Date of Hearing: April 14, 2026

ASSEMBLY COMMITTEE ON BUSINESS AND PROFESSIONS
Marc Berman, Chair
AB 1703 (Hart) – As Amended February 23, 2026

SUBJECT: Osteopathic physicians and surgeons: unauthorized practice: unauthorized use of titles.

SUMMARY: Prohibits any person who is not licensed by the Osteopathic Medical Board of California (OMBC) from professionally using the title "osteopath" or other terms implying they are a licensed osteopathic physician and surgeon, and prohibits alternative or complementary care providers from providing osteopathic manipulative treatment without a license.

EXISTING LAW:

1) Makes it unlawful for any healing arts licensee to publicly communicate a false, fraudulent, misleading, or deceptive statement, claim, or image for the purpose of or likely to induce, directly or indirectly, the rendering of professional services in connection with the professional practice or business for which they are licensed. (Business and Professions Code (BPC) § 651)

2) Enacts the Medical Practice Act, which provides for the licensure and regulation of physicians and surgeons. (BPC §§ 2000 *et seq.*)

3) Establishes the Medical Board of California (MBC), a regulatory board within the Department of Consumer Affairs (DCA) responsible for administering and enforcing the Medical Practice Act. (BPC § 2001)

4) Establishes the OMBC, which regulates osteopathic physicians and surgeons under the Osteopathic Act who possess effectively the same practice privileges and prescription authority as those regulated by MBC but with a training emphasis on diagnosis and treatment of patients through an integrated, whole-person approach. (BPC §§ 2450 *et seq.*)

5) Provides that references to the MBC or the term "board" refer to the OMBC where that board exercises the functions granted to it by the Osteopathic Act. (BPC § 2451)

6) Defines "osteopathic manipulative treatment" as the therapeutic application of manually guided forces by an osteopathic physician and surgeon to alleviate somatic dysfunction. (BPC § 2459.6)

7) Provides that any person who practices or attempts to practice, or who advertises or holds themselves out as practicing, any system or mode of treating the sick or afflicted in California, or who diagnoses, treats, operates for, or prescribes for any ailment, blemish, deformity, disease, disfigurement, disorder, injury, or other physical or mental condition of any person, without having at the time of so doing a valid, unrevoked, or unsuspended certificate as a physician and surgeon or without being otherwise authorized to perform the act is guilty of a crime. (BPC § 2052)

8) Allows for an unlicensed person to provide alternative or complementary care without being subject to prosecution for the unlicensed practice of medicine unless they do any of the following:

   a) Conduct surgery or any other procedure on another person that punctures the skin or harmfully invades the body.

   b) Administer or prescribe X-ray radiation to another person.

   c) Prescribe or administer legend drugs or controlled substances to another person.

   d) Recommend the discontinuance of legend drugs or controlled substances prescribed by an appropriately licensed practitioner.

   e) Willfully diagnose and treat a physical or mental condition of any person under circumstances or conditions that cause or create a risk of great bodily harm, serious physical or mental illness, or death.

   f) Set fractures.

   g) Treat lacerations or abrasions through electrotherapy.

   h) Hold out, state, indicate, advertise, or imply to a client or prospective client that the person is a physician and surgeon.

   (BPC § 2053.5(a))

9) Requires a person who advertises alternative or complementary care services to disclose in the advertisement that they are not licensed by the state as a healing arts practitioner. (BPC § 2053.5(b))

10) Requires a person who provides alternative or complementary care services to first disclose the following information to the client in writing in a language that the client understands, and requires the information to be acknowledged in writing by the client:

   a) That the practitioner is not a licensed physician.

   b) That the treatment is alternative or complementary to healing arts services licensed by the state.

   c) That the services to be provided are not licensed by the state.

   d) The nature of the services to be provided.

   e) The theory of treatment upon which the services are based.

   f) The practitioner's educational, training, experience, and other qualifications regarding the services to be provided.

   (BPC § 2053.6)

11) Prohibits any person who does not have a valid, unrevoked, and unsuspended certificate as a physician and surgeon from the MBC or the OMBC from using the words "doctor" or "physician," the letters or prefix "Dr.," the initials "M.D." or "D.O.," or any other terms or letters indicating or implying that they are a physician in any sign, business card, letterhead, or advertisement, or in a health care setting where a reasonable patient would be led to determine that person is a licensed M.D. or D.O., with certain exceptions. (BPC § 2054)

12) Allows a person who has been issued a physician's and surgeon's certificate by the MBC to use the initials "M.D." (BPC § 2055)

