LARA
LICENSING AND REGULATORY AFFAIRS

BUREAU OF PROFESSIONAL LICENSING

MICHIGAN PODIATRIC MEDICINE AND SURGERY LICENSING GUIDE

OVERVIEW:

The podiatric medicine and surgery license allows a licensee to engage in the unrestricted practice of podiatric medicine and surgery.

NOTE: The content contained below is a general overview of licensing requirements. Links to access the Occupational Code and Administrative Rules for this profession can be found at the end of this guide.

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LICENSURE REQUIREMENTS CHECKLIST

APPLICATION AND FEES

- ☐ Online Application for a Podiatric Medicine and Surgery License - Complete all fields, answer all questions, and upload any supporting documentation.
- ☐ Online Application for Controlled Substance License (Optional)
- ☐ Online applications can be completed by visiting www.michigan.gov/miplus

- ☐ Application Fee + 3 year license fee: (Must be paid by Visa, Mastercard, American Express, or Discover credit or debit card)
  - ➢ Podiatric Medicine by Exam and Endorsement $341.90
  - ➢ Controlled Substance $259.10

THE FOLLOWING REQUIREMENTS APPLY TO ALL APPLICANTS

- ☐ If you will be prescribing, dispensing, manufacturing, or distributing controlled substances, you must apply for both a podiatric medicine and surgery license and controlled substance license. You may apply for a controlled substance license by completing the controlled substance license fields in the application. If you do not apply for a controlled substance license on your podiatric medicine and surgery application, you must wait for the podiatric medicine and surgery license to be issued before you may apply for a controlled substance license.

- ☐ Opioids and Controlled Substances Awareness Training - An individual seeking a controlled substance license or who is licensed to prescribe or dispense controlled substances must have completed training in opioids and controlled substances awareness that meets the standards established in the Board of Pharmacy Controlled Substances Administrative Rules, R 338.3135 prior to being issued a license.

- ☐ Criminal Background Check – Once the online application is completed and submitted you will be emailed an Application Confirmation letter containing instructions to complete the Criminal Background Check (except those applicants seeking relicensure, for a license that expired within the last three years).

- ☐ Good Moral Character Questions – Documentation and explanation will be required if you answer “yes” to either question to show at the current time you have the ability to, and are likely to, serve the public in a fair, honest and open manner, that you are rehabilitated, or that the substance of the former offense is not reasonably related to the occupation or profession for which you are seeking a license.

- ☐ Human Trafficking Training – Completion of a training to identify victims of human trafficking is required for an individual seeking licensure or registration that meets the standards of Administrative Rule 338.8102.

- ☐ Implicit Bias Training– Completion of 2 hours of implicit bias training within the 5 years immediately preceding issuance of the license or registration is required.

- ☐ Social Security Number (SSN) – An individual applying for licensure is required to provide his or her social security number at the time of application. If exempt under law from obtaining an SSN or you do not have an SSN, the SSN affidavit form will be required to be uploaded at the time the application is submitted.

- ☐ Verification of Licensure – Verification of licensure must be submitted directly to our office by the licensing agency of any state of the United States or country in which you hold or ever held a license. The verification must show that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application. Verification can be emailed to bpldata@michigan.gov or mailed to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

- ☐ Professional Education – Name of school attended, and name of educational program completed.

- ☐ Hospital Affiliations – Name of each hospital where you are employed or under contract along with the name of each hospital in which you are allowed to practice.

- English Language Proficiency – An individual applying for licensure must demonstrate a working knowledge of the English language. This can be established if either the applicant's required health professional educational program was taught in English, a transcript establishes the applicant earned not less than 60 college level credits from an English-speaking graduate or undergraduate school, the applicant's credentials and English proficiency have been evaluated and determined to be equivalent to the credentials required In this state by a board-approved credentialing agency or that the applicant obtained a passing score on an approved English proficiency exam as established by the department under R 338.7002b(2) of the Public Health Code – General Rules.

