

Health Professions FY 2012 Annual Report Board Activities

(Pursuant to PA 368 of 1978 as amended)

April 1, 2013

Prepared by

Carole H. Engle, Director

Bureau of Health Care Services



**RICK SNYDER
GOVERNOR**



**STEVE ARWOOD
DIRECTOR**

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Executive Summary:

This annual report covers fiscal year 2012 from October 1, 2011 to September 30, 2012. 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 Health Professions section of 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, or federal mandate as in the case of the nurse aide registry. 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 Professions (BHP) was transferred from the Michigan Department of Community Health to Licensing and Regulatory Affairs (LARA) through Governor Snyder's Executive Reorganization Order #2011-4 effective April 25, 2011. In the fall of 2012, BHP was merged with the Bureau of Health Systems (BHS) to create the Bureau of Health Care Services (BHCS), where the Health Professions Division overseeing all licensing, investigations and enforcement responsibilities of health professionals is located. Carole H. Engle serves as the director for BHCS.

Fiscal Year 2012 Budget

Appropriated FTEs* 143

Legislative Appropriation* \$24,140,910

FINANCIAL PLAN:

Salary and Wages \$6,743,049.84

Longevity and Insurance \$1,436,803.23

Retirement & FICA \$3,323,202.74

Terminal Leave \$25,232.81

Travel, Out-of-State \$6,513.73

Travel, In State and Moving Exps \$225,224.85

Communications \$96,713.59

Utilities \$16,017.54

Contractual Services \$5,774,216.42

Consulting Services \$3,700.00

Supplies and Materials \$576,597.97

Equipment \$51,522.75

Cost Allocations \$74,079.60

IT Costs – 6112 \$617,035.86

Client Services and Bep \$400.00

Indirect Salaries \$244.24

TOTAL \$18,970,555.17

*Appropriated Amounts exclude MMP.

This amount excludes any MMP FY12 YTD expenditure amounts and the number of FTEs dedicated to MMP.

Licensing Statistics

<i>Professions Licensees</i>	<i>Applications Received</i>	<i>Examinations # of Applicants Processed</i>	<i>Written Verifications/ Certifications</i>	<i>Renewals</i>	<i>Total Licensees</i>
Acupuncture					
Acupuncturists	50			43	63
Athletic Trainer					
Athletic Trainer	130		43	202	1010
Temporary AT	0				0
Audiology					
Audiologist	30		14	281	542
Audiologist Limited	0			0	0
Chiropractic					
Chiropractors	153		95	1,371	2,926
Ed Ltd Chiropractor	26			0	15
Counseling					
Counselors	293		79	2,263	5,847
Ed Ltd Counselors	597			2,470	2,905
Dentistry					
Dentists	253		253	2,484	7,748
Dentist Limited	0			2	2
Dentist – Nonclinical Ltd	0			1	1
Ed Ltd Dentists	26			21	57
Clinical Academic Dentists	17			46	71
Dental Specialists		17 (94% Passed)	0		
Prosthodontist	1			20	58
Endodontist	6			61	175
Oral Surgeon	8			77	233
Orthodontist	6			116	356
Pediatric Dentist	8			38	129
Periodontist	7			49	156
Oral Pathologist	1			1	9
Dental Hygienists	346		154	3,371	10,462
Clinical Academic Hygienists	0			0	0
Nitrous Oxide Certification	59				2,627
Local Anesthesia Certification	66				3,341
Dental Assistants	148	160 (84% Passed)	5	539	1,657
Dental Asst – Clinical Acad	0			0	0
Dental Asst – Nonclinical Ltd	0			1	1
Dentist – Special Volunteer	6			4	20

<i>Professions Licensees</i>	<i>Applications Received</i>	<i>Examinations # of Applicants</i>	<i>Written Verifications/ Certifications</i>	<i>Renewals</i>	<i>Total Licensees</i>	
Marriage and Family Therapy						
Marriage & Family Therapists	31	25 (64% Passed)	8	311	673	
Ed Ltd MFT	29			71	97	
Medicine						
Medical Doctors	1,777	234 (92% Passed)	*176	10,139	32,285	
Medical Doctor – Limited	0			0	0	
MD – Special Volunteer	6			12	33	
Clinical Academic MD	21			26	45	
Ed Ltd MD	1,288			2,739	4,021	
Nurse Aides						
		22,594		20,144	55,159	
Train the Trainer	135				372	
Nurse Aide Exemptions	1,192				771	
Nursing						
Registered Nurses	7,585	6,016 (88% Passed)	*601	65,503	137,754	
RN Provisional	170					95
RN Temporary	22					24
Nurse Specialists						
Anesthetists	152			1,107	2,535	
Midwives	22			149	333	
Practitioners	485			2,050	4,573	
Practical Nurses	2,064	1,881 (86% Passed)	22	12,218	26,866	
Nursing Home Administrators						
	147	State 112 (71% Passed) Nat'l 125 (54% Passed)	31	670	1,213	
Occupational Therapy						
Occupational Therapists	294		128	2,520	4,970	
Occupational Therapy Assts	132		79	743	1,530	
Optometry						
Optometrists	59		43	782	1,634	
Special Volunteer	3				3	
DPA Specialty Certification	0			0	1,575	
TPA Specialty Certification	0			0	1,546	
DPA & TPA Specialty Cert	8			0	0	
Osteopathic Medicine & Surgery						
Osteopathic Doctors	441		*9	2,158	6,983	
Clinical Academic DO	0			0	0	
Ed Ltd DO	469			843	1,307	
Osteo – Special Volunteer	0			1	1	

<i>Professions Licensees</i>	<i>Applications Received</i>	<i>Examinations # of Applicants</i>	<i>Written Verifications/ Certifications</i>	<i>Renewals</i>	<i>Total Licensees</i>
Pharmacy					
Pharmacists (NAPLEX) Jurisprudence	568	427 (88% Passed) 672 (84% Passed)	246	6,476	13,347
Ed Ltd Pharmacists	527			1,093	1,386
Pharmacies	279		63	1,621	3,257
Manufacturer/Wholesaler	660		84	889	1,742
Physical Therapy					
Physical Therapists	409	366 (64% Passed)	593	4,570	9,305
Physical Therapy Assist	1,625		132	3,139	3,433
Phys Ther Assist - Limited	0	366 (72% Passed)		0	2
Physician's Assistant					
Physician Assistants	309		134	1,969	4,027
Physician Assist Temporary	34			0	31
Podiatric Medicine and Surgery					
Podiatrists	54	27 (100% Passed)	41	235	785
Ed Ltd Podiatrists	32			27	59
Pod Educ Preceptorships	0				0
Psychology					
Psychologists	129	216 (48% Passed)	90	1,442	2,965
Doctoral Limited	93			164	249
Masters Limited	227			1,655	3,517
Temporary Limited	43				548
Respiratory Care					
Respiratory Therapists	299		90	2,465	5,178
Resp Ther Temporary	0			0	0
Sanitarian					
Sanitarians	2		0	206	447
Social Work					
Social Services Technician	122		215	540	1,475
Social Services Ltd Tech	12			18	24
Bachelors Social Worker	90	69 (55% Passed)		1,787	4,204
Bachelors Ltd SW	380			680	999
Masters Social Worker	812	Clinical 874 (59% Passed) Macro 188 (48% Passed)		5,901	14,329
Masters Ltd SW	1,202			3,053	4,172
MSW Macro Specialty	24			0	11,409
MSW Clinical Specialty	8			0	14,051

<i>Professions Licensees</i>	<i>Applications Received</i>	<i>Examinations # of Applicants</i>	<i>Written Verifications/ Certifications</i>	<i>Renewals</i>	<i>Total Licensees</i>
Speech-Language Pathology					
Speech-Lang Pathologist	444			157	377
Speech-Lang Ed Ltd	140			0	106
Speech-Lang Ltd	33			10	27
Veterinary Medicine					
Veterinarians	183		203	1,718	3,825
Clinical Academic Vet Ed Ltd Vet	10			55	66
	0			3	3
Veterinary Technicians	215	MI 231 (81% Passed) Nat'l 389 (94% Passed)	10	1,247	2,621
TOTAL	28,027		3,598	156,623	333,018
	<i>(Total Licensees does not include Nurse Aides or Specialty Certifications)</i>				

**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	Reprimand	Probation	Fine	Voluntary Surrender	Limited License	Suspension	Revocation	Total
Acupuncture	0	0	0	0	0	0	0	0
Athletic Trainers	0	0	0	0	0	0	0	0
Audiology	0	3	0	0	0	0	0	3
Chiropractic	0	10	1	0	2	5	2	20
Counseling	0	0	0	0	1	2	0	3
Dentistry	0	39	3	6	3	3	0	54
Marriage & Family Therapy	1	0	0	0	0	2	0	3
Medicine	4	28	20	4	8	16	3	83
Nursing	7	172	15	7	5	148	1	355
Nursing Home Administrators	0	6	2	1	0	0	0	9
Occupational Therapy	0	2	1	0	0	0	0	3
Optometry	0	1	0	0	1	1	0	3
Osteopathic Med & Surgery	3	14	4	2	3	5	1	32
Pharmacy	0	27	21	8	3	14	4	77
Physical Therapy	1	2	1	0	4	0	0	8
Physician's Assts	0	2	0	0	1	2	2	7
Podiatric Med & Surgery	0	6	0	0	0	2	0	8
Psychology	0	3	5	0	3	0	0	11
Respiratory Care	0	3	0	0	0	0	0	3

Profession	Reprimand	Probation	Fine	Voluntary Surrender	Limited License	Suspension	Revocation	Total
Sanitarians	0	0	0	0	0	0	0	0
Speech-Language Pathology	0	0	0	0	0	0	0	0
Social Work	0	12	0	2	5	19	1	39
Veterinary Medicine	0	9	3	0	1	1	0	14
TOTAL	16	339	76	30	40	220	14	735

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	Term Expires
Lincoln, Deborah E., RN, MSN, Chair East Lansing	6/30/14
Roach, Chrystal, Public Member, Vice Chair (as of 7/2012) Fremont	6/30/14
Abel-Horowitz, Howard, MD Franklin	6/30/13
Batzer, Margaret Manistee	6/30/14
Haas, Annie East Lansing	6/30/14
Kimpinto, Echo Birmingham	6/30/14
Krofcheck, David, OMD, LAC, BA Richland	6/30/15
Morris, Charles, Public Member Detroit	6/30/14
Pappas, John L., MD Bloomfield Hills	6/30/14
Sousley, Rhonda, PhD Rochester Hills	6/30/12
Sullivan, William, Public Member Dewitt	6/30/15
Tan, Xiaohong, OMD East Lansing	6/30/15
Wright, Leonard D., MD Muskegon	6/30/13

The following appointment was made on 9/24/12:

Emanuele, Rosanne Ann Arbor (replaced Sousley)	6/30/16
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Schedule of Board Meetings

Fiscal Year 2012

October 21, 2011

January 20, 2012 (cancelled)

April 20, 2012 (cancelled)

