

GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

## MICHIGAN BOARD OF OSTEOPATHIC MEDICINE AND SURGERY RULES COMMITTEE WORK GROUP MEETING

# MINUTES NOVEMBER 2, 2021

The Michigan Board of Osteopathic Medicine and Surgery, Rules Work Group, met on November 2, 2021. The meeting was held via Zoom.

# ATTENDANCE

- Members Present: Walker Foland, D.O Craig Glines, D.O., MSBA
- Members Absent: Matthew Hauser, Public Member
- Staff Present:Kimmy Catlin, Board Support, Board and Committees SectionWeston MacIntosh, Senior Policy Analyst, Board and Committees Section
- Public Present: Jeff Rosenbaum

# **RULES DISCUSSION**

MacIntosh explained the Rules Work Group process as well as the promulgation process.

MacIntosh explained the non-substantive changes made to the draft.

# R 338.120 Training standards for identifying victims of human trafficking; requirements.

MacIntosh stated that this is a one-time training required for all professions.

# R 338.121 Accreditation standards for approval of osteopathic medical schools, postgraduate training programs, and institutions; adoption by reference.

MacIntosh stated this was updated to remain current and adopt the most recent standards.

BUREAU OF PROFESSIONAL LICENSING 611 W. OTTAWA • P.O. BOX 30670 • LANSING, MICHIGAN 48909 www.michigan.gov/bpl • 517-241-0199 LARA is an equal opportunity employer/program Michigan Board of Osteopathic Medicine and Surgery Rules Committee Work Group Meeting Minutes November 2, 2021 Page 2 of 2

# R 338.123 Licensure by examination.

(d) MacIntosh inquired whether a minimum of 1 year of postgraduate clinical training was an adequate requirement.

Discussion was held.

The Rules Committee agreed to leave the language as-is.

# R 338.125 Licensure by endorsement.

Glines inquired about the title of Osteopaths in Canada and expressed concern with under-educated applicants obtaining licensure and jeopardizing the safety of the public.

MacIntosh stated that there were two types of providers in Canada, one of which would not fall under this category, as they were not medically educated and trained osteopathic medical doctors.

Glines inquired if the educational requirements to become licensed in Canada were like those in the US.

MacIntosh directed Glines to subrule (1)(b), (c), (d), and (e) of the rule, which addressed education, examination, and training.

Discussion was held about the Medical Council of Canada Qualifying Examination (MCCQE) and the education and knowledge needed to pass it.

The Rules Committee was not in favor of adopting the MCCQE as a qualifying examination for licensure.

# ADJOURNMENT

The meeting adjourned at 10:30 a.m. Catlin will work with the committee to schedule another meeting.

Prepared by: Kimmy Catlin, Board Support Bureau of Professional Licensing

November 22, 2021

## DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

## DIRECTOR'S OFFICE

## OSTEOPATHIC MEDICINE AND SURGERY - GENERAL RULES

Filed with the secretary of state on

These rules take effect immediately upon filing with the secretary of state unless adopted under section 33, 44, or 45a(9) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.233, 24.244, or 24.245a. Rules adopted under these sections become effective 7 days after filing with the secretary of state.

(By authority conferred on the director of the department of licensing and regulatory affairs by sections 16145, 16148, 16174, 16204, 16215, 16287, 17531, 17533, and 17548 of the public health code, 1978 PA 368, MCL 333.16145, 333.16148, 333.16174, 333.16204, 333.16215, 333.16287, 333.17531, 333.17533, and 333.17548, and Executive Reorganization Order Nos. 1991-9, 1996-2, 2003-1, and 2011-4, MCL 338.3501, 445.2001, 445.2011, and 445.2030)

R 338.111, R 338.114, R 338.115, R 338.117, R 338.119, R 338.120, R 338.121, R 338.123, R 338.125, R 338.127, R 338.129, R 338.133, R 338.141, and R 338.143 of the Michigan Administrative Code are amended as follows:

## PART 1. GENERAL PROVISIONS

R 338.111 Definitions.

Rule 11. (1) As used in these rules:

(a) "Board" means the Michigan board of osteopathic medicine and surgery created under section 17521 of the code, MCL 333.17521.

(b) "Code" means the public health code, 1978 PA 368, MCL 333.1101 to 333.25211.

(c) "Department" means the department of licensing and regulatory affairs.

(2) A term defined in the code has the same meaning when used in these rules.

R 338.114 Telehealth.

Rule 14. (1) A licensee shall obtain Consent consent for treatment must be obtained before providing a telehealth service under section 16284 of the code, MCL 333.16284.

(2) A licensee shall keep Proof proof of consent for telehealth treatment must be maintained in the patient's up-to-date medical record and retained in compliance with satisfy section 16213 of the code, MCL 333.16213.

