Health Professions FY 2013 Annual Report Board Activities

(Pursuant to PA 368 of 1978 as amended)

April 1, 2014

Prepared by
Carole H. Engle, Director
Bureau of Health Care Services





STEVE ARWOOD DIRECTOR

TABLE OF CONTENTS

Executive Summary	3
Fiscal Year 2013 Budget	5
Licensing Statistics	6
Disciplinary Actions	10
Board of Acupuncture	12
Board of Athletic Trainers	14
Board of Audiology	16
Board of Chiropractic	
Board of Counseling	20
Board of Dentistry	
Board of Dietetics and Nutrition	
Board of Marriage and Family Therapy	
Board of Massage Therapy	
Board of Medicine	_
Board of Nursing	
Board of Nursing Home Administrators	
Board of Occupational Therapists	
Board of Optometry	
Board of Osteopathic Medicine and Surgery	
Board of Pharmacy	
Board of Physical Therapy	
Michigan Joint Task Force on Physician's Assistants	
Board of Podiatric Medicine and Surgery	
Board of Psychology	
Board of Respiratory Care	
Sanitarian Registration	
Board of Social Work	
Board of Speech-Language Pathology	
Board of Veterinary Medicine	
Health Professional Recovery Committee	
Controlled Substances Advisory Commission	
Michigan Automated Prescription System	
Advisory Committee on Pain and Symptom Management	72

The Department of Licensing and Regulatory Affairs will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political belief. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.



Executive Summary:

This annual report covers fiscal year 2013 from October 1, 2012 to September 30, 2013. Information about the programs under the Health Professions Division within the Bureau of Health Care Services (BHCS) can found in this report. In addition, this report is available online for the public and health professional board members to access at the following locations:

- The Bureau of Health Care Services website at: www.michigan.gov/bhcs.
- The All About LARA section Legislative Reports of the Department of Licensing and Regulatory Affairs website at: www.michigan.gov/lara.

The mission of the BHCS is to protect and preserve the health, safety and welfare of the citizens of Michigan by supporting a qualified healthcare workforce through the licensing, professional development and regulation of health professionals. Goals for the Health Professions Division of BHCS are as follows:

- Provide a high level of service to all stakeholders by conducting business in a courteous, professional and timely manner.
- Provide a fair, consistent and timely process for those applying for a license or registration and maintain accurate records of those licenses and registrations issued.
- Provide an objective, efficient and timely process for addressing allegations involving health professionals licensed or registered by the Bureau and develop proactive policies and procedures designed to enhance the health, safety and welfare of the citizens of Michigan.
- Provide the public with information and educational resources regarding the licensing, regulation and practice standards of health professions.

Each of the designated professions is authorized through legislative action. Most of the professions have a board consisting of licensed health professionals and public members who establish the educational, examination and general practice requirements. These requirements are established either in the legislation that authorizes the regulation of the profession or in the administrative rules for that board. Additionally, the boards are responsible for disciplining licensed/registered individuals who violate the provisions of the Public Health Code, PA 368 of 1978, as amended. The board members are appointed by the Governor and typically serve for two terms of four years each.

The board elects a chair and a vice-chair each year. These individuals can be either licensed professionals or public members. The board chair must appoint a disciplinary subcommittee which consists of two public members and three professional members. The disciplinary subcommittee must be chaired by a public member. This committee reviews most of the disciplinary cases and determines the sanction that needs to be imposed on the regulated individual.

Regulation of the health professionals come in three different levels of authorized practice:

 License – where only health professionals that hold the credential can practice in Michigan.



- Registration where only health professionals who hold the credential can call themselves by that name but other qualified individuals can practice that profession as long as they do not use the protected title.
- Certification where a registry is created that indicates individuals who have met a
 specified level of educational training and experience and completed an
 examination, if appropriate. Neither the title nor the practice is limited to those who
 hold the credential but all of those who hold the credential have met pre-established
 criteria.

The Bureau of Health Care Services (BHCS) is located within the Department of Licensing and Regulatory Affairs. The bureau's Administrative Support Division, Health Professions Investigation Division, Health Professions Licensing Division and the Regulatory Division oversee all licensing, investigations and enforcement responsibilities of health professionals. Carole H. Engle serves as the director of the bureau.



Fiscal Year 2013 Budget

Appropriated FTEs	140
Legislative Appropriation	\$26,822,000.00
FINANCIAL PLAN:	
Salary and Wages	7,328,094.05
Longevity and Insurance	1,488,155.18
Retirement & FICA	4,151,520.65
Terminal Leave	128,532.96
Travel, In & Out-of-State	245,286.08
Communications	111,153.88
Utilities	35,499.41
Contractual Services	6,263,935.13
Supplies and Materials	566,993.67
Equipment	55,513.70
Grants	335,905.00
Miscellaneous	16,507.31
Legal Services & Settlements	33,600.00
Cost Allocations	57,016.05
IT Costs – 6112	596,556.16
Indirect Salaries	633.60
TOTAL	\$21,414,902.83



Licensing Statistics

Professions Licensees	Applications Received	Examinations # of Applicants Processed	Written Verifications/ Certifications	Renewals	Total Licensees
Acupuncture Acupuncturists	52		4	38	117
Athletic Trainer Athletic Trainer Temporary AT	144 0		30	106	1,153 0
Audiology Audiologist Audiologist Limited	27 1		23	236 0	556 0
Chiropractic Chiropractors Ed Ltd Chiropractor	113 8		100	1,491 0	2,943 14
Counseling Counselors Ed Ltd Counselors	365 582		74	1,869 2,738	6,037 3,128
Dentistry Dentists Dentist Limited Dentist – Nonclinical L Ed Ltd Dentists	36		262	2,377 1 1 31	7,435 1 1 58
Clinical Academic Der Dental Specialists Prosthodontist Endodontist Oral Surgeon Orthodontist Pediatric Dentist Periodontist Oral Pathologist	ntists 18 3 1 7 13 11 9	23 (96% Passed)	0	55 14 48 69 97 39 50	55 165 221 333 131 160 6
Dental Hygienists Clinical Academic Hyg Nitrous Oxide Certifica Local Anesthesia Cert Dental Assistants Dental Asst – Clinical Dental Asst – Nonclini	346 gienists 0 ation 30 tification 31 154 Acad 1 ical Ltd 0	153 (86% Passed)	2	3,258 0 513 0	10,214 0 2,886 3,662 1,644 0
Local Anesthesia Cert Dental Assistants Dental Asst – Clinical	ification 31 154 Acad 1 ical Ltd 0	153 (86% Passed)	2	0	3,662 1,644



Professions Licensees	Applications Received	Examinations # of Applicants	Written Verifications/ Certifications	Renewals	Total Licensees
Marriage and Family The Marriage & Family The Ed Ltd MFT	• •	18 (56% Passed)	13	310 74	649 111
Massage Therapy	1,743			0	1,600
Medicine Medical Doctors Medical Doctor – Limit MD – Special Voluntee Clinical Academic MD Ed Ltd MD		223 (94% Passed)	*175	10,198 0 0 34 2,887	32,780 0 28 49 4,023
Nursing Registered Nurses RN Provisional RN Temporary Nurse Specialists	7,661 111 9	6,509 (81% Passed)	**443	68,024	140,210 85 16
Anesthetists Midwives Practitioners Practical Nurses	114 19 553 2,068	1,928 (82% Passed)	**8	1,282 162 2,304 12,545	2,562 337 5,102 26,536
Nursing Home Administrators	189	State 112 (82% Passed Nat'l 136 (51% Passed	•	547	1,281
Occupational Therapy Occupational Therapy Occupational Therapy			182 53	2,375 764	5,165 1,618
Optometry Optometrists Special Volunteer DPA Specialty Certification TPA Specialty Certification DPA & TPA Specialty	ation 0		40	811 0 0 0	1,663 3 1,607 1,582 0
Osteopathic Medicine Osteopathic Doctors Clinical Academic DO Ed Ltd DO Osteo – Special Volun	436 0 548		*16	2,252 0 949 0	7,143 0 1,403 1



Professions Licensees	Applications Received	Examinations # of Applicants	Written Verification Certification		Total Licensees
Pharmacy Pharmacists (NAPL Jurisprudence Ed Ltd Pharmacists Pharmacies Manufacturer/Whole	430 300	415 (88% Passed) 618 (86% Passed)	252 102 97	6,594 1,307 1,666 855	13,535 1,539 3,381 1,897
Physical Therapy Physical Therapists Physical Therapist A Phys Ther Assist - L	Assist 378 Limited 0	442 (68% Passed) 400 (67% Passed)	662 77	4,606 371 0	9,503 3,815 2
Physician's Assistant Physician Assistant Physician Assist Te	s 326		145	2,030 0	4,221 5
Podiatric Medicine a Podiatrists Ed Ltd Podiatrists Pod Educ Precepto	38 37	20 (100% Passed)	33	262 37	794 63 0
Psychology Psychologists Doctoral Limited Masters Limited Temporary Limited	123 90 243 70	255 (54% Passed)	112	1,424 80 1,613	2,934 240 3,310 659
Respiratory Care Respiratory Therapi Resp Ther Tempora			78	2,444 0	5,239 0
Sanitarian Sanitarians	1		0	216	418
Social Work Social Services Teo Social Services Ltd			215	533 16	1,375 26
Bachelors Social W Bachelors Ltd SW Masters Social Wor	396	88 (73% Passed) Clinical 1,253 (59% Passed)	,	1,898 865 6,765	3,830 1,168 14,380
Masters Ltd SW MSW Macro Specia MSW Clinical Speci		Macro 47 (64% Pass	eu)	3,499 0 0	4,382 10,812 14,099



Professions Licensees	Applications Received	Examinations # of Applicants	Written Verification Certification		Total Licensees
Speech-Language Pa	thology				
Speech-Lang Pathol	• • • • • • • • • • • • • • • • • • • •		35	699	3,045
Speech-Lang Ed Ltd	183			0	280
Speech-Lang Ltd	152			33	203
Veterinary Medicine					
Veterinarians	199		228	1,897	3,866
Clinical Academic Ve	et 17			52	67
Ed Ltd Vet	0			3	3
Veterinary Technicia	ns 283	MI 290 (73% Passed Nat'l 220 (81% Passed	,	1,138	2,784
TOTALS	28,701		3,669	159,453	344,711
		(Total Licensees does	s not include	Specialty Cer	rtifications)

^{*}Effective 01/01/09 Board of Medicine and Osteopathic Medicine verifications (to other state boards only) are now being processed by VeriDoc licensing system.



^{**}Effective 10/1/11 Board of Nursing verifications (to other state boards only) are now being processed by NURSYS licensing systems.

