

From: [BPL-BoardSupport](#)
To: [Marks, Dena \(LARA\)](#)
Subject: FW: Upcoming Hearing Commentary
Date: Wednesday, November 17, 2021 7:12:44 AM

From: Doctor Cantwil <doccant1@aol.com>
Sent: Tuesday, November 16, 2021 9:53 PM
To: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Subject: Upcoming Hearing Commentary

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Dear LARA representatives:

I have been practicing dentistry for 33 years in the State of Michigan and I speak against the mandated Implicit Bias Training for licensure.

I believe that the overwhelming majority of dental health care providers provide care to their patients in a non-biased manner. Those that don't will not be changed by a mandated implicit bias course because such a course cannot change this type of character flaw. Patients would be better served by dentists dedicating this mandated time to improving clinical procedures in order to improve clinical outcomes. Most dentists I know, and I know many, do not allow such a bias to affect the recommendations and/or treatment of their patients. We are guided and sworn to abide by the American Dental Association Code of Ethics.

I feel that this mandate will ultimately propel negative attitudes towards those that insist on proclaiming their uniqueness, and want to be identified, and treated differently, because of their perceived uniqueness. This in turn forces and enhances bias rather than eliminating it.

We are professionals and it is also very insulting to be accused of needing this type of "therapy." We are not in the business of subscribing to absurd social narratives. We are in the business to care for our patients in a way that fulfills the ethical and spiritual guidelines which govern us. State imposed requirements, such as Implicit Bias Training are intrusive and burdensome for dental professionals.

Sincerely,

James K Cantwil DDS
Flushing, Michigan

From: Susan Moon <powerofprayer91@gmail.com>

Sent: Saturday, November 13, 2021 2:51 PM

To: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>

Subject: Public Hearing (MOAHR#2021-74 LR) Implicit Bias Revision Nov. 22,2021

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RE: Public Hearing November 22, 2021 General Rules (MOAHR #2021-74 LR)

IMPLICIT BIAS TRAINING REVISION

At a time when healthcare professionals are in short supply and overworked, I would have you reconsider the necessity of implicit bias training on all practioners every re-licensure. Additionally, there is scant research showing implicit bias training is effective beyond the academic institution. It seems unreasonable to mandate continually training for current healthcare providers in the area of implicit bias training when there is only suggestions and possible solutions that are unproven. Implicit Bias training was required on a regular basis since 2015 for the Minneapolis police and yet the death of George Floyd still occurred. Having a one time implicit bias training class to try and reveal unconscious bias could potentially be helpful for providers who are motivated to overcome these beliefs, but to require continual courses with unproven results is not time or cost effective. There are only two states in the U.S. that require this, MI and CA, most likely due to the paltry research regarding effectiveness beyond the academic school. Therefore, I would recommend that the implicit bias training stand as written in the current law with no revision requiring this training for relicensure or reregistration be added. The training for those categories would be **optional**.

Susan Moon

944 Geller Ct.

East Tawas MI 48730

From: [BPL-BoardSupport](#)
To: [Marks, Dena \(LARA\)](#)
Cc: [Przybylo, Kerry \(LARA\)](#)
Subject: FW: Comments - Public Health Code - General Rules – Rule Set 2021-74 LR
Date: Monday, November 22, 2021 4:34:27 PM
Attachments: [image003.png](#)
[image004.png](#)
[image005.png](#)
[image006.png](#)
[image007.png](#)
[image008.png](#)
[Proposed Rule PHC-General Ltr 112221.pdf](#)
Importance: High

From: Stacey Hettiger <SHettiger@msms.org>
Sent: Monday, November 22, 2021 4:20 PM
To: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Cc: Rebecca Blake <rblake@msms.org>; Benjamin Louagie <BLOUAGIE@msms.org>
Subject: Comments - Public Health Code - General Rules – Rule Set 2021-74 LR
Importance: High

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Please see attached comments from the Michigan State Medical Society regarding Public Health Code - General Rules – Rule Set 2021-74 LR. If you have any questions, please feel free to contact me.