July 20, 2012

Registration Activity

Applications Received	50
Number of Registrations	63

Regulatory Activity

Allegations Received	2
Administrative Investigations	1
Field Investigations Authorized	2
Field Investigations Completed	1
Administrative Complaints Filed	0
Summary Suspensions Filed	0
Cease and Desist Orders Issued	1
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 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	Term Expires
Berry, Ann L., AT, ATC, Chair Canton	12/31/13
Corbin, Dennis R., AT, ATC, Vice Chair Kalamazoo	12/31/13
Abendour, Michael, AT Grosse Pointe Woods	6/30/14
Baker, Robert J., MD Kalamazoo	12/31/12
Bupp, William F., Public Member Dewitt	6/30/14
Cartwright, Lorin, Public Member Ann Arbor	6/30/14
Eyers, Christina, EdD, AT, ATC Holt	12/31/12
Nassar, Lawrence G., DO Holt	12/31/13
Ryan, Laurie L., AT, ATC Ada	12/31/11
Snyder, Rosemary, AT Ann Arbor	6/30/14

The following appointment was made on 11/16/11:

Wykes, Patrick F., AT, ATC Holland (replaced Ryan)	12/31/15
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Schedule of Board Meetings

Fiscal Year 2012

November 7, 2011
February 17, 2012
May 18, 2012
August 17, 2012

Licensing Activity

Applications Received	130
Number of Licensees	1,010

Regulatory Activity

Allegations Received	4
Administrative Investigations	3
Field Investigations Authorized	2
Field Investigations Completed	1
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	1
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 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	Term Expires
O'Connor, Thomas, Chair Lansing	6/30/15
Korpela, Lari P., Vice Chair Livonia	6/30/13
Frank, Peggy Twin Lake	6/30/14
Kauffman, Steven, Public Member Grandville	6/30/12
Kileny, Paul, PhD Ann Arbor	6/30/15
Kollaritsch, Joe, Public Member Clarkston	6/30/12
Mukkamala, Srinivas B., MD Flint	6/30/14
Schroeder, Virginia Dearborn Heights	6/30/12
Seidman, Michael D., MD West Bloomfield	6/30/12

The following appointments were made on 7/31/12:

Blackburn, Sharon L., MD Cadillac (replaced Schroeder)	6/30/16
Hicks, Diantha K., Public Member Alma (replaced Kollaritsch)	6/30/16
Hoff, Paul T., MD Ann Arbor (replaced Seidman)	6/30/16
Lewis, Melissa A., Public Member Plymouth (replaced Kauffman)	6/30/16

Schedule of Board Meetings

Fiscal Year 2012

December 16, 2011 (cancelled)
March 16, 2012 (Full Board only)
June 8, 2012
September 21, 2012

Licensing Activity**Audiologists**

Applications Received	30
Number of Licensees	542

Audiologists – Limited

Applications Received	0
Number of Licensees	0

Random Continuing Education Audits

Audited	23
Complied	19

Regulatory Activity

Allegations Received	9
Administrative Investigations	15
Field Investigations Authorized	4
Field Investigations Completed	2
Administrative Complaints Filed	4
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

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

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	Term Expires
Cogan, Solomon, DC, Chair West Bloomfield	12/31/12
Rodnick, Corey, DC, Vice Chair (until 12/2011) Midland	12/31/11
Klapp, Thomas, DC, Vice Chair (as of 1/2012) Ann Arbor	12/31/14
Dean, Christophe, DC Troy	12/31/14
Fellows, Charles, Public Member South Lyon	12/31/11
Knight, Philip, DC Marshall	12/31/11
Stuart, Mark, Public Member Battle Creek	12/31/13
Vittone, Julann, Public Member Lansing	12/31/13

The following appointments were made on 2/6/12:

Huta, Robert, Public Member Gaylord (replaced Fellows)	12/31/15
Reno, Donald, DC Harrison Twp. (replaced Rodnick)	12/31/15
Wilcox, J., Ronald, DC Wyoming (replaced Knight)	12/31/15

The following appointment was made on 3/5/12:

Erskin, Constance M., Public Member Grand Ledge (replaced Thompson)	12/31/13
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Schedule of Board Meetings

Fiscal Year 2012

November 10, 2011

January 12, 2012

March 15, 2012

May 10, 2012 (Full Board only)
July 26, 2012
September 13, 2012

Licensing Activity

Chiropractors

Applications Received	153
Number of Licensees	2,926

Educational Limited Chiropractors

Applications Received	26
Number of Licensees	15

Random Continuing Education Audits

Audited	104
Complied	76

Renewal Continuing Education Audits

Audited	20
Complied	20

Regulatory Activity

Allegations Received	55
Administrative Investigations	105
Field Investigations Authorized	8
Field Investigations Completed	3
Administrative Complaints Filed	18
Summary Suspensions Filed	5
Cease and Desist Orders Issued	1
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	10
Fine	1
Voluntary Surrender	0
Limited License	2
Suspension	5
Revocation	2
Total Disciplinary Actions	20

Rule Changes

**Filed with the Great Seal/Secretary of State on November 2, 2011
Effective November 2, 2011**

R 338.12001

Rule on definitions amended to make updates, revisions, and additions to terms.

R 338.12002

Rule rescinded. Rule addressed the licensure application form and fees.

R 338.12003

Rule amended to revise the requirements for licensure by examination.

R 338.12004

Rule amended to revise the requirements for licensure by endorsement.

R 338.12005

Rule amended to adopt and approve the national board examination in chiropractic and approve the passing score recommended by the national board of chiropractic examiners for the national board examination.

R 338.12006

Rule amended to revise the educational program standards adopted by the board.

R 338.12008

Rule amended to revise the requirements for licensure renewal and continuing education.

R 338.12008a

Rule amended to revise the requirements for approval of continuing education and clarify acceptable and unacceptable programs.

R 338.12008b

A new rule that establishes the requirements for relicensure.

R 338.12009

Rule amended to revise the factors used in assessing fines.

R 338.12010

Rule amended to revise the criteria for board approval of adjustment apparatus.

R 338.12011

Rule amended to revise the criteria for board approval of analytical instruments.

R 338.12011a

A new rule that sets forth the requirements for the performance or ordering of tests.

R 338.12014

Rule amended to make technical and grammatical corrections.

R 338.12015

Rule amended to revise the requirements of patient records.

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	Term Expires
Turowski, Marion, LPC, Chair Troy	6/30/13
Hampton, Steven D., LMSW, Vice Chair Grand Ledge	6/30/14
Burkett, Martha, LPC Grand Rapids (resigned 2/22/12)	6/30/12
Hunt, Meredith, Public Member Sturgis	6/30/14
Jiddou, Ramsey, Public Member Plymouth	6/30/13
LeClear, Laura, Public Member Richland	6/30/14
Munley, Patrick, PhD Kalamazoo	6/30/15
Parfitt, Diane, PhD Ypsilanti	6/30/15
Ramey, Luellen, LPC Rochester Hills	6/30/13
Singleton, Harriet A., LPC Kentwood	6/30/12
Wuori, Thomas J., Public Member Kalamazoo	6/30/14

The following appointments were made on 7/20/12:

Emde, Robyn, LPC St. Joseph (replaced Burkette)	6/30/16
Papazian, Gerald, LPC Lake Ann (replaced Singleton)	6/30/16

Schedule of Board Meetings

Fiscal Year 2012

December 2, 2011

March 2, 2012 (cancelled)

June 1, 2012
September 7, 2012

Licensing Activity

Counselors

Applications Received	293
Number of Licensees	5,847

Educational Limited Counselors

Applications Received	597
Number of Licensees	2,905

Regulatory Activity

Allegations Received	34
Administrative Investigations	38
Field Investigations Authorized	17
Field Investigations Completed	17
Administrative Complaints Filed	10
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	1
Suspension	2
Revocation	0
Total Disciplinary Actions	3

Rule Changes

**Filed with the Great Seal/Secretary of State on March 29, 2012
Effective March 29, 2012**

R 338.1751

Rule amended to update definitions used in the rules.

R 338.1752

Rule amended to clarify examination requirements; specifically, establishes the passing score as established by the testing organizations.

R 338.1752a

Rule amended to adopt the passing score and examination established by the National Board for Certified Counselors and the Commission on Rehabilitation Counselor Certification.

R 338.1753

Rule amended to update standards adopted by reference for counselor training programs.

R 338.1753a

Rule added to adopt by reference the accreditation standards for higher education institutions.

R 338.1753b

Rule added to establish application requirements for applicants coming from out-of-state. The rule includes language that was previously included in R 338.1756.

R 338.1753c

Rule added to establish relicensure requirements for licensed professional counselors who have lapsed licenses.

R 338.1754

Rule amended to clarify application procedures for limited licensed professional counselors. Effective January 1, 2012, the rule establishes that a limited license may be renewed annually, but for no more than 10 years. In cases of hardship, the board may consider a request for an extension of this time period.

R 338.1755

Rule added to establish relicensure requirements for limited licensed professional counselors.

R 338.1756

Rule rescinded, as information contained within rule has been reorganized into R 338.1753b.

R 338.1757

Rule added to establish educational and experiential requirements that a licensed professional counselor will have to meet before he or she provides counseling supervision.

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	Term Expires
Spencer, Craig W., DDS, Chair (until 8/2012) East Lansing	6/30/15
Hines, Diane, DDS, Vice Chair (until 8/2012) Detroit, Chair (as of 8/2012)	6/30/14
Manos, Deborah, DDS, Vice Chair (as of 8/2012) Grosse Pointe Woods	6/30/16
Bera, Julie, RDA Rockford	6/30/14
Briskie, Daniel, DDS Grand Blanc	6/30/15
Darrow, Lisa, RDH Grand Rapids	6/30/16
Franklin, Sandra, RDH St. Clair Shores	6/30/15
Haber, Lawrence M., DDS Commerce Township	6/30/13
Hodder, Joanne A., RDH Grand Rapids	6/30/13
Hondorp, Donna, Public Member Williamston	6/30/15

Kaysserian, Kerry, DDS Traverse City	6/30/15
Maturo, Raymond, DDS Ann Arbor	6/30/12
Molinari, John, PhD, Public Member Northville	6/30/13
Priestap, Deborah E., DDS Milford	6/30/14
Sanders, Rosetta, Public Member Battle Creek	6/30/12
Stamm, Carol, RDA Howell	6/30/15
Swiger, Martha, RDH Petoskey	6/30/12
Wright, William, DDS Lansing	6/30/13

The following appointments were made on 7/31/12:

Bournias, Nicholas J., DDS Gross Pointe Shores (replaced Hennessy)	6/30/16
Hale, Rita L., Public Member Munising (replaced Sanders)	6/30/16
Schmakel, Timothy R., DDS Bloomfield Hills (replaced Maturo)	6/30/16
Weidig, Paula S., RDH Fort Gratiot (replaced Swiger)	6/30/16

Schedule of Board Meetings

Fiscal Year 2012

October 13, 2011
December 8, 2011
February 29, 2012
April 12, 2012
June 14, 2012
August 9, 2012

Licensing Activity

Dentists

Applications Received	253
Number of Licensees	7,748

Dentist – Limited

Applications Received	0
Number of Licensees	2

Dentist – Nonclinical Limited

Applications Received	0
Number of Licensees	1

Dentist – Special Volunteer	
Applications Received	6
Number of Licensees	20

**Dental Specialty Licenses
Prosthodontists**

Applications Received	1
Examinations Administered	0
Number of Specialty Licensees	58

Endodontists

Applications Received	6
Examination Administered	2
Number of Specialty Licensees	175

Oral Surgeons

Applications Received	8
Examinations Administered	2
Number of Specialty Licensees	233

