

March 9, 2021

Department of Licensing and Regulatory Affairs
Bureau of Professional Licensing
Boards and Committees Section
Public Health Code - General Rules
2020-109 LR

Attention: Policy Analyst
P.O. Box 30670
Lansing, MI 48909
BPL-BoardSupport@michigan.gov

Dear Policy Analyst:

On behalf of the Michigan Health & Hospital Association (MHA), we respectfully submit the following comments of support with a few recommended changes on the proposed Public Health Code - General Rules.

Please consider using the term “unconscious bias” overall in the rules. “Implicit bias” implies a provider knowingly is involved in their bias while the term “unconscious bias” reflects the true meaning of what these rules are hoping to accomplish, helping those who are not aware of existing attitudes or stereotypes that affect their perception, action or decision making.

To provide clarity in the rule set, the word “provider” should be reserved for the health care community. The rule currently uses the term provider for both trainers and those professionals who are licensed in Article 15, which creates confusion. For example, the rules discuss “providers” related to who can give instruction for implicit bias training, and those who are receiving the education on implicit bias, i.e., health care providers. “Training provider” should be updated to “instructor” or an equivalent term in 338.7004, Rule 4 (3)(c) and (4)(a).

Regarding individuals allowed to offer training, the MHA requests 338.7004, Rule 4 (3)(c)(iv) be updated to “Training offered by an accredited college or university or *created by tenured faculty and used in academic courses at accredited universities.*” The draft rules as written have a narrow description which creates the potential of missing applicable trainings. The update will allow for qualified academics in non-traditional institutions to provide research-based training that addresses this need. In addition, the MHA recommends an additional section: “(v) Training offered by a nationally recognized diversity, equity and inclusion firm.” This would allow companies who specialize in this field, such as Cook Ross, to be used.

To clarify that non-live modalities of trainings are acceptable, amend 338.7004, Rule 4 (3)(d)(i) to add the word “may” and update the section to: “A teleconference or webinar that *may* permit live synchronous interaction.” This update will ensure flexibility is maintained for both larger and

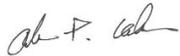
Brian Peters, Chief Executive Officer

smaller health care institutions and their providers. The nature of the health care system is 24/7 and providers will need the flexibility to complete this training at atypical hours.

Lastly, related to documentation retention, the MHA recommends reducing the number of years from six to four to match the other requirements related to continuing education credits for health care professions. Another option is to link required training and continuing education credits completion data directly to providers' National Provider Identifier (NPI) through the Michigan Department of Licensing and Regulatory Affairs website.

The MHA supports unconscious bias training for all health care personnel, Ensuring equitable access and care for all patients is an MHA strategic priority and eliminating health disparities is crucial to the MHA mission of advancing the health of individuals and communities. Thank you for your consideration of our comments and please reach out with any questions.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Adam Carlson".

Adam Carlson
Vice President, Advocacy
Michigan Health & Hospital Association
Desk: (517) 886-8245 | Cell: (269) 757-2479
acarlson@mha.org

From: [BPL-BoardSupport](#)
To: [Marks, Dena \(LARA\)](#)
Subject: FW: Comments on proposed PHC General Rules- MOAHR 32020-109 LR
Date: Monday, March 8, 2021 2:41:57 PM
Attachments: [image001.png](#)

From: Farrell, Chris (DHHS) <farrellc@michigan.gov>
Sent: Monday, March 8, 2021 2:40 PM
To: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Subject: Comments on proposed PHC General Rules- MOAHR 32020-109 LR

Hello,

First comment: R 338.7001a Biennial License and registration renewal; expiration. Dental Therapy is listed as a biennial license. All the other license and registration for dentistry, dental hygienists and dental assistants is a triennial license and registration renewal. The dental therapy license and registration renewal should be consistent with the other dental licenses and should be moved from R338.7001a to R338.7002 Triennial License and registration renewal; expiration

Second comment:R 338.7004 Implicit bias training standards. I recommend changing the word “medical” to “health” in section (3)(a)(i). The word health is much broader and can include medical, behavioral and oral health. Medical may be interpreted by some as only physical health and not the broader term of health care. Studies demonstrate that individuals have more difficulty accessing behavioral and oral health care than medical/physical health care.

(3) The implicit bias training must be related to reducing barriers and disparities in access to and delivery of health care services and meet all of the following requirements:

(a) Training content must include, but is not limited to, 1 or more of the following topics:

(i) Information on implicit bias, equitable access to **medical** care, serving a diverse population, diversity and inclusion initiatives, and cultural sensitivity.

Christine Farrell, RDH, BSDH, MPA
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March 9, 2021

Re: Comments on Rule Number(s): R 338.7001-338.705

To Whom It May Concern:

Thank you for the opportunity to provide comments on the Implicit Bias Rules.

The mission of the Michigan Oral Health Coalition is to mobilize stakeholders and advocate for policies and resources that connect Michiganders to optimal oral health. The MOHC works to create a large, interconnected network of national, state and local advocates dedicated to working collaboratively on advocacy, education and awareness of oral health.

We applaud LARA for promulgating these rules on implicit bias and that all dental providers are included in these rules. Specifically, we are glad to see that implicit bias training must be done with every license renewal and not just as one-time training. Second, we are glad that interactive training is required and that there are a range of options.