Disciplinary Actions

Profession I	Reprimand	Probation	Fine	Voluntary Surrender		Suspension F	Revocation	Total
Acupuncture	0	0	0	0	0	0	0	0
Athletic Traine	ers 0	0	1	1	0	0	0	2
Audiology	0	0	0	0	0	0	0	0
Chiropractic	2	8	3	1	1	3	0	18
Counseling	0	7	2	1	0	6	0	16
Dentistry	2	41	4	12	2	14	1	76
Marriage & Family Thera	0 apy	0	0	0	0	0	0	0
Massage Ther	ару 0	0	0	0	0	0	0	0
Medicine	5	18	24	8	5	25	5	90
Nursing	12	188	37	18	6	167	5	433
Nursing Home Administrato		5	0	0	0	3	0	8
Occupational Therapy	1	4	1	0	0	1	2	9
Optometry	0	2	1	0	0	1	1	5
Osteopathic Med & Surge	2 ery	17	8	0	2	6	0	35
Pharmacy	1	45	29	6	4	8	7	100
Physical Thera	ару 0	3	2	0	3	4	0	12
Physician's As	sts 0	3	0	0	0	2	1	6
Podiatric Med & Surge	1 ery	3	1	0	1	0	1	7
Psychology	1	2	0	2	6	6	1	18
Respiratory Ca	are 0	1	2	0	0	1	0	4



Profession	Reprimand	Probation	Fine	Voluntary Surrender		Suspension I	Revocation	Total
Sanitarians	0	0	0	0	0	0	0	0
Speech-Lang Pathology	guage 0	0	0	0	0	0	0	0
Social Work	0	59	1	8	11	28	1	108
Veterinary Medicine	0	1	6	0	0	0	0	7
TOTALS	27	407	122	57	41	275	25	954



Michigan Board of Acupuncture

The Michigan Board of Acupuncture was created with the enactment of Public Act 30 of 2006, which amended the Public Health Code, Public Act 368 of 1978.

The practice of acupuncture, as defined in the Public Health Code, means the insertion and manipulation of needles through the surface of the human body at specific locations on the human body for the prevention or correction of disease, injury, pain, or other condition.

The Board of Acupuncture consists of 13 voting members: 7 acupuncturists, 3 physicians and 3 public members.

Board Members as of 9/30/13	Term Expires
Lincoln, Deborah E., RN, MSN, RAC, Chair	6/30/14
Batzer, Margaret, RAC	6/30/14
Emanuele, Roseanne, MAC	6/30/16
Haas, Annie, MSTOM, Dipl.AC	6/30/14
Krofcheck, David, OMD, LAC, BA	6/30/15
Morris, Rev. Charles, Public Member	6/30/14
Pappas, John L., MD	6/30/14
Roach, Chrystal, Public Member	6/30/14
Sullivan, William, Public Member	6/30/15
Tan, Xiaohong, OMD	6/30/15
Vacant, Public Member	
Vacant, Public Member	
Vacant, Public Member	

Schedule of Board Meetings

Fiscal Year 2013

October 19, 2012 (cancelled) January 18, 2013 (cancelled) April 19, 2013 (cancelled) July 19, 2013 (full board)

Registration Activity Applications Received

Applications Received	52
Number of Registrations	117
Da malata ma A athaite	
Regulatory Activity	
Allegations Received	3
Administrative Investigations	5
Field Investigations Authorized	2
Field Investigations Completed	3
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0



Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0



Michigan Athletic Trainer Board

The Michigan Athletic Trainer Board was created with the enactment of Public Act 54 of 2006, which amended the Public Health Code, Public Act 368 of 1978.

The practice of athletic training, as defined in the Public Health Code, means the treatment of an individual for risk management and injury prevention, the clinical evaluation and assessment of an individual for an injury or illness, or both, the immediate care and treatment of an individual for an injury or illness, or both, and the rehabilitation and reconditioning of an individual's injury or illness, or both, as long as those activities are within the rules promulgated for this profession and performed under the direction and supervision of an individual licensed as an allopathic or osteopathic physician.

The Athletic Trainer Board consists of 11 voting members: 6 athletic trainers, 2 licensed physicians and 3 public members.

Board Members as of 9/30/13	Term Expires
Eyers, Christina, EdD, AT, ATC, Chair	12/31/16
Corbin, Dennis R., ATC, Vice-Chair	12/31/13
Abendour, Michael, AT, ATC	6/30/14
Berry, Ann, AT, ATC	12/31/13
Bupp, William F., Public Member	6/30/14
Cartwright, Lorin, Public Member	6/30/14
Nassar, Lawrence G., DO	12/31/13
Reynolds, Richard, MD Snyder, Rosemary, AT, ATC	12/31/16 6/30/14 12/31/15
Wykes, Patrick, MA, AT, ATC, CSCS Vacant, Public Member	12/31/15

Schedule of Board Meetings

Fiscal Year 2013

November 16, 2012 (full board) February 15, 2013 (cancelled) May 17, 2013 August 16, 2013

Licensing Activity

Applications Received	144
Number of Licensees	1,153

Regulatory Activity

Allegations Received	1
Administrative Investigations	1
Field Investigations Authorized	2
Field Investigations Completed	3
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0



Reprimand	0
Probation	0
Fine	1
Voluntary Surrender	1
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	2



Michigan Board of Audiology

The Michigan Board of Audiology was created with the enactment of Public Act 97 of 2004, which amended the Public Health Code, Public Act 368 of 1978.

The practice of audiology, as defined in the Public Health Code, means the nonmedical and nonsurgical application of principles, methods, and procedures related to disorders of hearing.

The Michigan Board of Audiology consists of 9 voting members: 5 audiologists, 2 members licensed to practice medicine or osteopathic medicine and surgery who hold a certificate of qualification from the American Board of Otolaryngology and 2 public members.

Board Members as of 9/30/13	Term Expires
O'Connor, Thomas, AuD, Chair	6/30/15
Blackburn, Sharon, AuD	6/30/16
Ferguson, Nicole, AuD	6/30/17
Frank, Peggy, AuD, MA	6/30/14
Hicks, Diantha, Public Member	6/30/16
Hoff, Paul T., MD	6/30/16
Kileny, Paul, PhD, AuD	6/30/15
Lewis, Melissa, JD, Public Member	6/30/16
Mukkamala, Srinivas B., MD	6/30/14

Schedule of Board Meetings

Fiscal Year 2013

December 21, 2012 (cancelled) March 15, 2013 (full board) June 21, 2013 (cancelled) September 20, 2013 (cancelled)

Licensing Activity

	logists

Applications Received	27
Number of Licensees	556

Audiologists - Limited

Applications Received	1
Number of Licensees	0

Random Continuing Education Audits

Audited	15
Complied	15

Renewal Continuing Education Audits

Audited	3
Complied	3



Regulatory Activity

Allegations Received	3
Administrative Investigations	7
Field Investigations Authorized	0
Field Investigations Completed	2
Administrative Complaints Filed	0
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions	
Reprimand	C
Probation	C
Fine	C
Voluntary Surrender	C
Limited License	C
Suspension	C
Revocation	C
Total Disciplinary Actions	C



Michigan Board of Chiropractic

The Michigan Board of Chiropractic was originally formed with the enactment of Public Act 145 of 1933. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of chiropractic as defined in the Public Health Code means that discipline within the healing arts that deals with the human nervous system and the musculoskeletal system and their interrelationship with other body systems.

The Michigan Board of Chiropractic consists of 9 voting members: 5 chiropractors and 4 public members.

Board Members as of 9/30/13	Term Expires
Klapp, Thomas, DC, Chair	12/31/14
Reno, Donald, DC, Vice-Chair	12/31/15
Dean, Christophe, DC	12/31/14
Erskine, Constance, Public Member	12/31/13
Huta, Robert, Public Member	12/31/15
Squires, Lewis, DC	12/31/16
Stuart, Mark, Public Member	12/31/13
Vittone, Julann, Public Member	12/31/13
Wilcox Jr., Ronald, DC	12/31/15

Schedule of Board Meetings

Fiscal Year 2013

November 1, 2012 January 10, 2013 March 14, 2013 May 9, 2013 July 11, 2013 September 19, 2013

Licensing Activity

Chiropractors

Applications Received	113
Number of Licensees	2,943

Educational Limited Chiropractors

Applications Received	8
Number of Licensees	14

Random Continuing Education Audits

Audited	103
Complied	83

Renewal Continuing Education Audits

Audited	23
Complied	23



Regulatory Activity	
Allegations Received	57
Administrative Investigations	106
Field Investigations Authorized	19
Field Investigations Completed	24
Administrative Complaints Filed	26
Summary Suspensions Filed	4
Cease and Desist Orders Issued	1
Order to Compel Issued	0
Board Disciplinary Actions	
Reprimand	2
Probation	8
Fine	3
Voluntary Surrender	1
Limited License	1
Suspension	3
	_



Revocation

Total Disciplinary Actions

0

18

Michigan Board of Counseling

The Michigan Board of Counseling was created by Public Act 421 of 1988 which was an amendment to the Public Health Code, Public Act 368 of 1978, as amended.

The Public Health Code defines the practice of counseling to mean the rendering to individuals, groups, families, organizations, or the general public, a service involving the application of clinical counseling principles, methods, or procedures for the purpose of achieving social, personal, career, and emotional development and with the goal of promoting and enhancing healthy, self-actualizing and satisfying lifestyles whether the services are rendered in an educational, business, health, private practice, or human services setting.

The Michigan Board of Counseling consists of 11 voting members: 6 counselors, 1 mental health professional and 4 public members.

Board Members as of 9/30/13	Term Expires
Munley, Patrick, LPC, Chair	6/30/15
Papazian, Gerald, LPC, Vice-Chair	6/30/16
Emde, Robyn, LPC	6/30/16
Galgoci, Tracey, MA, LPC, NCC	6/30/17
Hampton, Steven D., LMSW	6/30/14
Hunt, Rev. Meredith, Public Member	6/30/14
Kruse, Sara, Public Member	6/30/17
LeClear, Laura, Public Member	6/30/14
Parfitt, Diane, LPC, PhD	6/30/15
Sawdey-Roberts, LuAnn, CRC, LPC	6/30/17
Wuori, Thomas J., JD, Public Member	6/30/14

Schedule of Board Meetings

Fiscal Year 2013

December 7, 2012 March 1, 2013 June 7, 2013 September 13, 2013

Licensing Activity

Counselors

Applications Received 365 Number of Licensees 6,037

Educational Limited Counselors

Applications Received 582 Number of Licensees 3,128



Regulatory Activity

Allegations Received	45
Administrative Investigations	71
Field Investigations Authorized	16
Field Investigations Completed	21
Administrative Complaints Filed	15
Summary Suspensions Filed	3
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Reprimand	0
Probation	7
Fine	2
Voluntary Surrender	1
Limited License	0
Suspension	6
Revocation	0
Total Disciplinary Actions	16



Michigan Board of Dentistry

The Michigan Board of Dentistry was originally formed with the enactment of Public Act 122 of 1919. This Act regulated the practice of dentistry and dental hygiene in the State of Michigan, including providing for examination, licensing and regulation of persons practicing dentistry and dental hygiene; authorizing dental assistants; and providing for the discipline of offenders against the Act.

