

House Health and Human Services Policy Committee
Chair: Rep. Tina Liebling

Regulation of laser services

H.F. 1529, Abler

Contact: Tom Lehman, tom@thelehmgroupp.com 612 867-2755

In the 2014 session, no bill to expand the scope of an occupation's practice will be heard by the committee unless the proponent first submits a written report succinctly addressing the following:

1. How is this profession's scope of practice in the area of proposed change currently defined and what failings or shortcomings are being addressed by the proposed changes to the profession's scope?

Under current Minnesota law there is no regulation of laser use or direction on how medical personnel using lasers for aesthetic purposes are to be trained. There is a gap in state regulation in a sector that has grown rapidly in response to consumer demand. Laser centers are in business across Minnesota providing services which could harm consumers if not provided by appropriately-trained personnel. This legislation sets clear definitions on who is authorized to use lasers, how laser use can be delegated, how health care practitioners are supervised and trained, and creation of quality assurance programs and information that must be provided to patients.

2. Does specialized skill or training support the expansion of this occupation into the proposed areas of practice? If so, what skills or training?

Yes. Health care practitioners seeking to provide aesthetic laser services would be required to have successfully completed a laser safety training course and demonstrate to their delegating physician that they are proficient in the laser treatment to be provided. Currently, laser operators must meet no state standard for education and training and they have no requirement of physician oversight.

3. How would the public benefit by the occupation's ability to practice in the new proposed areas of practice? Is there any potential detriment to the public? Who would monitor practitioners to insure high quality service?

There are currently no standards in the State of Minnesota for laser services. Laser centers that have no physician medical director or staff adequately trained staff to provide safe laser services are operating with unwarranted risk to consumers. As a result, consumers seeking laser services may lack confidence that their practitioner is competent to provide the service. Anecdotal evidence exists of consumers being harmed by lasers, injuries that could have been avoided. The bill provides that the supervising physician who is licensed in Minnesota and has received laser safety training shall ensure that care providers performing laser treatments have demonstrated sufficient proficiency in performing specific treatments.

4. Could Minnesotans effectively receive the impacted services by a means other than the proposed changes to scope of practice?

No. As noted above, there are no current standards that assure consumers are protected from laser providers that have not completed adequate training. This legislation sets a standard that all providers of aesthetic laser services, including the physician, would have to meet.

5. How would the new or expanded services be compensated? What other costs and what savings would accrue and to whom? (E.g., the state, providers, patients)

This legislation makes no changes in how providers of aesthetic laser services are compensated. These services are generally deemed by insurers as not a covered benefit and consumers are responsible for payment.

Patients who are not harmed by currently unregulated laser providers would benefit from not having to seek other treatments to potentially correct the harm caused by an unqualified laser provider.

6. What, if any, economic impact is foreseeable as a result of the proposed change?

Harm to consumers would be avoided by assuring that providers of laser services meet education and training requirements and are overseen by a Minnesota-licensed physician. Laser centers that currently do not have a Minnesota-licensed physician medical director or adequately trained staff would have to comply to provide aesthetic laser services.

7. What other professions are likely to be impacted by the proposed changes?

Physician assistants, advance practice registered nurses, registered nurses, licensed practical nurses, clinical estheticians, board-certified electrologists and certified laser technicians are defined in the bill as being eligible to provide laser services. This legislation would provide members of these professions employment opportunities in laser centers once properly trained.

8. What position, if any, have professional associations of the impacted professions taken with respect to your proposal?

This legislation is supported by the Minnesota Academy of Physician Assistants and the Minnesota Nurses Association.

9. Please describe what efforts you have undertaken to minimize or resolve any conflict or disagreement described above.

The Minnesota Association for Aesthetic Safety (MAAS), has met with a variety of stakeholders on this legislation. This includes the Minnesota Academy of Physician Assistants, the Minnesota Nurses Association, the American Physical Therapy Association – Minnesota Chapter. All are supportive or neutral on the legislation. The only opponent that we are aware of is the Minnesota

Dermatological Society. We have met with them multiple times over the years in an effort to find common ground. Section 1 of the bill was taken word-for-word from their legislation. However, they apparently seek to “fence out” non-dermatologists and/or non-physicians from providing aesthetic laser services and do not support sensible regulation of laser services provided to Minnesota consumers.

The Chair will use the report to help evaluate whether the bill is ready for consideration by the committee. To facilitate this consideration, the report should be filed by January 31st, 2014. If the bill is given a hearing, the report will be transmitted to all committee members. The report will also be made available to the public and any opponents of the proposal will be given an opportunity to respond to or rebut items in the report. Any response will be used to help narrow the issues for hearing.