Orthodontists

Applications Received	6
Examinations Administered	6
Number of Specialty Licensees	356

Pediatric Dentists

Applications Received	8
Examinations Administered	0
Number of Specialty Licensees	129

Periodontists

Applications Received	7
Examinations Administered	2
Number of Specialty Licensees	156

Oral Pathologists

Applications Received	1
Number of Specialty Licensees	9

Educational Limited Dentists

Applications Received	26
Number of Licensees	57

Clinical Academic Dentists

Applications Received	17
Number of Licensees	71

Registered Dental Hygienists

Applications Received	346
Number of Licensees	10,462

Clinical Academic Hygienists

Applications Received	0
Number of Licensees	0

Specialty Certifications for Dental Hygienists**Nitrous Oxide**

Applications Received	59
Number of Certifications	2,627

Local Anesthesia

Applications Received	66
Number of Certifications	3,341

Registered Dental Assistants

Applications Received	148
Examinations Administered	160
Number of Licensees	1,657

Dental Assistant – Nonclinical Ltd

Applications Received	0
Number of Licensees	1

Dental Assistant – Clinical Academic

Applications Received	0
Number of Licensees	0

Random Continuing Education Audits**Dentists**

Audited	156
Complied	133

Dental Assistants

Audited	28
Complied	28

Dental Hygienists

Audited	205
Complied	139

Renewal Continuing Education Audits**Dentists**

Audited	45
Complied	45

Dental Assistants

Audited	5
Complied	5

Dental Hygienists

Audited	16
Complied	16

Regulatory Activity

Allegations Received	282
Administrative Investigations	428
Field Investigations Authorized	90
Field Investigations Completed	103
Administrative Complaints Filed	71
Summary Suspensions Filed	3
Cease and Desist Orders Issued	1
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	39
Fine	3
Voluntary Surrender	6
Limited License	3
Suspension	3
Revocation	0
Total Disciplinary Actions	54

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 dietitians or nutritionists and 2 public members.

Board Members	Term Expires
Prout, William, Public Member, Chair (as of 11/2011) Mt. Pleasant (Vice Chair until 11/2011)	6/30/15
Weatherspoon, Lorraine, PhD, Vice Chair (as of 11/2011) Williamston	6/30/15
Brogan, Kathryn, LD, LN, PhD Detroit	6/30/15
Doak Whitney, Louise, RD, MS East Lansing	6/30/15
Jay, Ann, LD, LN Pinconning	6/30/15
Newton, Coco, MPh Ann Arbor	6/30/15
Wille, Celina, PhD, Public Member East Lansing	6/30/15

Schedule of Board Meetings

Fiscal Year 2012

November 4, 2011

March 13, 2012 (cancelled)

June 12, 2012 (cancelled)

September 11, 2012 (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	Term Expires
Angera, Jeffrey, LMFT, Vice Chair (until 12/2011) Mt. Pleasant, Chair (as of 12/2011)	6/30/14
Harp, Sama, Public Member, Vice Chair (as of 12/2011) Dearborn Heights	6/30/13
Allen, Concha, Public Member Dewitt	6/30/15
Beckerson, Brett, Public Member Dearborn Heights	6/30/12
Jager, Kathleen, PhD, LMFT East Lansing	6/30/15
Moriarty, James J., PhD Bloomfield Hills	6/30/12
Pernice-Duca, Francesca Novi	6/30/15
Taylor, Anita, MA, LLP Bloomfield Hills (resigned 3/2012)	6/30/13
Wampler, Richard, MSW, PhD Haslett	6/30/15

The following appointments were made on 8/17/12:

Bischof, Gary, PhD Portage (replaced Moriarty)	6/30/16
Grierson, Terri, Public Member Saginaw (replaced Beckerson)	6/30/16
Mammen, Laura, LPC, LMFT Grand Rapids (replaced Taylor)	6/30/13

Schedule of Board Meetings

Fiscal Year 2012

December 9, 2011

March 9, 2012 (DSC only)

June 22, 2012 (DSC only)

September 28, 2012 (Full Board only)

Licensing Activity

Marriage and Family Therapists

Applications Received	31
Examinations Authorized	29
Number of Licensees	673

Educational Limited MFT's

Applications Received	29
Number of Licensees	97

Regulatory Activity

Allegations Received	8
Administrative Investigations	10
Field Investigations Authorized	5
Field Investigations Completed	4
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

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

Rule Changes

Filed with the Great Seal/Secretary of State on September 13, 2012 Effective September 13, 2012

R 338.7201

Rule amended to revise terms used in the rules.

R 338.7203

Rule amended to clarify educational requirements for an educational limited license.

R 338.7205

Rule amended to clarify educational requirements for licensure as a marriage and family therapist and clarify the passing score on the national examination established by the AMFTRB.

R 338.7207

Rule amended to allow applicants to take the national exam before they complete the 1,000 hours of supervised, direct client contact that is required for licensure.

R 338.7209

Rule amended to clarify that the passing score is established by the AMFTRB.

R 338.7211

Rule amended to adopt the most recent COAMFTE accreditation standards for marriage and family training programs and the most recent accreditation standards for postsecondary institutions.

R 338.7213

Rule amended to clarify the requirements for licensure by endorsement and the Department's current policy regarding verification of out-of-state licenses.

R 338.7215

Rule amended to clarify the procedures for relicensure when a license has lapsed for more than three (3) years.

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	Term Expires
Armstrong, Karen, Chair Farmington Hills	12/31/12
Joda-Miller, Bilyk, Vice Chair Lansing	12/31/13
Bograkos, Timothy, Public Member Lansing	12/31/12
Ericson, Mary Plymouth	12/31/11
Hartung, Tiffany, Public Member Warren	12/31/11
Hilton-Scheffler, Dennis Mt. Clemens	12/31/11
Kubizna, Jodi Grand Rapids	12/31/12
Mackowiak, Thomas, Public Member Lansing	12/31/12
Rudnianin, Harold Hancock	12/31/13
Ryan, Michael Marquette	12/31/13
West, Amanda, Public Member Holt	12/31/13

The following appointments were made on 3/20/12:

Bowman, Donald R. Lansing (replaced Hilton-Scheffler)	12/31/15
Lomax, Bridgett, Public Member Detroit (replaced Hartung) (resigned 7/2012)	12/31/15
Mueller, Melissa Ann Arbor (replaced Ericson)	12/31/15

The following appointment was made on 8/16/12:

Rivard, Teresa, Public Member Bloomfield Hills (replaced Lomax)	12/31/15
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Schedule of Board Meetings

Fiscal Year 2012

November 14, 2011 (cancelled)

January 9, 2012 (cancelled)

April 9, 2012

July 9, 2012 (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 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	Term Expires
Shade, George H., MD, Chair (until 12/2011) Farmington Hills	12/31/11
Burney, Richard E., MD, Chair (as of 1/2012) Ann Arbor	12/31/15
Ahmad, Busharat, MD, Vice Chair (until 12/2011) Monroe	12/31/11
Graham, Peter, MD, Vice Chair (as of 1/2012) East Lansing	12/31/13
Alghanem, Abd A., MD Flint	12/31/11
Cameron, Oliver G., MD, PhD Ann Arbor	12/31/13
Dull, David L., MD Ada	12/31/13
Frain, Jamie, Public Member Haslett	12/31/14
Fraley, Theresa L., Public Member Huntington Woods	12/31/13
Graham-Solomon, Cheryl, Public Member Rochester Hills	12/31/13
Gudipati, Rao VC, MD Freeland	12/31/11
Larson, Lynn M., Public Member Traverse City	12/31/11
Leung, Vivian W., Public Member Okemos	12/31/13
Pasky, Cynthia, Public Member Grand Rapids	12/31/13
Raines III, Frank, Public Member Farmington Hills	12/31/11

Riley, Meghan, PA-C Caledonia	12/31/14
San Diego, Leticia J., PhD, Public Member Clinton Township	12/31/13
Thomashow, Suzanne Hugly, MD, PhD East Lansing (resigned 11/2011)	12/31/13
Weingarden, David S., MD Southfield	12/31/13

The following appointments were made on 1/9/12:

Ariswala, Mohammed A., MD Novi (replaced Ahmad)	12/31/15
Szymanski, Dennis C. Benton Harbor (replaced Gudipati)	12/31/15
Tocco-Bradley, Rosalie, MD Ann Arbor (replaced Alghanem)	12/31/15
Torreano, Gail, Public Member Harbor Springs (replaced Larson)	12/31/15

The following appointments were made on 1/24/12:

Pruess, Louis J., Public Member Grosse Pointe Park (replaced Raines)	12/31/15
Rogers, James D., MD Williamsburg (replaced Shade)	12/13/15

The following appointment was made on 3/1/12:

Bates, Richard D., MD Ossineke (replaced Thomashow)	12/31/13
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Schedule of Board Meetings

Fiscal Year 2012

November 16, 2011
January 25 2012
March 21, 2012
May 16, 2012
July 18, 2012
September 19, 2012

Licensing Activity

Medical Doctors

Applications Received	1,777
Examinations Authorized	239
Number of Licensees	32,285

Medical Doctor – Limited

Applications Received	0
Number of Licensees	0

MD – Special Volunteers

Applications Received	6
Number of Licensees	33



Clinical Academic Doctors

Applications Received	21
Number of Licensees	45

Educational Limited Doctors

Applications Received	1,288
Number of Licensees	4,021

Random Continuing Education Audits

Audited	149
Complied (pending)	111+

Renewal Continuing Education Audits

Audited	155
Complied	155

Regulatory Activity

Allegations Received	695
Administrative Investigations	853
Field Investigations Authorized	201
Field Investigations Completed	181
Administrative Complaints Filed	99
Summary Suspensions Filed	10
Cease and Desist Orders Issued	2
Order to Compel Issued	1

Board Disciplinary Actions

Reprimand	4
Probation	28
Fine	20
Voluntary Surrender	4
Limited License	8
Suspension	16
Revocation	3
Total Disciplinary Actions	83

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 Member	Term Expires
Lavery, Kathleen, RN, MS, CNM, Chair Jackson	6/30/13
Thompson, Teresa, RN, Vice Chair Farmington Hills	6/30/15
Argyle, Roselyn D., RN Hemlock	6/30/15
Armstrong, Reginald, Public Member Detroit	6/30/14
Auty, Earl, RN, CRNA, MS Grosse Pointe Park	6/30/13
Basso, Ronald, Public Member Iron River	6/30/15
Bouchard-Wyant, Kathy, RN, BA East Lansing	6/30/15

Bowman, Karen A., RN, NP Lansing	6/30/13
Brown, Mary J., RN Dimondale	6/30/15
Bugbee, Nina A., RN Flushing	6/30/13
Childress, James H., Public Member Grand Rapids	6/30/14
Cohen, Leah C., RN Dimondale (resigned 10/2011)	6/30/15
Corrado, Mary, Public Member Canton	6/30/15
Daley, Melynda J., LPN Marquette	6/30/12
Egede-Nissen, Lars, Public Member Okemos	6/30/14
Ferency, Michael, Public Member St. Johns	6/30/14
Johnson, Michelle M., RN, MSN Marquette	6/30/12
Johnston-Calati, Kathleen, Public Member Lansing (resigned 10/2011)	6/30/14
McMillan, Brigid, LPN Grosse Pointe Park	6/30/13
Perry, Amy M., RN, MSN Ann Arbor	6/30/13
Schultz, LaDonna, Public Member West Branch	6/30/14
Stefanski, Elaine M., LPN Hazel Park	6/30/15
Stubbs, Donica, RN, BSN Inkster	6/30/12

