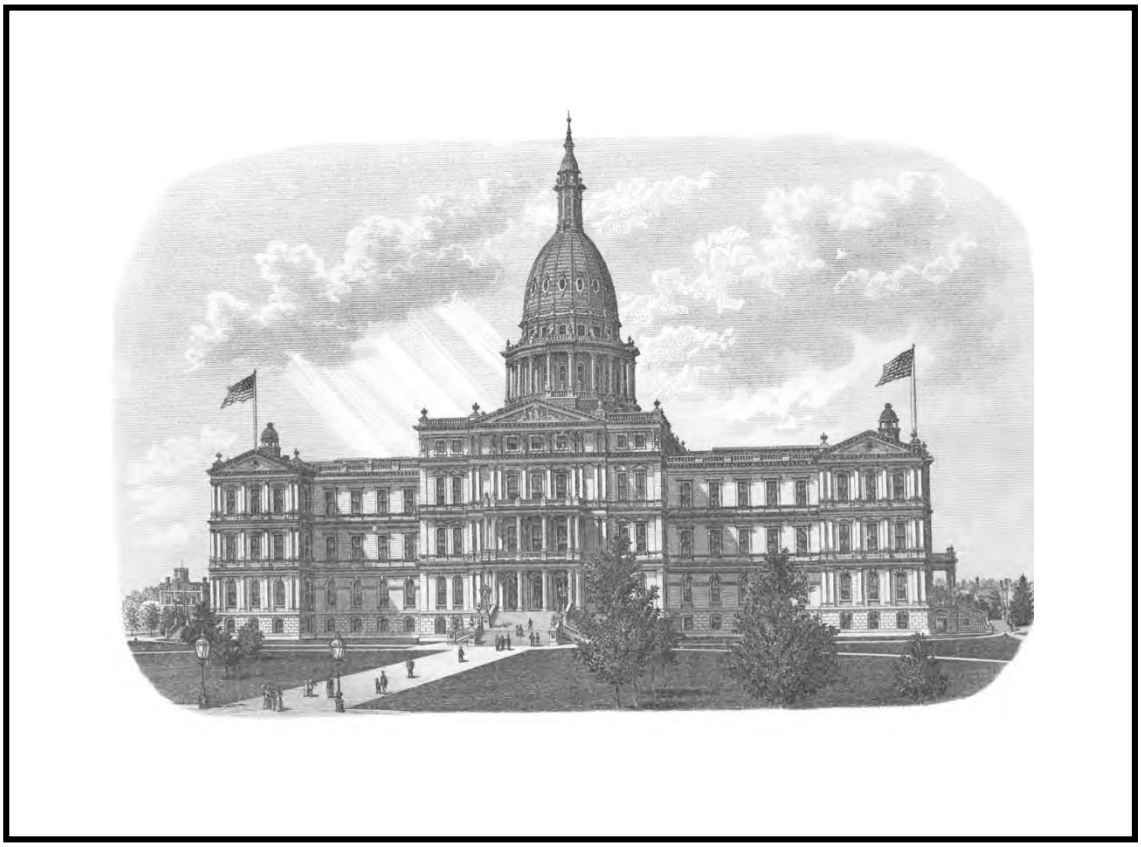
Michigan Register

Issue No. 18 – 2025 (Published October 15, 2025)



GRAPHIC IMAGES IN THE

MICHIGAN REGISTER

COVER DRAWING

Michigan State Capitol:

This image, with flags flying to indicate that both chambers of the legislature are in session, may have originated as an etching based on a drawing or a photograph. The artist is unknown. The drawing predates the placement of the statue of Austin T. Blair on the capitol grounds in 1898.

(Michigan State Archives)

PAGE GRAPHICS

Capitol Dome:

The architectural rendering of the Michigan State Capitol's dome is the work of Elijah E. Myers, the building's renowned architect. Myers inked the rendering on linen in late 1871 or early 1872. Myers' fine draftsmanship, the hallmark of his work, is clearly evident.

Because of their size, few architectural renderings of the 19th century have survived. Michigan is fortunate that many of Myers' designs for the Capitol were found in the building's attic in the 1950's. As part of the state's 1987 sesquicentennial celebration, they were conserved and deposited in the Michigan State Archives.

(Michigan State Archives)

East Elevation of the Michigan State Capitol:

When Myers' drawings were discovered in the 1950's, this view of the Capitol – the one most familiar to Michigan citizens – was missing. During the building's recent restoration (1989-1992), this drawing was commissioned to recreate the architect's original rendering of the east (front) elevation.