13) Provides that nothing in the Medical Practice Act prohibits service in the case of emergency, or the domestic administration of family remedies. (BPC § 2058)

14) Provides that nothing in the Medical Practice Act shall be construed as limiting the practice of other persons licensed, certified, or registered under any other provision of healing arts law when that person is engaged in their authorized and licensed practice. (BPC § 2061)

15) Makes it unlawful for any person to make or disseminate any statement in the advertising of services, professional or otherwise, which is untrue or misleading. (BPC § 17500)

THIS BILL:

1) Prohibits a person who is not licensed by the OMBC from using the word "osteopath," using the phrase "doctor of osteopathy," using the initials "D.O.," or indicating or implying that they are a licensed osteopath, licensed doctor of osteopathy, or licensed physician and surgeon when offering or providing a service to treat a medical or physical condition.

2) Provides that a person who violates the above title protections is guilty of a misdemeanor.

3) Prohibits unlicensed alternative or complementary care practitioners from providing osteopathic manipulative treatment.

4) Defines "osteopathic manipulative treatment" as the therapeutic application of manually guided forces to alleviate somatic dysfunction.

FISCAL EFFECT: Unknown; this bill is keyed fiscal by the Legislative Counsel.

COMMENTS:

Purpose. This bill is sponsored by the *Osteopathic Physicians & Surgeons of California*. According to the author:

> AB 1703 addresses a gap in current law where patients are protected when seeking care from a medical doctor (MD), but not when choosing a Doctor of Osteopathic Medicine (DO). There are strict protections that prevent non-physicians from advertising themselves as MDs, but not equivalent safeguards to stop those same individuals from advertising themselves as osteopaths or claiming they can provide licensed care. This bill will ensure only DOs who are licensed and medically trained to treat patients can advertise themselves as such and perform licensed services. Californians should be able to trust the quality of licensed medical practitioners and deserve the right to make informed decisions when choosing a doctor, no matter the type of care they seek.

Background.

History of Osteopathic Medicine in California. The medical practice of "osteopathy" was founded by Andrew Taylor Still, M.D. in 1892. A frontier physician working in rural Missouri, Dr. Still believed that "the present schools of medicine are injurious schools of drunken systems that are creating morphine, whisky, and other drug-taking habits, to the shame and disgrace of the advancement and intelligence of the age" and that "a wisely formulated substitute should be given before it is everlastingly too late."[1] While the precise definition of osteopathy evolved over time, its foundational premise was that the body is an integrated unit with the ability to self-heal without the use of drugs when properly aligned and balanced through manual manipulation.

Osteopathy was one of several natural healing disciplines competing for recognition during the Progressive Era, including homeopathy, naturopathy, physcultopathy, naprapathy, magnetopathy, and neuropathy.[2] In 1878, California created three boards to regulate medical practice, each appointed by a different society: the Medical Society, the Eclectic Medical Society, and the Homeopathic Medical Society.[3] These boards were consolidated into a single Board of Medical Examiners (precursor to the modern MBC) in 1901,[4] and the Governor was subsequently required to select appointments from lists of names presented by those societies, along with the Osteopathic Association.[5] In 1913, the MBC was again reconstituted with the role of societies and associations removed. The new board was authorized to issue two forms of certificates: a "physician and surgeon" certificate that granted the holder the authority to use drugs, medical preparations, and surgical procedures to treat patients; and a "drugless practitioner certificate."[6]

The new law reflected the medical dominance of allopathy, the system utilizing drugs and surgery to treat patients that some would eventually term "modern medicine."[7] Under the revised Medical Practice Act, individuals practicing within any of the natural or noninvasive medical systems were required to hold a certificate as a drugless practitioner. Drugless practitioners were explicitly prohibited from calling themselves "physicians" or "doctors of medicine."

Representatives of professions now relegated to drugless practitioner status immediately resisted the law. Chinese herbalists[8] and nonreligious faith healers[9] unsuccessfully challenged its constitutionality. In 1914, Proposition 46 was placed on the ballot to create a Board of Examiners for Drugless Physicians. The initiative would have allowed practitioners who treated patients without drugs or medicine to be regarded as physicians, outside the jurisdiction of the Board of Medical Examiners. While supporters argued that the initiative would give each Californian "the right to choose his or her own doctor without any interference by unfair or drastic laws," it was rejected by 67 percent of voters.