The following appointments were made on 11/15/11:

Hopper, Paula, MSN, RN Concord (replaced Cohen)	6/30/15
Tobbe, Kristoffer L., Public Member Brighton (replaced Johnston-Calati)	6/30/14

The following appointments were made on 7/3/12:

DeVries, Jill, LPN Zeeland (replaced Daley)	6/30/16
Meringa, Joshua, RN Grand Vile (replaced Stubbs)	6/30/16
Vander Kolk, Mary, RN Traverse City (replaced Johnson)	6/30/16

Schedule of Board Meetings

Fiscal Year 2012

October 6, 2011 (DSC)

November 3, 2011 (Board & DSC)



December 8, 2011 (DSC)
 January 5, 2012 (Board & DSC)
 February 2, 2012 (DSC – cancelled)
 March 8, 2012 (Board & DSC)
 April 5, 2012 (DSC)
 May 3, 2012 (Board & DSC)
 June 7, 2012 (DSC)
 July 12, 2012 (Board & DSC)
 August 2, 2012 (DSC – cancelled)
 September 6, 2012 (Board & DSC)

Licensing Activity

Registered Nurses

Applications Received	7,585
Examinations Authorized	6,012
Number of Licensees	137,754

Registered Nurses – Provisional

Applications Received	170
Number of Licensees	95

Register Nurses – Temporary

Applications Received	22
Numbers of Licensees	24

RN Specialty Certifications

Anesthetists

Applications Received	152
Number of Certifications	2,535

Midwives

Applications Received	22
Number of Licensees	333

Practitioners

Applications Received	485
Number of Licensees	4,573

Practical Nurses

Applications Received	2,064
Examinations Authorized	1,927
Number of Licensees	26,866

Random Continuing Education Audits

Practical Nurses

Audited	148
Complied	97

Registered Nurses

Audited	383
Complied	307



Nurse Anesthetists	
Audited	26
Complied	20

Nurse Midwives	
Audited	5
Complied	5

Nurse Practitioners	
Audited	46
Complied	41

Renewal Continuing Education Audits
Practical Nurses

Audited	259
Complied	259

Registered Nurses	
Audited	879
Complied	879

Registered Nurses w/Specialties	
Audited	45
Complied	45

Regulatory Activity

Allegations Received	1,366
Administrative Investigations	2,019
Field Investigations Authorized	440
Field Investigations Completed	351
Administrative Complaints Filed	346
Summary Suspensions Filed	80
Cease and Desist Orders Issued	4
Order to Compel Issued	2

Board Disciplinary Actions

Reprimand	7
Probation	172
Fine	15
Voluntary Surrender	7
Limited License	5
Suspension	148
Revocation	1
Total Disciplinary Actions	355

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	Term Expires
Clarkson, Gail J., NHA, Chair Bloomfield Hills (resigned 5/2012)	6/30/12
Ditri, Pam, NHA, Vice Chair Dansville	6/30/15
Breuker, Hermina, NHA, Chair (as of 9/2012) Twin Lake	6/30/13
Cook, Todd, Public Member Lansing	6/30/14
Ensign, Thomas, NHA Clinton Township	6/30/13
Fazio, Sara, Public Member Grand Rapids	6/30/14
Moon, Valaria Conerly, Public Member Flint	6/30/12
Pettis, Susan E., NHA Ann Arbor	6/30/12
Smith, Jeanne, NHA Lake Orion	6/30/14

The following appointments were made on 7/3/12:

Hanert, Kathleen, NHA Grayling (replaced Clarkson)	6/30/16
Kimbrough-Wozniak, Kimberly, NHA Muskegon (replaced Pettis)	6/30/16
Ver Beek, Carl, Public Member, Vice Chair (as of 9/2012) Grand Rapids (replaced Moon)	6/30/16

Schedule of Board Meetings

Fiscal Year 2012

December 20, 2011 (cancelled)

March 20, 2012

June 19, 2012 (cancelled)

July 23, 2012 (DSC only)

September 20, 2012

Licensing Activity

Applications Received	147
Examinations Authorized	237
Number of Licensees	1,213

Random Continuing Education Audits

Audited	73
Complied	56

Renewal Continuing Education Audits

Audited	55
Complied	55

Regulatory Activity

Allegations Received	130
Administrative Investigations	47
Field Investigations Authorized	21
Field Investigations Completed	12
Administrative Complaints Filed	15
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	6
Fine	2
Voluntary Surrender	1
Limited License	0
Suspension	0
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	Term Expires
Andert, Diane K., OTR, Chair Battle Creek	12/31/13
Robosan-Burt, Susan, OTR, Vice Chair Troy	12/31/13
Clipper, Christie, Public Member Taylor	12/31/13
Conti, Gerry E., OTR, PhD Ypsilanti	12/31/13
Miller, John D., Public Member Canton	12/31/11
Polk, LoRon, Public Member Canton	12/31/13
Sisco, William M., OTR, MA, MS Holt	12/31/12
Smith, Grace, Public Member Rockford	12/31/13

The following appointments were made on 6/5/12:

Moutsatson, Michael, DO, Public Member Mt. Pleasant (replaced Miller)	12/31/15
Pace, Kimberly, OTR Southgate (replaced Lenfield)	12/31/14

Schedule of Board Meetings

Fiscal Year 2012

November 15, 2011
 February 28, 2012 (Board only)
 May 15, 2012
 August 21, 2012 (cancelled)

Registration Activity

Occupational Therapists

Applications Received	294
Number of Registrants	4,970

Occupational Therapy Assistants

Applications Received	132
Number of Registrants	1,530

Regulatory Activity

Allegations Received	15
Administrative Investigations	30
Field Investigations Authorized	3
Field Investigations Completed	6
Administrative Complaints Filed	4
Summary Suspensions Filed	2
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

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

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	Term Expires
Lakin, Donald W., OD, Chair (until 6/2012) Clinton Township	6/30/12
Thompson, Stephen P., OD, Chair (as of 8/2012) East Lansing	6/30/14
McClintic, David C., OD, Vice Chair (until 6/2012) Portage	6/30/12
Patera, Gregory, OD, Vice Chair (as of 8/2012) Lake Odessa	6/30/14
Agnone, Peter, OD Grand Blanc	6/30/12
Dansby, William, Public Member East Lansing	6/30/14
Zair, Kays T., Public Member West Bloomfield	6/30/14

The following appointment was made on 11/30/11:

Perino, Robert, Public Member Shelbyville (replaced Motherwell)	6/30/15
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The following appointments were made on 7/3/12:

Kaminski, John, OD Midland (replaced Agnone)	6/30/16
McNamara, Paul, Public Member St. Johns (replaced Curley)	6/30/15
Peterson-Klein, Nancy, OD Mecosta (replaced McClintic)	6/30/16
Powers, Carl, OD Petoskey (replaced Lakin)	6/30/16

Schedule of Board Meetings

Fiscal Year 2012

November 30, 2011

February 22 2012 (cancelled)

May 23, 2012

August 22, 2012

Licensing Activity

Applications Received	59
Number of Licensees	1,634

Special Volunteer

Applications Received	3
Number of Licensees	3

Specialty Certifications

DPA Certification

Number of Certifications	1,575
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TPA Certification

Number of Certifications	1,546
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DPA & TPA Certification

Number of Certifications	0
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Random Continuing Education Audits

Audited	53
Complied	50

Renewal Continuing Education Audits

Audited	9
Complied	9

Regulatory Activity

Allegations Received	10
Administrative Investigations	20
Field Investigations Authorized	3
Field Investigations Completed	3
Administrative Complaints Filed	5
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

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

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	Term Expires
Kelly, Charles E., DO, Chair Ortonville	12/31/14
Dobritt, Dennis W., DO, Vice Chair Bloomfield Hills	12/31/14
Acker, Steven A., DO Ann Arbor	12/31/13
Carney, Kathleen M., Public Member Brighton	12/31/12
Cunningham, William C., DO Grand Rapids	12/31/14
Easton, Gale E., PA-C Jackson	12/31/11
Kane, Barry, Public Member Grand Rapids	12/31/13
Lindberg, Paulette J., Public Member Marquette	12/31/11
McAndrews III, Peter, DO Traverse City	12/31/14
Sevensma, Susan, DO, FAO, DME Grand Rapids	12/31/14
Vanator, Douglas P., DO Olive	12/31/12

The following appointments were made on 12/16/11:

Heise, Catherine, Public Member Plymouth (replaced Lindberg)	12/31/15
Kilmark, James, PA-C Belleville (replaced Easton)	12/31/15

Schedule of Board Meetings

Fiscal Year 2012

October 6, 2011
December 1, 2011
February 2, 2012
April 5, 2012
June 7, 2012
August 2, 2012

Licensing Activity

Doctors of Osteopathic Medicine

Applications Received	441
Number of Licensees	6,983

Clinical Academic DO's

Applications Received	0
Number of Licensees	0

Educational Limited DO's

Applications Received	469
Number of Licensees	1,307

Special Volunteer DO's

Applications Received	0
Number of Licensees	1

Random Continuing Education Audits

Audited	177
Complied	159

Renewal Continuing Education Audits

Audited	55
Complied	55

Regulatory Activity

Allegations Received	186
Administrative Investigations	282
Field Investigations Authorized	69
Field Investigations Completed	60
Administrative Complaints Filed	42
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	3
Probation	14
Fine	4
Voluntary Surrender	2
Limited License	3
Suspension	5
Revocation	1
Total Disciplinary Actions	32

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	Term Expires
Schmidt, Harvey E., RPh, Chair (until 8/2012) Tecumseh	6/30/14
Almaklani, Dhafer A., RPh, Vice Chair (until 8/2012) Dearborn, Chair (as of 8/2012)	6/30/13
Penny, Nichole L., RPh, Vice Chair (as of 8/2012) Three Rivers	6/30/15
Bufe-Wyett, Pamela L., Public Member Bloomfield Hills	6/30/13
Carlson, Dale, Public Member Ferndale	6/30/14
Cousens, Mark, Public Member West Bloomfield	6/30/14
Harney, Patricia, Public Member Grand Haven	6/30/15
Moy-Sandusky, Suit Hing Ann Arbor	6/30/15
Senneker, Devin R., Public Member Comstock Park	6/30/14

Smeelink, Patricia, RPh Ada	6/30/15
Yousif-Fakhoury, Sara A., RPh Troy	6/30/12

The following appointments were made on 7/1/12: Stevenson, James G., PharmD Northville (replaced Yousif-Fakhoury)	6/30/16
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Schedule of Board Meetings

Fiscal Year 2012

October 12, 2011
December 14, 2011
February 8, 2012
April 11, 2012
June 13, 2012
July 13, 2012 (Board only)
August 8, 2012

Licensing Activity

Pharmacists

Applications Received	568
Examinations Authorized	
NAPLEX	472
MPJE	747
Number of Licensees	13,347