Some improvements we recommend:

- Including Dental Therapists as provider with a triennial renewal like all of the other dental providers.
- Increasing the number of hours of training required.
- Including as a requirement or recommendation that information learned be shared within non-licensed staff.
- Using the word health instead of medical throughout the rule. Medical implies solely physical health.
- Allowing an established non-profit organizations to provide the training.

While the fact that implicit bias definition is broad and inclusive is good, we are concerned that implicit bias regarding race could be seen as optional if other groups included are covered. We recommend that all trainings be required to cover race-based implicit bias.

Warm Regards,

Ellen Sugrue Hyman
Executive Director



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From: [BPL-BoardSupport](#)
To: [Marks, Dena \(LARA\)](#)
Subject: FW: Public Comment Regarding Public Hearing for the Public Health Code General Rules on March 9
Date: Sunday, March 7, 2021 11:17:26 AM

From: Saad, Fayrouz (LEO) <SaadF@michigan.gov>
Sent: Friday, March 5, 2021 4:44 PM
To: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Cc: Phillippi, Karen (LEO) <PhillippiK@michigan.gov>; Fenton, Annie (LEO) <FentonA@michigan.gov>
Subject: Public Comment Regarding Public Hearing for the Public Health Code General Rules on March 9

To Whom It May Concern:

The Office of Global Michigan within the Department of Labor & Economic Opportunity (LEO) submits the following public comment in relation to the Public Hearing for the Public Health Code General Rules – MOAHR #2020-109 LR:

The Office of Global Michigan recommends that R338.7002b (Minimum English Language Standard) include the Occupational English Test (OET) as an additional test option for applicants who are graduates of a foreign prelicensure education program not taught in English or if English is not the applicant's native language. Further, we recommend that an overall minimum score of 300 be considered as proof of an applicant's ability to meet the minimum English language standard for licensure. The OET is the only international English language test designed specifically for healthcare professionals. The OET has been approved by regulators in Florida, Washington state and Oregon as an eligible test of English language proficiency for internationally trained nurses. Additionally, the Education Commission for Foreign Medical Graduates (ECFMG) offered OET as a pathway to certification this year, following the suspension of the Step 2 Clinical Skills (CS) component of the USMLE.

Thank you for your attention to this matter.

Fayrouz Saad
Executive Director
Office of Global Michigan
Michigan Department of Labor and Economic Opportunity
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201 N Washington Street Lansing MI 48933
Office: Cell: 517-930-4994 | Email: saadf@michigan.gov
www.michigan.gov/leo

From: [BPL-BoardSupport](#)
To: [Przybylo, Kerry \(LARA\)](#); [MacIntosh, Weston \(LARA\)](#); [Marks, Dena \(LARA\)](#); [Ditschman, Andria \(LARA\)](#)
Subject: FW: Public Comment
Date: Tuesday, March 2, 2021 10:39:36 AM

I wasn't sure who should receive this, so I sent it to all of you.

From: James Sullivan <james@behanlaw.com>
Sent: Tuesday, March 2, 2021 10:37 AM
To: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Subject: Public Comment

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I am providing a comment on the Public Health Code General Rules MOAHR 2020-109 during the open comment period.

An applicant who has had their education credentials evaluated by a credential evaluation service will already have completed the English proficiency requirement. The way the rule is written will require the applicant to satisfy the English proficiency requirement twice. May I suggest that the following phrase be added to the rule: "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."

submitted,

ESQ.

Respectfully

James D Sullivan,

From: [BPL-BoardSupport](#)
To: [Marks, Dena \(LARA\)](#)
Subject: FW: Public Comment to Public Health Code General Rules – MOAHR #2020-109 LR:
Date: Sunday, March 7, 2021 11:13:11 AM

From: Steve Tobocman <steve.tobocman@gmail.com>
Sent: Friday, March 5, 2021 9:54 AM
To: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Subject: Public Comment to Public Health Code General Rules – MOAHR #2020-109 LR:

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Global Detroit submits the following public comment in relation to the Public Hearing for the Public Health Code General Rules – MOAHR #2020-109 LR.

Global Detroit is a regional economic and community development organization. With a focus on immigrants and global talent, we develop and implement inclusive strategies to drive the growth, revitalization and broadly shared prosperity of Detroit and Southeast Michigan.

Global Detroit recommends that R338.7002b (Minimum English Language Standard) include the Occupational English Test (OET) as an additional test option for applicants who are graduates of a foreign prelicensure education program not taught in English or if English is not the applicant's native language. Further, we recommend that an overall minimum score of 300 be considered as proof of an applicant's ability to meet the minimum English language standard for licensure.

It is our understanding that the OET is the only international English language test designed specifically for healthcare professionals. The OET has been approved by regulators in Florida, Washington state and Oregon as an eligible test of English language proficiency for internationally trained nurses. Additionally, the Education Commission for Foreign Medical Graduates (ECFMG) offered OET as a pathway to certification this year, following the suspension of the Step 2 Clinical Skills (CS) component of the USMLE.

Thank you for your attention to this matter.

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Steve Tobocman
Executive Director, Global Detroit
Pronouns: He; His; Him
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www.globaldetroitmi.org

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Inclusive Economies. Vibrant Communities.