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[1] Still, Andrew Taylor. *The Philosophy and Mechanical Principles of Osteopathy*. Published by the author, 1902.
[2] Cody, George W. "The Origins of Integrative Medicine—The First True Integrators: The Philosophy of Early Practitioners." *Integrative Medicine: A Clinician's Journal* 17.2 (2018).
[3] Chapter 576, Statutes of 1878.
[4] Chapter 51, Statutes of 1901.
[5] Chapter 212, Statutes of 1907.
[6] Chapter 354, Statutes of 1913.
[7] Willis, Evan. *Medical dominance.* Routledge, 2020.
[8] *People v. Chow Let*, 28 Cal. App. 803 (1915)
[9] *P.L. Crane v. Hiram Johnson,* 242 U.S. 339 (1917)

While osteopaths were not initially included in the category of drugless practitioners, in 1919, the MBC ceased awarding physician and surgeon certificates to osteopaths. The MBC also revoked its approval of the state's only osteopathic college. The College of Osteopathic Physicians and Surgeons sued to compel the MBC to resume admitting its graduates to take the physician and surgeon examination; while the courts found in favor of the college, the MBC continued to resist recognizing osteopaths as physicians.[10]

In 1920, representatives of the osteopathic profession supported a referendum to allow osteopaths to prescribe poisons (i.e., pain relief drugs and other controlled substances), but the referendum failed to pass. In 1922, practitioners of osteopathy and chiropractic both respectively sponsored ballot measures to regulate their professions separately from the MBC. Arguments in favor of Proposition 20, the Osteopathic Act, accused the MBC of "medical tyranny." The proponents argued that medical doctors were "biased and prejudiced against osteopathy. They are competitors of osteopathic physicians and surgeons and therefore they should not have the legal power to license, or to refuse to license or to revoke the licenses of osteopaths."

Proposition 20 was approved by 57 percent of voters, resulting in the creation of the Board of Osteopathic Medical Examiners (precursor to the OMBC). Originally consisting of five members appointed by the Governor, the OMBC was authorized to award physician and surgeon certificates to applicants who completed 4,000 hours of specified education at an osteopathic college. Certificates granted to osteopathic physicians by the OMBC bestowed the same privileges as those granted by the MBC while establishing effectively the same requirements for licensure.

Over time, the distinction between osteopathic medicine and allopathic medicine gradually diminished. Physicians licensed by the OMBC, who possessed the same scope of practice as physicians licensed by the MBC, embraced substantially the same therapies as their allopathic counterparts. More traditional osteopathic techniques, such as osteopathic manipulation, steadily became less commonly incorporated into osteopathic physician practice.

Despite the fact that osteopathic physicians were substantively indistinguishable from allopathic physicians, there purportedly remained a sense of stigma attached to osteopathic medicine associated with its less evidence-based roots. In 1962, the California Medical Association and the California Osteopathic Association voted to merge the two professions. This agreement was effectuated in part through the passage of Proposition 22, which allowed osteopathic physicians to become recognized as M.D.s and provided for the eventual dissolution of the OMBC. Some doctors of osteopathy opposed the merger, viewing it as a threat to the distinct identity and autonomy of osteopathy, but the complaint was dismissed by the courts.[11]

As a result of the professional association merger and Proposition 22, no new doctor of osteopathy degrees or osteopathic physician licenses were issued between 1962 and 1974. However, in 1974, a group of out-of-state D.O.s filed a lawsuit challenging the 1962 merger, arguing that the requirement that new osteopathic physicians obtain licensure from the MBC as M.D.s violated the equal protection clauses of both the federal and state constitutions. The California Supreme Court sided with the plaintiffs, stating in its decision:

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[10] *College of Osteopathic Physicians & Surgeons v. Board of Medical Examiners*. 53 Cal. App. 138, 139, 199. 1921.
[11] *Osteopathic Physicians & Surgeons v. California Medical Ass'n*. 224 Cal. App. 2d 378. 1964.

> There exists no rational relationship between the protection of the public health and the exclusion from licensure of all medical practitioners who have received their training in an osteopathic rather than an allopathic college and hold D.O. rather than M.D. degrees. … We hold that the 1962 enactments, insofar as they forbid the licensure of graduates of osteopathic colleges as physicians and surgeons in this state regardless of individual qualifications, deny to plaintiffs the equal protection of the laws guaranteed by our state and federal Constitutions and are therefore to that extent void and of no effect.[12]

Following the court's decision, the OMBC resumed granting new osteopathic physician and surgeon licenses. Legislation in 1982 formally changed the name from the Board of Osteopathic Examiners to the OMBC and added board members. In 2002, OMBC volunteered to be included under the umbrella of the DCA. As of the OMBC's sunset review in 2021, there were over 10,000 D.O.s holding California active status licenses from the OMBC.

