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STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF PROFESSIONAL LICENSING

- - -

PUBLIC HEARING

TUESDAY, JANUARY 19, 2021

AT ABOUT 1:00 P.M.

- - -

HELD VIA ZOOM CONFERENCE

LANSING, MICHIGAN

- - -

RE: Chiropractic - General Rules
 (MOHR #2019-84 LR)

 Pharmacy Technicians - General Rules
 (MOHR #2020-29 LR)

 Speech-Language Pathology - General Rules
 (ORR 2018-107 LR)

- - -

HEARING FACILITATOR:

WESTON MacINTOSH
Bureau of Professional Licensing
611 W. Ottawa Street
Lansing, Michigan 48909

ALSO PRESENT: Kerry Przybylo
 Andria Ditschman
 LeAnn Payne

REPORTED BY: Lori Anne Penn, CSR-1315

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1 Tuesday, January 19, 2021

2 At 1:00 p.m.

3 - - -

4 MR. MacINTOSH: Good afternoon. My name
5 is Weston MacIntosh, and I am an analyst for the Bureau
6 of Professional Licensing in the Department of Licensing
7 and Regulatory Affairs, and I will be conducting the
8 hearing today.

9 This is a public hearing on proposed
10 administrative rules entitled "Chiropractic - General
11 Rules", "Pharmacy Technicians - General Rules", and
12 "Speech-Language Pathology - General Rules". We are
13 conducting the hearing as required by the Administrative
14 Procedures Act to allow the public to comment on the
15 proposed to changes to these rule sets. As with all
16 other public hearings on draft rule sets, the only items
17 discussed during this hearing will be proposed changes to
18 the rule sets. This hearing will not be covering any
19 questions or discussions on any other issues, such as
20 reopening businesses, as this is not the proper platform.

21 We are calling this hearing to order at
22 1:00 o'clock p.m. on January 19, 2021, via Zoom, to
23 follow measures designed to help prevent the spread of
24 Coronavirus Disease 2019 (COVID-19). The notice of
25 public hearing was published in three newspapers of
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1 general circulation, the Grand Rapids Press, the Flint
2 Journal, and the Mining Journal, on January 5, 2021, as
3 well as the *Michigan Register*, Issue #24, published on
4 January 15, 2021.

5 All comments should relate directly to
6 the proposed rules. If you have questions about the
7 rules, you may place your comments on the record and the
8 Department will review and consider them. If you have
9 suggested changes to the proposed rules, please include
10 the specific reasons why the changes would be in the
11 public interest.

12 We'll take comments in the following
13 manner.

- 14 • For those using the Video Conference Portion,
15 i.e., not calling on the telephone, please use
16 the "Raise Your Hand" feature in Zoom. I will
17 call on individuals to speak and they will be
18 unmuted at that time.
- 19 • For participants that are available only by
20 telephone, we'll ask if you wish to make a
21 comment after the video participants have
22 finished.
- 23 • If you have a comment but do not wish to speak,
24 please note that the Department will also accept
25 written statements e-mailed or postmarked to
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1 BPL-BoardSupport@Michigan.gov until 5:00 o'clock
2 p.m. today.

3 Those making comments should clearly and
4 slowly say and spell your name and advise if you are
5 speaking on behalf of an organization. We will limit
6 comments to three minutes per person. Please remember
7 that only one person should speak at a time.

8 The Department staff from the Bureau of
9 Professional Licensing includes Kerry Przybylo, Andria
10 Ditschman, and LeAnn Payne, as well as myself.

11 We will group the comments by rule set so
12 that we can group the comments together. And I'm not
13 going to go alphabetically, I'm going to actually start
14 with the first rule set we'll look at is taking comments
15 for Speech-Language Pathology - General Rules. Is there
16 anyone who wishes to speak on the Speech-Language
17 Pathology - General Rules?

18 MS. PRZYBYLO: Wes, I don't see anybody's
19 hands up.

20 MR. MacINTOSH: I'm just looking at the
21 second page. Okay. Yeah, I'm not seeing anyone either.

22 Okay. So the next rule set we'll look at
23 is comments for Pharmacy Technicians - General Rules. Do
24 we have anyone who would like to make comments on the
25 Pharmacy Technicians - General Rules?

1 MS. PRZYBYLO: Wes, this is Kerry. I
2 don't see anybody's hands up for the Pharmacy Technician
3 Rules.

4 MR. MacINTOSH: I don't either.

5 So next we'll take the third set, which
6 is the Chiropractic - General Rules. Is there anyone who
7 would like to make a comment on the Chiropractic -
8 General Rules? And again, please, if you wish to make a
9 comment, please raise Your hand under the participants'
10 tab in Zoom.

11 MS. PRZYBYLO: Wes, it looks like Martin
12 Brown has a comment.

13 MR. MacINTOSH: Yes, Martin, it looks
14 like you're unmuted. Go ahead.

15 MARTIN BROWN: Are asking me to begin my
16 comment?

17 MR. MacINTOSH: Yeah. Can you please
18 just state and -- state your name and first and last and
19 just spell it, because we do have a court reporter, just
20 so she has a record.

21 MARTIN BROWN: Okay. Thank you. My name
22 is Martin Brown, M-a-r-t-i-n B-r-o-w-n, and I'm president
23 of Macomb County Chiropractic Association, M-a-c-o-m-b,
24 County Chiropractic Association.