(3) A physician licensee providing a telehealth service may prescribe a drug if the physician licensee is a prescriber acting within the scope of his or her the licensee's

practice and in compliance with section 16285 of the code, MCL 333.16285, and if he or she the licensee does both of the following:

(a) If medically necessary, refers the patient to a provider that is geographically accessible to the patient.

(b) Makes himself or herself the licensee available to provide follow-up care services to the patient, or to refer the patient to another provider, for follow-up care.

(4) A physician licensee providing any telehealth service shall do both of the following:(a) Act within the scope of his or her the licensee's practice.

(b) Exercise the same standard of care applicable to a traditional, in-person health care service.

## R 338.115 Code of ethics.

Rule 15. (1) The standards of the American Osteopathic Association, 142 E. Ontario St., Chicago, IL 60611-2864 set forth in the "Code of Ethics" dated July 24, 2016, are adopted by reference in these rules. The code of ethics may be obtained at no cost from the association's website at: <u>https://osteopathic.org/about/leadership/aoa-governance-documents/code-of-ethics/</u>. at https://osteopathic.org.

(2) A licensee shall not violate the code of ethics.

(3) Copies of the adopted standards referenced in subrule (1) of this rule are available for inspection and distribution at a cost of 10 cents per page from the Board of Osteopathic Medicine and Surgery, Bureau of Professional Licensing, Department of Licensing and Regulatory Affairs, 611 West Ottawa, P.O. Box 30670, Lansing, Michigan 48909.

R 338.117 Prescribing of drugs by physician's assistants; procedures and protocols.

Rule 17. (1) Under section 17548(3) and (4) of the code, MCL 333.17548, and under the terms of a practice agreement, a physician's assistant may prescribe a drug, including a controlled substance that is included in schedules 2 to 5 of part 72 of the code, MCL 333.7201 to 333.7231, subject to both of the following requirements:

(a) If a physician's assistant prescribes a drug, the physician's assistant's name must be used, recorded, or otherwise indicated in connection with that prescription.

(b) If a physician's assistant prescribes a drug that is included in schedules 2 to 5, the physician's assistant's DEA registration number must be used, recorded, or otherwise indicated in connection with that prescription.

(2) Under section 17548(3) and (5) of the code, MCL 333.17548, and under the terms of a practice agreement, a physician's assistant may order, receive, and dispense complimentary starter dose drugs, including controlled substances that are included in schedules 2 to 5 of part 72 of the code, MCL 333.7201 to MCL 333.7231, subject to both of the following requirements:

(a) If a physician's assistant orders, receives, or dispenses a complimentary starter dose drug, the physician's assistant's name must be used, recorded, or otherwise indicated in connection with that order, receipt, or dispensing.

(b) If a physician's assistant orders, receives, or dispenses a complimentary starter dose drug that is included in schedules 2 to 5, the physician's assistant's DEA registration

number must be used, recorded, or otherwise indicated in connection with that order, receipt, or dispensing.

R 338.119 Delegation of prescribing controlled substances to an advanced practice registered nurse; limitation.

Rule 19. (1) A physician may delegate the prescription of controlled substances listed in schedules 2 to 5 of part 72 of the code, MCL 333.7201 to MCL 333.7231, to a registered nurse who holds specialty certification under section 17210 of the code, MCL 333.17210, with the exception of except for a nurse anesthetist, if the delegating physician establishes a written authorization that contains has all of the following information:

(a) The name, license number, and signature of the delegating physician.

(b) The name, license number, and signature of the nurse practitioner, nurse midwife, or clinical nurse specialist.

(c) The limitations or exceptions to the delegation.

(d) The effective date of the delegation.

(2) The delegating physician shall review and update a written authorization on an annual basis from the original date or the date of amendment, if amended. The delegating physician shall note the review date on the written authorization.

(3) The delegating physician shall maintain keep a written authorization at the delegating physician's primary place of practice.

(4) The delegating physician shall provide a copy of the signed, written authorization to the nurse practitioner, nurse midwife, or clinical nurse specialist.

(5) The delegating physician shall ensure that an amendment to the written authorization is in compliance with satisfies subrules (1), (2), (3), and (4) of this rule.

(6) A delegating physician may authorize a nurse practitioner, a nurse midwife, or a clinical nurse specialist to issue a multiple prescriptions allowing the patient to receive a total of up to a 90-day supply of a schedule 2 controlled substance.

(7) A delegating physician shall not delegate the prescription of a drug or device individually, in combination, or in succession for a woman known to be pregnant with the intention of causing either a miscarriage or fetal death.

