

Acupuncture Education and Examination Revisions Proposal

Objective: To revise acupuncture education and testing standards so as to benefit current and future (1) acupuncture students, (2) acupuncture schools, (3) acupuncturists, and (4) the general public.

Background: POCA (the People's Organization of Community Acupuncture) has been in the process of completing the requirements necessary for the accreditation of POCA Tech, an acupuncture school created in 2014. The process included an examination of existing standards with respect to acupuncture academic curricula, educational requirements, testing standards and competencies, current practices among practicing acupuncture professionals, as well as a Job Task Analysis conducted in July 2017. Our synthesis of this information led us to offer this proposal as a way to revise these interrelated components in a way that would provide a sustainable future for acupuncture students, acupuncture schools, acupuncturists as a profession, and the general public.

Overview of Observed Problems and Obstacles in Current System:

- High student-debt loads are incurred in obtaining acupuncture education and are continuing to rise
- Gainful employment standards demonstrating discrepancy between cost of acupuncture education versus amounts earned as acupuncturists
- Prevalence of pain, addiction, and PTSD in current society, with limited number of safe and accessible modalities to treat
- Limited number of acupuncture schools, with trend of schools closing down and consolidating
- Insufficient number of practicing acupuncturists to meet demand
- Acupuncture clinics unable to fill vacancies for acupuncturists nationwide
- Acupuncturists unable to earn what they need to pay back large student loan debts
- Graduates unprepared for real-world practice

Overview of Proposed Path Forward

If we change educational requirements and revise the licensing test to focus on safety and ethics,

- acupuncture schools can reduce bloated curricula, such that
- students will incur lower debt in order to obtain master's degrees and licensure, and thus
- with barriers to entry lowered, more students will attend acupuncture school, such that
- acupuncture schools can train more future acupuncturists, and
- these additional acupuncturists can help to address public health needs and ensure the continuation of the practice of acupuncture in the United States

Accordingly, we recommend the following revisions to the current system:

A. Reduce number of educational hours needed for Master's Degree/Master's level certificate

- Most master's programs are approximately 1200 hours (one to two years); an acupuncture master's degree is a minimum of 1900 hours (three to four years). This increase in hours requires additional student loan debt and time out of the workforce (meaning even more student loan debt for living expenses), without any demonstrated benefit for acupuncturists or the public.

B. Revise the NCCAOM licensing examination to be one that is based on safety and ethics

- Practicing acupuncturists employ numerous types of acupuncture. No one type of acupuncture has been proven to be more clinically effective than any other. Without such evidence, it is arbitrary to require all acupuncture schools to teach TCM (Traditional Chinese Medicine) and to require all acupuncture students to learn TCM for the licensing examination. Further, there is no evidence that TCM acupuncture is safer than any other approach.
- ACAOM's new standards for Master's-level competencies no longer require acupuncture schools to teach TCM, and acupuncture credentialing standards should keep pace with the current educational standards.
- Requiring arbitrary and extensive testing serves as another barrier, alongside the high cost of education, to entry into the profession.
- The mission of NCCAOM is to focus on public safety, not theory. The licensing test should reflect NCCAOM's mission and should ensure that graduates know how to safely and ethically treat their patients.