25 Is the reporter, stenographer ready for
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1 me to begin?

2 MR. MacINTOSH: Go ahead, Martin, yeah.

3 MARTIN BROWN: I oppose the Board of
4 Chiropractic granting authority over the review and
5 approval of continuing education to the Michigan
6 Association of Chiropractors, MAC for short. This is not
7 a common standard in other professions here, nor is it
8 common in other states' chiropractic boards. This option
9 is very questionable and controversial.

10 I am a loyal, longstanding, dues-paid
11 member of MAC and its predecessor since the early '80s.
12 I have consistently attended MAC events for over 35
13 years. I recognize MAC's fine efforts in serving its
14 members and promoting the profession, but there are
15 limits on MAC's organizational role.

16 MAC is a non-regulatory, nongovernmental
17 membership trade organization and should not be given a
18 regulatory role. Chiropractors are not required to join
19 MAC. The State board's primary obligation is to protect
20 the health, safety, and welfare of the public. MAC's
21 role is to serve its members. These are different and
22 separate roles and the distinction should remain.

23 MAC holds continuing ed programs and
24 derives significant income from these. There is a clear
25 conflict of interest if MAC were to oversee all other

1 providers of continuing ed. The proposed rules provide
2 no oversight, no checks or balances on MAC whatsoever.
3 In fact, MAC has been placed above the rules with no
4 application, review, or approval required for their own
5 programs. MAC courses should be impartially reviewed. I
6 do not doubt the validity of MAC programs, but I oppose
7 an unequal review process.

8 The Federation of Chiropractic Licensing
9 Boards established PACE, Providers of Approved Continuing
10 Ed, with an well-accepted rigorous review process
11 utilized by the vast majority, some 80 percent of state
12 boards, for impartial review. PACE is perfectly suitable
13 for Michigan.

14 Another issue, chiropractic college
15 courses given on campus are currently automatically board
16 approved. Off-campus and online courses should also be
17 automatically approved in the new rules. There are no
18 chiropractic colleges in the State of Michigan. The same
19 course taught in-state for the doctors' safety and
20 convenience of course warrants automatic approval if
21 taught on campus, likewise for online courses. The
22 pandemic has taught us about valid flexible options. All
23 universities offer online courses to protect from COVID,
24 and chiropractic CEs should become more accessible, not
25 further encumbered.

1 The State must preserve fair government
2 authority. The Board of Chiropractic must always focus
3 on its role of protecting the public. I speak in the
4 name of fairness, equal justice, and ethical principles.
5 And I've also submitted written documents personally and
6 as president of the Macomb County Chiropractic
7 Association providing reasonable options for a just and
8 fair alternative to serve the board and the public.
9 Thank you very much.

10 MR. MacINTOSH: Thank you, Dr. Brown.

11 And I'll just also remind folks, we
12 already have received a lot of written comments. If you
13 sent in a written comment, you don't have to basically
14 say the same thing. You know, if we have your written
15 comment, we have your written comment and we'll obviously
16 pass it along to the board, just for everybody's
17 clarification. So if you've already submitted something
18 and it would be basically the same thing that you would
19 say otherwise, you don't need to say it again for the
20 sake of the record.

21 Who else would like to make a comment on
22 Chiropractic - General Rules?

23 MS. PRZYBYLO: Wes, Kris Fetterman has a
24 comment. She was unable to raise her hand.

25 MR. MacINTOSH: Okay. Kris, go ahead.

1 KRIS FETTERMAN: Thank you. I'm Kris
2 Fetterman with Fetterman Events, spelled K-r-i-s, last
3 name is F- as in Frank e-t-t-e-r-m-a-n. And I sent each
4 board member of a packet of information a few weeks ago
5 that explained my thoughts and opinions on the issue; if
6 you didn't receive it, I can e-mail the information
7 again. But I sent it because I had heard the board
8 members were given incorrect information that weighed in
9 on your decision to move in the direction you were
10 taking.

11 My company provides CE seminars for about
12 38 states right now, and we've interacted with state
13 boards for each of these states and have seen firsthand
14 the differences in state boards that use their state
15 associations for some aspect of their business. In each
16 of these states, the chiropractors in the state feel as
17 if their state board is controlled by the state
18 association, the transparency of the board disappears,
19 and the impropriety of the board increases. There's a
20 lot of distrust between the doctors and the board. It
21 also builds a great divide between the chiropractors and
22 the association.

23 Now, I have always, have always and
24 always will encourage doctors to join their state
25 association, and specifically the Michigan one because

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1 they do a lot of great things for the chiropractors. We
2 only do continuing education, but the state association
3 does a lot more with legal and legislative issues
4 specifically. But so saying that, it's -- this is not to
5 just go against state association, this is actually
6 something that should be kept separate.

7 Many states, almost all states in fact,
8 use PACE to handle the CE approvals in some manner. Some
9 states rely solely on PACE and use their approval as the
10 board's approval, and other states use a PACE precheck to
11 sort through the applications and make it less lengthy
12 for their time, so there's an option of control for the
13 state boards. PACE is a part of the Federation of
14 Chiropractic Licensing Board, they're the ones who
15 control the national board testing. They are an unbiased
16 organization that's designed to ensure that CE programs
17 are of the highest quality and that providers adhere to
18 strict guidelines, and there's an extensive application
19 process to even become a PACE provider, which weeds out
20 individuals or companies that try to get CE approval for
21 seminars that don't enhance the doctors' knowledge or
22 education.