R 338.120 Training standards for identifying victims of human trafficking; requirements. Rule 20. (1) Under section 16148 of the code, MCL 333.16148, a licensed physician or an individual seeking licensure applicant or who is licensed shall complete training in identifying victims of human trafficking that satisfies the following standards:

(a) Training content must cover all of the following:

(i) Understanding the types and venues of human trafficking in the United States.

(ii) Identifying victims of human trafficking in health care settings.

(iii) Identifying the warning signs of human trafficking in health care settings for adults and minors.

(iv) Using resources for reporting the suspected victims of human trafficking.

(b) Acceptable providers or methods of training include any of the following:

(i) Training offered by a nationally recognized or state recognized health-related organization.

(ii) Training offered by, or in conjunction with, a state or federal agency.

(iii) Training obtained in an educational program that has been approved by the board for initial licensure, or by a college or university.

(iv) Reading an article related to the identification of victims of human trafficking that satisfies the requirements of subdivision (a) of this subrule and is published in a peer review journal, health care journal, or professional or scientific journal.

(c) Acceptable modalities of training include any of the following:

(i) Teleconference or webinar.

(ii) Online presentation.

(iii) Live presentation.

(iv) Printed or electronic media.

(2) The department may select and audit a sample of individuals and request documentation of proof of completion of training. If audited by the department, an individual shall provide an acceptable proof of completion of training, including either of the following:

(a) Proof of completion certificate issued by the training provider that includes the date, provider name, name of training, and individual's name.

(b) A self-certification statement by an individual. The certification statement must include the individual's name and either of the following:

(i) For training completed under subrule (1)(b)(i) to (iii) of this rule, the date, training provider name, and name of training.

(ii) For training completed under subrule (1)(b)(iv) of this rule, the title of article, author, publication name of peer review journal, health care journal, or professional or scientific journal, and date, volume, and issue of publication, as applicable.

(3) Under section 16148 of the code, MCL 333.16148, the requirements specified in subrule (1) of this rule apply for license renewals beginning with the 2017 renewal cycle and for initial licensure beginning December 20, 2021.

## PART 2. LICENSES

R 338.121 Accreditation standards for approval of osteopathic medical schools, postgraduate training programs, and institutions; adoption by reference.

Rule 21. (1) The board approves and adopts by reference the standards for accrediting osteopathic medical schools developed and adopted by the American Osteopathic Association Commission on Osteopathic College Accreditation, 142 E. Ontario St., Chicago, Illinois 60611-2864, as set forth in the publication entitled "Accreditation of Colleges of Osteopathic Medicine: COM Accreditation Standards," and Procedures" effective August 29, 2016, July 1, 2019, which is are available at no cost on the association's website at: www.osteopathic.org. at <u>https://osteopathic.org</u> are approved and adopted by reference. The board considers any Any osteopathic school of medicine accredited by the Commission on Osteopathic College Accreditation is approved. by the board.

(2) The board approves and adopts by reference the standards of the American Osteopathic Association Council on Postdoctoral Training, 142 E. Ontario St., Chicago, Illinois 60611-2864, as set forth in the publication entitled "The Basic Documents for Postdoctoral Training," effective March 1, 2018, July 1, 2020, which is are available at no cost on the association's website at: www.osteopathie.org. at <u>https://osteopathic.org</u> are approved and adopted by reference. The board considers any Any osteopathic postgraduate training program accredited by the American Osteopathic Association Council on Postdoctoral Training is approved. by the board.

(3) The board approves and adopts by reference the standards of the American Osteopathic Association Council on Osteopathic Postdoctoral Training Institutions, 142 E. Ontario St., Chicago, Illinois 60611-2864, as set forth in the publication entitled "OPTI Accreditation Handbook," effective March 2014, which is are available at no cost on the association's website at: www.osteopathic.org. at <u>https://osteopathic.org</u> are approved and adopted by reference. The board considers any Any osteopathic institution accredited by the American Osteopathic Association Council on Osteopathic Postdoctoral Training Institutions as is approved. by the board.

(4) The board approves and adopts by reference the standards for the approval of a postgraduate training program developed and adopted by the Accreditation Council for Graduate Medical Education, 401 N. Michigan Avenue, Suite 2000, Chicago, Illinois 60611, set forth in the publication entitled "ACGME Common Program Requirements," effective July 1, 2016, 2021, and which are available at no cost on the council's website at: www.acgme.org. at <u>https://www.acgme.org</u> are approved and adopted by reference. The board considers any Any medical postgraduate training program accredited on or after July 1, 2015 by the Accreditation Council for Graduate Medical Education is approved. by the board.

(5) Copies of the standards and criteria adopted by reference in this rule are available for inspection and distribution at a cost of 10 cents per page from the Board of Osteopathic Medicine and Surgery, Bureau of Professional Licensing, Licensing and Regulatory Affairs, 611 W. Ottawa Street, P.O. Box 30670, Lansing, Michigan 48909.

