

## Proposal Summary/ Overview

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**Organization:** AMTA American Massage Therapy Association-Minnesota Chapter, AOBTA® – American Organization for Bodywork Therapies of Asia®, ABMP Associated Bodywork and Massage Professionals

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*Is this proposal regarding:*

- *New or increased regulation of an existing profession/occupation? If so, complete this form, Questionnaire A.*
- *Increased scope of practice or decreased regulation of an existing profession? If so, complete Questionnaire B.*
- *Any other change to regulation or scope of practice? If so, please contact the Committee Administrator to discuss how to proceed.*

### **1) State the profession/occupation that is the subject of the proposal.**

Massage Therapy and Asian Bodywork Therapy

### **2) Briefly describe the proposed change.**

Licensing is crucial for maintaining safety, professionalism, and the integrity of the massage profession. It provides the very foundation for ethical conduct for massage therapists and supports the ongoing development and evolution of the profession, setting standards that guide education, ethics, training and ensuring that therapists are well prepared for their profession.

**HF 362 /SF 1131** proposes to legislate the professions of Massage Therapy and Asian Bodywork Therapy to a standard commensurate with current national standards. This legislation proposes entry level education, regulatory standards and regular reporting of those in violation of ethical and professional standards, creating enhanced public protection.

Additionally, this statewide licensure system would replace about 100 local regulations as it applies to Massage Therapists and Asian Bodywork Therapists while continuing to allow cities control over the licensure and regulation of the establishments that provide these services.

Currently Minnesota has in place Minnesota Statutes 146A. This law only requires the practitioner to provide a document of their education and training to attest their ability to provide their service. It does not establish any minimum requirements for any practitioner to demonstrate that they have entry level training commensurate with their profession to provide the service. It also does not require background checks for any ethical, illicit or scope of practice violations, leaving the client responsible to verify that the practitioner has no prior violations. This lends to public harm.

**3) If the proposal has been introduced, provide the bill number and names of House and Senate sponsors. If the proposal has not been introduced, indicate whether legislative sponsors have been identified. If the bill has been proposed in previous sessions, please list previous bill numbers and years of introduction.**

**House: HF 362:** Chief Author: Pinto (DFL-St. Paul); Co-Authors: Nadeau (R-Rogers), Schomacker (R-Luverne), Koegel (DFL- Spring Lake Park), Robbins (R-Maple Grove), Bierman (DFL-Apple Valley), Backer (R-Browns Valley), Elkins (DFL – Bloomington).

**Senate: SF 1131:** Chief Author: Hoffman (DFL-Champlin); Co-Authors: Housley (R-Stillwater), Gustafson (DFL-Vadnais Heights), Koran (R-North Branch), Lang (R-Olivia).

**2023:** HF973/SF967

**2021:** HF1275/SF1074

**2020:** HF3575/SF356

## **Questionnaire A: New or increased regulation (adapted from Mn Stat 214.002 subd 2 and MDH Scope of Practice Tools)**

This questionnaire is intended to help legislative committees decide which proposals for new or increased regulation of health professions should receive a hearing and advance through the legislative process. It is also intended to alert the public to these proposals and to narrow the issues for hearing.

This form must be completed by the sponsor of the legislative proposal. The completed form will be posted on the committee's public web page. At any time before the bill is heard in committee, opponents may respond in writing with concerns, questions, or opposition to the information stated and these documents will also be posted. The Chair may request that the sponsor respond in writing to any concerns raised before a hearing will be scheduled.

A response is not required for questions which do not pertain to the profession/occupation (indicate "not applicable"). Please be concise. Refer to supporting evidence and provide citation to the source of the information where appropriate.

New or increased regulation of health professions is governed by Mn State 214. Please read and be familiar with those provisions before submitting this form.

While it is often impossible to reach complete agreement with all interested parties, sponsors are advised to try to understand and to address the concerns of any opponents before submitting the form.

### **1) Who does the proposal impact?**

#### **a. Define the occupations, practices, or practitioners who are the subject of this proposal.**

**Massage Therapists.** Massage Therapy is defined as: the manual manipulation of the soft tissues of the body to promote, maintain, and restore health and well-being.(b) Massage therapy may use any of the following techniques: (1) stroking; (2) gliding; (3) lifting; (4) kneading; (5) jostling; (6) vibration; (7) percussion; (8) compression; (9) friction; (10) holding; (11) passive stretching within the client's physiological range of motion; (12) movement or manipulation of the soft tissues; (13) active assistive and resistive movement; and (14) stretching.