(Michigan Capitol Committee)

Michigan Register

Published pursuant to § 24.208 of
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Issue No. 18— 2025
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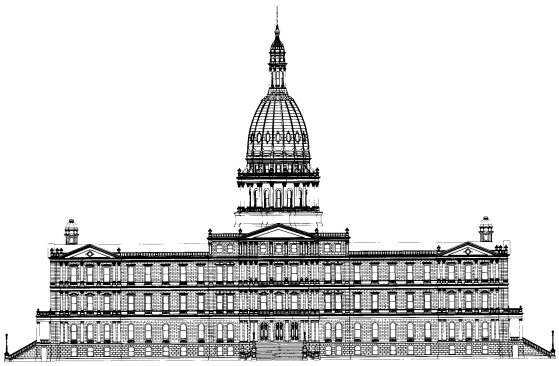
Katie Wienczewski, Administrative Rules Division Director, Michigan Office of Administrative Hearings and Rules; Deidre O'Berry, Administrative Rules Specialist for Operations and Publications.

Gretchen Whitmer, Governor



Garlin Gilchrist, Lieutenant Governor

PREFACE

PUBLICATION AND CONTENTS OF THE MICHIGAN REGISTER

The Michigan Office of Administrative Hearings and Rules publishes the *Michigan Register*.

While several statutory provisions address the publication and contents of the *Michigan Register*, two are of particular importance.

24.208 Michigan register; publication; cumulative index; contents; public subscription; fee; synopsis of proposed rule or guideline; transmitting copies to office of regulatory reform.

Sec. 8.

(1) The office of regulatory reform shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:

(a) Executive orders and executive reorganization orders.

(b) On a cumulative basis, the numbers and subject matter of the enrolled senate and house bills signed into law by the governor during the calendar year and the corresponding public act numbers.

(c) On a cumulative basis, the numbers and subject matter of the enrolled senate and house bills vetoed by the governor during the calendar year.

(d) Proposed administrative rules.

(e) Notices of public hearings on proposed administrative rules.

(f) Administrative rules filed with the secretary of state.

(g) Emergency rules filed with the secretary of state.

(h) Notice of proposed and adopted agency guidelines.

(i) Other official information considered necessary or appropriate by the office of regulatory reform.

(j) Attorney general opinions.

(k) All of the items listed in section 7(m) after final approval by the certificate of need commission under section 22215 of the public health code, 1978 PA 368, MCL 333.22215.

(2) The office of regulatory reform shall publish a cumulative index for the Michigan register.

(3) The Michigan register shall be available for public subscription at a fee reasonably calculated to cover publication and distribution costs.

(4) If publication of an agency's proposed rule or guideline or an item described in subsection (1)(k) would be unreasonably expensive or lengthy, the office of regulatory reform may publish a brief synopsis of the proposed rule or guideline or item described in subsection (1)(k), including information on how to obtain a complete copy of the proposed rule or guideline or item described in subsection (1)(k) from the agency at no cost.

(5) An agency shall electronically transmit a copy of the proposed rules and notice of public hearing to the office of regulatory reform for publication in the Michigan register.

4.1203 Michigan register fund; creation; administration; expenditures; disposition of money received from sale of Michigan register and amounts paid by state agencies; use of fund; price of Michigan register; availability of text on internet; copyright or other proprietary interest; fee prohibited; definition.

Sec. 203.

(1) The Michigan register fund is created in the state treasury and shall be administered by the office of regulatory reform. The fund shall be expended only as provided in this section.

(2) The money received from the sale of the Michigan register, along with those amounts paid by state agencies pursuant to section 57 of the administrative procedures act of 1969, 1969 PA 306, MCL 24.257, shall be deposited with the state treasurer and credited to the Michigan register fund.

(3) The Michigan register fund shall be used to pay the costs of preparing, printing, and distributing the Michigan register.

(4) The department of management and budget shall sell copies of the Michigan register at a price determined by the office of regulatory reform not to exceed the cost of preparation, printing, and distribution.

(5) Notwithstanding section 204, beginning January 1, 2001, the office of regulatory reform shall make the text of the Michigan register available to the public on the internet.

(6) The information described in subsection (5) that is maintained by the office of regulatory reform shall be made available in the shortest feasible time after the information is available. The information described in subsection (5) that is not maintained by the office of regulatory reform shall be made available in the shortest feasible time after it is made available to the office of regulatory reform.

(7) Subsection (5) does not alter or relinquish any copyright or other proprietary interest or entitlement of this state relating to any of the information made available under subsection (5).

(8) The office of regulatory reform shall not charge a fee for providing the Michigan register on the internet as provided in subsection (5).

(9) As used in this section, "Michigan register" means that term as defined in section 5 of the administrative procedures act of 1969, 1969 PA 306, MCL 24.205.

CITATION TO THE MICHIGAN REGISTER

The *Michigan Register* is cited by year and issue number. For example, 2025 MR 1 refers to the year of issue (2025) and the issue number (1).