23 Now, I understand there are more and more
24 CE applications coming into the board for review and that
25 this is taking a lot of the board's resources of staff

1 and member time, however, to give this duty to the state
2 association will dissolve any transparency of fairness
3 and ethical morality that the board has. It will also
4 give the appearance of impropriety, whether real or
5 imagined. So I'm asking the board members to reconsider
6 this option and look into the possibility of using PACE
7 instead to handle this duty. They're equipped to do this
8 and already handle this for the majority of state boards.

9 Members of the FCLB receive annual
10 benefits, such as free access to online reporting,
11 reporting agent service, polls, poll surveys regarding
12 scope or practice issues, and several more benefits that
13 help govern, towards govern their state professional.
14 Michigan is only -- is one of only three states that are
15 not members of the Federation, all other states are.

16 One of the most attractive benefits for
17 regulatory boards is the retention of authority. The
18 boards that are a part of the FCLB retain their authority
19 and they can choose to implement PACE as a means of
20 delegating some of the workload associated with that
21 authority.

22 Another big benefit, and this is one of
23 the largest ones I've been told, is their CIN-BAD
24 program. Members, board members can look up licensed
25 applicants to make sure they don't have board actions in

1 other states. CIN-BAD also sends out monthly
2 notification on any board action so that state licensing
3 boards can request get a heads up. That way if a doctor
4 who's licensed in Tennessee has his Oklahoma license
5 revoked for unprofessional conduct, the Tennessee board
6 will be able to act before that doctor hurts a patient in
7 their state. So, and all boards, all licensing boards
8 are required to report actions to the National
9 Practitioner Databank; FCLB handles that via the CIN-BAD.
10 So it can be a huge cost savings, and that's one of the
11 things I am presenting, presenting this information so
12 you can make an informed decision and encourage you to
13 consider the FCLB's PACE program as a better option.
14 Thank you.

15 MR. MacINTOSH: Do we have any other
16 comments on the Chiropractic --

17 MS. PRZYBYLO: Eric DiMartino has a
18 comment.

19 MR. MacINTOSH: Okay. Eric, go ahead.
20 And again, please, you know, state your first and last
21 name, and please spell it.

22 ERIC DiMARTINO: Thank you. Good
23 afternoon. My name is Dr. Eric DiMartino, that's E-r-i-c
24 D-i-M-a-r-t-i-n-o, and I currently serve as chairman of
25 the board for the Michigan Association of Chiropractors.

1 I'm here today to speak in support of the
2 proposed Administrative Rule, the change regarding
3 Chiropractic continuing education, as well as discuss a
4 potential change to the current rule regarding
5 chiropractic relicensure.

6 First, regarding the proposed rule
7 governing continue education, this solution was arrived
8 at after a member of the Michigan Board of Chiropractics
9 continuing education committee contacted the MAC
10 regarding the intense administrative burden faced by
11 their committee. In researching models across the
12 country and keeping in mind their desire to keep the
13 approval process within the State of Michigan, the rules
14 committee work group arrived at this solution.

15 MAC programs are already approved for
16 continuing education without going through the
17 application process; this is the result of the recent
18 changes to the Administrative Rules that were approved
19 and went through the public hearing process years ago,
20 this again is acknowledging the MAC's years of
21 high-quality programs that consistently meet State of
22 Michigan requirements. The MAC has the nonprofit legal
23 structure, expertise, experience, and well-informed staff
24 to provide a professional evaluation that strictly
25 follows the guidelines for approved continuing education

1 outlined in the current State of Michigan Administrative
2 Rules. As long as the current guidelines are followed,
3 programs will be approved.

4 As I mentioned, there are precedents
5 among other states for taking such action, including the
6 chiropractic licensing boards of Kansas and Tennessee,
7 both of which delegate the authority for the review and
8 approval of chiropractic continuing education programs to
9 their chiropractic state associations. Also, other
10 professional membership organizations in Michigan, such
11 as the realtors and CPAs, have taken on this critical
12 responsibility.

13 The MAC board of directors, leadership
14 and education programs committee are confident that the
15 model proposed by the rules committee work group and
16 passed by the full Board of Chiropractic solves the
17 administrative issues faced by the Board of Chiropractic
18 and ensures that CE programs continue to count for the
19 Michigan chiropractic scope of practice as well as
20 current trends in Michigan's chiropractic practice, while
21 continuing to allow only the highest quality programs for
22 continuing education. I firmly believe that the proposed
23 change to the rule governing acceptable chiropractic
24 continuing education will greatly benefit the licensed
25 chiropractors in our state and the State of Michigan

1 itself.

2 Next I'd like to talk about the
3 Administrative Rule governing chiropractic relicensure --

4 THE REPORTER: Can you slow down a little
5 bit, please. I'm sorry.

6 ERIC DiMARTINO: Am I speaking too fast?

7 THE REPORTER: You're getting faster and
8 faster. Thank you.

9 ERIC DiMARTINO: You can't keep up.
10 Okay.

11 Moving on, I'd like to talk about the
12 Administrative Rule governing chiropractic relicensure
13 for chiropractors whose Michigan license has been expired
14 for three years or more. Prior to the rewrite of the
15 rules that became effective in 2019, all applicants for
16 relicensure were required to satisfy either of the
17 following: Either 45 hours of continuing education in
18 the preceding three years with all the outlined
19 requirements, or have been licensed as a chiropractor in
20 another state of the United States during the three-year
21 period immediately preceding the applications for
22 relicensure. This was changed in the most recent rewrite
23 of the rules.