**Asian Bodywork Therapists.** Asian Bodywork Therapy is defined as: therapy based upon Chinese medical principles with the intent of promoting, maintaining, and restoring health and well-being by affecting the body and emotions. (b) Asian bodywork therapy may use any of the following techniques: (1) pressing; (2) soothing; (3) kneading; (4) vibration; (5) friction; (6) passive stretching within the client's physiological range of motion; (7) active assistive and resistive movement; (8) stretching; and (9) tapping, movement, exercising, or manipulation of the soft tissues

- b. List any associations or other groups representing the occupation seeking regulation and the approximate number of members of each in Minnesota**

American Massage Therapy Association (AMTA): 1508 Minnesota members  
Associated Bodywork and Massage Professionals (ABMP): 2027 Minnesota members  
American Organization for Bodywork Therapies of Asia (AOBTA): 147  
Centerpoint Massage and Shiatsu Therapy school reports there are 300-400 Asian Bodywork Therapists that may not be members of either AMTA or ABMP, practicing in Minnesota

- c. Describe the work settings, and conditions for practitioners of the occupation, including any special geographic areas or populations frequently served.**

Massage therapists work in a variety of work environments.  
For primary place of employment, 2024 AMTA Massage Research shows: 20 percent Spa, 43 percent Massage Therapy office, 13 percent Massage Therapy Franchise, 11 percent Chiropractic office or Integrated clinic, 28 percent Home office, 4 percent Hospital or Medical office, 6 percent Health Club or Athletic Facility  
Many massage therapists work in multiple settings beyond their primary employment.

- d. Describe the work duties or functions typically performed by members of this occupational group and whether they are the same or similar to those performed by any other occupational groups.**

"Massage Therapy" is a healthcare service involving the external manipulation or pressure of soft tissue for therapeutic purposes. Massage therapy includes techniques such as tapping, compressions, friction, gliding, kneading, shaking, and fascial or connective tissue stretching, with or without the aids of superficial heat, cold, water, lubricants, or salts. Massage therapy does not include diagnosis or attempts to adjust or manipulate any articulations of the body or spine or mobilization of these articulations by the use of thrusting force.  
Other professions such as Physical Therapy, Chiropractic or Acupuncture may provide massage services to a patient to prepare them for a specific application of care but not solely for therapeutic massage purposes. The proposed legislation does not impact these other professions from continuing to provide massage services.

**2) Specialized training, education, or experience (“preparation”) required to engage in the occupation**

- a. What preparation is required to engage in the occupation? How have current practitioners acquired that preparation?**

Currently, many massage therapists gain education and training from one of the massage therapy schools or programs in Minnesota. Some massage therapists have attended schools or programs from other states in which they have been licensed, and some through being “self-taught”.

The Minnesota office of Higher Education (MOHE) reports that there are 2 degree granting schools that have massage programs and 7 non- degree schools that have massage programs. MOHE does not approve any out-of-state programs for massage. About 100 cities regulate massage therapy in Minnesota with varying practitioner standards. In the cities that do have a massage therapist license and establishment license, the credential required to obtain a city massage license is that a massage therapist has obtained some minimal level of education of 500 to 625 hours of education which is on par with licensed states nationally, and has passed a nationally accredited examination, for example, the National Certification Exam (NCTMB) or MBLEx, Some cities require that the massage therapist has attend an accredited program.

**b. Would the proposed regulation change the way practitioners become prepared? If so, why and how? Include any change in the cost of entry to the occupation. Who would bear these costs?**

This proposed legislation would **not** require those already practicing to take any additional training. A provision for licensing by endorsement and prior experience is included referencing lines 10.4-10.16 Sub 4. License by Endorsement and lines 10.17-10.30 Sub. 5 License by Prior Experience.

Practitioners entering the profession would be required to attend an institution that provides post-secondary education in massage therapy training. Required educational hours 625 in anatomy, physiology, pathology, massage therapy, massage therapy history, theory, research, professional ethics, interpersonal communications, business and legal practices and supervision of practice including demonstrating safe use of equipment and supplies. Most existing schools and programs in Minnesota meet the educational requirements listed in the Bill.

**c. Is there an existing model of this change being implemented in another state? Please list state, originating bill and year of passage?**

In 45 states and 2 US territories Washington D.C and Puerto Rico, massage therapy is a regulated profession. Minnesota, Kansas, Vermont and Wyoming are the only states that do not regulate massage therapy on a statewide basis.