Professional Title Protection. Title protection is one of the forms of regulation of professional services that can be imposed by the Legislature to protect patients and consumers by reserving the use of words, terms, initials, and titles for individuals who have met certain requirements to demonstrate competence. As described in the context of the Legislature's "sunrise review" process, title protection is frequently included as part of a licensing act, where only persons who meet predetermined standards are allowed to work at an occupation. When licensure is required for a profession, both the scope of practice and the use of titles describing that title are protected.

As a less restrictive alternative to licensure, the Legislature will sometimes grant recognition to persons who obtain a voluntary certification or registration relating to an unlicensed profession by providing them with exclusive use of specified titles. In many cases, this title protection is limited to the use of terms such as "certified" or "licensed" in association with terms related to the profession. However, some specific terms, such as "dietician" or "athletic trainer," are reserved for individuals who have obtained a voluntary certification or met other requirements despite there being no requirement to obtain a license to practice that profession.

Unlawful use of a title is enforced by regulatory entities, including healing arts boards, consistent with the process for enforcement against unlicensed practice. Typically, these types of violations of a practice act constitute a misdemeanor. Many boards also possess the authority to cite and fine violators, or to engage in other actions to compel compliance with the law. The unauthorized use of professional titles in advertising can also form the basis for prosecutions against individuals or entities for false advertising or unfair business practices.

General provisions governing health professional licensing boards make it unlawful for any healing arts licensee to publicly communicate any false, fraudulent, misleading, or deceptive statement, claim, or image for the purpose of rendering professional services in connection with their licensed practice. Statute specifically prohibits a licensee from using "any professional card, professional announcement card, office sign, letterhead, telephone directory listing, medical list, medical directory listing, or a similar professional notice or device if it includes a statement or claim that is false, fraudulent, misleading, or deceptive." Practitioners may advertise that they are certified or that they limit their practice to specific fields; however, the term "board certified" is reserved for physicians certified by an American Board of Medical Specialties member board.

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[12] *D'Amico v. Board of Medical Examiners*. 11 Cal. 3d 1, 521 P.2d 981, 112 Cal. Rptr. 766, 1974.

Additionally, Section 17500 of the Business and Professions Code broadly prohibits false advertising of a product or service. Specifically, this law makes it unlawful for any person to make any statement or advertisement with intent to perform services, professional or otherwise, that is untrue or misleading. While this code section covers a wide range of false advertisements by sellers of goods or services, its provisions would be applicable to health care licensees.

The Medical Practice Act prohibits any person from practicing or advertising as practicing medicine without a license. Statute specifically makes it a misdemeanor for any unlicensed person to use the words "doctor" or "physician," the letters or prefix "Dr.," the initials "M.D." or "D.O.," or any other terms or letters indicating or implying that the person is a licensed physician and surgeon on any sign, business card, or letterhead, or, in an advertisement. To use these words, prefixes, or initials, a person's license must be valid, unrevoked, and unsuspended. The statute features several limited exceptions for individuals who are trained as physicians but not currently licensed in California, or who are licensed in another health care profession for which use of the term "doctor" is authorized. Statute also includes an exception for when the use of "doctor" is not associated with any claim of entitlement to practice medicine or any other professional service for which the use of the title would be untrue or misleading.

In 2009, the American Medical Association (AMA) launched an initiative branded by the organization as the "Truth in Advertising campaign." According to the AMA, the goal of the campaign is to address confusion among patients regarding the qualifications of health providers from whom they receive care. A survey published by the AMA in 2018 found that "only half of patients surveyed believe that it is easy to identify who is a physician—and who is not—by reading what services they offer, their title, and other licensing credentials in advertising and marketing materials."

Following the publication of its survey results, the AMA embarked on a campaign to seek both national and state legislation to reserve various professional titles for licensed physicians and surgeons. A model bill, the "Health Care Professional Transparency Act," has been introduced and passed in a number of states. Generally, the legislation requires all health care professionals to clearly and accurately describe their license type in advertisements, during patient encounters, and on name tags, and reserves the use of certain titles.

In 2023, AB 765 (Wood) was introduced to prohibit any person who is not a licensed physician and surgeon from using various medical specialty titles or otherwise implying that they are a physician and surgeon. The bill included a number of specific titles that would be reserved for licensed physicians, including "osteopath." The inclusion of that term was opposed by many unlicensed individuals practicing what they characterized as a more traditional form of osteopathy. The term "osteopath" was removed from the bill, which was ultimately held in the Assembly Committee on Appropriations. In 2024, the Legislature enacted SB 1451 (Ashby), which updated the Medical Practice Act's restrictions on the term "doctor" but did not include a list of specifically restricted terms.