Educational Limited Pharmacists

Applications Received	527
Number of Licensees	1,386

Other Licenses

Applications Received	
New Pharmacies	279
Manufacturer/Wholesaler	660

Number of Licensees	
Pharmacy	3,257
Manufacturer/Wholesaler	1,742

**Random Continuing Education Audits
(pending)**

Audited	277
Complied	189

Renewal Continuing Education Audits

Audited	97
Complied	97

Regulatory Activity

Allegations Received	207
Administrative Investigations	307
Field Investigations Authorized	100
Field Investigations Completed	110
Administrative Complaints Filed	78
Summary Suspensions Filed	14
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	27
Fine	21
Voluntary Surrender	8
Limited License	3
Suspension	14
Revocation	4
Total Disciplinary Actions	77

Pharmacy Inspections

New Store Apps	913
Transfer Apps	71
Relocation Apps	93
Probation/Monitoring	6
Random	286

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	Term Expires
Marlan, Jill A., PT, Chair Mason	12/31/13
May, Andrew G., PT, Vice Chair Lansing	12/31/13
Crockett, Mecha, Public Member Lansing	12/31/13
Goldenbogen, David, PT Saginaw	12/31/13
Handler, Sean, Public Member Boyne Falls	12/31/13
Kumar, Vijay, PT, DPT, PhD West Branch	12/31/12
Mostrom, Elizabeth, PT, PhD Grand Rapids	12/31/11
Perry, David W., PT Grosse Pointe Woods	12/31/11
Simmons, Barbara, PTA Battle Creek	12/31/14
Smietana, Ginger, Public Member Paw Paw	12/31/13
Thomas-Pilarczyk, Linda, Public Member Parma	12/31/11

The following appointments were made on 12/13/11:

Epolito, Mark, Public Member	12/31/15
Haslett (replaced Thomas-Pilarczyk)	

Gilbert, Brian, PT	12/31/15
Comstock Park (replaced Mostrom)	
Middha, Ajay, PT, DPT	12/31/15
Midland (replaced Perry)	

Schedule of Board Meetings

Fiscal Year 2012

October 18, 2011
 January 17, 2012
 February 3, 2012 (DSC only)
 April 17, 2012
 July 17, 2012

Licensing Activity

Physical Therapists

Applications Received	409
Examinations Authorized	510
Number of Licensees	9,305

Physical Therapy Assistants

Applications Received	1,625
Number of Licensees	3,433

Physical Therapist Assistants -- Limited

Applications Received	0
Examinations Authorized	747
Number of Licensees	2

Regulatory Activity

Allegations Received	45
Administrative Investigations	67
Field Investigations Authorized	21
Field Investigations Completed	12
Administrative Complaints Filed	14
Summary Suspensions Filed	2
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	1
Probation	2
Fine	1
Voluntary Surrender	0
Limited License	4
Suspension	0
Revocation	0
Total Disciplinary Actions	8

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	Term Expires
O'Brien, Bernard J., PA-C, Chair (until 12/2011) Alpena	12/31/11
McGinty, John, PA-C, Chair (as of 2/2012) Attica	6/30/14
Noth, Christopher, PA-C, Vice Chair (as of 2/2012) Grand Blanc	12/31/13
Acker, Steven A., DO Ann Arbor	12/31/13
Claussen, Michael, PA-C Kalamazoo	6/30/14
Davis, Michael A., PA-C Harbor Beach (resigned 4/2011)	12/31/11
Geller, Louis, DPM Huntington Woods	12/31/13
Gnodtke, Pamela, Public Member Charlevoix	12/31/13
Hernandez, Rene L., PA-C Alma	12/31/11
Lepird, Sherry L., Public Member Portage	12/31/11
Siemaszko, Thomas, Public Member Brighton	12/31/11
Wagner, Jr., Karl G., PA-C New Hudson	12/31/11
Weingarden, David S., MD Southfield	12/31/11

The following appointments were made on 12/29/11:	
Adado, April, PA-C	12/31/15
Holt (replaced Hernandez)	
Basso, Sara, Public Member	12/31/15
Iron River (replaced Lepird)	
Kutz, Joel, PA-C	12/31/15
Clinton Township (replaced O'Brien)	
Lopes, Jr., John, PA-C	12/31/15
Mt. Pleasant (replaced Wagner)	
Palazzolo, William, PA-C	12/31/15
Dexter (replaced Davis)	

The following appointments were made on 2/28/12:	
Hadden, Lisa G., Public Member	12/31/15
Mt. Pleasant (replaced Siemaszko)	
Rogers, James D., MD, ED, EACS	12/31/15
Williamsburg (replaced Weingarden)	

Schedule of Joint Task Force Meetings

Fiscal Year 2012

- October 4, 2011 (cancelled)
- January 3, 2012 (cancelled)
- February 9, 2012
- April 3, 2012
- July 10, 2012

Licensing Activity

Applications Received	309
Number of Licensees	4,027

Physician's Assistant Temporary

Applications Received	34
Number of Licensees	31

Regulatory Activity

Allegations Received	43
Administrative Investigations	53
Field Investigations Authorized	17
Field Investigations Completed	13
Administrative Complaints Filed	7
Summary Suspensions Filed	2
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Joint Task Force Disciplinary Actions

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

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 excrescences 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	Term Expires
Geller, Louis, DPM, Chair Huntington Woods	6/30/14
Lazar, Howard, DPM, Vice Chair Bloomfield Hills	6/30/13
Drozdowski, Shane, Public Member Lake Orion	6/30/15
Gee, Lily, Public Member Haslett (resigned 8/2012)	6/30/13
Hughes, Scott, DPM Monroe	6/30/14
Kezelian, Harry A., DPM Bloomfield Hills	6/30/13
Kreitman, Kevan, DPM Birmingham	6/30/15
Morris, Charles, Public Member Wyandotte	6/30/14
Sher, Robert, Public Member West Bloomfield (resigned 8/2011)	6/30/14

The following appointment was made on 10/25/11:

James, Joni, PA-C Lachine	6/30/15
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Schedule of Board Meetings

Fiscal Year 2012

October 26, 2011 (cancelled)
January 18, 2012 (Board only)
April 25, 2012
July 25, 2012

Licensing Activity**Podiatrists**

Applications Received	54
Examinations Authorized	39
Number of Licensees	785

Educational Limited Podiatrists

Applications Received	32
Number of Licensees	59

Podiatrist Educational Preceptorship

Applications Received	0
Number of Licensees	0

Random Continuing Education Audits

Audited	21
Complied (pending)	10+

Renewal Continuing Education Audits

Audited	17
Complied	17

Regulatory Activity

Allegations Received	20
Administrative Investigations	30
Field Investigations Authorized	3
Field Investigations Completed	3
Administrative Complaints Filed	7
Summary Suspensions Filed	0
Cease and Desist Orders Issued	1
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	6
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	2
Revocation	0
Total Disciplinary Actions	8

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	Term Expires
Ver Merris, Dane K., EdD, Chair Grand Rapids	12/31/12
Warbelow, Alan, LLP, Vice Chair Plymouth	12/31/15
Cowie, Julie, Public Member South Haven	12/31/11
Hack, Robert, MA, LLP West Bloomfield	12/31/12
Kayes, Dennis, Public Member Huntington Woods	12/31/14
Navarro, Monica P., Public Member Lake Orion	12/31/13
Reed, James, PhD Lansing	12/31/11
Swarts, Lori, Public Member Clare	12/31/14
Toll, Roberta, PhD Bloomfield Hills	12/31/11

The following appointments were made on 2/16/12:

Connelly, Michael, Public Member East Lansing (replaced Cowie)	12/31/15
Horak, Joseph, PhD Caledonia (replaced Toll)	12/31/15
Ozkan, Eric, PhD Midland (replaced Reed)	12/31/15

Schedule of Board Meetings

Fiscal Year 2012

October 20, 2011
December 15, 2011
February 16, 2012 (cancelled)
April 19, 2012
June 21, 2012
August 16, 2012

Licensing Activity

Applications Received	492
Examinations Authorized	259
Number of Licensees	
Psychologists	2,965
Doctoral Limited	249
Masters Limited	3,517
Temporary Limited	548

Regulatory Activity

Allegations Received	76
Administrative Investigations	69
Field Investigations Authorized	26
Field Investigations Completed	19
Administrative Complaints Filed	12
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	3
Fine	5
Voluntary Surrender	0
Limited License	3
Suspension	0
Revocation	0
Total Disciplinary Actions	11

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	Term Expires
Haas, Carl, LRT, Chair Ann Arbor	12/31/15
Rinck, John, LRT, Vice Chair Eaton Rapids	12/31/13
Abramson, Ilene, PhD, Public Member Novi	12/31/12
Berry, Jr., James R., RT Detroit	12/31/13
Darin, John, LRT Wyandotte	6/30/14
Hyka, John, LRT Shelby Township	12/31/14
Kehr, Randall M., RT Grandville	12/31/12
Monks, Patrick, Public Member Clinton Township	12/31/14
Prins, Julia, LRT Rochester Hills	6/30/14
Sprague, Frank R., MD Muskegon	12/31/11

The following appointments were made on 11/22/11:

Cherwinski, Beverly, Public Member Vanderbilt (replaced Mutch)	12/31/14
Tooker, Richard, MD Grand Rapids (replaced Sprague)	12/31/15

Schedule of Board Meetings

Fiscal Year 2012

October 28, 2011
February 10, 2012
May 11, 2012
August 10, 2012

Licensing Activity**Respiratory Therapists**

Applications Received	299
Number of Licensees	5,178

Respiratory Therapists Temporary

Applications Received	0
Number of Licensees	0

Regulatory Activity

Allegations Received	18
Administrative Investigations	25
Field Investigations Authorized	9
Field Investigations Completed	4
Administrative Complaints Filed	6
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Disciplinary Actions

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

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	2
Number of Registered Sanitarians	447

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	Term Expires
Wojack, Matthew, LMSW, Chair (until 1/2012) Lansing	12/31/13
Najor-Durack, Anwar, LMSW, Vice Chair (until 1/2012) West Bloomfield, Chair (as of 1/2012)	12/31/11
Hayes, E. Jane, LMSW, Vice Chair (as of 1/2012) Traverse City	12/31/13
Battles, Merry, LMSW Kalamazoo	12/31/12
Bell, Heather Adams, Public Member Grand Rapids (resigned 8/2012)	12/31/12
Blum, Eleanor, Public Member Farmington Hills	12/31/14
Brock, Michelle, LMSW East Lansing	12/31/15
Manela, Pamela, LMSW Novi	12/31/14
Woods, Michelle, Public Member Jackson	12/31/13

Schedule of Board Meetings

Fiscal Year 2012

November 22, 2011

January 24, 2012

March 27, 2012
May 22, 2012
July 24, 2012
September 27, 2012

Licensing Activity

Master's Social Workers

Applications Received	812
Examinations Authorized	1839
Number of Licensees	14,329

Limited Master's Social Workers

Applications Received	1,202
Number of Licensees	4,172

MSW Specialty Certifications

Macro Specialty

Applications Received	24
Number of Certifications	11,404

Clinical Specialty

Applications Received	8
Number of Certifications	14,051

Bachelor's Social Workers

Applications Received	90
Examinations Authorized	384
Number of Licensees	4,204

Bachelor's Limited Social Workers

Applications Received	380
Number of Licensees	999

Social Service Technicians

Applications Received	122
Number of Registrants	1,475

Social Services Limited Technician

Applications Received	12
Number of Registrants	24

Random Continuing Education Audits

Audited	445
Complied (pending)	273+

Renewal Continuing Education Audits

Audited	152
Complied	152

Regulatory Activity

Allegations Received	150
Administrative Investigations	156
Field Investigations Authorized	50
Field Investigations Completed	33
Administrative Complaints Filed	31
Summary Suspensions Filed	5
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	12
Fine	0
Voluntary Surrender	2
Limited License	5
Suspension	19
Revocation	1
Total Disciplinary Actions	39