Alabama enacted 1996  
Alaska enacted 2014  
Arizona enacted 2003  
Arkansas enacted 1951  
California enacted 2008  
Colorado enacted 2008  
Connecticut enacted 1993  
Delaware enacted 1993  
District of Columbia enacted 1994  
Florida enacted 1943  
Georgia enacted 2005  
Hawaii enacted 1947  
Idaho enacted 2012  
Illinois enacted 2002  
Indiana enacted 2007  
Iowa enacted 1992  
Kentucky enacted 2003  
Louisiana enacted 1992  
Maine enacted 1991  
Maryland enacted 1996  
Massachusetts enacted 2006  
Michigan enacted 2009  
Mississippi enacted 2001  
Missouri enacted 1998  
Montana enacted 2009  
Nebraska enacted 1958  
New Hampshire enacted 1980  
New Jersey enacted 1998  
New Mexico enacted 1991  
New York enacted 1967  
Nevada enacted 2005

## Questionnaire A – Increased Regulation

North Carolina enacted 1998  
North Dakota enacted 1959  
Ohio enacted 1915  
Oklahoma enacted 2016  
Oregon enacted 1951  
Pennsylvania enacted 2008  
Rhode Island enacted 1979  
South Carolina enacted 1996  
South Dakota enacted 2005  
Tennessee enacted 1995  
Utah enacted 1981  
Virginia enacted 1996  
Washington enacted 1976  
West Virginia enacted 1997  
Wisconsin enacted 1998

- d. If current practitioners in Minnesota lack any training, education, experience, or credential that would be required under the new regulation, how does the proposal address that lack?**

This proposed legislation would **not** require those already practicing to take any additional training. A provision for licensing by endorsement and prior experience is included referencing lines 10.4-10.16 Sub 4. License by Endorsement and lines 10.17-10.30 Sub. 5 License by Prior Experience.

- e. Would new entrants into the occupation be required to provide evidence of preparation or be required to pass an examination? If not, please explain why not. Would current practitioners be required to provide such evidence? If not, why not?**

Practitioners entering the profession would be required to attend an institution that provides post-secondary education in massage therapy training. Required educational hours 625 in anatomy, physiology, pathology, massage therapy, massage therapy history, theory, research, professional ethics, interpersonal communications, business and legal practices and supervision of practice including demonstrating safe use of equipment and supplies. Most existing schools and programs in Minnesota meet the educational requirements listed in the Bill.

### **3) Supervision of practitioners**

- a. How are practitioners of the occupation currently supervised, including any supervision within regulated institutions or by a regulated health professional? How would the proposal change the provision of supervision?**

There is not a regulatory body that supervises massage therapists and Asian bodywork therapists on a statewide basis. There are local laws that regulate individual practitioners. These regulations vary by locality and there is no comprehensive coordination of these local regulations.

Currently Minnesota has in place voluntary registration along with non-regulated complementary and alternative health care providers. To register, all the provider must do is provide a document of their education and training to attest to their ability to provide their respective service. It does not establish any minimum requirements for any practitioner that would demonstrate even an entry level training for their profession and does not require background checks for any ethical, illicit or scope of practice violations. Under the proposed legislation, the regulation would be held under the Commissioner of Health. An advisory council of five members to oversee the massage therapy profession would be formed to advise the Commissioner on issues impacting massage therapists.

- b. Does a regulatory entity currently exist or does the proposal create a regulatory entity? What is the proposed scope of authority of the entity? (For example, will it have authority to develop rules, determine standards for education and training, assess practitioners' competence levels?) Has the proposed change been discussed with the current regulatory authority? If so, please list participants and date.**

There is not a regulatory body that supervises massage and Asian bodywork on a statewide basis. There are about 100 Minnesota cities that are licensing massage therapists individually and/or regulating establishments. Each ordinance is different, with varying levels of regulation on the provider, with some having little or no relationship to massage therapy or protecting the public. The proposed legislation would unify all massage practitioner requirements across the state under a single regulatory body. It would preclude local governments from licensing massage therapists, while allowing them to regulate the business establishment.