R 338.123 Licensure by examination.

Rule 23. An applicant for a doctor of osteopathic medicine and surgery license licensure by examination, in addition to satisfying shall satisfy the requirements of the code, code and the administrative rules promulgated under the code, as well as shall satisfy all of the following requirements:

(a) Submit Provide the required fee and a completed application on a form provided by the department.

(b) Possess a degree from a school of osteopathic medicine that satisfies the standards set forth in R 338.121(1).

(c) Have passed Passed all parts levels of the Comprehensive Osteopathic Medical Licensing Examination (COMLEX) of the United States (COMLEX-USA) adopted under R 338.129- and satisfy all the requirements under that rule.

(d) Have completed Completed a minimum of 1 year of postgraduate clinical training in a program that satisfies either of the following requirements:

(i) A postgraduate training program that satisfies the requirements of R 338.121(2) at a training institution that satisfies the requirements of R 338.121(3).

(ii) A postgraduate training program approved by the board in under R 338.121(4).

(e) Submit Provide a certificate of completion of the postgraduate training required under subdivision (d) of this rule to the department no more than 15 days before the scheduled date of completion.

R 338.125 Licensure by endorsement.

Rule 25. (1) An applicant for an a doctor of osteopathic medicine and surgery license by endorsement shall submit the required fee and a completed application on a form provided by the department. satisfy the requirements of the code and the administrative rules promulgated under the code, as well as all the following requirements:

(a) Provide the required fee and a completed application on a form provided by the department.

(b) Holds a current and full doctor of osteopathic medicine and surgery license in another state or in a province of Canada.

(c) If the applicant is licensed as a doctor of osteopathic medicine and surgery in a province in Canada, the applicant completed the educational requirements in Canada or in the United States for licensure as a doctor of osteopathic medicine and surgery in Canada or in the United States.

(d) Received passing scores on either of the following examinations for a doctor of osteopathic medicine and surgery license in another state or in a province of Canada to obtain licensure as a doctor of osteopathic medicine and surgery in another state or in a province of Canada:

(i) All levels of the COMLEX-USA adopted under R 338.129 and satisfy all the requirements under that rule.

(ii) Both Part I and Part II of the Medical Council of Canada Qualifying Examination (MCCQE).

(e) Completed a minimum of 1 year of postgraduate clinical training in a program that satisfies either of the following requirements:

(i) A postgraduate training program that satisfies the requirements of R 338.121(2) at a training institution that satisfies the requirements of R 338.121(3).

(ii) A postgraduate training program approved under R 338.121(4).

(2) An applicant shall satisfy 1 of the following requirements: An applicant who provides proof of holding a current and full license in good standing as a doctor of osteopathic medicine and surgery in another state or in a province of Canada for at least the last 5 years prior to the date of filing the application for a doctor of osteopathic medicine and surgery license by endorsement is presumed to satisfy the requirements of subrule (1)(b), (c), (d), and (e) of this rule.

(a) Has first been licensed in good standing in another state and actively engaged in the practice of osteopathic medicine and surgery for at least 5 years before the date of filing the application.

(b) Has first been licensed in good standing in another state and actively engaged in the practice of osteopathic medicine and surgery less than 5 years before the date of filing the application and satisfies both of the following requirements:

(i) Passed all parts of the Comprehensive Osteopathic Medical Licensing Examination (COMLEX) adopted under R 338.129.

(ii) Completed a minimum of 1 year of postgraduate clinical training in a program that satisfies either of the following requirements:

(A) A postgraduate training program that satisfies the requirements of R 338.121(2) at a training institution that satisfies the requirements of R 338.121(3).

(B) A postgraduate training program approved by the board in R 338.121(4).

(3) An applicant's license must be verified by the licensing agency of any state of the United States in which the applicant holds a current license or has ever held a license as an osteopathic physician. Verification includes, but is not limited to, showing proof that the applicant's license is in good standing and, if applicable, any disciplinary action taken or pending against the applicant. An applicant who is or has been licensed, registered, or certified in a health profession or specialty by any other state, the United States military, the federal government, or another country shall disclose that fact on the application form. The applicant shall satisfy the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application. If licensure is granted and it is determined that sanctions have been imposed, the disciplinary subcommittee may impose appropriate sanctions under section 16174(5) of the code, MCL 333.16174.

R 338.127 Educational limited license.

Rule 27. (1) An individual not eligible for a Michigan doctor of osteopathic medicine and surgery license shall obtain an educational limited license before engaging in postgraduate training.

(2) An applicant for an educational limited license, in addition to satisfying license shall satisfy the requirements of the code, and the administrative rules promulgated under the code, as well as shall satisfy all of the following requirements:

(a) Submit Provide the required fee and a completed application on a form provided by the department.