ADDITIONAL REQUIREMENTS FOR LICENSURE BY EXAMINATION (These are in addition to the requirements stated above that apply to ALL applicants)

- Official transcripts confirming completion of a program of study offered by a Board approved school of podiatric medicine submitted directly to this office. Transcripts can be emailed to bpldata@michigan.gov or mailed to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

- APMLE Scores (Passing Scores on Part I, Part II, written portion only and Part III) - Contact the Federation of Podiatric Medical Boards (FPMB) at (202) 810-3762 or visit their website at www.fpmb.org to request to have your exam scores sent directly to this office by email to bpldata@michigan.gov or by mail to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

- Certification of satisfactory completion of not less than 2 years of a Board approved postgraduate residency training submitted not more than 15 days before the end of the 2-year minimum completion date. Certification must be submitted directly to this office by the director of the training program by email to bpldata@michigan.gov or by mail to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

ADDITIONAL REQUIREMENTS FOR LICENSURE BY ENDORSEMENT FOR THOSE LICENSED IN ANOTHER STATE FOR A MINIMUM OF 5 YEARS AT THE TIME OF APPLICATION (These are in addition to the requirements stated above that apply to All applicants)

- Must hold an active license in another state to engage in the practice of podiatric medicine for a minimum of 5 years before the date of application. Verification of Licensure – Verification of licensure must be submitted directly to our office by the licensing agency of any state of the United States or country in which you hold or ever held a license. The verification must show that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application. Verification can be emailed to bpldata@michigan.gov or mailed to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

ADDITIONAL REQUIREMENTS FOR LICENSURE BY ENDORSEMENT FOR THOSE LICENSED IN ANOTHER STATE FOR LESS THAN 5 YEARS AT THE TIME OF APPLICATION (These are in addition to the requirements stated above that apply to All applicants)

- Official transcripts confirming graduation from a Board approved school of podiatric medicine submitted directly to this office. Transcripts can be emailed to bpldata@michigan.gov or mailed to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

- Certification of satisfactory completion of not less than 2 years of a Board approved postgraduate residency training submitted not more than 15 days before the scheduled completion of the training. Certification must be submitted directly to this office by the director of the training program by email to bpldata@michigan.gov or by mail to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

- APMLE Scores (Passing Scores on Part I, Part II, written portion only and Part III) - Contact the Federation of Podiatric Medical Boards (FPMB) at (202) 810-3762 or visit their website at www.fpmb.org to request to have your exam scores sent directly to this office by email to bpldata@michigan.gov or by mail to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

ADDITIONAL REQUIREMENTS FOR LICENSURE BY ENDORSEMENT FOR THOSE LICENSED IN A PROVINCE OF CANADA FOR A MINIMUM OF 10 YEARS AT THE TIME OF APPLICATION

- Must hold an active license in good standing in a province of Canda to engage in the practice of podiatric medicine for a minimum of 10 years before the date of application.

- Verification of Licensure – Verification of licensure must be submitted directly to our office by the licensing agency in which you hold or ever held a license. The verification must show that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application. Verification can be emailed to bpldata@michigan.gov or mailed to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

ADDITIONAL REQUIREMENTS FOR LICENSURE BY ENDORSEMENT FOR THOSE LICENSED IN A PROVINCE OF CANADA FOR LESS THAN 10 YEARS AT THE TIME OF APPLICATION

- Verification of the completion of the educational requirements for a podiatrist license in Canada or in the United States to obtain licensure as a podiatrist in Canada or in the United States. Verification can be emailed to bpldata@michigan.gov or mailed to the Bureau of Professional Licensing at PO Box 30670, Lansing, MI 48909.