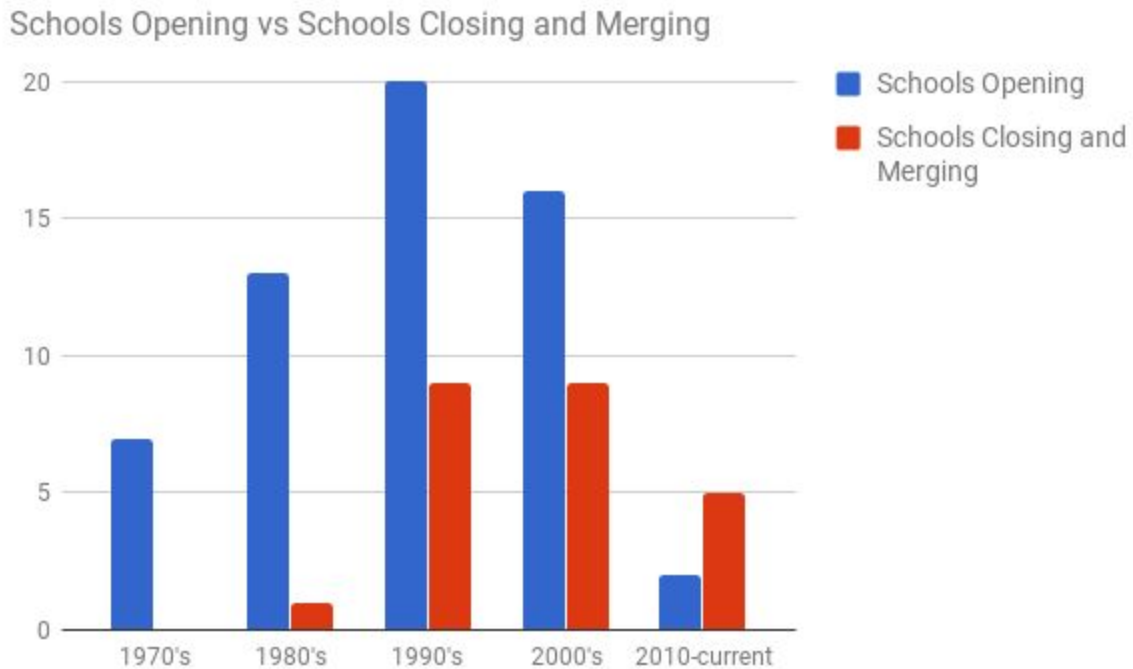
Discussion

I. Reduce total number of educational hours needed for Master's Degree

Based on our analysis, professional competencies can be reached with 1350 hours of instruction and clinical time. Reducing the number of hours will allow schools to award master's degrees in a shorter period of time. This will make the education more affordable, and therefore will attract more students who wish to become acupuncturists. Students wishing to pursue more education can do so through continuing education and with the doctoral programs that are being offered around the country.

There is currently a downward trend in the number of acupuncture schools in the United States. Only two new acupuncture schools have opened since the recession in 2008 (one of which is POCA Tech). Most acupuncture schools opened in 1990s. The current trend is for schools to

close and consolidate:



Data on schools compiled from <http://acaom.org/directory/>

At the same time, tuition at these schools has far outpaced inflation, and in many cases, has led to six-figure debt loads.

In order to continue the practice of acupuncture in the United States, the trend needs to reverse, and we need more schools to open around the country. With current awareness of student loan debt and gainful employment considerations, prospective students will be attracted to schools that can prepare them as acupuncturists with cost and debt considerations taken into account. If the number of hours required for a master's degree is lowered, more potential students would be interested in and able to enter the profession, leading to the creation of more schools and more jobs.

According to the current ACAOM Accreditation Manual, "the minimum length of the professional acupuncture curriculum must be at least three academic years (a minimum of 105 semester credits or 1905 hours). This must be composed of at least:

- 47 semester credits (705 hours) in Oriental medical theory, diagnosis and treatment techniques in acupuncture and related studies
- 22 semester credits (660 hours) in clinical training
- 30 semester credits (450 hours) in biomedical clinical sciences

- 6 semester credits (90 hours) in counseling, communication, ethics and practice management¹

Most master's degree programs require 1200 hours, or approximately two years.² By requiring over 1900 hours, an acupuncture master's degree is much more time- and tuition-intensive than comparable programs.

We propose the following revised standards for the professional acupuncture curriculum: two academic years (a minimum of 70 semester credits or 1350 hours). This would be composed of:

- 20 semester credits (300 hours) in acupuncture theory, diagnosis and treatment techniques in acupuncture and related studies
- 20 semester credits (600 hours) in acupuncture clinical training (75 hours observation, 525 clinical internship)
- 15 semester credits (225 hours) in biomedical clinical sciences
- 15 semester credits (225 hours) in communication, ethics, regulatory compliance and practice management

This reformed curriculum would be more than sufficient to prepare graduates with the education they need to safely and effectively treat the public as practicing acupuncturists. Importantly, the reduction of educational hours necessary for a Master's degree would not have any impact on the safety or efficacy of the medicine as taught to students. In fact, there is no data to show that acupuncturists who received fewer than 1500 hours of training (or even fewer than 500 hours) during the 1970s, 1980s, and early 1990s have a worse safety record than acupuncturists who received 1900 hours or more of training. Rather, it appears that the trend for increasing educational hours occurred because of the concurrent increase of available Title IV federal student loan funding. In other words, the required educational hours have expanded to fill the shape of their container, in the form of higher available student loans. As a result, the current high number of educational hours cannot be justified on the basis of either safety or efficacy,

¹ ACAOM Accreditation Manual Version 2/27/16, Criterion 8.1(a) Program Length, page 34.