24 Currently, doctors seeking Michigan
25 relicensure after their license has been elapsed for

1 three years or more are now required to have the 45 hours
2 of continuing education and either have been licensed in
3 another state for three years preceding the application
4 or have passed a National Board of Chiropractic Examiners
5 special purposes examination for chiropractic. We feel
6 that this is overly burdensome on doctors seeking
7 relicensure in that if a doctor has been continuously
8 licensed in another state for the three years immediately
9 preceding applications for relicensure, has been
10 following the state's continuing education rules, and has
11 no sanction against his or her license in that other
12 state, they are presumed to have the skills to practice
13 chiropractic in the State of Michigan. We also do not
14 believe that passing the NBCE SPEC exam is necessary to
15 establish the presumption of having the skills and
16 ability to practice chiropractic in the State of
17 Michigan.

18 It is also important to note that if a
19 doctor had never been licensed in Michigan at all, the
20 process to get a license is much less cumbersome, but
21 because someone may have gotten a Michigan license right
22 out of school, but then moved to another state to
23 practice and now wants to come back to Michigan, they
24 must follow a completely different and more stringent set
25 of rules. We would like to see the rule rewritten to be

1 more in line with the rule prior to the previous rewrite
2 in which chiropractors have access to two methods in
3 which to gain relicensure: (1) through continuing
4 education, or (2) having been continuously licensed in
5 another state for the immediate past three years. This
6 change will continue to protect both the general public
7 and the profession itself while easing a burdensome
8 requirement on applicants for relicensure whose license
9 has been expired for three years or more. Thank you for
10 your time and your consideration of these comments.

11 MR. MacINTOSH: The next hand I see
12 raised is (inaudible) --

13 THE REPORTER: I'm sorry, Wes, I could
14 not hear you.

15 MR. MacINTOSH: Sorry. The next hand I
16 see raised is Garth Aamodt. Hopefully I pronounced that
17 correctly. Garth.

18 GARTH AAMODT: You were close.

19 MR. MacINTOSH: And then please, again,
20 just state your first and last name and please spell it.
21 Thank you.

22 GARTH AAMODT: Okay. Can you hear me
23 now?

24 MR. MacINTOSH: Yes.

25 GARTH AAMODT: My name is Dr. Garth

1 Aamodt, and that's spelled A-a-m-o-d-t, pronounce it
2 Aamodt.

3 I actually don't represent anyone here
4 except my own opinion. I have sent in a letter from
5 January 12 to the board, so I won't repeat anything I've
6 said there. I have just a couple of things I didn't
7 bring up in my letter that I think pertain here, some of
8 them from been brought up by the previous speakers. I'll
9 keep it real brief.

10 My chief concern is the wording, which I
11 think is new wording, about how approved university
12 seminars must be on campus for automatic approval. That
13 bothers me. One reason is because every year I
14 participate in an annual conference held in Chicago,
15 Illinois, it's sponsored by National University of
16 Chiropractic, it's also sponsored by the ACA Council on
17 Orthopedics, but as I understand it, because they draw
18 chiropractors from all over the country, often all 50
19 states, or at least contiguous states, they hold it off
20 campus, they hold it at the Marriott Hotel; it's
21 convenient, you can book your room there, and it's a
22 three-day conference. I'm concerned that because it's
23 off campus, even though it's sponsored by a university,
24 does that mean that they or the other sponsors or the ACA
25 are going to have to add to their burden to apply for

1 sponsorship or approval for their CE hours. I don't know
2 that they have to do that with other states, but I
3 presume that since they are automatically included in
4 most other provisions being sponsored by the University
5 and the ACA, that that would be a formality that I would
6 think would not be necessary under normal circumstances.

7 My other concern is the conflict of
8 interest. We have not always had the best continuing
9 education seminars in Michigan, sorry. I'm not saying
10 those were sponsored by the MAC, we've had other
11 organizations before the MAC, but I have actually seen
12 some pretty bad things sponsored by various previous
13 trade organizations, so I'm concerned that if the
14 ideology becomes farther leaning one way or another,
15 we're going to find an unintentional bias in what they
16 may approve or not approve, so that concerns me. Also,
17 I'm concerned that conflict of interest, if they're doing
18 a seminar on one topic and Fetterman, say, for example,
19 or someone else, Macomb, applies for a similar topic you
20 might say, will they prefer theirs since theirs are
21 automatically approved. That's not a bonus that you're
22 automatically approved and are above the, I guess you'd
23 say the vetting process.

24 So those are my main contentions. It
25 could be that I have a misunderstanding, I have read the
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1 rule change and I've tried to stay informed, but my main
2 concern is one of conflict of interest and the additional
3 burden that would come upon organizations that right now
4 know that they're already vetted by I would assume almost
5 all other states, so why are we adding to their burden.
6 And we're just spreading out the burden in this state,
7 we're need not really improving it. I personally think
8 that PACE is a great way to go. I have no ax to grind
9 either way, I'm a private practitioner, but these are my
10 concerns, and I appreciate the opportunity to express
11 them.

12 MR. MacINTOSH: Thank you, Garth.

13 Next we'll do Don Reno. And again,
14 please state your first and last name and spell them.

15 DONALD RENO: Well, good afternoon,
16 everybody. My name is Dr. Donald Reno, D-o-n-a-l-d,
17 middle initial M., last name Reno, R-e-n-o. And I'm here
18 today to speak in support of the proposed changes to the
19 Michigan Board of Chiropractics Administrative Rules.