On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended, and included certification of specialists in the fields of orthodontics, endodontics, prosthodontics, pediatric dentistry, periodontics, oral and maxillofacial surgery, and oral pathology.

The practice of dentistry, as defined by the Public Health Code, means the diagnosis, treatment, prescription, or operation for a disease, pain, deformity, injury, or physical condition of the human tooth, teeth, alveolar process, gums or jaws, or their dependent tissues, or an offer, undertaking, attempt to do, or holding oneself out as able to do any of these acts.

The practice of dental hygiene, as defined by the Public Health Code, means practice at the assignment of a dentist in that specific area of dentistry based on specialized knowledge, formal education, and skill with particular emphasis on preventive services and oral health education.

Practice as a dental assistant, as defined by the Public Health Code, means assistance in the clinical practice of dentistry based on formal education, specialized knowledge, and skill at the assignment and under the supervision of a dentist.

The Michigan Board of Dentistry consists of 19 voting members: 8 dentists, 2 dentists who have been issued a health profession specialty certification, 4 dental hygienists, 2 registered dental assistants, and 3 public members.

Board Members as of 9/30/13	Term Expires
Hines, Diane, DDS, Chair	6/30/14
Manos, Deborah, DDS, Vice-Chair	6/30/16
Bera, Julie, RDA, CDA	6/30/14
Bournias, Nicholas, DDS	6/30/16
Briskie, Daniel, DDS	6/30/15
Darrow, Lisa, RDH	6/30/16
Franklin, Sandra, RDH	6/30/15
Hale, Rita, Public Member	6/30/16
Hondorp, Donna, Public Member	6/30/15
Horvath, Laurie, Public Member	6/30/17
Inman, Kathleen, RDA, RDH	6/30/17
Kaysserian, Kerry, DDS	6/30/15
Priestap, Deborah E., DDS	6/30/14
Roels, Patricia, DDS	6/30/17
Schmakel, Timothy, MD, DDS	6/30/16
Spencer, Craig, DDS	6/30/15
Stamm, Carol, RDA	6/30/15
Weidig, Paula, RDH	6/30/16
Wright, William, DDS	6/30/17



Schedule of Board Meetings

Fiscal Year 2013

October 11, 2012 December 13, 2012

February 14, 2013

April 11, 2013

June 13, 2013

August 8, 2013

Licensing Activity

Dentists

Applications Received 245 Number of Licensees 7,435

Dentist – Limited

Applications Received 0
Number of Licensees 1

Dentist – Nonclinical Limited

Applications Received 0
Number of Licensees 1

Dentist – Special Volunteer

Applications Received 2 Number of Licensees 14

Dental Specialty Licenses

Prosthodontists

Applications Received 3 Number of Specialty Licensees 55

Endodontists

Applications Received 1
Examination Administered 1
Number of Specialty Licensees 165

Oral Surgeons

Applications Received 7
Examinations Administered 6
Number of Specialty Licensees 221

Orthodontists

Applications Received 13
Examinations Administered 10
Number of Specialty Licensees 333

Pediatric Dentists

Applications Received 11
Number of Specialty Licensees 131



Periodontists Applications Received Examinations Administered Number of Specialty Licensees	9 6 160
Oral Pathologists Applications Received Number of Specialty Licensees	0 6
Educational Limited Dentists Applications Received Number of Licensees	36 58
Clinical Academic Dentists Applications Received Number of Licensees	18 67
Registered Dental Hygienists Applications Received Number of Licensees	346 10,214
Clinical Academic Hygienists Applications Received Number of Licensees	0 0
Specialty Certifications for Dental I	Hvaienists
Nitrous Oxide	., 9
Applications Received Number of Certifications	30 2,886
Local Anesthesia	
Applications Received	31
Number of Certifications	3,662
Registered Dental Assistants	151
Applications Received Examinations Administered	154 153
Number of Licensees	1,644
Dental Assistant – Nonclinical Ltd	
Applications Received	0
Number of Licensees	1
Dental Assistant – Clinical Academ	nic
Applications Received	1
Number of Licensees	0
Random Continuing Education Aud Dentists	dits
Audited	103
Complied	83



Dental Assistants Audited Complied	17 12
Dental Hygienists Audited Complied	167 138
Renewal Continuing Education Audits Dentists Audited Complied	34 34
Dental Assistants Audited Complied	1 1
Dental Hygienists Audited Complied	12 12
Regulatory Activity Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued Order to Compel Issued	312 449 89 104 88 4 2
Board Disciplinary Actions Reprimand Probation Fine Voluntary Surrender Limited License Suspension Revocation Total Disciplinary Actions	2 41 4 12 2 14 1 76



Michigan Board of Dietetics and Nutrition

The Michigan Board of Dietetics and Nutrition was created with the passage of Public Act 333 of 2006 with an effective date of July 1, 2007 which amended the Public Health Code, Public Act 368 of 1978, as amended.

The practice of dietetics and nutrition means the provision of dietetics and nutrition care service including assessing the nutrition needs, establishing priorities, goals and objectives to meet the nutrition needs of an individual or group of individuals, providing nutrition counseling, developing, implementing and managing a nutrition care system, evaluation and maintaining a standard of quality in dietetics and nutrition care services, and providing medical nutrition therapy.

The Michigan Board of Dietetics and Nutrition consists of 7 voting members: 5 licensed dieticians or nutritionists and 2 public members.

Board Members as of 9/30/13	Term Expires
Prout, William, Public Member, Chair	6/30/15
Weatherspoon, Lorraine, PhD, Vice-Chair	6/30/15
Doak-Whitney, Louise, MS, RD	6/30/15
Jay, Ann, MS, RD	6/30/15
Wille, Celina, PhD, Public Member	6/30/15
Vacant, Professional Member	
Vacant, Professional Member	

Schedule of Board Meetings

Fiscal Year 2013

December 11, 2012 (cancelled) March 12, 2013 June 4, 2013 September 10, 2013 (cancelled)

Licensing Activity

The Board is developing administrative rules to implement the licensing program so no licenses can be issued until the rules are officially filed.



Michigan Board of Marriage and Family Therapy

The Michigan Board of Marriage Counselors was originally formed with the enactment of Public Act 292 of 1966. On October 21, 1980, the authority of the Board was transferred to Article 15 of Public Act 299 of 1980. Public Act 126 of 1995 transferred the authority of the Board to the Public Health Code, Public Act 368 of 1978, as amended, and the name was changed to the Board of Marriage and Family Therapy.

Part 169 defines the practice of marriage and family therapy as the providing of guidance, testing, discussions, therapy, instruction, or advice that is intended to avoid, eliminate, relieve, manage or resolve marital or family conflict or discord, to create, improve, or restore marital or family harmony, or to prepare couples for marriage.

The Michigan Board of Marriage and Family Therapy consists of 9 voting members: 6 marriage and family therapists and 3 public members.

Board Members as of 9/30/13	Term Expires
Angera, Jeffrey, PhD, LMFT, Chair	6/30/14
Pernice-Duca, Francesca, PhD, LMFT, Vice-Chair	6/30/15
Allen, Concha, PhD, Public Member	6/30/15
Bischof, Gary, PhD, LMFT	6/30/16
Grierson, Terri, Public Member	6/30/16
Jager, Kathleen, PhD, LMFT	6/30/15
Mammen, Laura, LMFT, LPC	6/30/17
Romney-McDaniel, Ronna, Public Member	6/30/17
Wampler, Richard, PhD, LMFT	6/30/15

Schedule of Board Meetings

Fiscal Year 2013

December 14, 2012 (cancelled) March 8, 2013 June 14, 2013 (cancelled) September 27, 2013 (full board)

Licensing Activity

Marriage	and	Famil	v Iha	raniete
Iviai i iaue	anu	ı amı	v ilie	Iavisis

Applications Received	29
Examinations Authorized	22
Number of Licensees	649

Educational Limited MFTs

Applications Received	31
Number of Licensees	111



Regulatory Activity

Allegations Received	1
Administrative Investigations	1
Field Investigations Authorized	1
Field Investigations Completed	3
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0



Michigan Board of Massage Therapy

The Michigan Board of Massage Therapy was created with the enactment of Public Act 471 of 2009, which amended the Public Health Code, Public Act 368 of 1978.

The practice of massage therapy, as defined in the Public Health Code, means the application of a system of structured touch, pressure, movement, and holding to the soft tissue of the human body in which the primary intent is to enhance or restore the health and well-being of the client. Practice of massage therapy includes complementary methods, including the external application of water, heat, cold, lubrication, salt scrubs, body wraps, or other topical preparations; and electromechanical devices that mimic or enhance the actions possible by the hands.

The Michigan Board of Massage Therapy consists of 11 voting members: 7 massage therapists and 4 public members.

Board Members as of 9/30/13	Term Expires
Ryan, Michael, MT, Chair	12/31/13
Joda-Miller, Bilky, MT, Vice-Chair	12/31/13
Behen, Rosalie, MT	12/31/16
Bowman, Donald, MT	12/31/15
Gennety, Tiffany, MT	12/31/16
Hunter, Terese, Public Member	12/31/16
Mueller, Melissa, CMT	12/31/15
Murphy, Jill, Public Member	12/31/16
Rivard, Teresa, Public Member	12/31/15
Rudnianin, Harold, Public Member	12/31/13
West, Amanda, Public Member	12/31/13

Schedule of Board Meetings

Fiscal Year 2013

October 22, 2012 (cancelled) January 7, 2013 April 8, 2013 July 8, 2013 (cancelled)

Licensing Activity

Ma	SS	age	Thera	pist	S
-			_		

Applications Received	1,743
Number of Licensees	1,600

Regulatory Activity

regulatory retirity	
Allegations Received	0
Administrative Investigations	0
Field Investigations Authorized	0
Field Investigations Completed	0
Administrative Complaints Filed	0
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0



Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0



Michigan Board of Medicine

The Michigan Board of Medicine was originally formed with the enactment of Public Act 237 of 1899. This act provided for the examination, regulation and licensing of physicians and surgeons in the State of Michigan, and for the discipline of offenders against the Act. On January 8, 1974, a new Medical Practice Act, Public Act 185 of 1973, became effective. This Act continued in effect until September 30, 1978, when the Board's authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of medicine, as defined in the Public Health Code, means the diagnosis, treatment, prevention, cure or relieving of a human disease, ailment, defect, complaint, or other physical or mental condition, by attendance, advice, device, diagnostic test, or other means, or offering, undertaking, attempting to do, or holding oneself out as able to do, any of these acts.