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	Term Expires
Weise, Timothy, CCC-SLP, Chair Grosse Ile	12/31/13
Strong, Katie, CCC-SLP, Vice Chair (until 12/2011) East Lansing	12/31/11
Stevens, Lizbeth, CCC-SLP, Vice Chair (as of 5/2012) Berkley	12/31/12
Austin, Brit, CCC-SLP Oxford	12/31/14
Brown-Clarke, Judith, PhD, Public Member Lansing (resigned 9/2011)	12/31/13
Divi, Vasu, MD Ann Arbor (resigned 5/2012)	12/31/13
Eldis, Francis, CCC-A/SLP Redford (resigned 4/2012)	12/31/14
Fairbrother, Ellen, CCC-SLP Southfield	12/31/11
Koepke, Thomas, PhD, Public Member Novi	12/31/12
Meyer, Jeanette, MD Kalamazoo	12/31/12
Riccio-Omichinski, Donna, Public Member Ann Arbor	12/31/11

The following appointments were made on 2/14/12:

Dwyer, Erica, CCC-SLP Williamsburg (replaced Strong)	12/31/15
Hawatmeh, Nicola, Public Member Warren (replaced Brown-Clark)	12/31/13
Swartz, Bradford, PhD, CCC-SLP Mt. Pleasant (replaced Fairbrother)	12/31/15

The following appointment was made on 4/30/12:

Lynch, Mary, Public Member Bloomfield Hills (replaced Riccio-Omichinski)	12/31/15
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The following appointment was made on 7/16/12:
Carlson, Amanda, MS, CCC-SLP
Ada (replaced Eldes)

12/31/14

Schedule of Board Meetings

Fiscal Year 2012

November 21, 2011 (cancelled)
February 14, 2012 (cancelled)
May 8, 2012
August 14, 2012

Licensing Activity

Speech-Language Pathologists

Applications Received	444
Number of Licenses	377

Educational Limited SLP

Applications Received	140
Number of Licenses	106

Limited SLP

Applications Received	33
Number of Licenses	27

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

Rules:

The first set of rules to implement licensing for Speech-Language Pathologists was filed with the Secretary of State, Office of the Great Seal, on December 7, 2011 with an effective date of December 7, 2011.

R 338.601

A new rule that lists definitions for terms used in the rules.

R 338.603

A new rule that specifies requirements for a speech-language pathology license.

R 338.605

A new rule that adopts the speech-language pathology examination and passing score.

R 338.607

A new rule that specifies requirements for a limited speech-language pathology license for certified teachers.

R 338.609

A new rule specifying the implementation date for the licensing program.

R 338.611

A new rule establishing requirements to obtain a speech-language pathology license by endorsement.

R 338.613

A new rule establishing requirements to obtain an educational limited license.

R 338.615

A new rule establishing requirements for supervised postgraduate clinical experience.

R 338.617

A new rule establishing licensing requirements for graduates of non-accredited postsecondary institutions.

R 338.619

A new rule adopting educational standards by reference.

R 338.621

A new rule establishing requirements for relicensure when a license has lapsed.

R 338.623

A new rule establishing requirements for licensure when a certified teacher's limited license has lapsed.

R 338.625

A new rule specifying which titles or initials are prohibited from use unless a person holds a speech-language pathology license.

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	Term Expires
Letsche, Lawrence A., DVM, Chair Plymouth	12/31/13
Rohwer, Christopher, DVM, Vice Chair Kalamazoo	12/31/14
Allen, Carlene, Public Member Frederic	12/31/13
Beattie, Kimlee, Public Member East Lansing	12/31/13
Kim, Charlotte, DVM Canton	12/31/14
McMahon-Pelton, Sandra, LVT Westland	12/31/12
Postorino-Reeves, Nancy, DVM East Lansing	12/31/12
Stitt, Amanda, Public Member Lansing	12/31/11
Thorp-Stout, Colleen, DVM Brutus	12/31/14

The following appointment was made on 12/19/11:

Werth, Renee, Public Member Eaton Rapids (replaced Stitt)	12/31/15
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Schedule of Board Meetings

Fiscal Year 2012

October 27, 2011

December 13, 2011 (cancelled)

February 23, 2012

April 26, 2012

June 28, 2012 (Board only)

August 23, 2012 (cancelled)

Licensing Activity**Veterinarians**

Applications Received	183
Number of Licensees	3,825

Clinical Academic Veterinarians

Applications Received	10
Number of Licensees	66

Educational Limited Veterinarians

Applications Received	0
Number of Licensees	3

Veterinary Technicians

Applications Received	215
Examinations Administered	220
Number of Licensees	2,621

Regulatory Activity

Allegations Received	48
Administrative Investigations	90
Field Investigations Authorized	29
Field Investigations Completed	21
Administrative Complaints Filed	8
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0
Order to Compel Issued	0

Board Disciplinary Actions

Reprimand	0
Probation	9
Fine	3
Voluntary Surrender	0
Limited License	1
Suspension	1
Revocation	0
Total Disciplinary Actions	14

Michigan Medical Marihuana Registry

The Michigan Medical Marihuana Registry was created with the passage of Initiated Law 1 of 2008 by the people of Michigan in November 2008. The Act is intended to allow the medical use of marihuana; to provide protections for the medical use of marihuana; to provide for a system of registry identification cards for qualifying patients and primary caregivers; to impose a fee for registry application and renewal; to provide for the promulgation of rules; to provide for affirmative defenses; and to provide for penalties for violations of the act.

Although federal law currently prohibits any use of marihuana except under very limited circumstances, states are not required to enforce federal law or prosecute people for engaging in activities prohibited by federal law. The passage of this law creates a setting where citizens are not penalized for the medical use and cultivation of marihuana if authorized to do so by the state of Michigan.

The registry was implemented on April 6, 2009. Individuals can apply to be registered as a patient and a patient can indicate that a specific individual will assist as a caregiver for them. A registered patient can cultivate up to 12 plants and possess 2.5 ounces of usable marihuana. A designated caregiver can cultivate up to 12 plants on behalf of a patient to whom they are connected, if so authorized by the patient. Only one person – the patient or the caregiver on behalf of the patient can grow the 12 allotted plants. A caregiver can be designated to assist up to 5 patients.

The application process consists of submitting a fee and a form with basic information regarding name, address, identification information and designation of who controls the marihuana plants – the patient or caregiver. In addition to the application, the patient must also provide documentation from a fully licensed Michigan physician with whom they have a bona fide relationship certifying they have one or more of the debilitating conditions specified in the law. The physician attests that the use of medical marihuana may be beneficial to the patient. The physician does not write or provide a prescription for the medical marihuana. Marihuana is not dispensed through a pharmacy.

As of September 30, 2012, the registry program had received 312,261 applications since the onset of the program in April 2009. From October 1, 2011 through September 30, 2012, the registry program received a total of 122,463 original and renewal applications. As of October 1, 2012, there were 121,043 active registered patients and 25,199 active registered caregivers. There were 47,847 registered patients who had a designated caregiver.

The registry program cycled through its third renewal process. All registered qualifying patients are required to renew annually. The renewal process requires an application, a new physician certification form, an attestation from the designated caregiver (if applicable), the required fee and copies of photo identification (as applicable). The renewal is valid for one year, just as the original application. New registry identification cards are issued to the qualifying patient and the designated caregiver.

In Fiscal Year 2012, 5,485 new and renewal applications were denied. Common reasons for the denial of applications are: incomplete information was provided; incomplete documentation was submitted; or an insufficient fee (without proper supporting documentation) was submitted.

The table below identifies the frequency for each of the debilitating conditions indicated on the patient applications.

Debilitating Condition	Number of Patients	
	Original 10/1/2011 – 09/30/2012	Renewals 10/1/2011 – 9/30/2012
AIDS	119	151
Alzheimers	182	17
Amyotrophic Lateral Sclerosis	11	14
Cachexia	274	337
Cancer	1,160	1,366
Crohn's Disease	299	579
Glaucoma	391	721
Hepatitis C	548	1,069
HIV	128	158
Nail Patella	25	13
Seizures – Epilepsy	612	802
Severe and Chronic Pain	34,218	45,-95
Severe and Persistent Muscle Spasms	8,697	13,553
Severe Nausea	4,064	5,020
Wasting Syndrome	320	342
Total # patients	10,798	87

No patient or primary caregiver registrations were revoked in Fiscal Year 2012.

In Fiscal Year 2012, 1,928 licensed physicians (MD and DO) certified patients for the Medical Marihuana Registry Program.

In February 2012 the Medical Marihuana Registry Program moved to its current location in Lansing, adjoining the Health Professions Division Health Investigations Section. All MMP staff and equipment are housed in one location.

In March 2012 the Medical Marihuana Registry Program accepted delivery of a new card issuance system. This card issuance system prints the registry identification cards, prints the approval letters, attaches the registry card to the approval letter, folds the letter, inserts it into an envelope, which is then sealed and is ready for postage. The card issuance system can print and process up to 1,400 cards and letters per hour. The acquisition of this machine has totally eliminated any backlog for the issuance of registry identification cards.

At the end of Fiscal Year 2012, the Medical Marihuana Registry Program was in compliance with the requirements of the Medical Marihuana Act, and all applications were approved or denied within 15 (calendar) days of receipt of the application. With the benefit of the card issuance system, all registry identification cards were issued within the mandated time frame from when an application was approved.

The Medical Marihuana Registry Program was staffed by one manager, 2 departmental analysts, 15 word processing assistants, 9 temporary employees and one student at the end of Fiscal Year 2012.

Additional information regarding this program can be located at www.michigan.gov/mmp.

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.*

The health profession boards and the designee of Licensing and Regulatory Affairs appoint members in accordance with Section 16165 of the Michigan Public Health Code.