20 There's been some awesome points that
21 have been made by all parties. And I speak as the former
22 BOC chairman, served eight years on the Michigan board,
23 and there's a couple things I think I can help to clarify
24 here.

25 Administratively, the State of Michigan
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1 deals with its boards maybe a little bit differently than
2 some other states; I think it's an extremely great system
3 that the State of Michigan has utilized over the years.
4 Many states have boards with budgets and directors and
5 heavy, cumbersome internal organization factors. The
6 State of Michigan does not allow for board budgets and
7 secretaries that are private to the members of the board
8 per se, which is a very good way to keep the board in
9 line without being a sheriff in town.

10 PACE is also -- or FCLB is an
11 organization that does specialize in continuing education
12 through their PACE program. Due to the fact that
13 Michigan does not participate in the FCLB -- the reason
14 why that is is it's a cost pay-for-play organization --
15 since there's no budget for the board to pay FCLB dues,
16 the board had always navigated the world of CEs through
17 volunteer. Yes, it's a cumbersome situation. I believe
18 the MAC is stepping up in great faith to take on a burden
19 that will have no financial redeeming qualities to it,
20 they are not going to be paid for the work that they're
21 going to do, and there is no new conflict because most of
22 these chair of the CE committee on the board has always
23 been a MAC member, so there is no new introduction to any
24 kind of conflict of interest whatsoever in my opinion.

25 The members of the Association are dues

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1 paid, it is not incumbent upon the MAC to pay the FCLB to
2 pay for the approval of the continuing education credits.
3 Especially in a pandemic period where obviously cost
4 containment is is very, very important, I think it would
5 be unfair for us to put additional costs on the shoulders
6 of the doctors for the MAC or -- not the MAC, but for the
7 board to participate with the FCLB. It's just, it's an
8 additional cost that's not really in the best interest of
9 the public.

10 And in my eight years as, or disciplined
11 in the Board of Chiropractic, I've always observed
12 nothing but the utmost integrity in the review of the CEs
13 with no conflict, and if there was any disapproval of a
14 CE, it was over something that just simply didn't appear
15 in the paperwork or the quality of the program. So I
16 speak in support of this, and I can't imagine a better
17 organization to review the CEs for the State of Michigan
18 and offer the best and highest quality of public
19 protection.

20 MR. MacINTOSH: Thank you for your
21 comments. Next I see Robert Fenell. Robert.

22 ROBERT FENELL: Good afternoon. My name
23 is Dr. Robert Fenell, and that's spelled R-o-b-e-r-t
24 F-e-n-e-l-l, and I'm here representing nobody other than
25 myself right now.

1 I'm a practicing chiropractor and
2 licensed in the State of Oklahoma, and I am speaking here
3 today to oppose the rule under consideration which would
4 give the Michigan Association of Chiropractors, or MAC,
5 sole authority over continuing education.

6 We have a different, but somewhat
7 similar, process here in Oklahoma. You may or may not
8 know that we have two state associations, and as a
9 practicing chiropractor, we are required to take one of
10 the handful of seminars that are made available to us
11 each year by either/or of the different state
12 associations. It makes for -- and I'm speaking for let's
13 just say nearly a hundred percent of the chiropractors in
14 the State of Oklahoma because I personally have met most
15 of the chiropractors through my affiliations with either
16 one or other of those associations. So, and it is a
17 disadvantageous environment for us to practice in. The
18 speakers that are chosen for either/or of the two
19 associations, in many opinions of the doctors, we'd
20 rather have other presenters. Speaking to colleagues of
21 ours who practice in other states, they have a plethora
22 of seminars and speakers they can gain their CE hours
23 through, and they may travel, some of them come to other
24 states, and what have you. But in Oklahoma, it's very
25 limited.

1 A colleague of mine who practices in
2 Michigan mentioned this to me recently, and I said, oh,
3 no, please, I hope that doesn't happen to you guys, that
4 sounds like it could even be potentially worse because
5 there's one association and they'll have full control
6 versus we have two associations and there's some shared
7 control there of course. But it's very, very limiting,
8 the DCs here wish that we had similarities of other
9 states, possibly, for example, PACE certified or able to
10 get a seminar that's certified through a chiropractic
11 college, but that's not the case, unfortunate for the
12 Oklahoma chiropractors, and it sounds like this would be
13 the more unfortunate for doctors practicing chiropractic
14 in the State of Michigan. So I greatly oppose that
15 consideration, and hopefully Michigan can remain how they
16 have been. I'm just speaking from the love of
17 chiropractic and a fellow chiropractor. That's all I
18 have to say.

19 MR. MacINTOSH: Thank you for your
20 comment.

21 MS. PRZYBYLO: Weston, Kris Fetterman was
22 next on the list. She had an additional comment to make
23 and messaged me before the other people put their hand
24 up.

25 MR. MacINTOSH: Oh, okay. Go ahead,
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1 Kris.

2 KRIS FETTERMAN: Oh, thanks. I just
3 wanted to mention Dr. Reno had mentioned -- no, no, it
4 wasn't Dr. Reno, it was Dr. DiMartino, that Tennessee
5 uses their state association. They actually switched two
6 years ago and are with PACE. Their association still is
7 automatically approved, but they do go through PACE, you
8 have to be a PACE provider to be approved there, and I
9 wanted to mention that.