The Michigan Board of Medicine consists of 19 voting members: 10 medical doctors, 1 physician's assistant, and 8 public members.

Board Members as of 9/30/13	Term Expires
Burney, Richard E., Chair	12/31/15
Graham, Peter, MD, Vice-Chair	12/31/13
Arsiwala, Mohammed A., MD	12/31/15
Bates, Richard, MD	12/31/13
Bisonet, Meghan, PA-C	12/31/14
Cameron, Oliver G., MD	12/31/13
Dull, David L., MD	12/31/13
Fraley, Theresa L., Public Member	12/31/13
Graham-Solomon, Cheryl, Public Member	12/31/13
Leung, Vivian W., Public Member	12/31/13
Pasky, Cynthia, Public Member	12/31/13
Prues, Louis, Public Member	12/31/15
Rogers, James, MD	12/31/15
San Diego, Leticia J., PhD, Public Member	12/31/13
Sheridan, Carol, Public Member	12/31/14
Szymanski, Dennis C., MD	12/31/15
Tocco-Bradley, Rosalie, MD	12/31/15
Torreano, Gail, Public Member	12/31/15
Weingarden, David S., MD	12/31/13

Schedule of Board Meetings

Fiscal Year 2013 November 21, 2012 January 16 2013 March 27, 2013 May 22, 2013 July 17, 2013

September 18, 2013



Licensing Activity Medical Doctors Applications Received Examinations Authorized Number of Licensees	1,786 218 32,780
Medical Doctor – Limited Applications Received Number of Licensees	0 0
MD – Special Volunteers Applications Received Number of Licensees	7 28
Clinical Academic Doctors Applications Received Number of Licensees	18 49
Educational Limited Doctors Applications Received Number of Licensees	1,297 4,023
Random Continuing Education A Audited Complied	udits 115 90
Renewal Continuing Education A	udits
Audited Complied	177 177
Regulatory Activity Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued Order to Compel Issued	767 770 151 204 110 18 2
Reprimand Probation Fine Voluntary Surrender Limited License Suspension Revocation Total Disciplinary Actions	5 18 24 8 5 24 5 89



Michigan Board of Nursing

The Michigan Board of Nursing was originally created with the enactment of the Nurse Practice Act, Public Act 319 of 1909; authority was transferred to the Nursing Practice Act of 1967 by Public Act 149 of 1967. On September 30, 1978, authority was again transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of nursing, as defined in the Public Health Code, means the systematic application of substantial specialized knowledge and skill, derived from the biological, physical, and behavioral sciences, to the care, treatment, counsel, and health teaching of individuals who are experiencing changes in the normal health processes or who require assistance in the maintenance of health and the prevention or management of illness, injury, or disability.

The practice of nursing as a "licensed practice nurse" or "LPN." means the practice of nursing based on less comprehensive knowledge and skill than that required of a registered professional nurse and performed under the supervision of a registered professional nurse, physician, or dentist. "Registered professional nurse" or "RN" means an individual licensed under this article to engage in the practice of nursing which scope of practice includes the teaching, direction, and supervision of less skilled personnel in the performance of delegated nursing activities.

The Public Health Code establishes the Board of Nursing to consist of 23 members: 9 registered nurses (RNs), 1 nurse midwife, 1 nurse anesthetist, 1 nurse practitioner, 3 licensed practical nurses (LPNs), and 8 public members. Of the 9 registered nurses: 3 must have a master's degree with a major in nursing and be engaged in nursing education, 1 in less than a baccalaureate program; 1 in a baccalaureate or higher program and 1 in a licensed practical nurse program; 3 must have a baccalaureate degree in nursing and be engaged in nursing practice or nursing administration; and 3 must be non-baccalaureate registered nurses engaged in nursing practice or nursing administration. The 3 licensed practical nurses must have graduated from a state-approved program of practical nurse education.

During this fiscal year, the Board met to grant licenses, impose disciplinary sanctions, review and approve nurse education programs, and to carry out all other mandates of the Code relating to the licensing and regulating of RNs and LPNs.

Board Members as of 9/30/13	Term Expires
Meringa, Joshua, RN, Chair	6/30/16
Basso, Ronald, JD, Public Member, Vice-Chair	6/30/15
Argyle, Roselyn D., RN	6/30/15
Armstrong, Reginald, Public Member	6/30/14
Beranek, Kelly, RN	6/30/17
Bouchard-Wyant, Kathy, RN	6/30/15
Brown, Mary J., RN	6/30/15
Childress, James H., Public Member	6/30/14
Corrado, Mary, Public Member	6/30/15
DeDecker-Vander Kolk, Mary, RN	6/30/16
DeVries, Jill, LPN	6/30/16
Egede-Nissen, Lars, Public Member	6/30/14
Fenske, Cynthia, RN	6/30/15
Ferency, Michael, JD, Public Member	6/30/14
Hopper, Paula, RN	6/30/15



Howard, Denise, LPN	6/30/17
Leigh, Elaine, RN, NP	6/30/17
McDonald, Tiffany, RN	6/30/17
O'Connor, Glenn, RN, CRNA	6/30/17
Schultz, LaDonna, JD, Public Member	6/30/14
Stefanski, Elaine M., LPN	6/30/15
Tobbe, Kristopher, Public Member	6/30/14
Velez, Sondra, RN, CNM	6/30/17

Schedule of Board Meetings

Fiscal Year 2013

October 4, 2012 (disciplinary subcommittee)

November 8, 2012 (full board and disciplinary subcommittee)

December 6, 2012 (disciplinary subcommittee)

January 3, 2013 (full board and disciplinary subcommittee)

February 7, 2013 (disciplinary subcommittee)

March 7, 2013 (full board and disciplinary subcommittee)

April 4, 2013 (disciplinary subcommittee)

May 2, 2013 (full board)

May 10, 2013 (disciplinary subcommittee)

June 5, 2013 (full board and disciplinary subcommittee)

July 11, 2013 (disciplinary subcommittee)

August 1, 2013 (disciplinary subcommittee)

September 12, 2013 (full board and disciplinary subcommittee)

Licensing Activity

Registered Nurses

Applications Received	7,661
Examinations Authorized	7,079
Number of Licensees	140.210

Registered Nurses – Provisional

Applications Received	111
Number of Licensees	85

Register Nurses – Temporary

Applications Received	9
Numbers of Licensees	16

RN Specialty Certifications

Anesthetists

Applications Received	114
Number of Certifications	2,562

Midwives

Applications Received	19
Number of Licensees	337

Practitioners

Applications Received	553
Number of Licensees	5,102



Practical Nurses Applications Received Examinations Authorized Number of Licensees	2,068 1,959 26,536
Random Continuing Educ Practical Nurses	cation Audits
Audited Complied	77 53
Registered Nurses	
Audited Complied	395 317
Nurse Anesthetists	
Audited Complied	55 50
•	
Nurse Midwives Audited	10
Complied	10
Nurse Practitioners	
Audited Complied	98 92
•	-
Renewal Continuing Educe Practical Nurses	cation Audits
Audited	257 257
Complied	237
Registered Nurses Audited	1,025
Complied	1,025
Registered Nurses w/Spe	cialties
Audited Complied	56 56
•	30
Regulatory Activity Allegations Received	1,304
Administrative Investigation	ns 2,414
Field Investigations Author	
Field Investigations Comple	
Administrative Complaints	Filed 483



Summary Suspensions Filed

Order to Compel Issued

Cease and Desist Orders Issued

108

2

3

Reprimand	12
Probation	189
Fine	38
Voluntary Surrender	18
Limited License	6
Suspension	167
Revocation	5
Total Disciplinary Actions	435



Michigan Board of Nursing Home Administrators

The Michigan Board of Nursing Home Administrators was created by Public Act 166 of 1969. On October 21, 1980, the authority of the Board was transferred to Article 19 of Public Act 299 of 1980. Public Act 139 of 2001 transferred the authority of the Board of Nursing Home Administrators to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of a nursing home administrator, as defined in the Public Health Code, means planning, organizing, directing, and controlling the total operation of the nursing home on behalf of the governing board or owner of a nursing home.

The Michigan Board of Nursing Home Administrators consists of 9 voting members: 6 nursing home administrators and 3 public members.

Board Members as of 9/30/13	Term Expires
Kimbrough-Wozniak, Kimberly, NHA, Chair	6/30/16
Ver Beek, Carl, JD, Public Member, Vice-Chair	6/30/16
Ackerman, Ricky, NHA	6/30/17
Cook, Todd, Public Member	6/30/14
Ditri, Pam, NHA	6/30/15
Fazio, Sara, Public Member	6/30/14
Hanert, Kathleen, NHA	6/30/16
Lyden, Patricia, RN, NHA	6/30/17
Smith, Jeanne, NHA	6/30/14

Schedule of Board Meetings

Fiscal Year 2013

December 18, 2012 March 5, 2013 (cancelled) June 18, 2013 September 3, 2013

Licensing Activity

Applications Received	189
Examinations Authorized	283
Number of Licensees	1,281

Random Continuing Education Audits

Audited	15
Complied	9

Renewal Continuing Education Audits

Audited	4
Complied	4



Regulatory Activity

Allegations Received	92
Administrative Investigations	31
Field Investigations Authorized	35
Field Investigations Completed	37
Administrative Complaints Filed	9
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	5
Fine	1
Voluntary Surrender	0
Limited License	0
Suspension	3
Revocation	0
Total Disciplinary Actions	9



Michigan Board of Occupational Therapists

Public Act 473 of 1988 amended the Public Health Code, Public Act 368 of 1978, creating the Michigan Board of Occupational Therapists and the registration program for Occupational Therapists in Michigan. Public Act 523 of 2008 which was effective on January 13, 2009 changed the regulation of occupational therapists from registration to licensure.

The practice of Occupational Therapy, as defined in the Public Health Code, means the provision of services provided to promote health and wellness, prevent disability, preserve functional capabilities, prevent barriers, and enable or improve performance in everyday activities.