CLOSING DATES AND PUBLICATION SCHEDULE

The deadlines for submitting documents to the Michigan Office of Administrative Hearings and Rules for publication in the *Michigan Register* are the first and fifteenth days of each calendar month, unless the submission day falls on a Saturday, Sunday, or legal holiday, in which event the deadline is extended to include the next day which is not a Saturday, Sunday, or legal holiday. Documents filed or received after 5:00 p.m. on the closing date of a filing period will appear in the succeeding issue of the *Michigan Register*.

The Michigan Office of Administrative Hearings and Rules is not responsible for the editing and proofreading of documents submitted for publication.

Documents submitted for publication should be delivered or mailed in an electronic format to the following address: MICHIGAN REGISTER, Michigan Office of Administrative Hearings and Rules, Ottawa Building – Second Floor, 611 W. Ottawa Street, Lansing, MI 48933.

RELATIONSHIP TO THE MICHIGAN ADMINISTRATIVE CODE

The *Michigan Administrative Code* (1979 edition), which contains all permanent administrative rules in effect as of December 1979, was, during the period 1980-83, updated each calendar quarter with the publication of a paperback supplement. An annual supplement contained those permanent rules, which had appeared in the 4 quarterly supplements covering that year.

Quarterly supplements to the Code were discontinued in January 1984, and replaced by the monthly publication of permanent rules and emergency rules in the *Michigan Register*. Annual supplements have included the full text of those permanent rules that appear in the twelve monthly issues of the *Register* during a given calendar year. Emergency rules published in an issue of the *Register* are noted in the annual supplement to the Code.

SUBSCRIPTIONS AND DISTRIBUTION

The *Michigan Register*, a publication of the State of Michigan, is available for public subscription at a cost of $400.00 per year. Submit subscription requests to: Michigan Office of Administrative Hearings and Rules, Ottawa Building –Second Floor, 611 W. Ottawa Street, Lansing, MI 48933. Checks Payable: State of Michigan. Any questions should be directed to the Michigan Office of Administrative Hearings and Rules (517) 335-2484.

INTERNET ACCESS

The *Michigan Register* can be viewed free of charge on the website of the Michigan Office of Administrative Hearings and Rules – Administrative Rules Division: www.michigan.gov/ard.

Issue 2000-3 and all subsequent editions of the *Michigan Register* can be viewed on the Michigan Office of Administrative Hearings and Rules website. The electronic version of the *Register* can be navigated using the blue highlighted links found in the Contents section. Clicking on a highlighted title will take the reader to related text, clicking on a highlighted header above the text will return the reader to the Contents section.

Executive Director,
Michigan Office of Administrative Hearings and Rules

2025 PUBLICATION SCHEDULE

Issue No.	Closing Date for Filing or Submission Of Documents (5 p.m.)	Publication Date
1	January 1	February 1
2	January 15	February 15
3	February 1	March 1
4	February 15	March 15
5	March 1	April 1
6	March 15	April 15
7	April 1	May 1
8	April 15	May 15
9	May 1	June 1
10	May 15	June 15
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13	July 1	August 1
14	July 15	August 15
15	August 1	September 1
16	August 15	September 15
17	September 1	October 1
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FILED WITH THE SECRETARY OF STATE

MCL 24.208 states in part:

"Sec. 8. (1) The Office of Regulatory Reform shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:

* * *

(f) Administrative rules filed with the secretary of state."

ADMINISTRATIVE RULES

DEPARTMENT OF STATE

ELECTIONS & CAMPAIGN FINANCE

ELECTRONIC RETURN OF ABSENT VOTER BALLOTS BY ELIGIBLE VOTERS

Filed with the secretary of state on September 11, 2025

These rules become effective immediately after filing with the secretary of state unless adopted under section 33, 44, or 45a(9) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.233, 24.244, or 24.245a. Rules adopted under these sections become effective 7 days after filing with the secretary of state.

(By authority conferred on the secretary of state by section 759a of the Michigan election law, 1954 PA 116, MCL 168.759a)

R 168.101, R 168.102, R 168.103, R 168.104, R 168.105, R 168.106, R 168.107, R 168.108, R 168.109, R 168.110, R 168.111, R 168.112, R 168.113, and R 168.114 are added to the Michigan Administrative Code, as follows:

R 168.101 Definitions.

Rule 1. (1) As used in these rules:

(a) "Act" means the Michigan election law, 1954 PA 116, MCL 168.1 to 168.992.

(b) "Clerk" means a city or township clerk, the clerk's deputy clerk, or a sworn member of the clerk's staff, including appointed election inspectors, assisting with the electronic return program.

(c) "Data" means verifying information about the voter's identity, the voted ballot, timestamps, notifications sent from the portal, and other records or information.

(d) "Department" means the department of state.