- Verification of Licensure – Verification of licensure must be submitted directly to our office by the licensing agency in which you hold or ever held a license. The verification must show that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application. Verification can be emailed to bpldata@michigan.gov or mailed to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

- Certification of satisfactory completion of not less than 2 years of a Board approved postgraduate residency training submitted not more than 15 days before the end of the 2-year minimum completion date. Certification must be submitted directly to this office by the director of the training program by email to bpldata@michigan.gov or by mail to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

- APMLE Scores (Passing Scores on Part I, Part II, written portion only and Part III) - Contact the Federation of Podiatric Medical Boards (FPMB) at (202) 810-3762 or visit their website at www.fpmb.org to request to have your exam scores sent directly to this office by email to bpldata@michigan.gov or by mail to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

ADDITIONAL REQUIREMENTS FOR FOREIGN EDUCATED OR TRAINED APPLICANTS WHO RECEIVED EDUCATION OR TRAINING OUTSIDE THE UNITED STATES
(These are in addition to the requirements stated above that apply to All applicants)

- ☐ Those trained in foreign countries are required to meet the requirements for licensure listed above.

ADDITIONAL REQUIREMENTS FOR THOSE APPLYING FOR RELICENSURE
(These are in addition to the requirements stated above that apply to All applicants)

- ☐ Online application can be completed by visiting www.michigan.gov/miplus and selecting MiPLUS Login. Once logged in, click on the **"Licenses"** tab, select "**Modification**" next to your license number and this will start the relicensure process.

- ☐ Podiatry Relicensure Application and Fee: $361.90 (Must be paid by Visa, Mastercard, American Express or Discover credit or debit card)
  Controlled Substance: $259.10

- ☐ Complete 150 hours of continuing education pursuant to R 338.8153 including not less than 3 hours in pain and symptom management. Not less than 2 of the 3 hours must include controlled substances management and at least 1 hour in medical ethics. The applicant must submit proof of having completed the required continuing education within the 3-year period immediately preceding the date of the application for relicensure.

Applicants for relicensure whose license has lapsed for MORE than 3 years preceding the date of application for relicensure and are NOT currently licensed in another state or Canada, must have completed the following requirements in addition to the above requirements listed for all relicensure applicants:

- ☐ Examination – Achieve a passing score on part III of the APMLE sponsored by the NBPME or its successor within 3 years of the application for relicensure. Contact the Federation of Podiatric Medical Boards (FPMB) at (202) 810-3762 or visit their website at www.fpmb.org to request to have your exam scores sent directly to this office by email to bpldata@michigan.gov or by mail to the Bureau of Professional Licensing, PO Box 30670, Lansing, MI 48909.

RENEWAL REQUIREMENTS CHECKLIST

- ☐ Online Application for Podiatric Medicine and Surgery License Renewal and Controlled Substance License Renewal – Must be completed by visiting **www.michigan.gov/miplus** no sooner than 90 days prior to the expiration date of current license.

- ☐ Podiatric Medicine and Surgery License Renewal Fee: $314.40 (Must be paid by Visa, Mastercard, American Express or Discover credit or debit card)

- ☐ Controlled Substance Renewal Application Fee: $248.10 (if applicable)

- Renewal Cycle: 3 years
- Good Moral Character Questions – Documentation and explanation will be required if you answer "yes" to either question to show at the current time you have the ability to, and are likely to, serve the public in a fair, honest and open manner, that you are rehabilitated, or that the substance of the former offense is not reasonably related to the occupation or profession for which you are seeking license renewal.

- Disciplinary Question - Documentation will be required if you answer "yes" to having sanctions imposed against you by a similar licensure, registration, certification, or disciplinary board of another state or country you have not previously reported to the department.

- Human Trafficking Training – Licensees seeking renewal must certify on their renewal application that prior to renewing their license they have completed a one-time training in identifying victims of human trafficking that meets the standards in Administrative Rule 338.8102.