The Michigan Board of Occupational Therapists consists of 9 voting members: 5 occupational therapists and 4 public members, one of whom shall be a physician licensed under Part 170 or 175.

Board Members as of 9/30/13	Term Expires
Andert, Diane K., OTR, Chair	12/31/13
Robosan-Burt, Susan, OTR, Vice-Chair	12/31/13
Clipper, Christie, Public Member	12/31/13
Conti, Gerry E., PhD, OTR	12/31/13
King, Kelli, OTR	12/31/16
Moutsatson, Michael, DO	12/31/15
Pace, Kimberly, OTR	12/31/14
Polk, LoRon, Public Member	12/31/13
Smith, Grace, Public Member	12/31/13

Schedule of Board Meetings

Fiscal Year 2013

November 20, 2012 February 19, 2013 May 21, 2013 August 20, 2013 (cancelled)

Registration Activity

Occupational Therapists

Applications Received 292 Number of Registrants 5,165

Occupational Therapy Assistants

Applications Received 134 Number of Registrants 1,618

Regulatory Activity

Allegations Received 13
Administrative Investigations 23
Field Investigations Authorized 2
Field Investigations Completed 3
Administrative Complaints Filed 4
Summary Suspensions Filed 0
Cease and Desist Orders Issued 0
Order to Compel Issued 0



Board Disciplinary Actions

Reprimand	1
Probation	4
Fine	1
Voluntary Surrender	0
Limited License	0
Suspension	1
Revocation	2
Total Disciplinary Actions	9



Michigan Board of Optometry

The Michigan Board of Optometry was originally formed with the enactment of Public Act 71 of 1909. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of Optometry includes the employment of objective or subjective means, including diagnostic pharmaceutical agents for the examination of the human eye for the purpose of ascertaining a departure from the normal, measuring of powers of vision, and adapting lenses for the aid of those powers.

On March 26, 1984, the Governor signed Public Act 42, which allowed optometrists to be certified to administer topical oculardiagnostic pharmaceutical agents to the anterior segment of the human eye. Rules allowing the board to certify optometrists as diagnostic agents were promulgated on July 13, 1985.

The Board of Optometry consists of 9 voting members: 5 optometrists and 4 public members.

Board Members as of 9/30/13	Term Expires
Thompson, Stephen P., OD, Chair	6/30/14
Patera, Gregory, OD, Vice-Chair	6/30/14
Dansby, William, Public Member	6/30/14
Kaminski, John, OD	6/30/16
McNamara, Paul, Public Member	6/30/15
Peterson-Klein, Nancy, OD	6/30/16
Perino, Robert, Public Member	6/30/15
Powers, Carl, OD	6/30/16
Zair, Kays T., Public Member	6/30/14

Schedule of Board Meetings

Fiscal Year 2013

November 28, 2012 (cancelled) February 27, 2013 May 29, 2013 August 28, 2013

	Activity

Applications Received	74
Number of Licensees	1,663

Special Volunteer

Applications Received 0
Number of Licensees 3

Specialty Certifications

DPA Certification

Number of Certifications 1,607

TPA Certification

Number of Certifications 1,582



DPA & TPA Certification Number of Certifications	0
Random Continuing Education Audits Audited Complied	61 53
Renewal Continuing Education Audits Audited Complied	8
Regulatory Activity Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued Order to Compel Issued	22 27 5 5 4 1 0
Board Disciplinary Actions Reprimand Probation Fine Voluntary Surrender Limited License Suspension Revocation Total Disciplinary Actions	0 2 1 0 0 1 1 5



Michigan Board of Osteopathic Medicine and Surgery

The Michigan Board of Osteopathic Medicine and Surgery was originally formed with the enactment of Public Act 162 of 1903. This Act regulated the practice of osteopathic medicine and surgery in the State of Michigan; provided for the examination and licensing of osteopathic physicians and surgeons; and provided for the discipline of offenders against the Act. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of osteopathic medicine and surgery, as defined in the Public Health Code, means a separate, complete, and independent school of medicine and surgery, utilizing full methods of diagnosis and treatment in physical and mental health and disease, including the presentation and administration of drugs and biologicals, operative surgery, obstetrics, radiological and other electromagnetic emissions, and placing special emphasis on the interrelationship of the musculoskeletal system to other body systems.

The Michigan Board of Osteopathic Medicine and Surgery consists of 11 voting members: 7 osteopathic physicians, 1 physician's assistant, and 3 public members.

Board Members as of 9/30/13	Term Expires
Kelly, Charles E., DO, Chair	12/31/14
Dobritt, Dennis W., DO, Vice-Chair	12/31/14
Acker, Steven A., DO	12/31/13
Cunningham, William C., DO, MHA	12/31/14
Heise, Catherine, JD, Public Member	12/31/15
Kane, Barry, Public Member	12/31/13
Kilmark, James, PA-C	12/31/15
McAndrews III, Peter, DO	12/31/14
Sevensma, Susan, DO, FAO, DME	12/31/14
Thompson, Sheryl, Public Member	12/31/16
Walters, David, DO, MHSA	12/31/16

Schedule of Board Meetings

Fiscal Year 2013

October 4, 2012
December 6, 2012 (disciplinary subcommittee)
February 7, 2013
April 4, 2013

April 4, 2013 June 6, 2013

August 1, 2013

Licensing Activity

Doctors of Osteopathic Medicine

Applications Received 436 Number of Licensees 7,143

Clinical Academic DOs

Applications Received 0
Number of Licensees 0



Educational Limited DOs Applications Received Number of Licensees	548 1,403
Special Volunteer DOs Applications Received Number of Licensees	0
Random Continuing Education Audit Audited Complied	113 88
Renewal Continuing Education Audit Audited Complied	66 66
Regulatory Activity Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued Order to Compel Issued	246 293 61 74 50 7 0
Board Disciplinary Actions Reprimand Probation Fine Voluntary Surrender Limited License Suspension Revocation Total Disciplinary Actions	2 17 8 0 2 6 0 35



Michigan Board of Pharmacy

The Michigan Board of Pharmacy was originally formed with the enactment of Public Act 134 of 1885. On March 28, 1963, the authority of the Board to regulate the practice of pharmacy and to prescribe its powers and duties; and to prescribe penalties for violations of the act, was transferred to Public Act 151 of 1962. On September 30, 1978, authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The Public Health Code, Public Act 368 of 1978, as amended, defines the practice of pharmacy as a health service, the clinical application of which includes the encouragement of safety and efficacy in the prescribing, dispensing, administering and use of drugs and related articles for the prevention of illness and the maintenance and management of health.

Professional functions associated with the practice of pharmacy include the interpretation and evaluation of prescriptions; drug product selection; compounding, dispensing, safe storage, and distribution of drugs and devices; maintenance of legally-required records; advising the prescriber and the patient as required regarding contents, therapeutic action, utilization, and possible adverse reactions and interactions of drugs.

The Public Health Code, by section 17722, grants authority to the Board of Pharmacy to regulate, control, and inspect the character and standards of pharmacy practice and of drugs manufactured, distributed, prescribed, dispensed, and administered or issued in this State and procure samples, and limit or prevent the sale of drugs that do not comply with this section's provisions; prescribe minimum criteria for the use of professional and technical equipment in reference to the compounding and dispensing of drugs; grant pharmacy licenses for each separate place of practice of a dispensing prescriber who meets requirements for drug control licensing; and grant licenses to manufacturer/wholesaler distributors of prescription drugs.

The Michigan Board of Pharmacy consists of 11 voting members: 6 pharmacists and 5 public members.

Board Members as of 9/30/13	Term Expires
Almaklani, Dhafer A., RPh, Chair	6/30/17
Penny, Nichole L., RPh, Vice-Chair	6/30/15
Bufe-Wyett, Pamela L., Public Member	6/30/17
Carlson, Dale, Public Member	6/30/14
Cousens, Mark, JD, Public Member	6/30/14
Harney, Patricia, Public Member	6/30/15
Moy-Sandusky, Suit Hing, RPh	6/30/15
Schmidt, Harvey E., RPh	6/30/14
Smeelink, Patricia, RPh	6/30/15
Senneker, Devin, Public Member	6/30/14
Stevenson, James, RPh, PharmD	6/30/16



Schedule of Board Meetings

Fiscal Year 2013

October 10, 2012 December 12, 2012

February 13, 2013

April 10, 2013

June 12, 2013

August 14, 2013

Licensing Activity

Ph	arm	ac	ists

Applications Received 579

Examinations Authorized

NAPLEX 465 MPJE 698 Number of Licensees 13,535

Educational Limited Pharmacists

Applications Received 430 Number of Licensees 1,539

Other Licenses

Applications Received

New Pharmacies 300 Manufacturer/Wholesaler 275

Number of Licensees

Pharmacy 3,381 Manufacturer/Wholesaler 1,897

Random Continuing Education Audits

Audited 278 Complied 238

Renewal Continuing Education Audits

Audited 79 Complied 79

Regulatory Activity

Allegations Received 314
Administrative Investigations 443
Field Investigations Authorized 99
Field Investigations Completed 119
Administrative Complaints Filed 101
Summary Suspensions Filed 14
Cease and Desist Orders Issued 1
Order to Compel Issued 0



Board Disciplinary Actions

Reprimand	1
Probation	45
Fine	29
Voluntary Surrender	6
Limited License	4
Suspension	11
Revocation	7
Total Disciplinary Actions	103

Pharmacy Inspections

New Store Applications	562
Transfer Applications	74
Relocation Applications	115
Probation/Monitoring	11
Random	570



Michigan Board of Physical Therapy

The Michigan Board of Physical Therapy was originally formed with the enactment of Public Act 164 of 1965. On September 30, 1978, authority was transferred to the Public Health Code by Public Act 368 of 1978, as amended.

The practice of physical therapy, as defined in the Public Health Code, means: "the evaluation of, education of, consultation with, or treatment of an individual by the employment of effective properties of physical measures and the use of therapeutic exercises and rehabilitative procedures, with or without assistive devices, for the purpose of preventing, correcting, or alleviating a physical or mental disability. It includes treatment planning, performance of tests and measurements, interpretation of referrals, initiation of referrals, instruction, consultative services, and supervision of personnel. Physical measures include massage, mobilization, heat, cold, air, light, water, electricity, and sound."

Public Act 55 of 2009 amended the Public Health Code to include the licensing of the physical therapist assistant. The physical therapist assistant is an individual with a health profession subfield license under this part who assists a physical therapist in physical therapy intervention. The practice of the physical therapist assistant is defined as the practice of physical therapy performed under the supervision of a physical therapist licensed under this part. Additionally, it modified the composition of the board to 11 voting members: 6 physical therapists, 1 physical therapist assistant and 4 public members.