10 And I also mentioned -- wanted to say
11 something about verbiage being given to people to speak
12 here which is in the chat box, that doesn't quite seem
13 right, but I just thought I'd bring that up. That's all.
14 Thank you.

15 MR. MacINTOSH: Just as a heads-up, no
16 one should be commenting in the chat box, comments are
17 supposed to be made orally for the purpose of this
18 hearing.

19 Let's see here. Next I see Robyn Peake.
20 Go ahead, Robyn.

21 ROBYN PEAKE: I am sorry for the comment
22 that ended up in the public chat, I thought I was
23 responding to somebody privately and it did not respond
24 to that individual, and my apologies for that. I
25 recognized that after the fact, and I did make that

1 apology on chat for any disruption. That was certainly
2 not my intent.

3 I have a love of chiropractic,
4 chiropractic is my first go-to for healthcare for myself
5 and my family. And it's important to me that we have
6 doctors and continuing ed that are efficient, that are
7 effective. One of the concerns that I have as an
8 individual is what's the value of online coursework that
9 can -- that has no supervision. Somebody could set up a
10 program to play and then walk back in two to three hours
11 later when it's complete. How much value has that served
12 for the chiropractor, and what does that translate to for
13 care of patients.

14 Just because something comes in does not
15 mean that it needs to be approved. I think that running
16 it through the MAC would streamline the process, I think
17 it would help for both doctors as well as the providers
18 of the coursework. There's certain standards that I
19 expect out of my chiropractor, there's certain standards
20 that I would hope would be followed with the continuing
21 ed programs. To resist those standards I think puts the
22 public at risk. I think there needs to be the programs
23 that have the proper supervision that can verify that the
24 doctors have in fact completed the coursework, that can
25 have a positive result on how they practice and

1 protecting the public. Thank you very much.

2 MR. MacINTOSH: Thank you for your
3 comments. Is there anyone -- I'm not seeing any other
4 hands right now. Is there anyone else who would like to
5 make a comment? Let me just really quick circle back
6 because I'm not seeing any hands right now.

7 Was there anyone else who would want to
8 make a comment on either the Speech-Language Pathology -
9 General Rules or the Pharmacy Technician - General Rules?
10 Okay. I'm not seeing anyone.

11 And again, sort of last call, is there
12 anyone else who would like to make a comment on the
13 Chiropractic - General Rules?

14 MS. PRZYBYLO: Weston, Larry Kaplan is
15 physically raising his hand.

16 MR. MacINTOSH: Okay. Larry, go ahead.
17 Again, please state your first and last name and spell
18 them for the record.

19 LARRY KAPLAN: Okay. My name is Larry
20 Kaplan, L-a-r-r-y K-a-p-l-a-n.

21 I strongly oppose this measure. I've
22 been a MAC member for many years, I was an MCC member, I
23 was a Society member. They put, the MAC puts on great
24 seminars, but I think there has to be a regulatory part
25 of it. I think there's a conflict of interest here both

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1 financially on both sides. The MAC, from what I
2 understand, is more of a membership association, and it
3 even says in its bylaws that it's not a regulatory
4 agency, and I think that's a conflict there. The state
5 board, they might be overwhelmed and maybe they need help
6 in doing it, but they're the ones who can give a fair
7 maybe assessment of the continuing ed, and I never
8 understood why this came to where it is.

9 Not everyone in the State here is a
10 member of the MAC, so now, arbitrarily now they have to
11 become a member or they have to abide by their rules, and
12 there's no regulation, they're just being handed over
13 this priority of regulating the continuing ed program.
14 And everything else has been said.

15 I've been to many seminars, the MAC puts
16 on great seminars, Macomb puts on, I've been to Omni,
17 I've been to Fetterman, I've been all over, and they're
18 all really good, and I just think right now, I just think
19 it would be a conflict of interest, and that's my input.
20 Everything else has been said. So that's it, and I thank
21 you for the opportunity.

22 MR. MacINTOSH: Thank you for your
23 comments. I see a hand, Royann Hassinger. Royann, can
24 you hear me? You're on mute.

25 ROYANN HASSINGER: Yes. Okay. I'm
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1 sorry. I'm Royann Hassinger, I'm a chiropractor in
2 Ortonville. I have been a member of MAC --

3 MR. MacINTOSH: First of all, can you
4 please spell your first and last name.

5 ROYANN HASSINGER: I'm sorry. My first
6 name is Royann, R-o-y-a-n-n, Hassinger, H-a-s-s- like in
7 Sam i-n-g-e-r. I'm in Ortonville, Michigan.

8 There are several of us in my little,
9 tiny community, and I believe we all practice
10 differently; that is one of my concerns with MAC being
11 the primary or having authority over all the continuing
12 education.

13 I've attended MAC seminars, I've attended
14 other seminars. If I want an in-depth seminar, if I want
15 to learn a new program, it is very difficult to get that
16 at seminars sponsored by larger organizations.

17 I'm concerned about the conflict of
18 interest. I want to be able to practice the way the laws
19 say I can, but are different from the person down the
20 street from me. That is what gives our patients the
21 freedom of choosing a particular doctor. Unfortunately,
22 because I turned 65 and had to get Medicare, I went to a
23 medical doctor. I didn't really get a choice as to who I
24 got, and they're all the same so it really didn't matter.
25 Nothing wrong. But now I really, really appreciate the

1 fact that I can choose the doctor who I want as a
2 chiropractor, my patients can choose me as opposed to
3 Dr. Brown. He doesn't live near me so it's not a
4 problem. But we can choose who we want because of how we
5 practice, and I am afraid that MAC will restrict what my
6 continuing education credits are.