- Implicit Bias Training – Licensees and registrants are required to complete 1 hour of implicit bias training for each year of their license or registration cycle. Please note, this is not a one-time training and must be completed for each renewal cycle prior to the renewal being completed

- Opioids and Controlled Substances Awareness Training – All controlled substance licensees or individuals who are licensed to prescribe or dispense controlled substances must certify on their renewal application prior to renewing their license that they have completed training in opioids and controlled substance awareness that meets the standards established in Administrative Rule 338.3135.

- Hospital Affiliations – Name of each hospital where you are employed or under contract along with the name of each hospital in which you are allowed to practice.

- Accept Renewal Attestation – By accepting the renewal attestation you as the licensee are certifying that you have met the continuing education requirements during the renewal period and all information provided on your renewal application is true and correct:

  - If licensed during the full 3-year renewal cycle:
    - 150 hours of continuing podiatric medical education in activities approved by the board.
    - Not less than 3 continuing podiatric medical education hours in pain and symptom management. Not less than 2 of the 3 hours must include controlled substancesmanagement.
    - At least 1 continuing podiatric medical education hour in medical ethics.

HELPFUL RESOURCES AND FORMS

- By visiting www.michigan.gov/healthlicense and clicking on the podiatric medicine and surgery link you can access the following helpful resources and forms:

Resources:

- Public Health Code
- Administrative Rules for Podiatric Medicine and Surgery

Form:

- Certification of Completion of Postgraduate Training
- Track continuing education using CE broker – The Bureau of Professional Licensing (BPL) has partnered with CE Broker to help licensed professionals keep track of their continuing education (CE) credits. Additional information can be found on our website.

FREQUENTLY ASKED QUESTIONS

1. How long is the full Podiatry license type valid?

Podiatrist licenses are valid for 3 years.

2. How many continuing education hours are required?

Michigan podiatrists are required to earn 150 hours of continuing education within the 3-year period immediately preceding the application for renewal. At least 3 of these hours must be in pain and symptom management. Not less than 2 of the 3 hours of pain and symptom management must include controlled substances management. At least 1 hour in medical ethics is required.

3. Do I need to submit proof of my continuing education (CE)?

The Board does not maintain a record of CE earned. You are required to maintain your own records and keep documentation on hand for a minimum of 4 years from the date of applying for license renewal. You are not required to submit CE information when you renew your license. The Board conducts a random audit after each renewal period. At that time, a percentage of all licensees who renewed will be randomly selected and notified by mail that they must submit evidence of having earned the required CE. If you are selected for the audit, then you will be required to submit copies of the CE certificates you earned. **(Retain your originals)**.

4. Where can I find approved CE courses?

The Administrative Rules for Podiatric Medicine and Surgery located on the Bureau website at www.michigan.gov/bpl addresses acceptable continuing education, requirements, and limitations under R 338.8153. The Department does not approve CE courses. It is your responsibility to make sure the CE you complete meets the requirements outlined in the administrative rules.

5. How can I change my name or address?

Name and address changes must be completed through your MiPLUS account by submitting a modification. You are required to upload supporting documentation such as a driver's license, marriage certificate, divorce decree, or court order for all name changes.

If you hold a controlled substance (CS) license and need to update the address associated with the controlled substance license, this can be completed through your MiPLUS account by submitting a modification.

When updating your name and/or address in MiPLUS you can also request to have a license mailed to you with the updated information. There is a $10.00 fee per license to have it mailed. An email copy can be requested free of charge.

6. If I'm licensed in more than one state, Canada or another country, do you need verification from all locations in which I hold or have ever held a license in?

Yes, we need verification from any state of the United States, Canada or country in which you hold or have ever held a license (active or inactive). The verification must show that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.

7. If applying by endorsement, do the National exam scores need to come to your office directly from the examination agency?

Yes. You will need to contact the National Board of Podiatric Medicine Examiners (NBPME) and/or the Federation of Podiatric Medical Board (FPMB) to have your exam scores sent to the State of Michigan, Board of Podiatric Medicine and Surgery. Exam scores will be accepted directly from the examination agency by email or mail.