduced tremendously, because we have such a tight budget / cash flow issues. Since OANP requested a change to the volunteer rules, I thought this would be a good time to introduce a rule giving Board members the option / opportunity to get annual hours of required CE with Board service if members waive their stipends. Clearly Board members spend more than 32 hours, including the required pharmacy / cultural competency / ethics etc through review and deliberation of board investigations and public board meeting agenda items. I also wrote in the rule that Formulary Council ND members get either 5 pharm or general CE hours, the hours are less b/c because they only meet an hour and a half bi-annually. For the public members, if licensed by an agency or work for a company that accepts pro-bono hours, ED would write a letter work with the appropriate person to work through applying those hours. Or if enough licensed NDs chose the CE option, then there will be budget space to pay the public members.

6. Review Draft Rules & Public Comment for Approval:

Draft Rule: [Amend Rule 850-040-0250](#)

FILING CAPTION: Corrects rule title. Incorporates passage of Parenteral Medicine elective NPLEX prior to administering IV therapy.

- ED MBB revised the title to the rule, b/c of an error of changing the title in the last round of changes to the rule. Added the parenteral exam for clarity – not a new requirement. No substantive changes, restores original title / intent of the rule.

Board Vote 7-0 to forward / enter all afore listed draft rules, with agreed upon changes, to the Secretary of State for public comment

7. Status Update: Draft Rule –[850-030-0005](#)

RULE TITLE: Criminal Conviction Determination Process for Licensure

RULE SUMMARY: The rule implements SB 1552 (2024) section 44 allowing a person to petition a licensing board for a determination as to whether a criminal conviction would prevent the person from receiving a license. Section 44 and the rule become operative on July 1, 2025.

FILING CAPTION: Creates criminal conviction determination process to implement SB 1552 (2024)

- MBB working with DAS CFO to determine next steps.

8. Discussion regarding proposed legislative concepts

ED MBB discussion re: three legislative concepts introduced.

(1) Remove performing an abortion as a grounds for discipline, so NDs can join all their other health medical professionals in being able to perform abortions.

-- MB ED Discussion: Since I started this job, from the first legislative session I could introduce something, I introduced it and I / we keep introducing it every year, and I think it's essential healthcare that's sorely missing in the state, and I feel like there's absolutely no reason in the world why this is not an allowed practice for naturopaths. It's not an expansion of your scope. This is an unreasonable limitation on your scope. You don't even need to be a physician to perform abortions anymore. So, the idea that this is just a relic from 1958, before it was illegal the first time, and so there's absolutely no reason to keep this discipline provision in your rules. I continue to lobby every single time I can for you all to be able to have that in your scope of practice, because there's absolutely no reason that you shouldn't. But we know the minute you start discussing abortion, it's a... it's a... it's a political firestorm, and so it's just whether or not we... whether or not it's advisable as one... as one board, one small board, be able to do this, or we wait till there's more of an omnibus bill that addresses reproductive rights and we become part of it.

(2) Resubmitted the alcohol / drug / addiction evaluation and treatment LC from the 25-27 Session.

(3) Changing the Formulary Council membership criteria. The formulary council only meets twice a year, members serve 2-year terms, so we're in a constant cycle of trying to find. Often most of the FC work is finding / approving new members. Introduced a legislative concept, to change membership terms to 4-years instead of the current 2-year term. Per current statute, the Council is made up of two naturopathic doctors, one that's a member on the OBNM board, two pharmacists (appointed by Bd of Pharmacy), one medical doctor (appointed by OMB), two members who hold an advanced medical degree in either pharmacology or medicine. This is not clear enough – we consistently get applications from pharmacists, or NDs – which technically qualify under the description, but is not the spirit of, legislative intent for the make-up of the Board. MBB asked the Formulary Council at the March meeting regarding amending the rule to get members that will help the evolving nature / purpose of the Formulary Council. The suggestion from the FC was to change the requirements for those two positions to **Advanced practice practitioners (APPs)** – defined as highly trained, licensed medical professionals—such as nurse practitioners (NPs), physician assistants (PAs), and certified registered nurse anesthetists (CRNAs)—who diagnose illnesses, prescribe medications, and manage treatment plans, often functioning with a high degree of clinical independence.

9. Discussion re: Prescribing Restrictions: Board discussion this is a good topic for the Formulary Council review, and maybe do actual research, not just chat GPT research at their Sept meeting – for the Board to discuss at the October meeting.
 - a. [OMB's Patient-Practitioner Philosophy](#) – Josh Luper, DAc, LAc, BCSI
 - b. Prescribing to Family Members
10. Discussion re: Chaperone Policy – Discussion moved to June / October meeting.
11. Directors Report:
 - a. OBNM Fund Report
MB ED Discussion. All meetings until further notice need to be via Zoom, no more, in-person because we are in a serious, serious, serious cash flow problem. Because we didn't raise our fees in the legislative session, the regular legislative session in 25-27, we missed... the bulk of our licensure income because everyone renews from October to January. And so the new licensure fees imposed through the special session that raised fees didn't come into effect until January 1. So, we lost all that increased revenue because we didn't do it in the regular session.

By the next bulk of licensees in October, November, December, we will see that increase in revenue, things will balance out, and things will... the fees that we raise will balance out for the rest of this biennium and next biennium. But right now, it's a cash flow problem/ I know I'm frustrated, and you're all frustrated, why didn't we just raise fees in the 25-27 session? Because we didn't anticipate how significant costs were going to rise, the huge increase in costs for administrative services, the huge increase in cost for the licensure database. All of those things, we anticipated an increase with inflation. We did not anticipate an increase the 30, 40, or 50% that ended up happening. That's why we weren't advised we need to raise fees in the previous session. The numbers projected made us think we were going to be able to get through to the 2027-29 biennium. But the costs were well above what we projected, so we have to tighten our belts, and anything and everything that is not required that we spend money on... we are literally to the point where the only thing we're spending money on are the bills that we must pay. So that's why we're where we are, having to do all Zoom, me having to really reduce stipends. It's not that the fee increases that we just implemented aren't going to work, they are, we just are a cycle behind, and it's really, really, really tight.

b. Change June Meeting Date: Options – Week of June 15, 16, 17 or 18.

Board Discussion: June meeting moved to Monday, June 15. MB will send a calendar invite as a reminder.

12. Public Comment https://oregon.public.law/rules/oar_918-040-0040.

The Board is not required, nor do the Board members anticipate engaging in discussion with participants providing comments.