7 I did like what Dr. Eric had said about
8 licensing. I agree, if you've been practicing out of
9 state, you should be able to come to Michigan if you
10 qualify. Dr. Reno made a comment that the chiropractic
11 board has always had an MAC president; that does kind of
12 seem strange to me. But I just think that from an
13 individual chiropractor not associated with any
14 organization, that PACE or some non-biased organization
15 would be a better supplier for our continuing education
16 credits. Thank you.

17 MR. MacINTOSH: Thank you for your
18 comments. Squires.

19 LEWIS SQUIRES: There we go. Thank you,
20 Weston. I'm Dr. Lou Squires, S-q-u-i-r-e-s. I'm the
21 immediate past chairman of the board.

22 MR. MacINTOSH: (Inaudible).

23 THE REPORTER: I'm sorry, I didn't hear
24 you, Weston.

25 MR. MacINTOSH: I asked for him to spell

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1 his first name for the record as well.

2 THE REPORTER: Thank you.

3 LEWIS SQUIRES: Sorry, Weston. First
4 name Lewis, L-e-w-i-s, last name Squires, S-q-u-i-r-e-s.
5 I'm speaking in favor of these rule changes as a person
6 that has been on this board for eight years, appointed by
7 Governor Snyder at the time.

8 We have seen a lot of situations occur
9 within Michigan on the CE, and within the last two years
10 we have had an overabundance of CE credits turned in,
11 some positive, some negative, some outside our scope, and
12 some within our scope. It has been extremely challenging
13 for the doctors that review these CE credits to keep up
14 with all those situations that they're faced. I'm urging
15 the State to understand that the importance of doing all
16 this is to safeguard the public, but also to be able to
17 present the best educational seminars for CEs. This not
18 to criticize any of the CEs put on by other organizations
19 or universities, this is to help us in the process. That
20 doesn't mean that other organizations and universities
21 sponsored or entrepreneurs are going to not receive their
22 credits, this is just a starting point for this, this is
23 something that's vitally important on behalf of the Board
24 of Chiropractic to safeguard the public and to provide
25 quality educational situations for our doctors. I think

1 there's a little confusion going on with some of the
2 people that have spoke about exactly what the rules are
3 intended to do, so I just wanted to say that, and I do
4 support this. Thank you very much.

5 MR. MacINTOSH: Thanks for your comments.
6 Next I see Leighia Wells.

7 LEIGHIA WELLS: Hi. My name is Leighia
8 Wells, L-e-i-g-h-i-a, Wells, W-e-l-l-s. I'm a provider
9 in Portage, Michigan, and I've been a part of the MAC in
10 the past and enjoyed my time very much there.

11 I think the MAC does a very good job with
12 other endeavors, legislative, and also with supporting
13 changes in, governmental changes that are needed and with
14 legalized changes that we also need implemented. I
15 don't, however, agree with having the MAC be in charge of
16 continuing education. I think that is a conflict of
17 interest. I do appreciate that they want to help with
18 it, but I am concerned about what courses would be
19 automatically agreed to, and we're spending money on that
20 instead of other endeavors, and I think that that should
21 be separated and not combined into two.

22 Many times I do not attend the
23 conferences that occur at -- for the State for the MAC
24 because, or I only attend a few of classes that happen
25 because I don't agree with the information that's being

1 presented, and I don't necessarily agree with many of the
2 courses being presented on a very large scale, and so I
3 often take classes in other states and don't even get the
4 continuing education credits from Michigan applied
5 because these other organizations don't go through the
6 rigorous process to get it applied for Michigan because
7 if they only have me there, I'm not going to ask them to
8 make sure that that gets applied.

9 So I want to make sure that classes,
10 also, if they're off campus for a university, they should
11 automatically count just as much as if they're on campus.
12 I completely disagree with that rule. I saw that come up
13 a year or so ago and I couldn't even believe it, it makes
14 no sense to me that suddenly the same teachers that are
15 putting the presentation on, you know, down the street,
16 no longer is automatically in. That's more work for
17 whoever is approving these courses, so that should be
18 automatically taken care of.

19 I see no reason why we don't use PACE.
20 I've looked into other states, and that's what they're
21 using. That seems a legitimate way, an effective and
22 efficient way of completing some of these courses.

23 And I'm also curious, I started to do
24 some digging but it was very hard to find, is what are
25 other healthcare professional boards doing for continuing

1 education. Do they have a state-run organization like
2 we're considering, the MAC, in control of all of the
3 courses? I don't know the answer to that, but I want to
4 make sure that we're in alignment with what other
5 professions are doing in our State. If we are to be
6 considered legitimate, we need to make sure that we're in
7 alignment with all other health professions.

8 So in conclusion, I disagree with the MAC
9 being in charge, not because I don't think they're
10 capable, but I think there could be some bias, and I
11 think there is a conflict of interest, and I do think we
12 should consider other options. Obviously the State board
13 is having difficulty running through all of this
14 information for all of these submissions, but I think we
15 need another alternative, and I don't think it should be
16 the MAC unfortunately controlling this. And that's all I
17 have to say. Thank you.