(b) Have documentation provided directly to the department from an osteopathic medical school that satisfies the requirements of R 338.121(1) verifying that the applicant has graduated or is expected to graduate within 3 months of the date of the application.

(c) Have documentation provided directly to the department verifying that the applicant has been accepted into a postgraduate training program that satisfies the requirements of R 338.121(2) or (4).

(3) Under section 17512(2) of the code, MCL 333.17512(2), an educational limited license may be renewed not more than 5 years.

R 338.129 Examination; adoption; passing scores; limitation on attempts; time limitations.

Rule 29. (1) The board adopts the Comprehensive Osteopathic Medical Licensing Examination (COMLEX) COMLEX-USA, developed and administered by the National Board of Osteopathic Medical Examiners (NBOME). (NBOME), is approved and adopted, which consists of the following levels:

#### (a) COMLEX-USA Level 1.

(b) COMLEX-USA Level 2-Cognitive Evaluation (Level 2-CE).

(c) COMLEX-USA Level 2-Performance Evaluation (Level 2-PE) or a temporary eligibility pathway approved by the NBOME.

## (d) COMLEX-USA Level 3.

(2) The passing score for each <del>part</del> level of the <del>COMLEX</del> COMLEX-USA accepted for licensure is the passing score established by the NBOME.

(3) An applicant cannot make more than 6 4 attempts to pass any <del>part</del> level of the <del>COMLEX.</del> COMLEX-USA.

(4) An applicant shall successfully pass all parts levels of the COMLEX COMLEX-USA within 7 years from the date that he or she the applicant first passed any part level of the COMLEX. COMLEX-USA. An applicant may request consideration of a variance of the 7-year requirement by providing, at a minimum, proof of both of the following requirements to the board:

(a) That the applicant has already passed all <del>parts</del> levels of the <del>COMLEX,</del> **COMLEX-USA**, but that the time taken to pass all <del>parts</del> levels is more than 7 years.

(b) That the applicant has completed **1** either of the following activities:

(i) Graduation from an accredited graduate degree program in addition to osteopathic medical school.

(ii) Completion of a residency or fellowship program with demonstrated consistent participation in the program.

#### R 338.133 Relicensure.

Rule 33. (1) An applicant whose Michigan doctor of osteopathic medicine and surgery license has lapsed for less than 3 years preceding the date of application for relicensure may be relicensed under section 16201(3) of the code, MCL 333.16201, if the applicant satisfies the requirements of the code and the administrative rules promulgated under the code, as well as all of the following requirements:

(a) Submits Provides the required fee and a completed application on a form provided by the department.

(b) Submits Provides proof to the department of completing not less than 150 hours of continuing education that satisfies the requirements of R 338.141 during the 3 years immediately preceding the date of the application for relicensure.

(c) Establishes that he or she is of good moral character as defined under 1974 PA 381, MCL 338.41 to 338.47.

(d) An applicant who holds or has ever held a license to practice osteopathic medicine and surgery shall establish all <del>of</del> the following requirements:

(i) Disciplinary proceedings are not pending against the applicant.

(ii) If sanctions have been imposed against the applicant, the sanctions are not in force at the time of application.

(iii) A previously held license was not surrendered or allowed to lapse to avoid discipline.

(2) An applicant whose Michigan doctor of osteopathic medicine and surgery license has been lapsed for 3 years but less than 5 years may be relicensed under section 16201(4) of the code, MCL 333.16201, if the applicant submits provides fingerprints as set forth in section 16174(3) of the code, MCL 333.16174(3), and satisfies the requirements of subrule (1) of this rule and 1 of the following requirements:

(a) Presents proof to the department that he or she the applicant is actively currently licensed and is in good standing as an a doctor of osteopathic physician medicine and surgery in another state. state or in a province of Canada.

(b) Completes 1 of the following during the 3 years immediately preceding the date of the application for relicensure:

(i) Takes and passes the Comprehensive Osteopathic Medical Variable-Purpose Examination (COMVEX) offered by the NBOME. The passing score is the passing score established by the NBOME.

(ii) Successfully completes a postgraduate training program that satisfies the requirements of R 338.121(2) or (4).

(iii) Successfully completes a physician re-entry program accredited by the Coalition for Physician Enhancement (CPE).

(iv) Successfully completes a physician re-entry program affiliated with an osteopathic medical school that satisfies the requirements of R 338.121(1).

(3) An applicant whose Michigan doctor of osteopathic medicine and surgery license has been lapsed for 5 years or more may be relicensed under section 16201(4) of the code, MCL 333.16201, if the applicant submits provides fingerprints as set forth in section 16174(3) of the code, MCL 333.16174, and satisfies the requirements of subrule (1) of this rule and 1 of the following requirements:

(a) Presents proof to the department that he or she the applicant is actively currently licensed and is in good standing as an a doctor of osteopathic physician medicine and surgery in another state. state or in a province of Canada.