Sincerely,

Stacey



Stacey P. Hettiger | Senior Director
Medical and Regulatory Policy
Michigan State Medical Society
517-336-5766 | shettiger@msms.org
www.msms.org



- » [MDPAC](#)
- » [MSMS Foundation](#)
- » [MSMS Physicians Insurance Agency](#)
- » [Physicians Review Organization](#)
- » [Professional Credential Verification Service, Inc.](#)
- » [Quantum Medical Concepts](#)

VIA email at BPL-BoardSupport@michigan.gov

November 22, 2021

Department of Licensing and Regulatory Affairs
Bureau of Professional Licensing– Boards and Committees Section
Attention: Policy Analyst
P.O. Box 30670, Lansing, MI 48909-8170

Re: Public Health Code - General Rules – Rule Set 2021-74 LR

Dear Policy Analyst:

I am writing on behalf of the Michigan State Medical Society (MSMS) regarding Public Health Code - General Rules - Rule Set 2021-74 LR. MSMS respectfully requests your consideration of an administrative amendment to R 338.7004 - Implicit Bias Training Standards. In addition to representing approximately 15,000 Michigan physicians and physicians-in-training of all specialties and practice settings, MSMS is accredited by the ACCME to provide CME training and is recognized by the ACCME to accredit 30 other locally based organizations that provide CME.

We are supportive of the efforts by the State of Michigan to raise awareness about the impact of implicit bias on patient-provider interactions, treatment decisions, treatment adherence, and patient health outcomes. Addressing health disparities and advancing health equity is a strategic priority of MSMS.

MSMS requests the following change:

- Amend Rule 4 (3)(d)(iii) to strike “interactive.”

Michigan licenses approximately 36,000 physicians. As written, 12,000 physicians (one third of licensed physicians) will need to participate in one hour of implicit bias training per year. As a physician education community, it will be difficult to assure enough live training options for this number of physicians. The same concerns are applicable for the 400,000 other health care professionals who are also required to fulfill this requirement.

Additionally, the pandemic brings additional safety concerns regarding regularly scheduled, in person conferences as well as the ability for physicians to schedule appropriate time to attend sessions during regularly scheduled work hours with their current workload.

For these reasons, MSMS respectfully requests the interactive component be eliminated to allow both in person and virtual programming without a live component as this new training requirement is rolled out in an expedited manner.

November 22, 2021

Department of Licensing and Regulatory Affairs

Bureau of Professional Licensing– Boards and Committees Section

Page 2

Thank you for the opportunity to comment. Should you have any questions regarding our recommended changes, MSMS would be happy to discuss further. Thank you for your consideration.

Sincerely,

A handwritten signature in black ink that reads "Julie L. Novak". The signature is written in a cursive style with a large initial 'J'.

Julie L. Novak

Chief Executive Officer

From: [BPL-BoardSupport](#)
To: [Marks, Dena \(LARA\)](#)
Subject: FW: Implicit Bias Training
Date: Tuesday, November 16, 2021 3:29:28 PM
Attachments: [image002.png](#)

I believe this goes to you.

Thank you,
Stephanie Wysack
Departmental Technician
Boards and Committees Section
Bureau of Professional Licensing
Michigan Department of Licensing and Regulatory Affairs
Phone: 517-241-7500
Email: BPL-BoardSupport@michigan.gov



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From: Milan Sata <milansata@gmail.com>
Sent: Tuesday, November 16, 2021 3:26 PM
To: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Subject: Implicit Bias Training

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To Whom It May Concern,

In regards to the new Implicit Bias Training being considered for re-licensure, I would like to say that I feel it is an overreach to require this of dentists. I have been practicing for 26 years and do not feel I have been biased towards anyone because of their race, religion, sexual orientation, or how they identify. In the past I have worked in areas that were primarily minorities and lower income. I have also worked with patients who were LBGT. Never once have I received a complaint on how they were treated or that I was somehow biased towards them. I understand the world is changing and you want to appear to be politically correct at every step of the way, however I feel this is not something that should be mandated to be re-licensed after 26 years of working and never once having a complaint. If you want to offer this as an elective towards our CE's then that is fine, but to require it is a complete overreach. There will always be some bad apples in any profession, but to add on to everyone's requirements when the majority are very ethical and treat patients objectively and professionally is not necessary.

Milan Sata DDS
810-694-0200
Grandblancdentalcenter.com

From: [Przybylo, Kerry \(LARA\)](#)
To: [Marks, Dena \(LARA\)](#)
Cc: [Wysack, Stephanie \(LARA\)](#)
Subject: FW: Public Hearing (MOAHR#2021-74 LR) Implicit Bias Revision Nov. 22,2021
Date: Monday, November 15, 2021 7:20:24 AM
Attachments: [image002.png](#)

Dena,
Here is a comment about the rules for the public hearing on Monday.