This bill would prohibit a person who is not licensed by the OMBC from using the word "osteopath" or otherwise indicating or implying that they are a licensed osteopathic physician and surgeon when offering or providing a service to treat a medical or physical condition. As with similar title protection laws, the prohibition would be enforceable as a misdemeanor. The author and supporters believe that reserving the term "osteopath" for D.O.s will resolve the potential for confusion for patients seeking to obtain care from a licensed osteopathic physician.

Alternative and Complementary Care Services. The Medical Practice Act broadly prohibits the unlicensed practice of medicine, which is punishable as a misdemeanor. However, in 2002, the Legislature enacted SB 577 (Burton), which was intended "to allow access by California residents to complementary and alternative health care practitioners who are not providing services that require medical training and credentials." The legislation cited a report by the National Institute of Medicine and other studies that found that "millions of Californians, perhaps more than five million, are presently receiving a substantial volume of health care services from complementary and alternative health care practitioners" but that "the provision of many of these services may be in technical violation of the Medical Practice Act."

SB 577 established an exception to the Medical Practice Act's prohibitions on the unlicensed practice of medicine for practitioners who provide alternative or complementary care. Those practitioners may not imply that they are licensed physicians, and must disclose in any advertisements that they are not licensed by the state. Additionally, alternative and complementary care practitioners must provide patients with various specified disclosures prior to providing services, which must be acknowledged in writing by the patient.

While SB 577 allowed for the unlicensed practice of alternative and complementary care, it expressly prohibited those practitioners from engaging in certain acts. Statute currently lists seven proscribed services, such as conducting surgery or other invasive procedures, prescribing controlled substances, or setting fractures. This bill would additionally prohibit any unlicensed individual from providing osteopathic manipulative treatment, which is defined as the therapeutic application of manually guided forces to alleviate somatic dysfunction. Along with the bill's restriction of the term "osteopath," this bill seeks to ensure that unlicensed individuals cannot provide or claim to provide services within the scope of practice of a D.O., regardless of whether they comply with the requirements for alternative and complementary care.

Prior Related Legislation. SB 1451 (Ashby), Chapter 481, Statutes of 2024 updated existing restrictions on the use of the words "doctor" or "physician" or similar terms by individuals not licensed as physicians and surgeons, among various other changes.

AB 765 (Wood) of 2023 would have prohibited any person who is not a licensed physician and surgeon from using various medical specialty titles or otherwise implying that they are a physician and surgeon. *This bill died on suspense in the Assembly Committee on Appropriations.*

SB 577 (Burton), Chapter 820, Statutes of 2002 authorized unlicensed individuals to provide alternative or complementary care services under specified conditions.

ARGUMENTS IN SUPPORT:

The *Osteopathic Physicians & Surgeons of California* (OPSC) is sponsoring this bill. The OPSC writes: "In recent years, unlicensed, internationally trained 'osteopaths' have begun opening practices in California, offering medical treatments that overlap with services traditionally performed by licensed physicians. These individuals operate without formal licensure requirements or governmental oversight, claiming to treat conditions ranging from anxiety and depression to chronic pelvic pain and vertigo. Their professional-sounding titles, including "DO (CAN)" or "D.O.M.P.," blur the lines between licensed DOs and unlicensed practitioners, creating confusion for patients. AB 1703 appropriately makes it a misdemeanor for unlicensed individuals to use misleading titles, ensuring patients can distinguish legitimate DOs from unlicensed practitioners."

ARGUMENTS IN OPPOSITION:

There is no opposition on file.

POLICY ISSUE(S) FOR CONSIDERATION:

Impact on Traditional Osteopathy Practitioners. While there are no schools for traditional osteopathy in the United States, the author and sponsor of this bill cite a perceived increase in the number of unlicensed osteopaths who were trained in other countries and have now come to California to practice. Because these individuals are not subject to oversight by any state licensing agency, it is unclear how many of these individuals are currently practicing in California. While there is currently no opposition to this bill, similar language contained in a 2023 bill received opposition from a number of "non-physician osteopaths" and their patients. While the argument that allowing these individuals to practice alternative and complementary care while using terms commonly associated with licensed osteopathic physicians is cogent, the author should further seek to ascertain how significant the current population of unlicensed osteopaths is in the state so that the ultimate impact of the bill can be better understood.

REGISTERED SUPPORT:

Osteopathic Physicians and Surgeons of California *(Sponsor)*
American Osteopathic Association
California Rheumatology Alliance
California Society of Dermatology and Dermatologic Surgery
Osteopathic Medical Board of California

REGISTERED OPPOSITION:

None on file

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