Board Members as of 9/30/13	Term Expires
Marlan, Jill A., PT, Chair	12/31/13
May, Andrew G., PT, Vice-Chair	12/31/13
Crockett, Meecha, Public Member	12/31/13
Epolito, Mark, Public Member	12/31/15
Gilbert, Brian, PT, MSPT, OCS	12/31/15
Goldenbogen, David, PT	12/31/13
Kumar, Vijay, PT, DPT, MD	12/31/16
Middha, Ajay, PT, DPT	12/31/15
Minter, Linda, Public Member	12/31/13
Simmons, Barbara, PTA	12/31/14
Vacant, Public Member	

Schedule of Board Meetings

Fiscal Year 2013

October 16, 2012 January 15, 2013 April 16, 2013

July 9, 2013 (disciplinary subcommittee)

<u>Licensing Activity</u> Physical Therapists

Applications Received 479
Examinations Authorized 465
Number of Licensees 9,503



Physical Therapist Assistants Applications Received Examinations Authorized Number of Licensees	378 427 3,815
Physical Therapist Assistants – Applications Received	0
Number of Licensees	2
Regulatory Activity Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued Order to Compel Issued	29 74 8 14 9 6 0
Board Disciplinary Actions Reprimand Probation Fine Voluntary Surrender Limited License Suspension Revocation Total Disciplinary Actions	0 3 2 0 3 4 0 12



Michigan Joint Task Force on Physician's Assistants

The Committee on Physician's Assistants was formed with the enactment of Public Act 420 of 1976, signed by the Governor on January 9, 1977. The Act regulated the practice of physician's assistants in the State of Michigan, providing a system to determine and approve the qualifications of physician's assistants, creating a committee on physician's assistants, prescribing its powers and duties, and prescribing penalties. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended and became the Joint Task Force on Physician's Assistants.

The practice of a physician's assistant, as defined in the Public Health Code, means the practice of allopathic or osteopathic medicine under the supervision of an allopathic or osteopathic physician or the practice of podiatric medicine under the supervision of a podiatrist.

The Joint Task Force on Physician's Assistants of 2009 consisted of 11 voting members: 5 physician's assistants, a physician representative of the Boards of Medicine, Osteopathic Medicine and Surgery and Podiatric Medicine and Surgery and 3 public members. In May 2010, Public Act 79 passed which increased the board composition to 13 members; 7 physician's assistants, the 3 physicians previously specified and 3 public members.

Task Force Members as of 9/30/13	Term Expires
Noth, Christopher, PA-C, Chair	12/31/13
Palazzolo, William, PA-C, Vice-Chair	12/31/15
Adado, April, PA-C	12/31/15
Basso, Sara, JD, Public Member	12/31/15
Dobritt, Dennis, DO	12/31/13
Geller, Louis, DPM	12/31/13
Gnodtke, Pamela, Public Member	12/31/13
Hadden, Lisa, Public Member	12/31/15
Kutz, Joel, PA-C	12/31/15
Lopes Jr., John, PA-C	12/31/15
McGinnity, John, PA-C	6/30/14
Rogers, James D., MD	12/31/15
Vacant, Professional Member	

Schedule of Joint Task Force Meetings

Fiscal Year 2013

October 2, 2012 (disciplinary subcommittee) January 29, 2013 April 30, 2013 July 30, 2013

Licensing Activity

Applications Received 326 Number of Licensees 4,221

Physician's Assistant Temporary

Applications Received 2 Number of Licensees 5



Regulatory Activity

Allegations Received	59
Administrative Investigations	60
Field Investigations Authorized	11
Field Investigations Completed	13
Administrative Complaints Filed	9
Summary Suspensions Filed	3
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Joint Task Force Disciplinary Actions

Reprimand	0
Probation	3
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	2
Revocation	1
Total Disciplinary Actions	6



Michigan Board of Podiatric Medicine and Surgery

The Michigan Board of Podiatric Medicine and Surgery was originally formed with the enactment of Public Act 115 of 1915. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of podiatric medicine and surgery, as defined in the Public Health Code, means the examination, diagnosis, and treatment of abnormal nails, superficial excrescenses occurring on the human hands and feet, including corns, warts, callosities, and bunions, and arch troubles or the treatment medically, surgically, mechanically, or by physiotherapy of ailments of human feet or ankles as they affect the condition of the feet. It does not include amputation of human feet, or the use or administration of anesthetics other than local.

The Michigan Board of Podiatric Medicine and Surgery consists of 9 voting members: 5 podiatrists, 1 physician's assistant, and 3 public members.

Board Members as of 9/30/13	Term Expires
Geller, Louis, DPM, Chair	6/30/14
Kreitman, Kevan, DPM, Vice-Chair	6/30/15
Anton-Athens, Vicki, DPM	6/30/17
Farrehi, Cyrus, Public Member	6/30/15
Holmes, Crystal, DPM	6/30/17
Hughes, Scott, DPM	6/30/14
James, Joni, PA-C	6/30/15
Morris, Rev. Charles, Public Member	6/30/14
Peterson, Franklin, Public Member	6/30/17

Schedule of Board Meetings

Fiscal Year 2013

October 24, 2012 (full board) January 23, 2013 April 24, 2013 (full board) July 24, 2013

Licensing Activity

Podiatrists

Applications Received	38
Examinations Authorized	20
Number of Licensees	794

Educational Limited Podiatrists

Applications Received	l 37
Number of Licensees	63

Podiatrist Educational Preceptorship

Applications Received	0
Number of Licensees	0



Random Continuing Education Audit Audited Complied	s 17 14
Renewal Continuing Education Audit Audited Complied	240 240
Regulatory Activity Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued Order to Compel Issued	23 33 8 9 5 2 0
Board Disciplinary Actions Reprimand Probation Fine Voluntary Surrender Limited License Suspension Revocation Total Disciplinary Actions	1 3 1 0 1 0 1 7



Michigan Board of Psychology

The regulation of psychologists was initially started as a certification by the superintendent of public instruction under the provisions of Public Act 257 of 1959. On September 30, 1978, the certification process was transferred to the Public Health Code, Public Act 368 of 1978, as amended and the Board of Psychology was created.

The Public Health Code defines the practice of psychology as the rendering to individuals, groups, organizations, or the public services involving the application of principles, methods, and procedures of understanding, predicting, and influencing behavior for the purposes of the diagnosis, assessment related to diagnosis, prevention, amelioration, or treatment of mental or emotional disorders, disabilities or behavioral adjustment problems by means of psychotherapy, counseling, behavior modification, hypnosis, biofeedback techniques, psychological tests, or other verbal or behavioral means. The practice of psychology does not include the practice of medicine such as prescribing drugs, performing surgery, or administering electro-convulsive therapy.

The Michigan Board of Psychology consists of 9 voting members: 5 psychologists, including at least 1 non-doctoral psychologist, and 4 public members.

Board Members as of 9/30/13	Term Expires
Warbelow, Alan, LLP, Chair	12/31/15
Ozkan, Eric, PhD, Vice-Chair	12/31/15
Connelly, Michael, Public Member	12/31/15
Horak, Joseph, PhD	12/31/15
Kayes, Dennis, JD, Public Member	12/31/14
Navarro, Monica P., JD, Public Member	12/31/13
Shively, Lori, Public Member	12/31/14
Van Wormer, Sara, MA, LLP	12/31/16
Waalkes, Martin, PhD	12/31/16

Schedule of Board Meetings

Fiscal Year 2013
October 18, 2012
December 20, 2012
February 21, 2013
April 18, 2013
June 20, 2013

August 15, 2013 (disciplinary subcommittee)



Licensing Activity Applications Received Psychologists Doctoral Limited Masters Limited Temporary Limited Examinations Authorized Number of Licensees Psychologists Doctoral Limited Masters Limited Temporary Limited	123 90 243 70 354 2,934 240 3,310 659
Regulatory Activity Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued Order to Compel Issued	89 118 26 30 14 4 2
Board Disciplinary Actions Reprimand Probation Fine Voluntary Surrender Limited License Suspension Revocation Total Disciplinary Actions	1 2 0 2 6 6 1 18



Michigan Board of Respiratory Care

The Michigan Board of Respiratory Care was created with the enactment of Public Act 3 of 2004, which amended the Public Health Code, Public Act 368 of 1978.

The practice of respiratory care, as defined in the Public Health Code, means the provision of respiratory care services which may be provided by an inpatient or outpatient service or department within a health facility, by a home care agency or durable medical equipment company, or by an educational program.

The Michigan Board of Respiratory Care in 2009 consisted of 4 respiratory therapists, 1 medical director and 2 public members. In May 2010, Public Act 79 passed which increased the board composition to 7 respiratory therapists, 1 medical director, and 3 public members.

Board Members as of 9/30/13	Term Expires
Rinck, John, LRT, RRT, Chair	12/31/13
Darin, John, LRT, RRT, Vice-Chair	6/30/14
Bainbridge, Jeremy, LRT, RRT	12/31/16
Cherwinski, Beverly, Public Member	12/31/14
Dix, Debra, LRT, RRT	12/31/13
Haas, Carl, LRT, RRT	12/31/15
Hyka, John, LRT, RRT	12/31/14
Monks, Patrick, Public Member	12/31/14
Prins, Julia, LRT, RRT	6/30/14
Tooker, Richard, MD	12/31/15
Wiltse, Helene, Public Member	12/31/16

Schedule of Board Meetings

Fiscal Year 2013

November 9, 2012 February 8, 2013 (cancelled) May 10, 2013 August 9, 2013 (cancelled)

Licensing Activity

Respiratory Therapists

Applications Received 289 Number of Licensees 5,239

Respiratory Therapists Temporary

Applications Received 0
Number of Licensees 0



Regulatory Activity

Allegations Received	29
Administrative Investigations	51
Field Investigations Authorized	7
Field Investigations Completed	9
Administrative Complaints Filed	13
Summary Suspensions Filed	3
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Disciplinary Actions

Reprimand	0
Probation	1
Fine	2
Voluntary Surrender	0
Limited License	0
Suspension	1
Revocation	0
Total Disciplinary Actions	4



Sanitarian Registration

The Michigan Board of Sanitarians was originally formed with the enactment of Public Act 147 of 1963. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended. Executive Order No. 1996-2, effective May 15, 1996, transferred all statutory authority, powers, duties, functions and responsibilities of the Board of Sanitarians under Part 184 of the Public Health Code, being Sections 333.18401 *et seq.* of the Michigan Compiled Laws, from the Department of Commerce to the Director of the Department of Consumer & Industry Services by a Type III transfer as defined by Section 3 of Act No. 380 of the Public Acts of 1965, as amended, being Section 16.103 of the Michigan Compiled Laws. Effective January 1, 2004, Executive Order No. 2003-18 transferred, by a Type II transfer, any authority, powers, duties, functions and responsibilities for programs or functions within the Department of Consumer & Industry Services within the Bureau of Health Services to the Director of the Department of Community Health.