(b) Completes both of the following during the 3 years immediately preceding the date of the application for relicensure:

(i) Takes and passes the COMVEX offered by the NBOME. The passing score is the passing score established by the NBOME.

(ii) Successfully completes 1 of the following training options:

(A) A postgraduate training program that satisfies the requirements of R 338.121(2) or (4).

(B) A physician re-entry program that is accredited by the CPE.

(C) A physician re-entry program affiliated with an osteopathic medical school that satisfies the requirements of R 338.121(1).

(4) If required to complete the requirements of subrules (2)(b) or (3)(b) of this rule, the applicant may obtain an educational limited license for the sole purpose of completing that training.

(5) An applicant with an educational limited license may be relicensed under section 16201(3) or (4) of the code, MCL 333.16201, if he or she the applicant complies with satisfies subrule (1) of this rule and R 338.127.

(6) An applicant must have his or her license verified by the licensing agency of any state of the United States in which the applicant holds or has ever held a license to practice osteopathic medicine. Verification must include information that the license is in good standing and, if applicable, the record of any disciplinary action taken or pending against the applicant. An applicant who is or has been licensed, registered, or certified in a health profession or specialty by any other state, the United States military, the federal government, or another country shall disclose that fact on the application form. The applicant shall satisfy the requirements of section 16174(2) of the code, MCL 333.16174, which includes verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application. If licensure is granted and it is determined that sanctions have been imposed, the disciplinary subcommittee may impose appropriate sanctions under section 16174(5) of the code, MCL 333.16174.

### PART 3. CONTINUING EDUCATION

### R 338.141 License renewals.

Rule 41. (1) This part applies to an application for renewal of an osteopathic medicine and surgery license under section 17533 of the code, MCL 333.17533, and an osteopathic medicine and surgery special volunteer license under section 16184 of the code, MCL 333.16184. An applicant for renewal shall satisfy the requirements of the code and the administrative rules promulgated under the code.

(2) An applicant for license renewal who has been licensed in the 3-year period immediately preceding the application for renewal shall accumulate a minimum of 150 hours of continuing education in activities approved by the board under R 338.143 during the 3 years immediately preceding the application for renewal.

(3) Submission of an application for renewal constitutes the applicant's certification of compliance with the requirements of this rule. The licensee shall retain keep documentation of satisfying the requirements of this rule for 4 years from the date of applying for license renewal. Failure to satisfy this rule is a violation of section 16221(h) of the code, MCL 333.16221.

(4) The department may select and audit a sample of licensees who have renewed their license and request proof of compliance with subrule (2) of this rule. If audited, a licensee must submit provide documentation as specified in R 338.143.

R 338.143 Acceptable continuing education; requirements; limitations.

Rule 43. (1) The 150 hours of continuing education required under R 338.141 must satisfy the following requirements, as applicable:

(a) Credit for a continuing education program or activity that is identical or substantially identical equivalent to a program or activity for which the licensee has already earned credit during the renewal period cannot be granted.

(b) A minimum of 1 hour of continuing education must be earned in the area of medical ethics.

(c) For license renewals filed December 20, 2017, or later, a minimum of 3 hours of continuing education must be earned in the area of pain and symptom management under section 17533(2) of the code, MCL 333.17533. At least 1 of the 3 hours must include controlled substances prescribing. Continuing education hours in pain and symptom management may include, but are not limited to, any of the following areas:

(i) Public health burden of pain.

(ii) Ethics and health policy related to pain.

(iii) Michigan pain and controlled substance laws.

(iv) Pain definitions.

(v) Basic sciences related to pain including pharmacology.

(vi) Clinical sciences related to pain.

(vii) Specific pain conditions.

(viii) Clinical physician communication related to pain.

(ix) Management of pain, including evaluation and treatment and nonpharmacological and pharmacological management.

(x) Ensuring quality pain care and controlled substances prescribing.

(xi) Michigan programs and resources relevant to pain.

(d) A minimum of 60 continuing education credits must be obtained through category 1 programs listed in subrule (2) of this rule.