² “[M]aster’s degree: An award that requires the successful completion of a program of study of generally 1 or 2 full-time-equivalent academic years of work beyond the bachelor’s degree. Some of these degrees, such as those in Theology (M.Div., M.H.L./Rav) that were formerly classified as “first-professional,” may require more than 2 full-time-equivalent academic years of work.” [Postsecondary Institutions and Cost of Attendance in 2014- 15: Degrees and Other Awards Conferred, 2013-14; and 12-Month Enrollment, 2013-14, at B-2; see also Structure of the U.S. Education System: Master’s Degrees, International Affairs Office, U.S. Department of Education, Feb. 2008](#) (“Master’s degrees generally take two years to complete, but the time period may be shorter or longer depending on how the degree program is structured (12-month versus 9-month academic years, for example), whether the student is enrolled full-time or part-time, the degree requirements and the prior preparation of the student.”).

and thus it would be the acupuncture profession's (and the public's) best interests to lower these requirements.

II. Revise NCCAOM licensing examination to be based on safety and ethics

Based on our analysis, we propose that the NCCAOM licensing examination be revised so that it is based on testing practice safety and ethics.

First, safety and ethics are the two components that are universal to all acupuncturists in all types of settings, and are important for both patients and the profession as a whole. It makes sense that the universal licensing test should be based on what all acupuncturists will encounter, no matter what acupuncture theor(ies) they follow and no matter what their practice setting will be. Importantly, ethics is the area in which most acupuncturists receive complaints and/or other negative safety issues with patients and licensing boards; this area should be a substantial component of the licensing examination.

Second, because ACAOM's new standards for Master's-level competencies no longer require acupuncture schools to teach TCM, the licensing examination should be revised to reflect the current educational standards; otherwise, schools will still have to teach TCM just so that its students will be able to pass the NCCAOM examination.

Finally, it is the mission of NCCAOM is to focus on public safety, not theory.³ It follows that the NCCAOM exam should reflect this mission and that it be based on the public safety, both in terms of best safety practices as well as ethics. The licensing test should reflect NCCAOM's mission and should ensure that graduates know how to safely and ethically treat their patients. To do so would benefit both acupuncturists and the public.

III. Interaction of ACAOM, NCCAOM, and State Licensing Laws

An immediate objection to this proposed reduction in educational hours will be that it does not align with the acupuncture licensing laws in many states. According to our research, graduates of an ACAOM-approved program with 1350 hours, who passed the NCCAOM acupuncture credentialing exams, would qualify to apply for acupuncture licensure in 24 states. Graduates who accumulated additional clinical hours would qualify to apply for acupuncture licensure in another two states.⁴

³ "To assure the safety and well-being of the public and to advance the professional practice of acupuncture and Oriental medicine by establishing and promoting national evidence-based standards of competence and credentialing." <http://www.nccaom.org/about-us/>.

⁴ There are nine states that have such different requirements that the changes proposed here would not make any difference with regard to licensure.

Although this proposed reduction in educational hours would not qualify graduates to apply for licensure in 15 states due to their requirements for additional (1) classroom or (2) classroom and clinical hours, we respectfully submit that in addressing the problems of high student debt loads, failing gainful employment metrics, and an insufficient number of acupuncturists, we have to start somewhere and national standards as enacted by ACAOM and NCCAOM are the place to start, as opposed to state acupuncture laws, for several reasons.

First, the structure of acupuncture as a profession in the U.S. has been shaped by the interests of schools and credentialing bodies; there has been virtually no input into the system that represents the organized interests of patients and of acupuncturist employers. There is increasing discussion at the federal and state level about the degree to which occupational licensing laws serve to protect the economic interests of relatively small groups rather than actually protecting the public as a whole and serving the public good. That discussion is beyond the scope of this proposal, but it informs our concerns. In the acupuncture profession, only ACAOM has the role of protecting students with respect to debt and gainful employment; only NCCAOM has the role of protecting the public. State licensing bodies in general follow their lead.