- c. Do provisions exist to ensure that practitioners maintain competency? Describe any proposed change.**

There is not a regulatory body that supervises massage therapy and Asian bodywork therapy. This proposed legislation would require educational competency to enter the profession and a requirement that practitioners carry liability insurance to maintain their license. Additionally, the professional standards included in the legislation would require a massage therapist to maintain the knowledge and skills to provide treatments and a level of care at the level of reasonably prudent massage therapists

**4) Level of regulation (See Mn Stat 214.001, subd. 2, declaring that “no regulations shall be imposed upon any occupation unless required for the safety and well-being of the citizens of the state.” The harm must be “recognizable, and not remote.” Ibid.)**

- a. Describe the harm to the public posed by the unregulated practice of the occupation or by the continued practice at its current degree of regulation.**

1) The proposed legislation would reduce the risk to the public as the practice of therapeutic massage includes the potential risk of patient injury or harm given the procedures used by massage therapists during the course of treatment. The knowledge of contraindications (i.e., how a procedure can impact a patient with a preexisting health condition) is critical and a central component of proper education and training.

A report from AMTA insurance carrier Affinity Insurance Services stated that of the members educated and with professional liability insurance the following claims at a glance overview:

Most Frequent Allegations:

improper technique, inappropriate behavior of clinician/ sexual abuse, equipment malfunction/ failure, improper business practice.

Most Frequent Injury: sexual misconduct, burns, sprain/ strain, neck injury, dislocation  
Location of Incident: clinic/ medical spa/ spa, franchise location, gym

2) As a nonpharmacologic treatment, massage therapy is becoming rapidly integrated into the healthcare system for treatment of varied conditions including cancer, asthma, osteoarthritis, chronic low back and neck pain, headache, soft tissue injury, depression, anxiety, effects of premature birth, temporomandibular joint pain, digestive disorders, fibromyalgia, nerve pain and insomnia related to stress among other conditions.

<https://nccih.nih.gov/health/massage>).

3) Competency and Regulation. The degree of entry-level competency required to remove potential harm to the public can only be assured through statewide regulation. Licensure of massage therapists will offer the optimal public protection and with appropriate academic, clinical, ethics and business training, will be able to offer safe and effective massage therapy to Minnesotans. Barring state regulation, there are no entry-level education and training requirements for those seeking to practice therapeutic massage.

A competent massage therapist must be able to integrate the knowledge of anatomy, physiology, and kinesiology with the hands-on skill of a wide variety of massage therapy techniques. The massage therapist must have high ethical standards, be able to establish boundaries, and provide an environment of physical and emotional safety for the client. A skilled massage therapist must be able to determine what the patient's needs and goals are through professional communication, assessment and documentation, and develop and deliver an appropriate massage session to meet those goals. The massage therapist should be able to recognize various clinical pathologies, understand what conditions are contraindicated for massage, and be confident in refusing service or making referrals to other healthcare providers as needed. All massage therapists, when properly educated and trained, will have acquired this basic knowledge.

4) The proposed legislation requires background checks and imposes a statewide disciplinary scheme that will provide a level of confidence with the public that licensed Massage Therapists and Asian Bodywork Therapists have been vetted for prior criminal and disciplinary activities.

**b. Explain why existing civil or criminal laws or procedures are inadequate to prevent or remedy any harm to the public.**

Because there is no uniform state regulation, it is the responsibility of each city to regulate laws for massage and Asian body work. Not all cities in Minnesota require this. If a practitioner is violating professional ethics there is not a regulatory board to report the practitioner. This leaves responsibility to the local law enforcement. This also means that a practitioner could have a violation in one city and then practice in another city, or continue to practice

**c. Explain why the proposed level of regulation has been selected and why a lower level of regulation was not selected.**

The degree of entry-level competency required to remove potential harm to the public can only be assured through statewide regulation. Licensure of massage therapists will offer the optimal public protection and with appropriate academic, clinical, ethics and business training, will be able to offer safe and effective massage therapy to Minnesotans. Barring state regulation, there are no entry-level education and training requirements for those seeking to practice therapeutic massage.

As stated earlier, licensure requirements and other regulations for massage therapists already exist in the state. However, that regulation is not consistent across the state as it comprises 100 local ordinances. In addition, some have suggested voluntary registration instead of statewide licensure. This is problematic as Minnesota already has a higher level of regulation in the 100 different localities and will not bring consistency to practice standards and enforcement.

