

**HOUSE . . . . . No. 2270**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

*Jon Santiago*

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to the safer treatment.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Jon Santiago</i>	<i>9th Suffolk</i>	<i>1/20/2023</i>

**HOUSE . . . . . No. 2270**

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By Representative Santiago of Boston, a petition (accompanied by bill, House, No. 2270) of Jon Santiago relative to the practice of “dry needling” or “trigger point acupuncture” by certain health care professionals. Public Health.

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**The Commonwealth of Massachusetts**

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**In the One Hundred and Ninety-Third General Court  
(2023-2024)**  
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An Act relative to the safer treatment.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1 SECTION 1. Section 148 of Chapter 112 of the General Laws is amended by adding the  
2 following definition after the definition of “acupuncture intern”:-

3 “Dry needling” or “Trigger Point Acupuncture”, the practice of intramuscular therapy,  
4 means an advanced needling skill or technique limited to the treatment of myofascial pain, using  
5 a single use, single insertion, sterile filiform needle (without the use of heat, cold, or any other  
6 added modality or medication), that is inserted into the skin or underlying tissues to stimulate  
7 trigger points. Dry needling may apply theory based only upon Western medical concepts,  
8 requires an examination and diagnosis, and treats specific anatomic entities selected according to  
9 physical signs. Trigger point Acupuncture/Dry needling does not include the stimulation of  
10 auricular points, utilization of distal points or non-local points, needle retention, application of  
11 retained electric stimulation leads, or the teaching or application of other acupuncture theory.

12 SECTION 2. Chapter 112 of the General Laws shall be amended by adding the following  
13 new section after section 152:-

14 Section 152A. Licensed health care professionals wishing to practice “dry needling” or  
15 “trigger point acupuncture” as defined in Section 148 of Chapter 112 of the General Laws shall  
16 meet the following criteria:

17 (a) Practitioners must have completed at least two years of post-graduate, professional  
18 experience prior to the addition of trigger point acupuncture/dry needling.

19 (b) Five hundred didactic hours and 150 clinical hours total shall be required training for  
20 the practice of dry needling/trigger point acupuncture.

21 (c) Proof of education shall be supplied by the practitioner upon request by the  
22 department of public health.

23 (d) Education must be in-person and provided by qualified instructors as determined by  
24 IDFPR in consultation with the department of public health.

25 (e) Practitioners shall demonstrate minimal competency through psychometrically sound,  
26 third party examination testing not given by the courses offering training.

27 (f) A standard set of competencies shall be defined, including the knowledge, skills, and  
28 abilities needed for the safe and competent practice of trigger point acupuncture/dry needling by  
29 non-Licensed acupuncturists by the department of public health.

30 (g) Anyone practicing dry needling shall obtain and maintain the advanced orthopedic  
31 clinical certification.

32 (h) Any health care practitioner dry needling shall meet the continuing education required  
33 for acupuncture.

34 (i) The CNT class and exam taught by the CCAOM shall be passed by all practitioners of  
35 dry needling/trigger point acupuncture.

36 (j) Treatment defined as dry needling/trigger point acupuncture shall be charted  
37 appropriately in the medical record.

38 (k) Significant adverse events (requiring follow up medical attention) shall be reported  
39 and documented.

40 (l) Specific and appropriate written consent for treatment must be obtained from the  
41 patient, and malpractice insurance policies must specify acupuncture coverage.

42 SECTION 3. The department of public health shall promulgate rules and regulations  
43 necessary to the implementation of this chapter.