



MICHIGAN OSTEOPATHIC ASSOCIATION

SPRING CONFERENCE MAY 18, 2025

MICHIGAN OSTEOPATHIC LICENSING REQUIREMENTS

E-PRESCRIBING REQUIREMENTS

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MICHIGAN OSTEOPATHIC LICENSING REQUIREMENTS

- Done once every 3 years.
- Online only: www.Michigan.gov/miplus
- Controlled substance license is optional.
- Will need 150 hours of CME (minimum 75 hours in category 1, etc.)

MICHIGAN OSTEOPATHIC LICENSURE REQUIREMENTS

1. Requirements for all applicants:
 - a. Controlled Substance License (apply at same time or following issuance).
 - i. Will need to have completed required training in opioids and controlled substances awareness training.
 - b. Criminal background check.
 - i. Not required if relicensing less than 3 years from expiration.

MICHIGAN OSTEOPATHIC LICENSURE REQUIREMENTS

- c. Answer Good Moral Character Questions.
 - i. Provide documentation and explanation if you answer “yes”.
- d. Complete 150 hours of CME as required including:
 - i. Complete one-time human trafficking training.
 - ii. Complete 2 hours of implicit bias training.
 - iii. Within the preceding 5 years.

MICHIGAN OSTEOPATHIC LICENSURE REQUIREMENTS

- e. Provide Social Security Number.
 - i. If exempt/do not have one, provide the SSN Affidavit Form.
- f. Provide verification of licensure from the licensing agency of any state or country you hold or ever held a license.
 - i. Verification must show that disciplinary proceedings are not pending and no sanctions are currently in effect.

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- g. Provide Educational Information.
- h. List Hospital Affiliations (i.e., employee, independent contractor, have privileges).
- i. Demonstrate a working knowledge of the English language.
 - i. Medical school was taught in English.
 - ii. 60 college level credits at an English-speaking school.
 - iii. Passing score on an approved English proficiency exam.
- j) Pay the required fee(s).

MICHIGAN OSTEOPATHIC LICENSURE REQUIREMENTS

2. Licensure By Exam – Additional Requirements
 - a. Verification of COMLEX passing scores submitted directly to LARA from the National Board of Osteopathic Medical Examiners.
 - b. Official transcripts confirming award of a degree in osteopathic medicine submitted directly to LARA by an approved school of osteopathic medicine.
 - c. Certification of 1-year approved postgraduate clinical training. A Certification of Completion of Post Graduate Training form must be submitted directly by the medical director or superintendent of the program.

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3. Licensure by Endorsement – Additional Requirements.
 - a. Licensed in another state or province of Canada for 5 years or more:
 - i. Submit verification of completion of the educational requirements of the other state or province of Canada.

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- b. Licensed in another state or province of Canada less than 5 years:
 - i. Submit verification of completion of the educational requirements of the other state or province of Canada.
 - ii. Verification of COMLEX passing scores submitted directly to LARA from the National Board of Osteopathic Medical Examiners.
 - iii. Certification of 1-year approved postgraduate clinical training. A Certification of Completion of Post Graduate Training form must be submitted directly by the medical director or superintendent of the program.

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4. Relicensure (i.e. previous license lapsed and was not renewed within 60 days of expiration).
 - a. Select “Modification” next to your license number on the online application to start the relicensure process.
 - b. All applicants for relicensure must submit proof of accumulating at least 150 continuing education hours in the previous 3 years (including 1 hour in medical ethics, 3 hours in pain and symptom management with at least 1 of these 3 hours in controlled substances prescribing).

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- c. Applicants whose license lapsed more than 3 but less than 5 years previously, must also do one of the following:
 - i. Submit proof of current licensure in good standing in another state or province of Canada.
 - ii. Complete one of the following within the 3 previous years:
 - a) Passage of the COMVEX exam.
 - b) Complete an approved postgraduate training program.
 - c) Complete a re-entry program that is a member of the Coalition for Physician Enhancement or affiliated with and approved osteopathic medical school.

MICHIGAN OSTEOPATHIC LICENSURE REQUIREMENTS

- d. Applicants whose license lapsed more than 5 years previously, must also complete one of the following requirements:
 - i. Submit proof of current licensure in good standing in another state.
 - ii. Complete both of the following within the previous 3 years:
 - a) Passage of the COMVEX offered by NBOME.
 - b) One of the following training options:
 - 1) an approved post-graduate training program.
 - 2) a physician re-entry program that is an organization member of the CPE.
 - 3) Completion of a re-entry program that is a member of the Coalition for Physician Enhancement or affiliated with and approved osteopathic medical school.

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5. Volunteer medical license.
 - a. No expectation of payment of any kind.
 - b. Active license has lapsed and was in good standing.
 - c. Meet CME requirement:
 - i. Less than 3 years since lapse – none.
 - ii. 3 years or more since lapse – 2/3 of requirements for active license.

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- d. Benefits of a volunteer license.
 - i. Free
 - ii. Immunity from malpractice claims if services were provided:
 - a) At a facility that provides at least 75% of its care annually to “medically indigent individuals.”
 - b) For no consideration; and
 - c) Without gross negligence.

ELECTRONIC PRESCRIBING REQUIREMENTS

1. Enforcement of the Michigan requirements began January 1, 2023 (to coincide with the Medicare requirement).
2. Prescribers are now required to electronically transmit prescriptions for drugs, including controlled substances, directly to a pharmacy of the patient's choice.
3. The transmission must comply with HIPAA security standards and the information transmitted must include:

ELECTRONIC PRESCRIBING REQUIREMENTS

- a. Prescriber name, address and telephone number.
- b. Patient name, except as otherwise authorized.
- c. Electronic signature or another identifier of the prescriber.
- d. Time and date of the transmission.
- e. Identity of the pharmacy intended to receive the transmission.
- f. Other information required by Michigan or federal law.