**5) Implications for Health Care Access, Cost, Quality, and Transformation**

- a. Describe how the proposal will affect the availability, accessibility, cost, delivery, and quality of health care, including the impact on unmet health care needs and underserved populations. How does the proposal contribute to meeting these needs?**

Regulation and licensure of massage therapy will increase the equity and availability of care for clients, building on Minnesota’s current exemption for massage therapy when prescribed by a physician or licensed healthcare professional. Barriers for massage therapists across Minnesota will decrease, in part given an end to the current patchwork of requirements, or lack thereof, mandated by local ordinances and rising fees to establish and conduct a business. Because massage therapists practice in multiple settings as noted earlier, massage therapists currently need to register and pay associated fees to numerous municipalities who maintain their own independent, jurisdictional procedures and processes that collectively interfere with the ability to provide uniformity in practice and are an administrative burden to both the practitioner and the municipality.

Minnesota Health network Fulcrum, as of January 1, 2024 now provides massage therapy as a benefit to insurance members. The credentialing requirement for a massage therapist to join as a provider to this network, is currently Nationally Certification meaning that they have attended a massage program with 500 hours of education or more, or that they attended an accredited institution. This allows those that have this health care insurance access to massage therapy services and the cost is covered. However, the credentialing requirements for massage therapists in Minnesota only apply to very few because there is not a statewide requirement for educational hours or examinations. Instituting state licensure would make all massage therapists eligible to become providers, which increases public access to massage.

- b. Describe the expected impact of the proposal on the supply of practitioners and on the cost of services or goods provided by the occupation. If possible, include the geographic availability of proposed providers/services. Cite any sources used.**

According to the U.S. Bureau of Labor and statistics, employment of massage therapists is projected to grow to 18% from 2022-2023, much faster than the average for all occupations.

The Minnesota Department of Labor & Industry and the Minnesota Dual-Training Pipeline program in February 2024 added Massage Therapist under the Health Care Services Industry as an occupation that is eligible for Dual Training Grant funding. This funding is used to pay tuition costs for education to become certified as a Massage Therapist, resulting in entering the workforce in Minnesota.

- c. Does the proposal change how and by whom the services are compensated? What costs and what savings would accrue to patients, insurers, providers, and employers?**

This does not directly change how and by whom the services are compensated.

Minnesota Health network Fulcrum, as of January 1, 2024 now provides massage therapy as a benefit to insurance members.

This allows those that have this health care insurance with this benefit access to massage therapy services. For example, those in Minnesota who have massage therapy as a benefit in their healthcare plan are allowed 6 1-hour visits to a massage therapist per calendar year at no cost to the member. Due to the trend for health care networks to provide massage therapy service coverage to health insurance members, we would expect the number of carriers to grow.

Insurance companies and other third-party payers may now pay for massage therapy services that they previously did not cover because they required practitioners to be licensed by the state to obtain reimbursement. Indirectly the legislation could reduce out-of-pocket costs to clients and also make massage therapy more accessible to those who could not otherwise afford it. As mentioned earlier, massage therapy is growing in its use within the healthcare system to provide cost effective non-pharmacological treatment for pain.

The last several legislative sessions, legislation concerning the opioid crisis acknowledged the importance of massage therapy in addressing the crisis by including a representative for massage on the committee that is recommending integrative treatments. As a growing option for non-pharmacological treatment the licensure of massage therapists will not only protect the public, but also assist in providing increased accessibility and coverage by health insurance and other payers.

- d. Describe any impact of the proposal on an evolving health care delivery and payment system (e.g., collaborative practice, innovations in technology, ensuring cultural competency, value-based payments)?**

As a low cost, effective, nonpharmacologic treatment, massage therapy is becoming rapidly integrated into the healthcare system for treatment of varied conditions including cancer, asthma, osteoarthritis, chronic low back and neck pain, headache, soft tissue injury, depression, anxiety, effects of premature birth, temporomandibular joint pain, digestive disorders, fibromyalgia, nerve pain and insomnia related to stress among other conditions.

(<https://nccih.nih.gov/health/massage>). As such, it is expected that massage therapy will play an increasing role in providing valued services in collaboration with other health care professionals.

- e. What is the expected regulatory cost to the state government? Is there an up-to-date fiscal note for the proposal? How are the costs covered under the proposal?**

A fiscal note was completed in March 2020 on a similar version of the legislation. The fiscal note showed that revenues generated through statewide fees would offset the projected costs. (Fiscal note HF3575, March 11, 2020).

## **6) Evaluation/Reports**

**Describe any plans to evaluate and report on the impact of the proposal if it becomes law, including focus and timeline. List the evaluating agency and frequency of reviews.**

Not applicable.