Public Act 308 of 2004, effective January 1, 2004, created a seven-member advisory committee whose purpose is to make recommendations to the Department relative to qualifications for registration, establishment of education and training standards and actions regarding disciplinary proceedings. Underlying all duties is the responsibility of the Department to promote and protect the public's health, safety, and welfare.

Sanitarian means an individual who has specialized education and experience in the physical, biological and sanitary sciences as applied to the educational, investigational and technical duties in the field of environmental health.

By Executive Order 2009-12, the Sanitarian Advisory Committee was abolished effective May 17, 2009. The registration of individuals continues unimpeded.

Registration Activity

Applications Received 1
Number of Registered Sanitarians 418

Regulatory Activity

NONE

Disciplinary Actions

NONE



Michigan Board of Social Work

The Michigan Board of Examiners of Social Workers was originally formed with Public Act 352 of 1972. On October 21, 1980, the authority of the Board was transferred to Article 16 of Public Act 299 of 1980. Public Act 11 of 2000 transferred the authority of the Board of Examiners of Social Workers to the Public Health Code, Public Act 368 of 1978, as amended. Public Act 61 of 2004 amended Public Act 368 of 1978 to provide for licensure of bachelor's and master's level social workers and for the registration of social service technicians.

The practice of social work at the bachelor's level, as applied within the scope of social work values, ethics, principles and skills, means the following: the application of social work theory, knowledge, methods and ethics; social work case management and casework; helping communities, organizations, individuals, or groups improve their social or health services by utilizing social work practice skills; and the administration of assessment checklists that do not require special training and that do not require interpretation.

The practice of social work at the master's level, as applied within the scope of social work values, ethics, principles and skills, means the following: advanced application of macro social work processes and systems; the advanced application of specialized clinical knowledge; and advanced clinical skills and the advanced application of the knowledge of human development and behavior and social, economic and cultural institutions.

The Michigan Board of Social Work consists of 9 voting members: 6 individuals engaged primarily in the practice of social work and 3 public members.

Board Members as of 9/30/13	Term Expires
Najor-Durack, Anwar, LMSW, Chair	12/31/15
Hayes, E. Jane, LMSW, Vice-Chair	12/31/13
Blum, Eleanor, Public Member	12/31/14
Brock, Michelle, LMSW	12/31/15
Manela, Pamela, LMSW	12/31/14
Mazur, Kenneth, MSW	12/31/13
Milburn, Marc, Public Member	12/31/16
Philson, Brian, LMSW	12/31/16
Woods, Michelle, Public Member	12/31/13

Schedule of Board Meetings

Fiscal Year 2013 November 27, 2012 January 22, 2013 March 26, 2013 May 14, 2013 July 23, 2013 September 24, 2013



	823 1,985 4,380
• •	1,134 4,382
MSW Specialty Certifications Macro Specialty Applications Received Number of Certifications	15 0,812
Clinical Specialty Applications Received Number of Certifications 1	2 4,099
Bachelor's Social Workers Applications Received Examinations Authorized Number of Licensees	91 182 3,830
Bachelor's Limited Social Workers Applications Received Number of Licensees	396 1,168
Social Service Technicians Applications Received Number of Registrants	121 1,375
Social Services Limited Technician Applications Received Number of Registrants	16 26
Random Continuing Education Audits Audited Complied	570 384
Renewal Continuing Education Audits Audited Complied	s 74 74



Regulatory Activity

Allegations Received	271
Administrative Investigations	438
Field Investigations Authorized	67
Field Investigations Completed	67
Administrative Complaints Filed	134
Summary Suspensions Filed	6
Cease and Desist Orders Issued	0
Order to Compel Issued	2

Board Disciplinary Actions

Reprimand	0
Probation	59
Fine	1
Voluntary Surrender	8
Limited License	12
Suspension	29
Revocation	1
Total Disciplinary Actions	110



Michigan Board of Speech-Language Pathology

The Michigan Board of Speech-Language Pathology was created with the enactment of Public Act 524 of 2009, which amended the Public Health Code, Public Act 368 of 1978.

The practice of speech-language pathology, as defined in the Public Health Code, means the application of principles, methods, and procedures related to the development of disorders of human communication.

The Michigan Board of Speech-Language Pathology consists of 11 voting members: 6 speech-language pathologists, 3 public members, and 2 physicians, one of whom is a board certified otolaryngologist.

Board Members as of 9/30/13	Term Expires
Weise, Timothy, CCC-SLP, Chair	12/31/13
Swartz, Bradford, PhD, CCC-SLP, Vice-Chair	12/31/15
Austin, Brit, MA, CCC-SLP	12/31/14
Callaghan-Lynch, Mary, Public Member	12/31/15
Carlson, Amanda, MS, CCC-SLP	12/31/14
Dwyer, Erica, CCC-SLP	12/31/15
Hawatmeh, Nicola, Public Member	12/31/13
Mervenne, Patricia, MS, CCC-SLP	12/31/16
Pynnonen, Melissa, MD	12/31/16
Weingarten, Jeffrey, MD	12/31/13
Wells, Lynee', Public Member	12/31/16

Schedule of Board Meetings

Fiscal Year 2013 November 13, 2012

February 5, 2013 May 7, 2013 August 6, 2013

Licensing Activity

Applications Received

Number of Licenses

Speech-Language Pathologists

Applications Received Number of Licenses	2,284
Number of Licenses	3,045
Educational Limited SLP	
Applications Received	183
Number of Licenses	280
Limited SLP	



152

203

Regulatory Activity

Allegations Received	0
Administrative Investigations	0
Field Investigations Authorized	0
Field Investigations Completed	0
Administrative Complaints Filed	0
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0



Michigan Board of Veterinary Medicine

The Michigan Board of Veterinary Medicine was originally formed with the enactment of Public Act 152 of 1956. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of veterinary medicine, as defined in the Public Health Code, means prescribing or administering a drug, medicine, treatment or method of procedure; performing an operation or manipulation; applying an apparatus or appliance; or giving an instruction or demonstration designed to alter an animal from its normal condition; curing, ameliorating, correcting, reducing, or modifying a disease, deformity, defect, wound, or injury in or to an animal; diagnosing or prognosing, or both, a disease, deformity or defect in an animal by a test, procedure, manipulation, technique, autopsy, biopsy, or other examination.

The Michigan Board of Veterinary Medicine consists of 9 voting members: 5 veterinarians, 1 veterinary technician, and 3 public members.

Board Members as of 9/30/13	Term Expires
Letsche, Lawrence A., DVM, Chair	12/31/13
Rohwer, Christopher, DVM, Vice-Chair	12/31/14
Allen, Carlene, Public Member	12/31/13
Averill, James, DVM (Ex-Officio Member)	No Specific Term
Beattie, Kimlee, Public Member	12/31/13
Happel, Lynn, DVM	12/31/16
Kim, Charlotte, DVM	12/31/14
Tear, Marianne, MS, LVT	12/31/16
Thorp-Stout, Colleen, DVM	12/31/14
Werth, Renee, Public Member	12/31/15

Schedule of Board Meetings

Fiscal Year 2013

October 25, 2012 December 19, 2012 February 28, 2013 April 25, 2013 (full board) June 27, 2013 August 22, 2013 (cancelled)

Licensing Activity

Veterinarians

Applications Received 199 Number of Licensees 3,866

Clinical Academic Veterinarians

Applications Received 17 Number of Licensees 67

Educational Limited Veterinarians

Applications Received 0
Number of Licensees 3



Veterinary Technicians Applications Received Examinations Administered Number of Licensees	283 290 2,784
Regulatory Activity Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued Order to Compel Issued	86 123 34 40 9 3 0
Board Disciplinary Actions Reprimand Probation Fine Voluntary Surrender Limited License Suspension Revocation Total Disciplinary Actions	0 1 6 0 0 0 0 7



Health Professional Recovery Committee

The Health Professional Recovery Committee (HPRC) was created by Public Act 80 of 1993, which became effective April 1, 1994. Section 333.16167 describes the Committee's duties as follows:

Sec. 16167. The committee shall do all of the following:

- (a) Establish the general components of the health professional recovery program and a mechanism for monitoring health professionals who may be impaired.
- (b) Subject to sections 16169 and 16170 and in conjunction with the health professional recovery program consultants described in section 16168, develop and implement criteria for the identification, assessment, and treatment of health professionals who may be impaired.
- (c) In conjunction with the health professional recovery program consultants described in section 16168, develop and implement mechanisms for the evaluation of continuing care or aftercare plans for health professionals who may be impaired.
- (d) Develop a mechanism and criteria for the referral of a health professional who may be impaired to a professional association when appropriate for the purpose of providing assistance to the health professional. In developing criteria under this subdivision, the committee shall require that a referral be made only with the consent of the health professional.
- (e) Annually report to each board and the physician's assistants task force created under this article on the status of the health professional recovery program. The committee shall include in the report, at a minimum, statistical information on the level of participation in the program of each health profession. The committee may include in the report recommendations for changes in the health professional recovery program and for participation by the boards and the physician's assistants task force, professional associations, substance abuse treatment and prevention programs, and other appropriate agencies.

In accordance with Section 333.16165 of the Public Health Code, the health profession boards appoint members in consultation with appropriate professional associations. The Director shall appoint the public members.