ELECTRONIC PRESCRIBING REQUIREMENTS

4. The electronic form used for transmission cannot include “dispense as written” or “d.a.w.” as a default setting.
5. A number of exceptions are provided for prescriptions:
 - a. Issued by a veterinarian.
 - b. Issued when electronic transmission is unavailable due to temporary technological or electrical failure.

ELECTRONIC PRESCRIBING REQUIREMENTS

- c. Issued by prescribers who have been granted a waiver.
- d. When the prescriber reasonably believes it will be impractical for a patient to obtain the drug in a timely manner and the delay will adversely affect the patient's medical condition. The prescriber must document the specific reasons for the belief that the patient's medical condition will be adversely affected.
- e. Issued orally when allowed under Michigan law.
- f. Issued to be dispensed outside of Michigan.

ELECTRONIC PRESCRIBING REQUIREMENTS

- g. Issued by a prescriber located outside of Michigan to be dispensed by a pharmacy located inside of Michigan.
- h. Issued, dispensed and used exclusively in the same health care facility (e.g. hospital, hospice, dialysis treatment clinic, skilled nursing facility, surgery center, etc.).
- i. Containing content not supported by the National Council for prescription Drug Programs Prescriber/Pharmacist Interface SCRIPT Standard.

ELECTRONIC PRESCRIBING REQUIREMENTS

- J. Requiring content required by FDA standards that cannot be transmitted electronically.
- K. Issued under circumstances in which the name of the patient is not required to be included.
- L. Issued under a research protocol.
- M. Dispensed by a dispensing prescriber.
- N. Issued for dialysis-related drug that is administered incident to home-based dialysis treatment.

ELECTRONIC PRESCRIBING REQUIREMENTS

6. If you have received a waiver from CMS of the Medicare electronic prescribing requirement, LARA, upon application, is required to grant a waiver of the Michigan electronic prescribing requirements.
7. Prescribers without a CMS waiver may apply to LARA for a waiver of the Michigan electronic prescribing requirements by filing an application and providing:
 - a. Evidence of economic hardship or technological limitations outside your control.
 - b. Evidence that you prescribe from a non-profit charitable medical clinic.
 - c. An attestation of exceptional circumstances, e.g.:
 - i. prescribing fewer than 100 controlled substance prescriptions in a year.
 - ii. your intention to cease practicing within 12 months.
 - iii. you have limited your practice due to illness or other unforeseen event.



Bureau of Professional Licensing
PO Box 30670 • Lansing, MI 48909
Telephone: (517) 335-0918
www.michigan.gov/bpl
BPLHelp@michigan.gov

**APPLICATION FOR WAIVER OF ELECTRONIC
PRESCRIBING REQUIREMENTS**

Authority: 1978 PA 368

This form should be used by a prescriber requesting a waiver from the mandate to electronically transmit prescriptions, who cannot meet the requirements of [MCL 333.17754a\(1\) or \(2\)](#), and who does not meet one of the other exceptions in [MCL 333.17754a\(5\)](#). A waiver is valid for 2 years and is applicable to the specific circumstances included in this application. A waiver may be renewed by application to the department. You must provide the information described below with your application. For more information about the waiver provision, please see [MCL 333.17754a\(7\)](#).

The completed form and supporting documentation may be emailed to BPLData@michigan.gov or mailed to PO Box 30670, Lansing, MI 48909.

Applicant's Legal First Name		Legal Middle Name	Legal Last Name
10-Digit MI Permanent ID/License Number		Date of Birth	
<p>I am requesting waiver of the electronic prescription requirements in MCL 333.17754a for the following types of prescriptions. Check all that apply.</p> <p><input type="checkbox"/> Non-controlled substance prescriptions</p> <p><input type="checkbox"/> Controlled substance prescriptions</p>			
<p>Have you received a waiver of the Medicare requirement for electronic transmission of controlled substances prescriptions from the federal Centers for Medicare and Medicaid Services? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p>If you have received a waiver of the Medicare requirement, attach documentation showing you have received the waiver.</p>			
<p>If you have NOT received a waiver of the Medicare requirement, provide one or more of the following with your application:</p> <ul style="list-style-type: none"> • Evidence of economic hardship or technological limitations that are not within your control. • Evidence that you issue prescriptions from a non-profit charitable medical clinic. • An attestation to exceptional circumstances including, but not limited to: <ul style="list-style-type: none"> ◦ Prescribing fewer than 100 controlled substance prescriptions per year: <ul style="list-style-type: none"> • Note, this circumstance alone can only lead to the waiving of the electronic prescribing mandate as it relates to controlled substance prescriptions. ◦ Intention to cease practice within the next twelve months. ◦ Limited practice due to an illness or other unforeseen event. 			
<p>I attest that I am unable to meet the requirements of MCL 333.17754a(1) or (2). I further attest that the statements in this application are true and complete, including any and all attached documents and information provided as part of this application. I understand that any omitted statement, misrepresentation, or fraud of any of the documents and information provided on or as part of this application may be cause for denial of my application, disciplinary action, and/or may be punishable by law.</p>			
Signature		Date	

LARA/BPL-EPRESCRIBEWAIVER (Rev. 11/21)

The Department of Licensing and Regulatory Affairs will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

Questions