(2) The board considers any of the following activities as acceptable category 1 continuing education:

	Activity and Proof of Completion	Number of continuing education hours granted/permitted for the activity
(a)	Attendance at or participating in a continuing education program or activity related to the practice of osteopathic medicine, which includes, but is not limited to, live, in-person programs; and journal articles with a self-study component, interactive or monitored teleconference; audio conference, web-based programs; or online programs approved or offered by any of the following organizations: - American Osteopathic Association. - Michigan Osteopathic Association. If audited, a licensee shall submit <b>provide</b> a copy of a letter or certificate of completion showing the licensee's name, number of credits earned, sponsor name or the name of the organization that approved the program or activity for continuing	The number of continuing education hours for a specific program or activity is the number of hours assigned by the sponsoring organization for the specific program or activity. A minimum of 40 hours of continuing education must be earned in this activity. A maximum of 150 hours of continuing education may be earned for this activity in each renewal period.

	education credit, and the date or dates	
	on which the program or activity was	
	completed.	
(b)	Attendance at or participating in a continuing education program or activity related to the practice of osteopathic medicine which includes, but is not limited to, live, in-person programs; and journal articles with a self-study component, interactive or monitored teleconference; audio conference; web-based programs; or online programs approved or offered by any of the following organizations:	The number of continuing education hours for a specific program or activity is the number of hours assigned by the sponsoring organization for the specific program or activity. A maximum of 110 hours of continuing education may be earned for this activity in a renewal period.
	<ul> <li>American Medical Association.</li> <li>Accreditation Council for Continuing Medical Education.</li> <li>Michigan State Medical Society.</li> <li>If audited, the licensee shall submit provide a copy of a letter or certificate of completion showing the licensee's name, number of credits earned, sponsor name or the name of the organization that approved the program or activity for continuing education credit, and the date or dates on which the program or activity was completed.</li> </ul>	
(c)	Taking and passing a specialty board certification or recertification examination for a specialty board recognized by the American Osteopathic Association, the American Board of Medical Specialties, or the American Board of Physician Specialties.	A specialty board certification or recertification examination successfully passed during the renewal period is granted 50 hours of continuing education credit. A maximum of 50 hours of continuing education credit may be earned for this activity in each renewal period.
(d)	If audited, the licensee shall provide proof from the specialty board of the successful passing of the examination. Successfully completing an activity	One hour of continuing education is
(4)	that is required for maintenance of a specialty certification for a specialty board recognized by the American	granted for every 60 minutes spent on the activity. A maximum of 30

	Osteopathic Association, the American Board of Medical Specialties, or the American Board of Physician Specialties that does not satisfy the requirements of subdivision (a) or (c) of this subrule. If audited, the licensee shall provide proof from the specialty board that the activity was required for maintenance of certification, that the activity was	hours may be earned for this activity in each renewal period.
	successfully completed, and the date of completion.	
(e)	Serving as a teacher, lecturer, preceptor, or moderator-participant in a medical education or training program that satisfies the standards adopted by the board in R 338.121. If audited, the licensee shall submit <b>provide</b> a letter from the program director verifying the licensee's role, length of lecture or lectures, and the date on which the lecture or lectures	Two hours of continuing education are granted for each scheduled lecture or clinical consultation. Additional credit for preparation of the lecture cannot be granted. A maximum of 90 hours of continuing education may be earned for this activity in each renewal period.
(f)	<ul> <li>were held.</li> <li>Conducting a formal inspection of an osteopathic medical education or training program that satisfies the standards adopted by the board in R 338.121 or conducting clinical examinations of osteopathic specialty boards recognized by the American Osteopathic Association.</li> <li>If audited, the licensee shall submit provide documentation from the accrediting organization verifying the licensee's role and participation in the inspection.</li> </ul>	Five hours of continuing education are granted per an inspection. A maximum of 90 hours of continuing education may be earned in this activity in each renewal period.
(g)	<ul> <li>Participating in any of the following committees:</li> <li>A peer review committee dealing with quality patient care as it relates to the practice of osteopathic medicine and surgery.</li> </ul>	Fifteen hours per each committee per year are granted. A maximum of 90 hours of continuing education credit shall may be earned for this activity in each renewal period.