Member Appointed By	Term Expires
Board of Acupuncture	Vacant
Board of Athletic Trainers Jeff Monroe, AT, ATC	12/31/13
Board of Audiology	Vacant
Board of Chiropractic Roberts, Gordon, DC	12/31/13
Board of Counseling Walkons, Christine, LPC	12/31/13
Board of Dentistry Lewis, Joan M., DDS (resigned 6/14/12)	12/31/13
Board of Dietetics and Nutrition (not currently licensing)	Vacant
Board of Marriage & Family Therapy Rainey, Joseph, LMFT	12/31/14
Board of Massage Therapy (not currently licensing)	Vacant
Board of Medicine	

Christensen, Carl, MD, PhD, Chair	12/31/13
Board of Nursing	
McKenzie, Kitrinka, RN (resigned 4/15/12)	12/31/12
Board of Nursing Home Administrators	Vacant
Board of Occupational Therapy	
Chapleau, Ann, MS	12/31/14
Board of Optometry	Vacant
Board of Osteopathic Medicine & Surgery	
William R. Morrone, DO	12/31/14
Board of Pharmacy	
Dimo, Mary E., PharmD	12/31/13
Board of Physical Therapy	
Talley, Susan, DPT	12/31/14
Joint Task Force on Physician's Assistants	
Westbrook, Joan, PA-C	12/31/13
Board of Podiatric Medicine & Surgery	Vacant
Board of Psychology	
Berkman, Arnold S., PhD	12/31/13
Board of Respiratory Care	
Hamick, Steven K., RRT	12/31/12
Board of Social Work	
Muzzi, Dennis, LMSW	12/31/14
Board of Speech-Language Pathology	Vacant
Board of Veterinary Medicine	
O'Handley, Patricia, DVM	12/31/12
Public Member	
Burke, Michael	12/31/13
Public Member	Vacant

Ex-Officio Members

Ramsdell, Rae, Ex-Officio, Bureau of Health Care Services
Representing Department Director
Bushong, Susan M., LBSW, Contract Administrator/Outreach Coordinator
Bureau of Health Care Services

The following appointment was made on 1/25/12:

Carl Christensen, MD, PhD	12/31/13
Board of Medicine	

The following appointment was made on 2/2/12:

William R. Morrone, DO	12/31/14
Board of Osteopathic Medicine & Surgery	

The following appointment was made on 2/8/12:

Mary E. Dimo, PharmD	12/31/13
Board of Pharmacy	

The following appointment was made on 2/9/12:



Joan Westbrook, PA-C Task Force of Physician's Assistants	12/31/13
The following appointment was made on 2/28/12: Ann Chapleau, DHS, MS, OTR Board of Occupational Therapy	12/31/14
The following re-appointment was made on 2/29/12: Joan Lewis, DDS Board of Dentistry	12/31/13
The following appointment was made on 3/7/12: Michael Burke Public Member	12/31/13
The following appointment was made on 3/15/12: Gordon Roberts, DC Board of Chiropractic	12/31/13
The following appointment was made on 4/19/12: Arnold S. Berkman, PhD Board of Psychology	12/31/13
The following appointment was made on 5/3/12: Linda Taft, RN Board of Nursing And reappointed on 11/8/12	12/31/12 12/31/14
The following appointment was made on 5/18/12: Jeff Monroe, AT, ATC Board of Athletic Trainers	12/31/13
The following re-appointment was made on 6/1/12: Christine Walkons, LPC Board of Counseling	12/31/13
The following re-appointment was made on 7/17/12: Susan Talley, PT, DPT, C/NDT Board of Physical Therapy	12/31/14
The following re-appointment was made on 9/27/12: Dennis Muzzi, LMSW Board of Social Work	12/31/14
The following re-appointment was made on 9/28/12: Joseph Rainey, LMFT Board of Marriage & Family Therapy	12/31/14

Schedule of Committee Meetings



Fiscal Year 2012

December 12, 2011

March 19, 2012

June 18, 2012

September 23, 2012

Accomplishments

- The Committee continues to review the HPRP policies and procedures to identify potentially needed changes to ensure accurate monitoring.
- Policies regarding Abstinence Based Recovery and Medical Marijuana use in program were approved.
- The HPRP Outreach Worker continues to increase educational and outreach efforts for the program, statewide, to hospitals and other treatment facilities as well as educational facilities to ensure awareness of signs of impairments and resources for referral.
- The contract for the HPRP was posted for bidders per DTMB requirements and a new Vendor was selected. Ulliance, Inc. took over the contract on September 1, 2012.
- The HPRP website, www.hprp.org, has been updated to allow for on-line submission of required reports by providers and participants. Relevant information for anyone requesting information on the program is also available.

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 7 ex-officio members.

Member Representing	Term Expires
Prior member terms expired 8/30/11	
The following were appointed on 11/7/11	
Bouchard-Wyant, Kathy A., RN Board of Nursing	8/30/13
Cibor, Gregory M. Public Member	8/30/13
Dettloff, Richard W. Pharmaceutical Manufacturers	8/30/13
Kreitman, Kevan R., DPM Board of Podiatric Medicine & Surgery	8/30/13
Letsche, Lawrence A., DVM Board of Veterinary Medicine	8/30/13
Penny, Nichole L., RPh Board of Pharmacy	8/30/13
Picone, David A. Psychiatry Profession	8/30/13
Sevensma, Susan C., DO Board of Osteopathic Medicine & Surgery	8/30/13
Steffey, Jeffrey K. Pharmacology Profession	8/30/13
Szajna, Kim R. Public Member	8/30/13
Westra, Jeffrey M. Public Member	8/30/13
Wright, William D., DDS Board of Dentistry	8/30/13

Ex-Officio Members

Ramsdell, Rae, Bureau of Health Care Services
Department of Licensing and Regulatory Affairs

Stokes, Wanda, Division Chief, Licensing & Regulation Division
Department of Attorney General

Kenyon, James, RPh, Bureau of Medicaid Program
Department of Community Health

Wissel, Michael, RPh, Drug Control Administrator
Department of Licensing and Regulatory Affairs

Vacant
Director of Public Health

Vacant
Department of Education

Vacant
Department of Michigan State Police

The following appointment was made on 3/23/12:

Arsiwala, Mohammed, MD

Board of Medicine (replaced Dull)

8/30/13

Schedule of Commission Meetings

Fiscal Year 2012

October 25, 2011 (cancelled)

January 17, 2012

April 17, 2012

July 17, 2012 (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 weekly basis. A rule change has been introduced which will require daily reporting in an effort to provide the most current prescription information on MAPS reports.

Upon registration to MAPS Online, prescribers query the electronic MAPS database for patient-specific reports which allow a review of the patient's previous Schedule 2-5 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 in Michigan also register to MAPS Online to obtain prescription data for bona fide drug-related criminal investigatory or evidentiary purposes. In 2012, health care payment or benefit providers were granted access to MAPS for purposes of ensuring patient safety and investigating fraud and abuse; access was also extended to practitioners to allow them to request MAPS reports using their own DEA registration also for the purpose of ensuring patient safety and detecting fraud and abuse.

The system is currently providing approximately 4,000 reports on a daily basis to approximately 23,000 MAPS users. Forty percent of the licensed health professionals in Michigan are registered to MAPS.

A total of 20,991,020 prescriptions were reported to MAPS in 2012. Hydrocodone combinations such as Vicodin, Norco, Lorcet and Lortab accounted for approximately 6,759,000 prescriptions or 32% of the total number dispensed.

MAPS operations also include notification to prescribers when MAPS information indicates their patient may be a doctor shopper, which is 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 for the patient and provide the patient with guidance for substance abuse and addiction treatment.

A grant was received in 2012 to continue the automation of the notification letter process, and to distribute MAPS educational brochures to all law enforcement agencies in Michigan.

MAPS is currently exchanging prescription data with 11 states through the interstate data exchange program monitored by the National Association of Boards of Pharmacy (NABP) PMP Interconnect, whereby practitioners can request data from other states directly through MAPS.

A ReStart contract continues to provide 2 full-time programmers placed within DTMB to facilitate the MAPS database. MAPS operations continue to be administered by the Bureau.

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

Professional Practice Section

The Workforce Development, Research & Evaluation Section (WDRE) was established in August 2006 and is within the Bureau of Health Care Services. The name of the section was changed in 2009 to the Professional Practice Section to encompass its broader range of activities.

The Professional Practice Section is responsible for ongoing program efforts and various projects including:

- Licensing surveys received by licensees and registrants in their license/registration renewal notice mailings. The information obtained from these completed surveys determines current and future healthcare workforce trends and needs as well as professional practice issues such as practice specialty, the use of E-health practices, and the acceptance of Medicaid and Medicare. Professions surveyed to date include nurses, physicians, physician residents, dentists, dental hygienists, pharmacists and physician's assistants. Since 2009, the physician survey contains a section with questions that measure pain management knowledge, attitudes, and practices.
- A *Health Careers in Michigan* website that provides comprehensive information about careers in the healthcare field, the skills and education needed to pursue various careers, licensing requirements, and employment information.
- A *Patient Safety* website (www.michigan.gov/patientsafety) that provides information for health professionals and the general public related to patient safety issues.
- A *Pain Management* website (www.michigan.gov/pm) that provides information regarding pain and symptom management for health professionals and the general public, as well as a section for the Advisory Committee on Pain and Symptom Management.
- Publication of a quarterly newsletter titled *Public Forum*. This newsletter addresses health issues impacting the public and is electronically disseminated to health clinics and health professionals to make available for their patients. It can also be electronically submitted to members of the general public upon request. The newsletter provides a wide array of health-related information that is of interest to both the general public and the health professionals who provide care for Michigan's citizens.
- Publication and distribution of the biannual newsletter *MiPainManagement* to several health professions. This newsletter is designed to provide healthcare professionals with information regarding pain and symptom management. It includes information regarding best practices, training, and efforts to improve pain management in Michigan by the state's pain management program.
- Development of resources for licensed and registered health professionals around a host of professional practice, healthcare workforce, licensure, and regulatory issues. A recent resource was the development of an online three-part training module for nurses on Licensing, Professionalism and Regulation in 2010.

- Staff response to over 2,000 inquiries annually from health care licensees and the public regarding scope of professional practices, regulatory issues, and issues impacting patient care.
- Providing administrative support and guidance for two special committees: the Advisory Committee on Pain and Symptom Management (ACPSM) and the Interagency Healthcare Workforce Coordinating Council (IHWCC).
- Serves as the contract administrator for the Michigan Center for Health Professions and the Michigan Center for Nursing, and to manage the annual Master Agreement for the licensee surveys and physician training module.
- Developing the statutorily required Medical Marijuana Review Panel. A first meeting has been established for December 14, 2012. The section will provide staff support to the panel, and will arrange and oversee all public hearings relative to panel recommendations.

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 year containing 18 recommendations to improve pain and symptom management in Michigan. The State of Michigan enacted a number of legislative measures to improve pain and symptom management in Michigan between 1995 and 2004. These include 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 Pain Management and Palliative Care Program (PMPCP), which was established in 2008 through the Workforce Development, Research and Evaluation Section, has provided staff support to the ACPSM. To better reflect the pain management work of the section, the section was renamed the Professional Practice Section (PPS) in 2009.

During FY 2012, and in support of the ACPSM 2002 recommendations, the PPS continued to promote the increased use of the Michigan Automated Prescription System (MAPS) to all prescribers through presentations, printed materials, and electronic media. This includes a DVD on MAPS and pain management that has been distributed since May 2011. The program also printed and distributed a booklet published by the Federation of State Medical Boards, *Responsible Opioid Prescribing: A Physicians Guide*. The booklet was distributed to all licensed prescribers and dispensers (MD and DO physicians, dentists, pharmacists, podiatrists, optometrists, physician’s assistants, and advance practice nurses). In spring 2012, the PMPCP customized the second edition of this booklet, to be distributed in FY 2013.

The Committee provides professional expertise and consultation to the state’s Pain Management and Palliative Care Program (PMPCP). A wide range of health professionals and two general public members make up this important advisory body.