**7) Support for and opposition to the proposal**

- a. What organizations are sponsoring the proposal? How many members do these organizations represent in Minnesota?**

American Massage Therapy Association (AMTA): 1508

Minnesota members Associated Bodywork and Massage Professionals (ABMP): 2027 Minnesota members

American Organization for Bodywork Therapies of Asia (AOBTA): 147

Centerpoint Massage and Shiatsu Therapy school reports there are 300-400 Asian Bodywork Therapists that may not be members of either AMTA or ABMP, practicing in Minnesota

- b. List organizations, including professional, regulatory boards, consumer advocacy groups, and others, who support the proposal.**

We can report that each of these schools, programs and organizations have participated in the bill drafting process as part of the MN Bill Development Group. This includes professional organizations that are exempt by 146A.

We cannot speak for the institutions listed, as they show their support with individual emails to their legislators:

**Professional Organizations:**

American Massage Therapy Association (AMTA) , Minnesota and National  
Associated Bodywork Massage Professionals (ABMP), National  
AOBTA® – American Organization for Bodywork Therapies of Asia®  
International Association of Structural Integration- IASI  
Rolfing  
United States Trager Association (USTA)  
Feldenkrais Guild® of North America  
International Somatic Movement Education & Therapy Association-ISMETA  
National Qigong Association  
Biodynamic Craniosacral Therapy Association of North America-BCTA/NA  
Society for Ortho-Bionomy International-SOBI  
American Polarity Association- APTA  
ROSEN METHOD  
United States Bowen Registry, Inc  
Reflexology  
Reiki Unified

**Schools and Programs:**

Northwestern Health Sciences University - Bloomington, MN  
The Massage School - St Paul, MN  
Lake Superior College - Duluth, MN  
St Paul College - St Paul, MN  
Anoka Ramsey Community College - Coon Rapids, MN  
Minnesota State Community College and Technical College - Wadena, MN  
Ridgewater College Massage Therapy Program - Willmar, MN  
Riverland Community College - Austin, MN

## Questionnaire A – Increased Regulation

Professional Massage Academy - Waite Park, MN

The Salon Professional Academy - Maplewood, MN

\*Centerpoint Shiatsu and Massage - St Louis Park, MN - Closed Representatives have participated in the MN BDG since 2017

- c. List any organizations, including professional, regulatory boards, consumer advocacy groups, and others, who have indicated concerns/opposition to the proposal or who are likely to have concerns/opposition. Explain the concerns/opposition of each, as the sponsor understands it.**

We do get occasional comments or inquiries from individuals who have concerns or questions about the legislation. We take those thoughts and concerns into account as we work towards enactment of the legislation. As a product of collaboration and compromise there will always be those that can find flaws in the proposed licensure approach, but those that have been working towards a solution feel this approach is better than our current regulatory framework in Minnesota.

We were made aware that an individual with the Minnesota Touch Movement Network (MTMN) is opposed to the bill. They have not contacted us. We did reach out and offered to discuss and receive feedback and have not received a response. MTMN has not been active since 2011 per the MN Secretary of State's business records website and we cannot find any additional information on the existence of the group.

- d. What actions has the sponsor taken to minimize or resolve disagreement with those opposing or likely to oppose the proposal?**

Beginning in the early 2000's the American Massage Therapy Association (AMTA) Minnesota chapter formed an alliance that had a steering committee to develop massage therapy and Asian bodywork therapy regulation language. At the end of 2016 established in 2017, this group reorganized to form a bill development group (BDG) that included all Minnesota massage schools and national organizations. The BDG reviewed and wrote bill draft language consulting with other professional organizations and government organizations. The BDG met every 4-6 weeks in person until the shut down in March 2020, then continued to meet virtually. Bill updates and communication weekly have been maintained, currently at update #445. At this time all BDG members have participated in supporting the language of licensing massage therapy and Asian bodywork therapy.

Additionally, over the past few years other groups that had been identified as possibly having an interest in the bill were contacted for their feedback. Any feedback was addressed with modifications to the language or through further explanation.

The groups contacted:

Minnesota Department of Public Safety

Minnesota Department of Health

Minnesota Council of Health Plans

Insurance Federation of Minnesota

Minnesota Physical Therapists Association

Minnesota Chiropractic Association

Minnesota Medical Association

Minnesota Occupational Therapists

Minnesota Athletic Trainers Association

Minnesota Acupuncture Association