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	<ul> <li>A committee dealing with utilization review as it relates to the practice of osteopathic medicine.</li> <li>A health care organization committee with patient care issues related to the practice of osteopathic medicine.</li> <li>A national or state committee, board, council, or association related to the practice of osteopathic medicine.</li> <li>A committee, board, council, or association is considered acceptable by the board if it enhances the participant's knowledge and understanding of the practice of osteopathic medicine. If audited, the licensee shall submit provide a letter</li> </ul>	
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	from an organization official verifying the licensee's participation in at least	
	50% of the regularly scheduled	
	meetings.	
(h)	Providing individual supervision for a disciplinary limited osteopathic physician. doctor of osteopathic medicine and surgery. If audited, the licensee shall submit provide an affidavit from the disciplinary limited osteopathic physician doctor of osteopathic medicine and surgery who received the supervision. The affidavit shall	One hour of continuing education is granted for each 60 minutes spent consulting or reviewing the disciplined licensee's work. A maximum of 50 hours of continuing education may be earned for this activity per renewal period.
	attest to the licensee's role as supervisor and the number of hours spent providing supervision to the disciplinary limited osteopathic physician. doctor of osteopathic medicine and surgery.	
(i)	Participating in a postgraduate training	Fifty continuing education credits
	program that satisfies the requirements of R 338.121(2) or (4). To receive credit the licensee must be enrolled in the program a minimum of 5 months per year.	per year are granted. A maximum of 150 credits per renewal period may be earned for this activity in each renewal period.
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	<b>TC 1</b> <sup>1</sup> <b>4</b> - <b>1</b> <sup>1</sup> <b>4</b> - <b>1</b> <sup>1</sup> <b>5</b> - <b>5</b> - <b>5</b> - <b>5</b> - <b>1</b> - <b>111</b>	
	If audited, the licensee shall submit	
	provide a letter from the program	
	director verifying the dates that the	
	licensee was enrolled in the program.	
(j)	Publication of a scientific article	Ten hours of continuing education
	relating to the practice of osteopathic	are granted for serving as the
	medicine in a peer-reviewed journal or	primary author. Five hours of
	periodical.	continuing education are granted for
		serving as a secondary author.
	If audited, the licensee shall submit	Under subrule (1)(a) of this rule,
	provide a copy of the publication that	credit for an article is granted only
	identifies the licensee as the author or	once per renewal period. A
	a publication acceptance letter and	maximum of 90 hours of continuing
	documentation	education may be earned for this
		activity in a renewal period.
(k)	Initial publication of a chapter or a	Ten hours of continuing education
	portion of a chapter related to the	are granted for serving as the
	practice of osteopathic medicine in	primary author. Five hours of
	either of the following textbooks:	continuing education are granted for
	ether of the following textoooks.	serving as a secondary author. A
	- A professional health care textbook.	maximum of 90 hours may be earned
	- A peer-reviewed text book.	for this activity in each renewal
	textbook.	period. Under subrule (1)(a) of this
	ICALDOOK.	rule, credit for publication is granted
	If audited, the licensee shall <del>submit</del>	once per renewal period.
		once per renewar period.
	<b>provide</b> a copy of the publication that identifies the licensee as the author or	
(1)	a publication acceptance letter.	
(1)	Until December 20, 2019, attendance	The number of continuing education
	at or participation in a continuing	hours for a specific program or
	education activity that had been	activity is the number of hours
	approved by the board before the	previously approved by the board. A
	effective date of this rule but does not	maximum of 90 hours of continuing
	satisfy the requirements of subdivision	education may be earned for this
	(a) or (b) of this subrule.	activity.
	If audited, the licensee shall submit a	
	copy of the letter or certificate of	
	completion showing the licensee's	
	name, number of continuing education	
	hours earned, sponsor name, and the	
	date on which the program was held	
	or the activity completed.	

(3) The board considers any of the following activities as acceptable category 2 continuing education:

	Activity and Proof of Completion	Number of continuing education hours
		granted/permitted for the activity
<del>(a)</del>	Independently reading a peer-reviewed	Three hours of continuing education
(4)	journal that does not satisfy the	are granted for each journal article
	requirement of subrule (2)(a) of this	read. A maximum of 90 hours of
	1	continuing education credit may be
	rule. The reading must have been	6
	completed before the effective date of this rule.	earned for this activity in each renewal
	this rule.	period. Under subrule (1)(a) of this
		rule, credit for the same article
	If audited, the licensee shall submit a	appearing in different journals is
	signed document, listing the journals	granted once per renewal period.
	read, including title, publisher, volume	
	number, article read, and the authors.	
<del>(b)</del>	Initial presentation of a scientific	Ten hours of continuing education are
<b>(a)</b>	exhibit, poster, or paper to a	granted for each presentation. No
	professional osteopathic medicine	additional credit is granted for
	organization.	preparation of the presentation. A
		maximum of 90 hours may be earned
	If audited, the licensee shall submit	in this activity in each renewal period.
	<b>provide</b> a copy of the document	Under subrule (1)(a) of this rule, credit
	presented with proof of the presentation	for a presentation is granted once per
	or a letter from the program sponsor	renewal period.
	verifying the date of presentation.	
<del>(c)</del>	Completing a multimedia self-	The number of continuing education
	assessment that does not satisfy the	hours is the number of hours approved
	requirements of subrule (2)(a) of this	by the self-assessment sponsor. A
	rule before December 20, 2016. The	maximum of 90 hours of continuing
	self-assessment must improve the	education may be earned for this
	licensee's knowledge and	activity.
	understanding of the practice of	
	osteopathic medicine.	
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	If audited, the licensee shall submit a	
	certificate of self-assessment provided	
	by the program sponsor.	
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