The committee members serving the term of 07/01/11 to 06/30/13* are:

Member Representing/Appointed by	Term Expires
Ramsdell, Rae, Chair Bureau of Health Care Services/Director, Licensing Unit	6/30/13
Ashman, Lawrence, DDS Board of Dentistry	6/30/13
Atkinson, Marie, MD (resigned with replacement to be determined) Wayne State University School of Medicine/Governor	6/30/13
Berland, Daniel, MD Board of Medicine	6/30/13
Deremo, Dorothy (replaced by Ashley, Lisa) Hospice and Palliative Care Association of Michigan/Governor	6/30/13
Dobritt, Dennis W., DO Board of Osteopathic Medicine & Surgery	6/30/13
Gigliotti, Lisa	6/30/13

Chronic Pain Sufferer/Governor	
Green, Carmen	6/30/13
University of Michigan School of Medicine/Governor	
Jerome, John	6/30/13
Board of Psychology	
Kohn, Jody	6/30/13
Public Member/Governor	
Lewandowski, Jeanne, MD	6/30/13
Board of Medicine	
Morrone, William, DO	6/30/13
Board of Osteopathic Medicine & Surgery	
Noiva, Robert, MD	6/30/13
Oakland University William Beaumont School of Medicine**	
Prokop, Lawrence L., DO	6/30/13
Michigan State University, College of Osteopathic Medicine	
Roskos, Steven E., MD	6/30/13
Michigan State University, College of Human Medicine	
Saadeh, Claire, PharmD, BCOP	6/30/13
Board of Pharmacy	
Schram, Karel, PA	6/30/13
Task Force on Physician's Assistants	
Vallerand, April, PhD, RN	6/30/13
Board of Nursing	

*On June 30, 2013, the two-year terms of the above members will expire. Subsequently, the involved licensing boards and the Governor's Appointments Division will be appointing or reappointing people to serve on the committee. The new list of committee members will be provided in the FY 2013 report.

**Dr. Robert Noiva represents the first appointee from one of Michigan's new medical schools, Oakland University William Beaumont School of Medicine.

The following projects were undertaken by the PMPCP in FY 2012 in order to meet the Committee's recommendations:

1. Held two regular biannual meetings of the ACPSM on November 18, 2011 and May 4, 2012. At the November 18, 2011 meeting, which was the first meeting for the new appointees serving from July 1, 2011 through June 30, 2013, the Committee established the following four recommendations which are targeted for completion in FY 2012 and FY 2013.

- a) Develop a pain management toolkit for health professionals.
 - b) Develop a pain management toolkit for the public.
 - c) Develop and implement strategies to reach the public, including the use of social media.
 - d) Develop and implement strategies to reach health professionals, including the use of social media.
 - e) Complete follow up work from the May 2011 Medical School Curriculum Summit.
2. Distributed approximately 75,000 copies of the booklet *Responsible Opioid Prescribing: A Guide for Michigan Physicians* to licensed health professionals located in Michigan (MD and DO physicians and medical residents, dentists, pharmacists, podiatrists, optometrists, physician's assistants, advance practice nurses, and, initially, psychologists). Each year the booklet will be distributed to all newly licensed, Michigan-based health professionals with prescribing rights. The booklet is also distributed at various health professional conferences and other training venues.
 3. Beginning in FY11 and continuing in FY12, distributed the DVD *Michigan Automated Prescription System (MAPS) and Effective Pain Management* to all of the same Michigan health licensees targeted for the booklet distribution (see above). The DVD will continue to be distributed at various conferences and other training venues. In FY 12, the DVD won a Hermes award, which recognizes excellence in visual media.
 4. Distributed a hard copy of the newsletter *MiPainManagement* to all newly licensed health professionals in fall 2011. The newsletter was also sent electronically in both fall 2011 and summer 2012 to a list serve of over 5,000 subscribers. Each newsletter contains updates on the Michigan Automated Prescription System, examples of best practices, State program information, and a variety of current topics on pain management.
 5. Made presentations at events hosted by Michigan State Medical Society, Michigan Academy of Physician's Assistants, Michigan Assisted Living Association, State of Michigan's Ombudsmen Program, and Health Occupations Students of America. Consultation and event planning assistance was provided to the Kalamazoo County Substance Abuse Task Force, Advancing Excellence in America's Nursing Home's project, and the Michigan Hospice and Palliative Care Organization Annual Assembly on Pain.
 6. Conducted the fourth annual *Physician Pain Management Survey*, which is an optional survey during license renewal. This survey is a statistically reliable and valid tool to measure the impact of PMPCP strategies, and is used in program assessment and program planning. This fourth survey showed significant increases in awareness about and use of the Michigan Automated Prescription System (MAPS) and a dramatic increase in the number of physicians who identify the State of Michigan as a good source of pain management information.
 7. Co-sponsored the three conferences in Michigan dealing with pain management (the *Conference on Pain, the Annual Palliative Care Collaborative, and the Annual Health Occupations Students of America*).

8. Held the fourth annual Pain and Palliative Care Assembly, sponsored by the Bureau Health Care Services and the Hospice & Palliative Care Association of Michigan. The conference featured Rollin Gallagher, MD, a national pain expert and an advisory board member for the booklet we annually distribute, *Responsible Opioid Prescribing: A Physician's Guide*.
9. Continued follow up work from the May 2011 Pain Management Medical School Curriculum Summit. The ACPSM Professional Education Subcommittee completed a final draft of a model pain curriculum for medical schools, which will be distributed to the medical schools in 2013.
10. Completed a draft of a Toolkit for Health Professionals, which we will post on the website and consider other opportunities to distribute it in FY13.
11. Developed a Pain Management Toolkit for the public, which was posted on the pain management website during the launch of the Public Service Announcement (PSA) campaign in September 2012.
12. Launched a statewide media campaign for the public on pain management in September 2012. Four radio and TV Public Service Announcements were distributed to over 200 radio and TV stations serving Michigan. It also involved postings through social media. The messages were directed at self-help strategies and working closely with your health professionals to find one of the many safe and effective pain management strategies available. The campaign will be extended through April 2013.
13. Held numerous meetings, gave presentations and/or consulted with various licensing boards, state programs, professional organizations, health care facilities and other stakeholder agencies regarding the resources of the PMPCP.

Healthcare Workforce Activity

The Bureau of Health Care Services has been engaged in work related to Michigan's health care workforce since 2003. In 2004, the Bureau established the Michigan Healthcare Workforce Center. The Center's purpose is to serve as a clearinghouse for workforce data through their website (www.michigan.gov/mhwc), administer surveys to licensed health professionals, convene and/or participate with groups to address workforce issues, and conduct research and publish papers on workforce related issues. In 2006, the Bureau established the Workforce Development, Research and Evaluation Section to staff the Center's activities. The activities include managing a contract with the Michigan Health Council to develop and maintain the Michigan Center for Health Professions and the Michigan Center for Nursing:

Michigan Center for Health Professions

The Michigan Center for Health Professions at the Michigan Health Council was established in 2005 as a central source for information on the recruitment, education and retention of health professionals in Michigan.

The 2012 goals of the Michigan Center for Health Professions were to:

- Establish a central forum for exploring and addressing needs and issues that impact the supply and career mobility of health professionals.
- Foster collaboration among representatives of key health disciplines, educators, employers, and government regulators.
- Locate existing data sources and identify any gaps in the data.
- Collect additional information to evaluate the supply and demand of health professionals in Michigan.
- Provide a clearinghouse of educational resources and information to assist academic institutions in strengthening the education of health professionals in Michigan.

The 2012 accomplishments of the MCHP include:

- a) Council of University Deans of Allied Health:
 - Western Michigan University consulted with group to host an NIH workshop regarding best practices to pursue NIH funding that reached full capacity.
 - Met with LARA staff regarding the impact of occupational licensing in Michigan.
- b) Developed statewide collaborations on interprofessional education and practice:
 - Convened approximately seven workgroup meetings with a total of 56 participants from higher education, clinical sites, and related workforce organizations to assess interest and potential of interprofessional activities.
 - Completed a report regarding the impact of interprofessional education titled, "Building an Innovative Clinical Education Model" that summarizes the current state and prospective value of interprofessional activities for the State of Michigan.
 - Received training from international experts at the University of Toronto to help Michigan further develop emerging interprofessional models.
 - Convened approximately 80 attendees including speakers and staff at the Northern Michigan Interprofessional Education Conference that launched a region-specific effort around interprofessional activities.

- Coordinated, submitted, and received funding from the Health Resources and Services Administration to pursue interprofessional collaborative practice in partnership with Grand Valley State University, Wayne State University, the Michigan Area Health Education Center and two nurse managed health centers associated with the higher education partners.
- c) Delivered a report on accreditation through contract with Public Sector Consultants.
- d) Developed a program of study for clinical preceptors.
- e) Strengthened partnerships with related organizations to help serve the State of Michigan.
 - Participated on multiple working groups associated with the Michigan Area Health Education Center's program office and regional centers.

Michigan Center for Nursing

The Michigan Center for Nursing at the Michigan Health Council was created in 2003 to champion the nursing workforce through on-going collaboration, communication and consensus building.

The goals of the Michigan Center for Nursing are to:

- Develop recommendations for cultivating and maintaining a high-quality nursing workforce that meets the demand for nursing services in Michigan.
- Foster strategic alliances among nurses, educational institutions, health care systems, the business community and other stakeholders for improvement in the recruitment, education, and retention of nurses and the delivery of health care.
- Establish a central resource for nursing workforce data collection and analysis.

The 2012 accomplishments of the MCN include:

- a) The 2012 survey of licensed nurses in Michigan was completed in June. Survey questions were revised to include data on the APRN workforce to negate the need for two surveys.
- b) The Center is a member of the Michigan Nursing Education Council.
- c) Monthly newsletters were sent out to all nurses with updates on nursing issues. We have 135,000 emails in the database.
- d) A Nursing Summit was held with the focus on Leadership in Nursing with 150 participants.
- e) A workshop on writing test items to mirror the RN and LPN NCLEX was held for nursing faculty with 125 participants.
- f) A workshop on teaching methodologies for the certified nursing assistant curriculum was held in August. This is an annual event that enables the primary and delegated instructors of CNA programs to obtain the 8 continuing education credits they are required to obtain to maintain their Train-the-Trainer certification.
- g) A workshop was held to help faculty include more information on care of the geriatric patient/client. There were 100 participants.
- h) The Leading Toward Tomorrow leadership academy continued with two groups of 80 participants. The grant funding has ended but the program is self-sustaining.
- i) Sponsored two Institutes of Nursing Excellence with 30 participants each. This is a retreat for nurses who provide direct care and to encourage leadership.
- j) The Center for Nursing sponsored Career Launch events for nursing students in their senior year (last semester), to assist in the transition from student to graduate nurse.

- The Career Launch in Marquette had 65 students and the Career Launch event in Grand Rapids had 230 participants. Sessions were held on getting that first job and where to look for a job in healthcare outside of the hospital setting.
- k) A webinar on nursing delegation is being designed. The webinar will be aired in 2013.
 - l) The Center responded to 535 requests/questions on nursing issues from telephone and email inquiries. These inquiries included questions on delegation, scope of practice and licensure.
 - m) The Center responded to 450 requests/questions on nursing education. A majority of the questions focused on approved nursing education programs versus accredited programs.
 - n) Presentations were made to the Board of Nursing on the work of the Center.
 - o) A curriculum for developing nursing preceptors is under development (anticipated completion in 2013).
 - p) A task force to look at how new graduate nurses are trained in a variety of practice settings; acute care, long term care and ambulatory care. A work group is developing a report with recommendations on a template or model for each of these care areas.
 - q) The Center participated in the Quality and Safety in Nursing Education (September 2012). A total of 150 participants from practice and education created regional work teams. The Center is in the process of helping to develop a report on the work being accomplished.