Kerry

From: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Sent: Monday, November 15, 2021 7:05 AM
To: Przybylo, Kerry (LARA) <PrzybyloK@michigan.gov>
Subject: FW: Public Hearing (MOAHR#2021-74 LR) Implicit Bias Revision Nov. 22,2021

Thank you,
Stephanie Wysack
Departmental Technician
Boards and Committees Section
Bureau of Professional Licensing
Michigan Department of Licensing and Regulatory Affairs
Phone: 517-241-7500
Email: BPL-BoardSupport@michigan.gov

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NOV 22 2021

November 16, 2021

DEPARTMENT OF LICENSING & REGULATORY AFFAIRS
BUREAU OF PROFESSIONAL LICENSING
ENFORCEMENT DIVISION

Department of Licensing and Regulatory Affairs
Bureau of Professional Licensing– Boards and Committees Section
Attention: Policy Analyst
P.O. Box 30670
Lansing, MI 48909-8170

RECEIVED

NOV 18 2021

LARA

Re: Request to change implicit bias requirement to once in a lifetime for dental professionals

To Department of Licensing and Regulatory affairs,

I would like to make a request to amend the public health code to change the Implicit Bias training of 3 hours required every license period for dental professionals to once in a lifetime. As Michigan dentists, not enough is going to change to warrant a requirement every 3 years to 3 hours of required CE. This places an undue burden on Michigan dentists and the list of required CE is getting long.

I did take the 3 hours session through the Michigan Dental Association. I am a Muslim American of Middle Eastern descent and while I do see the value in being aware and of being educated on implicit bias, I feel a once in a lifetime requirement, like the CE requirement for sex trafficking, should suffice.

Please consider amending the public health code to have the 3 hour Implicit bias training for dental professionals to be once in a lifetime and NOT every 3 year license period.

Thank you,

Niman Shukairy, DDS

Niman Shukairy, DDS
Mallory Still, DDS
Sirin Chaker, DDS

319 W Main St.
Flushing, MI 48433
810-659-7800
www.flushingdental.com



319 W. Main St., Flushing, MI 48433

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NOV 22 2021

DEPARTMENT OF LICENSING & REGULATORY AFFAIRS
BUREAU OF PROFESSIONAL LICENSING
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Department of Licensing and Regulatory Affairs
PO BOX 30670
Lansing, MI 48909-8170

48909-817070



From: [Przybylo, Kerry \(LARA\)](#)
To: [Marks, Dena \(LARA\)](#)
Cc: [Payne, LeAnn \(LARA\)](#)
Subject: FW: Public Health Code - General Rule (R. 338.7004): Implicit Bias Training Standards
Date: Monday, November 22, 2021 7:10:23 AM
Attachments: [HFHS Comment Letter LARA Implicit Bias Training FINAL.pdf](#)

Dena,
Forwarding the message below to you.

Kerry

From: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Sent: Friday, November 19, 2021 4:25 PM
To: Przybylo, Kerry (LARA) <PrzybyloK@michigan.gov>
Subject: FW: Public Health Code - General Rule (R. 338.7004): Implicit Bias Training Standards

Would this go to Wes?

LeAnn

From: Daugherty, Payton <pdaughe1@hfhs.org>
Sent: Friday, November 19, 2021 3:54 PM
To: BPL-BoardSupport <BPL-BoardSupport@michigan.gov>
Cc: Valade, Diane K. <DVALADE1@hfhs.org>
Subject: Public Health Code - General Rule (R. 338.7004): Implicit Bias Training Standards

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Good afternoon,

On behalf of Henry Ford Health System, thank you for the opportunity to submit comments on the LARA Implicit Bias Training Standards.

Sincerely,

Kimberlydawn Wisdom, M.D.



