

Licensure Laws and Healthcare Part I

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Make Americans Free Again is defending a growing number of doctors and other healthcare professionals who are being investigated by state licensure boards for speaking out about issues like COVID restrictions and vaccines; writing medical exemptions; or for prescribing effective drugs to treat COVID-19.

The targeting of health professionals who do not promote accepted medical and health dogma/propaganda by state licensure boards is not new. Like all things related to COVID, this has been going on for a very long time. There is just a lot more of this activity, and more people are aware that this is taking place. Most people, however, do not know that this is an insidious form of censorship that benefits drug companies, medical institutions, and some practice groups. If it is not stopped, medical choice will be eliminated, and we will all be stuck with a Soviet-style healthcare system that is populated by puppets of the government and drug companies.

Solving this problem will be dependent on the ability to raise enormous amounts of money. Historically, most people who found themselves in the crosshairs of a licensure board begged for forgiveness and agreed to do anything necessary to not lose their license; or if not licensed, to avoid criminal prosecution. Many stopped saying anything not approved by the powers that be, stopped offering certain treatments, declined to write any more vaccine exemptions, and agreed to operate under the supervision of a pharma-friendly doctor during a probationary period. Many naturopaths, herbalists and body workers just closed their businesses. Even these concessions often cost tens of thousands of dollars to arrange. Licensure boards have the unlimited resources of the state on their side, while healthcare practitioners must pay their own legal fees out of pocket. Most simply cannot afford to finance a prolonged battle with the state.

Another thing that will be required is a better understanding of the history of licensure boards and how external factors influence the way they regulate healthcare practices. This article will be the first in a series that delves into this issue.

Understanding Licensure: Basics

Economist Milton Friedman published an essay over 40 years ago called *Capitalism and Freedom* in which he stated "The pressure on the legislature to license an occupation rarely comes from the members of the public who have been mulcted. On the contrary, the pressure invariably comes from members of the occupation itself."

This is true. Professionals ranging from frog farmers to medical doctors have sought licensure, which is regulated at the state level, for decades. The number of licensed professions has grown and continues to grow. You may find this difficult to believe, but

some states license occupations like animal breeders, upholstery professionals, florists, interior designers, bartenders, travel guides, shampooers, and home entertainment installers.¹ In almost every case, legislation to license a group is proposed by the professional group itself. Indeed, it is hard to imagine that consumers are really worried about incompetent home entertainment installers or feel threatened by the potential of ordering a floral arrangement that is not to their liking.

Licensure boards are established by state legislators, who are told that licensure of anyone engaged in healthcare practice is necessary to protect the public. Practice groups like the Academy of Nutrition and Dietetics and the American Medical Association say that requiring certain educational pathways, a clear scope of practice, and supervision by state employees who have the power to revoke licensure if a practitioner misbehaves, protects the public from harm. There may be some truth to this, but this is not the most important reason that health care professionals seek licensure. Licensure laws are often strategies for restricting competition.

The reality is that few people are hurt by non-licensed practitioners. Yet professional groups have used scare tactics for decades to convince legislators that not only should their group be licensed, but that everyone who is not a member of their group should be prevented from practicing.

Healthcare Licensure

Medical doctors were the first to use licensure as a tactic to gain control of the market and to increase their incomes. At the beginning of the 20th century, American doctors were not well respected or well paid. Most made less than the average postal worker. Some states licensed healthcare professionals but there were no educational standards or enforcement against unlicensed practitioners. Most healthcare was provided by laypersons like midwives and bonesetters, and family members were the primary caregivers for sick people. At the time, medicine was thought of as an inferior profession.

The American Medical Association decided to remedy this by setting educational standards, limiting the number of medical schools and graduates, and advocating for state licensure. The AMA also conducted a well-coordinated campaign to eliminate all other healthcare practices, including midwives, homeopaths, naturopaths, and Native American practitioners. At one time, the AMA maintained files on 300,000 people that the organization had labeled as "quacks." The AMA relentlessly pursued these people, using law enforcement to help whenever possible. For example, Harry Hoxsey, who developed an effective treatment for cancer, was arrested almost 200 times, until he was forced out of business and his nurse relocated the clinic to Mexico. His formula was later patented by medical doctor Frederic Mohs.² The Mohs procedure for the treatment of skin cancer is used all over the world. The AMA stopped criticizing Hoxsey's treatment after it became known that the Mohs formula was essentially the same.³

Licensure and the pursuit of people who were not licensed were the strategies used by medical doctors to take control of the healthcare marketplace.

Another targeted group was osteopaths, and the AMA spent enormous amounts of time and money convincing state legislators and the public that osteopaths were dangerous and a threat to public safety. Eventually, osteopaths gained licensure and they quickly joined with the medical doctors to make sure that everyone knew that chiropractors were threats to public safety.

In fact, the American Chiropractic Association filed a lawsuit alleging restraint of trade, among other counts against the American Medical Association (AMA) and other defendants. In 1987, the courts ruled in their favor, with an opinion stating, "...In the early 1960's, the AMA decided to contain and eliminate chiropractic as a profession. In 1963, the AMA Committee on Quackery was formed. The committee worked aggressively, both overtly and covertly to eliminate chiropractic."⁴

As a result of this court decision, chiropractors gained licensure and they promptly joined other licensed occupations in trying to keep new groups of professionals like naturopaths from being able to legally practice.

The Bottom Line

Licensure boards developed as a means of controlling entry to practice and keeping out competition. But almost all government agencies and institutions, particularly when they partner with private business, eventually become corrupt.

Next Week: Part II

¹ <https://ij.org/report/license-to-work-2/report/ranking-the-occupations/>

² <https://patents.google.com/patent/WO2000048541A1/en>

³ <https://patents.google.com/patent/WO2000048541A1/en>

⁴ <http://www.chiro.org/Wilk/>