

Testimony in favor with amendments for HB 1527, Complementary and Alternative Health Care Practice Act

Tom Swiss, Dipl. ABT (NCBAHM), CP (AOBTA), LMT
2119 Arlonne Drive
Catonsville, MD, 21228

A member of the **American Organization for Bodywork Therapies of Asia (AOBTA)**

DRAFT 1, 15 Mar 2026

Dear Delegates:

I write **in favor of HB 1527**, with **clarifying amendments**, provided at the end of this testimony.

I am a **Maryland Licensed Massage Therapist; nationally certified as a Diplomat in Asian Bodywork Therapy by the NCBAHM (the same board that certifies acupuncturists); and an AOBTA Certified Practitioner.**

I have practiced massage therapy and Asian Bodywork Therapy (ABT) for over 20 years. I am a member of the **medical staff of Mercy Hospital**, where I work with cancer and other chemotherapy patients using massage and Asian Bodywork therapy. And I am a member of the **faculty of the Potomac Massage Training Institute**, where I teach fundamentals of ABT, including acupressure, to **massage therapy** students.

HB 1527 Protects Practitioners and Clients

HB 1527 (with the amendments suggested below) would **preserve what has been the status quo for massage therapists and Asian Bodywork Therapists for decades. It would protect us and our clients** from arbitrary interference by overzealous or ignorant regulatory-state bureaucrats.

Unfortunately **we are at this very moment under grave threat of such interference.** The Acupuncture Board was able to introduce SB370/HB274, which is intended to make acuPRESSURE and other forms of Asian Bodywork Therapy the exclusive domain of acuPUNCTURISTS.

That bill is still before this committee and could destroy the practice of Asian Bodywork Therapy in Maryland.

Such attempts demonstrate why HB 1527 is necessary.

Keep Alternative Care Alternative

Complementary care is health care which is **performed alongside** biomedical allopathic medicine. When I work at the hospital with cancer patients as they undergo chemotherapy, using acupressure and massage to treat nausea and neuropathic pain, I am doing complementary care. **Alternative care** is care which **provides an alternative to surgery, drugs**, or similar care. When a person comes to me to try ABT before deciding to have surgery on their bad shoulder, I am doing alternative care.

The entire point of **complementary and alternative medicine (CAM)** is that it is **not biomedical allopathic medicine. It is alternative**, as it says right in the name. It cannot be standardized and licensed without losing its defining characteristics.

Many of its practices are **folk medicine** meant to be easily accessible and easily practiced – practices which take “a minute to learn, a lifetime to master”.

It is an unfortunate fact that some CAM practitioners believe that they can obtain higher social status or greater income opportunities by ceasing to be alternative and joining the **high-barrier medical model** that prevents people from accessing care or providing care to each other; where burdensome regulations and licensing requirements make criminals out of people trying to help others.

You very likely will hear from some of these practitioners in opposition to this bill.

Let me be clear: **there are places where licensing is appropriate!** It is good that the state of Maryland had vetted me to work with hospital patients. It is good that someone offering brain surgery is subject to strict requirements.

But the general rule is that **people have the natural right to seek out the care they think best**; to provide the care for their fellow citizens they think best; and to do so for compensation in an **open, honest, and fair free market**.

These **rights apply even when they act to the financial detriment of practitioners in regulated fields**. Just as I have the right to provide licensed massage therapy even if it decreases business for licensed orthopedic surgeons, so a reflexology practitioner, operating in a modality so safe it does not require licensing, has the right to provide their services even if it decreases my business.

It is natural when entrenched interests try to use the power of the state to prevent competition. **It is the duty of legislators to not permit them to do so.**

The Importance of CAM

According to the NIH, more than 30% of American adults use some form of CAM.

Low barrier CAM therapies that do not require licensing allow people to quickly obtain a skill which they can put to work in formal or informal self-employment; for that reason they are often practiced by members of vulnerable populations.

CAM is affordable and accessible. Many licensed healthcare practitioners also practice low-barrier CAM therapies: the nurse who does reiki, the massage therapist who incorporates reflexology, the paramedic who does acupuncture to help calm an accident victim in emotional shock.

Proposed Amendments

1. On page 14, line 10, change

(22) TRADITIONAL ORIENTAL PRACTICES

to

(22) TRADITIONAL EAST ASIAN PRACTICES, OTHER THAN THE USE OF SKIN-PUNCTURING NEEDLES

2. Add to 22-101

BODYWORK INCLUDES ONLY TECHNIQUES OF PRESSURE OR MOVEMENT ON AN INDIVIDUAL WHO IS FULLY CLOTHED, EXCEPT FOR FOOTWEAR.

I will be **happy to answer any questions you may have**. Thank you for your consideration.

Tom Swiss, Dipl. ABT (NCBAHM), CP (AOBTA), LMT
2119 Arlonne Drive
Catonsville, MD, 21228
tms@EarthTouchShiatsu
443-803-9621