Appointed By Member	Term Expires
Board of Acupuncture	
Vacant	
Board of Athletic Trainers	
Monroe, Jeffrey, AT, ATC	12/31/15
Board of Audiology	
Vacant	
Board of Chiropractic	
Roberts, Gordon, MA, DC	12/31/13
Board of Counseling	
Walkons, Christine	12/31/13
Board of Dentistry	
Poirier, G. Thomas, DDS	12/31/13
Board of Dietetics and Nutrition	
Christoph, Carl, JD, RD	12/31/15



Board of Marriage & Family Therapy	
Rainey, Joseph, LMFT	12/31/14
Board of Massage Therapy	
Vacant	
Board of Medicine	
Gehrke, Charles F., MD, Chair	12/31/13
Board of Nursing	
Taft, Linda, RN	12/31/14
Board of Nursing Home Administrators	
Vacant	
Board of Occupational Therapy	
Chapleau, Ann, PhD, OTR	12/31/14
Board of Optometry	
Wallace, Michael, OD	12/31/14
Board of Osteopathic Medicine & Surgery	
Morrone, William, DO	12/31/14
Board of Pharmacy	
Dimo, Mary E., PharmD	12/31/13
Board of Physical Therapy	
Talley, Susan, MS, PT	12/31/14
Board of Podiatric Medicine & Surgery	
Vacant	
Board of Psychology	
Berkman, Arnold S., PhD	12/31/13
Board of Respiratory Care	
Zahodnic, Richard, PhD, RT	12/31/14
Board of Social Work	
Muzzi, Dennis, LMSW, Vice-Chair	12/31/14
Board of Speech-Language Pathology	
Vacant	
Board of Veterinary Medicine	
Vaupel, Henry, DVM	12/31/14
Task Force on Physician's Assistants	
Vacant	
Public Member	
Burke, Michael	12/31/13
Public Member	
Hicks, Jeffrey C., JD	12/31/14

Ex-Officio Members

Engle, Carole H., Ex-Officio, Bureau of Health Care Services, Representing Director of the Department of Licensing and Regulatory Affairs

Moultine, Carol, Bureau of Health Care Services

Bushong, Susan M., LBSW, Contract Administrator/Outreach Coordinator, Bureau of Health Care Services



Schedule of Committee Meetings Fiscal Year 2013

December 17, 2012
March 17, 2013
June 17, 2013
September 23, 2013 (cancelled)



Controlled Substances Advisory Commission

The Controlled Substances Advisory Commission was established by Public Act 60 of 1988, to monitor indicators of controlled substance abuse and diversion, to recommend actions to address diversion and identified problems of abuse and diversion. The Commission consists of 13 voting members and 6 ex-officio members.

Representing Member	Term Expires
Board of Dentistry Roels, Patricia, DDS	8/30/15
Board of Medicine	3,33,13
Arsiwala, Mohammed A., MD	8/30/15
Board of Nursing	
Bouchard-Wyant, Kathy A., RN	8/30/15
Board of Osteopathic Medicine & Surgery	
Sevensma, Susan C., DO	8/30/15
Board of Pharmacy	0/00/45
Penny, Nichole L., RPh	8/30/15
Board of Podiatric Medicine & Surgery Kreitman, Kevan R., DPM	8/30/15
Board of Veterinary Medicine	0/30/13
Letsche, Lawrence, DVM	8/30/15
Pharmaceutical Manufacturers	3,33,13
Dettloff, Richard W.	8/30/15
Pharmacology Profession	
Steffey, Jeffrey K.	8/30/15
Psychiatry Profession	
Picone, David A., MD	8/30/15
Public Member	0/00/45
Cibor, Gregory M.	8/30/15
Public Member	0/20/45
Szajna, Kim R. Public Member	8/30/15
Westra, Jeffrey M., Chair	8/30/15
in come, come, in, chair	3,33,10

Ex-Officio Members

Engle, Carole H., Ex-Officio, Director, Bureau of Health Care Services

Eggleston, Debbie, Department of Community Health

Stokes, Wanda, Department of Attorney General

Vacant, Department of Education

Vacant, Department of State Police

Wissel, Michael, RPh, Drug Control Administrator, Bureau of Health Care Services



Schedule of Commission Meetings Fiscal Year 2013

Fiscal Year 2013
January 15, 2013
April 16, 2013
July 16, 2013
October 15, 2013 (cancelled)



Michigan Automated Prescription System

The Michigan Automated Prescription System (MAPS) is the state mandated prescription monitoring program for the State of Michigan. The MAPS program is used to identify and prevent drug diversion at the prescriber, pharmacy and patient levels by collecting prescription data listed in Schedules 2-5 controlled substances dispensed by pharmacies and practitioners.

Pharmacists and dispensing prescribers are required to report all controlled substances they dispense to MAPS on a bimonthly basis.

Upon registration to MAPS Online, prescribers query the electronic MAPS database for patient-specific reports which allow a review of the patient's previous controlled substance prescription records to determine if patients are receiving controlled substances from another provider. MAPS is available 24/7 and reports are available for review almost immediately upon the practitioner's request. Law enforcement agencies may register to MAPS Online to obtain prescription data for bona fide drug-related criminal investigations. Pharmacy benefit managers may also utilize MAPS for the purposes of ensuring patient safety, and investigating fraud and abuse of controlled substances.

The system is currently providing approximately 5,300 MAPS reports to prescribers and law enforcement agencies on a daily basis to approximately 27,000 MAPS users. Forty-six percent of the licensed health professionals in Michigan are registered to MAPS.

A total of 20,912,002 prescriptions were reported to MAPS in 2013. Hydrocodone combinations such as Vicodin, Norco, Lorcet and Lortab accounted for approximately 6,534,575 or 31% of the total number dispensed.

MAPS operations in 2013 included notification to prescribers when MAPS information indicated their patient may be a "doctor shopper", defined as an individual who visits numerous doctors and pharmacies to obtain controlled substances for the purpose of abuse or diversion. The goal of informing practitioners of possible doctor shoppers is to assist them in taking corrective action with the patient, which may include information or referral for substance abuse and/or addiction treatment. A grant was received in 2013 to fund the notification letter process. A portion of this grant was also used for the creation and distribution of a MAPS poster to dispensing prescribers and pharmacies to place in their office to alert patients that they promote and utilize MAPS.

MAPS is currently exchanging prescription data with 23 states through the interstate data exchange program monitored by the National Association of Boards of Pharmacy (NABP) PMP Interconnect. This allows practitioners to request data from other participating states directly through MAPS.

A contract with HTC Global Services continues to provide two full-time programmers placed within the Department of Technology, Management & Budget to facilitate the MAPS database. MAPS operations continue to be administered by the Bureau of Health Care Services.

This report satisfies the requirements of MCL 333.7113(2).



Advisory Committee on Pain and Symptom Management

The Advisory Committee on Pain and Symptom Management (ACPSM) was originally established as the Interdisciplinary Advisory Committee under Public Act 232 of 1994. The statute was later amended under Public Act 421 of 1998 to create the current ACPSM. The committee was charged with making recommendations to the legislature in 2002, and issued a report that contained 18 recommendations to improve pain and symptom management in Michigan. The State of Michigan subsequently enacted a number of legislative measures to improve pain and symptom management in Michigan between 1995 and 2004. These included eliminating the term "intractable pain" from the Public Health Code as the basis for use of opioid medication, requiring at least one hour of continuing education in pain management for nearly every health licensee in Michigan, establishing the right of all Michigan citizens to have their pain managed as part of their overall health care, and a number of new pharmacy regulations making opioid medication more available to all Michigan citizens. The ACPSM provides professional expertise and consultation to the state's Pain Management and Palliative Care Program (PMPCP), which was established in 2008.

Representing Member

Term Expires

Department of Licensing and Regulatory Affairs, Bureau of Engle, Carole H., Chair	Health Care Services 6/30/15
Board of Dentistry	
Ashman, Lawrence, DDS	6/30/15
Board of Medicine (Pain Specialist MD)	
Berland, Daniel, MD	6/30/15
Board of Medicine (Primary Care MD)	
Lewandowski, Jeanne, MD	6/30/15
Board of Nursing	
Vallerand, April, PhD, RN	6/30/15
Board of Osteopathic Medicine & Surgery (Pain Specialist	DO)
Dobritt, Dennis W., DO	6/30/15
Board of Osteopathic Medicine & Surgery (Primary Care D	
Morrone, William, DO	6/30/15
Board of Pharmacy	
Saadeh, Claire, BCOP, PharmD	6/30/15
Board of Psychology	
Jerome, John, PhD	6/30/15
Task Force on Physician's Assistants	0/00/45
Schram, Karel, PA	6/30/15
Central Michigan University, College of Medicine	0/00/45
Bradley, Ronald H., DO	6/30/15
Michigan State University, College of Osteopathic Medicine	
Prokop, Lawrence L., DO	6/30/15
Michigan State University, College of Human Medicine	0/00/45
Roskos, Steven E., MD	6/30/15
Oakland University, William Beaumont School of Medicine	C/20/4E
Noiva, Robert, MD	6/30/15
University of Michigan, School of Medicine Hilliard, Paul, MD	6/30/15
Wayne State University, School of Medicine	0/30/13
Lininger, Todd, MD	6/30/15
Lillinger, roud, MD	0/30/13



Hospice and Palliative Care Association of Michigan

Ashley, Lisa, MSW, CHPCA, NHA 6/30/15

Chronic Pain Sufferer

Gigliotti, Lisa 6/30/15

Public Member

Kohn, Jody 6/30/15

Schedule of Commission Meetings

Fiscal Year 2013

May 3, 2013

The following Pain Management and Palliative Care Program projects were completed in FY 2013:

- Provided assistance with the biannual BHCS Joint Provider Surveyor Training sessions held in the spring and fall and also had exhibits at both sessions.
- Completed the following projects in conjunction with the ACPSM and its four subcommittees:
 - Developed individual pain management toolkits for health professionals and the public, which were posted on the Pain Management website at www.michigan.gov/pm.
 - o Developed and implemented strategies to reach the public during "September is Pain Awareness Month" using public service ads, YouTube videos and Twitter.
 - o The third biennial public survey on pain was conducted and analyzed.
 - Continued the distribution of the Responsible Opioid Prescribing: A Guide for Michigan Clinicians booklet by Scott Fishman, MD, and The Michigan Automated Prescription System (MAPS) and Effective Pain Management DVD to current and newly licensed prescribers/dispensers of controlled substances.
 - The Responsible Opioid Prescribing: A Guide for Michigan Clinicians booklet and The Michigan Automated Prescription System (MAPS) and Effective Pain Management DVD were also distributed to 3,113 newly licensed prescribers/ dispensers of controlled substances.
 - o Promoted PMPCP and the ACPSM as an exhibitor at several health professional conferences that were hosted by pain management stakeholders.
 - o BHCS co-sponsored and exhibited at the three largest annual conferences in Michigan dealing with pain management (Caring Coalition, Conference on Pain, and the Annual Palliative Care Collaborative).
 - BHCS sponsored and exhibited at the Annual Health Occupations Students of America.
 - o The fifth survey of physicians on pain management was put into the field.
 - A medical school curriculum was completed and distributed to all Michigan medical schools. Follow-up contact was made following distribution to answer questions and encourage review of the model curriculum.
 - In conjunction with Boston University's S.C.O.P.E. of Pain training program, conducted a train-the-trainer session for 27 Michigan health professionals, who committed to training 20 other health professionals.
 - Presentations were made to health professions boards to inform board members of ACPSM activities/recommendations, seek appointments/reappointments to the ACPSM, etc.