Second, for a number of states that now require a higher number of education hours, these regulatory increases have generally followed the ACAOM's trend of increasing its hours, and, as noted above, such increases were never based on data that earlier standards that mandated a lower number of hours were in any way insufficient for educational and safety purposes. Rather, these increases have apparently tracked both California's increase in its internal educational requirements as well as the increased availability of federal student loans.⁵ There is no reason to think that states will continue to require a higher number of hours than ACAOM if ACAOM were to now reduce its requirements; to the contrary, these states have showed that they likely will continue to follow ACAOM's lead in setting these requirements.⁶

Finally, the 24 states in which our proposal would qualify graduates to apply for acupuncture licensure have a combined population of over 100 million people. According to data collected by the National Institutes of Health, about 17.6% of the American population suffers from severe pain; in these 24 states, that's about 17,600,000 people in need for whom access to acupuncture could potentially be increased. According to [Acupuncture's Role in Solving the Opioid Epidemic: Evidence, Cost-Effectiveness, and Care Availability for Acupuncture as a](#)

⁵ For example, Virginia's requirements demonstrate the increasing "credential creep" that has occurred over the past few decades, as there are different educational requirements for those graduating prior to 1990 (1000 hours), from 1990 to 1999 (90 semester hours), from 1999 to 2011 (1725 hours), and from 2011 to the present (1905 hours). See <https://law.lis.virginia.gov/admincode/title18/agency85/chapter110/section50/>

⁶ It should be noted that some of these states require education and passage of the herbal examination, which is reflected in the higher number of required hours.

Primary, Non-Pharmacologic Method for Pain Relief and Management, a white paper published in 2017 by the American Society of Acupuncturists, acupuncture is an effective, safe, and cost-effective treatment for numerous types of acute and chronic pain. Acupuncture should be recommended as a first line treatment for pain before opiates are prescribed, and may reduce opioid use. Among most non-pharmacological managements for pain relief now available, acupuncture therapy is the most effective and specific for opioid abuse and overuse. Given the ever-rising social and financial costs of the opioid epidemic, we believe it is critical not to lose sight of the individual patients for whom access to acupuncture could be life-saving.

For all of these reasons, ACAOM's Master's-level educational requirements should be reduced so as to have an impact now on the 24 states in which these reforms could have a meaningful impact, and submit that those 15 states that will become out of compliance will follow suit and make revisions to follow ACAOM's lead.

IV. Relationship with other AOM Degrees

It is important to clarify that these proposed changes to Master's-level education are designed to produce capable and prepared independent health care practitioners, not "technicians" practicing under the supervision of another category of AOM practitioner. In the past, acupuncturists in community settings have been derided as providing a lower level of care because they were perceived as not utilizing "full" TCM methods of diagnosis and treatment. First, this is inaccurate; POCA Tech's Job Task Analysis indicates that acupuncturists across practice styles use many different strategies for acupuncture diagnosis and treatment. Second, any serious study of the history of acupuncture reveals that acupuncture is inherently heterogeneous. There is simply no one right way to diagnose or treat, and there never has been. Acupuncturists who utilize methods of diagnosis and treatment other than TCM are not "technicians" who should be working under TCM doctors, they are acupuncturists making use of the vast diversity of acupuncture itself. Thus, the changes we recommend with respect to both the educational requirements and the testing requirements for Master's-level acupuncturists is in no way meant to suggest that these graduates would not be considered anything other or less than other acupuncturists. The heterogeneity of acupuncture can lead to factionalism among acupuncturists which can in turn be confusing to both laypeople and officials tasked with regulation. However, since the new ACAOM competencies for both master's level and doctoral education focus on foundational knowledge, critical thinking and professional judgement in a way that supports professional diversity rather than factionalism, we respectfully request that other areas of the profession follow suit.

Conclusion

In summary, we recommend that (1) the number of educational hours needed for Master's Degree/Master's level certificate be reduced to 1350, down from 1905 hours, and (2) the NCCAOM licensing examination be revised so that it is based on safety and ethics, and no

longer focuses on non-universal acupuncture theories such as TCM. Both of these changes will help the long-term stability of the acupuncture in the United States, in terms of attracting new acupuncturists who will have manageable student-debt loads, reducing barriers to entry into the profession for the benefit of patients who need access to acupuncture, and better serving the safety and best interests of both acupuncturists and the general public.⁷

⁷ This proposal is submitted on behalf of the POCA Tech Board of Directors. It was authored by Sarah Evans, L.Ac; Michelle Rivers, L.Ac.; Christopher Rogers, L.Ac.; Lisa Rohleder, L.Ac.; and Jacquelyn Rogers, J.D.