November 19, 2021

Attention: Policy Analyst
Michigan Department of Licensing and Regulatory Affairs
Bureau of Professional Licensing
Boards and Committees Section
P.O. Box 30670
Lansing, MI 48909-8170

Submitted via electronic mail to: BPL-BoardSupport@michigan.gov

Re: Public Health Code – General Rules (R. 338.7004): Implicit Bias Training Standards

Dear Boards and Committees Section Policy Analyst:

On behalf of Henry Ford Health System (Henry Ford), I want to thank you for the opportunity to comment on the Department of Licensing and Regulatory Affairs (LARA): Bureau of Professional Licensing rule "Public Health Code – General Rules" (R. 338.7004). Henry Ford has an extensive history of advancing diversity, equity, inclusion and social justice within our system and in the communities we serve; we developed and implemented an Unconscious Bias & Respectful Care training among our women's health services team members at our main hospital system in 2020-2021, and trained approximately 350 team members. This year, we have begun implementing unconscious bias training among all health system leaders; the sessions are ongoing. We believe that implicit (unconscious) bias training done well is an important step in teaching people how to increase awareness of bias and to manage biases, change behavior and reduce snap judgements about people's talents or character, often based on race and gender.

We are pleased to see the state recognize the importance of implicit bias training for healthcare professionals by requiring this training as part of licensure or registration. In general, we are supportive of the implicit bias training standards provided for in LARA's standards as set forth in R. 338.7004 but have one area of concern about the need for "live" training, which we note below.

About Henry Ford Health System

Henry Ford is a Michigan-based, not-for-profit corporation and one of the nation's largest integrated health care systems, with over 33,000 employees. Headquartered in Detroit, we have been committed to improving the health and wellbeing of the community for over 100 years. Our mission is to improve people's lives through excellence in the science and art of health care and healing. Henry Ford offers health care insurance and health care delivery across the continuum of care through a diverse network of facilities and healthcare professionals in Southeast Michigan (Metro Detroit) and South-Central Michigan (Jackson).

In the Detroit area, Henry Ford includes four acute-care hospitals, including our flagship, Henry Ford Hospital (HFH), a large academic hospital located within the city of Detroit; an inpatient psychiatric facility; and a network of outpatient medical facilities staffed by members of the Henry Ford Medical group (HFMG). HFMG is a salaried, multi-specialty group practice of some 1,900 physicians and researchers in more than 40 specialties from 60 countries across the globe. Henry Ford Allegiance Health (HFAH) has served the Jackson community since 1918. HFAH provides comprehensive, advanced inpatient and

outpatient care, and works with an integrated network of physicians, the Jackson Health Network, which serves more than 40 facilities.

Specific Comments on Implicit Bias Training Standards

Our concern with the final rule is with the acceptable modalities in which the training may take place, as listed in R. **338.7004, Rule 4: 3(d) i-iii**. The rule states that the implicit bias training must be provided in one of the three listed modalities:

- (d) Acceptable modalities of training include any of the following:*
 - (i) A teleconference or webinar that permits live synchronous interaction.*
 - (ii) A live presentation.*
 - (iii) Interactive online instruction.*

Further, on September 24, 2021, LARA released a set of Frequently Asked Questions for Implicit Bias Training that clarified that training should provide “meaningful engagement” that includes “opportunities for *interaction among participants and with the instructor.*”

Henry Ford believes that, at least in the short term, the requirement for a “live” interaction, in any of the three modes listed, will be a heavy lift for those organizations that will be offering the implicit bias training, at least during the first year of two of implementation, given the large volume of healthcare professionals who will need this training as part of continuing education requirements. These types of training sessions take a great deal of time and resources to plan, develop and implement at the level of excellence needed to ensure success. Once the training sessions are developed, organizations handling the training will need to estimate how many people will be needed to facilitate each training session and determine the number of sessions needed to accommodate all providers. Our efforts to use live, virtual sessions to train 350 women’s health services team members on unconscious bias required conducting 20 live virtual sessions over 3 months to ensure proper coverage was maintained for treating patients and to accommodate training facilitator’s schedules. Organizations that employ many healthcare professionals, such as Henry Ford, are likely to offer or oversee this training to ensure our providers are compliant. This may require the organization to hire and train new staff to handle this training - and may be constrained by the workforce shortage issue the healthcare industry faces.

We suggest that the requirement for “live” training be delayed so that organizations conducting the training have time to ramp up staffing resources and to not over-burden providers in meeting the new requirements. In the meantime, we suggest that the state allow interactive online instruction that does not require a “live” person to be present. Online video interactive instruction has been shown to be an effective tool in the teaching/learning process, and may be an optimal way to begin the roll-out of implicit bias training across the state.

Once again, on behalf of Henry Ford, I thank you for the opportunity to provide comments on the implicit bias training final rule implementation process.

Sincerely,



Kimberlydawn Wisdom, M.D., M.S.
Senior Vice President Community Health & Equity
Chief Wellness & Diversity Officer