18 MR. MacINTOSH: Thank you for your
19 comments. Any other comments at this time? Don Reno, go
20 ahead.

21 DONALD RENO: Yeah. This is a process.
22 What the State of Michigan came to when I was on the
23 board was the awareness that this was cumbersome indeed,
24 and with the multiplicity of the number of programs that
25 have come in, that is where the reason came in. And

1 Dr. Wells, your statement about PACE being a great entity
2 is not to say -- to take anything away from them, but the
3 structure in your state does not give any participation
4 because the requirement is that you as an individual
5 would have to pay for a representative to go to PACE and
6 the FCLB. With those dollars not being there, I think
7 it's unfair to shoulder the practitioners with that.

8 The MAC as an entity will not have the
9 ability to deny anything because there's a rule
10 structure, and the structure will hold every entity just
11 as accountable as the other, and as this is a good-faith
12 gesture, not a gesture, but act by the State of Michigan
13 to clarify something that became very, very cumbersome.
14 Volunteer individuals on the board don't see a dime or
15 get paid for the work that they do to show up in Lansing,
16 do the hard work behind the scenes, and then show up in
17 Lansing and ask for an approval of everybody who's shown
18 up here today to testify against the process. The
19 process has no conflicts in it. And I know there's
20 questions and it's cumbersome, but you just have to trust
21 in the fact that you've got a great group of people
22 currently on the board right now that have you and your
23 profession's best interest in mind.

24 MR. MacINTOSH: Thanks you. Any other
25 comments?

1 MARTIN BROWN: I have a comment.

2 MR. MacINTOSH: Garth Aamodt.

3 GARTH AAMODT: Yeah. Is it possible to
4 just ask a question so maybe some clarity can be added
5 here. And my main question -- again, this is Dr. Garth
6 Aamodt, G-a-r-t-h A-a-m-o-d-t. I'm not making a
7 statement, I'm just asking, is there clarity or a reason
8 can be explained by those who support this, like
9 Dr. Reno, about why the phrase of on-campus classes are
10 automatically approved if sponsored by a university, but
11 they're going to require going through the MAC, I assume,
12 if they're not on campus? Doesn't that add to the
13 burden? And if the goal is to remove the burden or
14 lessen the burden, why didn't that phraseology get
15 changed there? That's all I ask.

16 MR. MacINTOSH: Thank you. Do we have
17 any other comments?

18 MS. PRZYBYLO: Dr. Martin has a question,
19 or has a comment, Wes.

20 MR. MacINTOSH: Dr. Martin Brown, go
21 ahead.

22 MARTIN BROWN: The name is Martin Brown,
23 M-a-r-t-i-n B-r-o-w-n.

24 Robyn Peake had made a comment about
25 continuing ed that was offered online and questioned the
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1 validity of that. I just want to remind the board and
2 those attending that the board already approves up to 15
3 hours of online credits, and they're often accompanied
4 with quizzes and so on to ensure the validity of the
5 program, so it wouldn't be a change in terms of adding
6 the on-campus or off-campus or online automatic credit
7 approval to college courses.

8 Additionally, I did provide in written
9 version a detailed analysis of each of the providers and
10 a breakdown and did some statistical reporting in a
11 written document provided for your review, and
12 approximately one-third of the programs would fall into
13 that category and would drop off; in other words, of the
14 some 300 applications, would reduce it to some 200. In
15 fact, only two providers make up the vast majority of the
16 entire block of all of those courses. Eighty-seven
17 percent of those submitted courses that were reviewed and
18 approved are online courses, 13 percent are live courses,
19 only 40 courses out of the some 300. So if the board
20 opted for direct application for five or fewer
21 applications per sponsor and maintained a concurrent
22 option of application to PACE or whomever is chosen, then
23 the board's workload would decrease by over 90 percent,
24 they would only have reviewed 21 applications, fewer
25 applications than have been provided each year for the

1 past 6 years. So it's a reasonable thing to look at a
2 multiple course option in terms of approval where the
3 board could retain the option with a limit of up to five
4 applications and the overage could go to PACE as the
5 authority to review any multitude or quantity of courses.
6 So I've provided all the details and the breakdowns in my
7 written report that was sent by e-mail. If you have
8 questions, I'd be happy to review them as well.

9 MR. MacINTOSH: Thank you for your
10 comment. Are there any other comments? Okay. I'm not
11 seeing any other comments.

12 So if there are no other comments or
13 anyone else who would like to speak at this time, I
14 hereby declare the hearing closed. The record will
15 remain open until 5:00 o'clock p.m. for any other
16 comments you may wish to share about the proposed rules.
17 Thank you for attending.

18 (At 1:53 p.m., the public hearing concluded.)

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1 STATE OF MICHIGAN)
2)
3 COUNTY OF MACOMB)

4 I, Lori Anne Penn, certify that this
5 transcript consisting of 40 pages is a complete, true,
6 and correct record of the public hearing held in these
7 matters on Tuesday, January 19, 2021.

8 I further certify that I am not
9 responsible for any copies of this transcript not made
10 under my direction or control and bearing my original
11 signature.

12 I also certify that I am not a relative
13 or employee of or an attorney for a party; or a relative
14 or employee of an attorney for a party; or financially
15 interested in the action.

16 January 21, 2021

Lori Anne Penn

17 _____
18 Date

19 _____
20 Lori Anne Penn, CSR-1315
21 Notary Public, Macomb County, Michigan
22 My Commission Expires June 15, 2025
23
24
25