(e) "Electronic return identity verification" means the United States Department of Defense verified electronic signature as defined in section 18a of the act, MCL 168.18a, or other forms of identity verification authorized by statute or court order for purposes of electronic return.

(f) "Electronic return program" means use of the portal by voters to either only electronically receive ballots or to both electronically receive ballots and electronically return voted ballots.

(g) "Eligible voter" means "eligible member" as defined in section 759a of the act, MCL 168.759a, and other individuals authorized by statute or court order to electronically return a voted ballot.

(h) "Portal" means the secure online system used to electronically send ballots, ballot instructions, and required certification to a voter, and to electronically return to the clerk voted ballots and signed certifications from eligible voters.

(i) "Secretary of state's duly authorized agent" includes the bureau of elections, other necessary department staff, county clerks or the county clerk's designees, and relevant department of technology, management, and budget staff as determined by the director of elections.

(j) "UOCAVA voter" means an absent uniformed services voter or overseas voter who receives specified registration and absentee voting protections under the uniformed and overseas citizens absentee voting act, Public Law 99-410; the military and overseas voter empowerment act, Public Law 111-84 ; and corresponding state law provisions under the act.

(k) "Verified user" means a clerk or a clerk's designee responsible for electronically delivering ballots and receiving ballots through the portal, an authorized agent of the secretary of state, or a voter authorized to electronically receive or electronically receive and return a ballot by law.

(2) Unless otherwise defined in these rules, a term defined in the act has the same meaning when used in these rules.

R 168.102 Electronic delivery of ballots.

Rule 2. (1) Ballots must be transmitted through the portal to all eligible voters requesting to receive their ballot electronically.

(2) The portal may allow for delivery of ballots electronically to UOCAVA voters who are ineligible to return their ballots electronically but who request electronic delivery.

(3) Unless a different delivery preference is indicated, a voter who provides their email address on their absentee ballot application is presumed to request electronic delivery.

R 168.103 Clerk and administrator access to portal and identity verification.

Rule 3. (1) Clerks who have voters that may access the portal shall also have access to the portal and complete the security verification required by the department to enter the portal.

(2) The secretary of state's duly authorized agents shall have access to the portal and complete the security verification required by the department to enter the portal.

(3) The secretary of state's duly authorized agents may allow access to the portal's vendor, as specified by the executed contract.

R 168.104 Clerk responsibility to deliver ballots.

Rule 4. (1) All ballots must be transmitted not less than 45 days before an election through the portal to every eligible voter who requested electronic delivery of their ballot.

(2) All ballots must be transmitted not less than 45 days before an election through the portal to every UOCAVA voter who is able to receive a ballot through the portal and requested electronic delivery of their ballot.

(3) If the clerk does not electronically transmit the ballots to every voter identified under subrules (1) and (2) of this rule not less than 45 days before an election, the bureau of elections shall contact the clerk and may designate an authorized agent of the secretary of state to transmit the ballot to the voter.

(4) The reporting requirements under section 759a of the act, MCL 168.759a, apply to ballots that are electronically transmitted to voters using the portal.

(5) Delivery of ballots to additional voters authorized under a future statutory change or court order is governed by the authorizing legal authority.

R 168.105 Participation in electronic return.

Rule 5. (1) To participate in the electronic return program, an eligible voter shall elect to electronically receive their ballot and sign the voter application so the eligible voter's identity can be verified, as provided below:

(a) If the eligible voter is using the federal post card application, include the electronic return identity verification as indicated in the state-specific instructions.

(b) If the eligible voter is using the Michigan absent voter ballot application, include the electronic return identity verification as indicated on the application.

(c) If the eligible voter does not sign their absentee voter ballot application with their electronic return identity verification, they may still participate in the electronic return program if the electronic return identity verification is provided to the clerk not later than 2 p.m. on the Saturday before the election, as specified in section 759a(10) of the act, MCL 168.759a.

(d) As authorized under a future statutory change or court order.

(2) An eligible voter shall make this request annually.

(3) The waiver of the constitutional right to a secret ballot contemplated by section 759a(8) of the act, MCL 168.759a, applies to voters who participate in the electronic return program to the extent that the secrecy of the absent voter ballot may be compromised during the duplication process.

R 168.106 Voter access to the portal; electronic return of ballot.

Rule 6. (1) All eligible voters who have elected to electronically receive their ballot are able to access the portal when their ballot is available and shall receive an electronic notification when their ballot is ready.

(2) UOCAVA voters who are not eligible voters but receive their ballot electronically through the portal shall receive an electronic notification when their ballot is ready and are instructed to print their ballot and return it by mail.

(3) Eligible voters are instructed to vote their ballot in the portal and electronically return the ballot. To electronically return a voted ballot, the eligible voter shall sign the certification with their electronic return identity verification.

(4) Eligible voters shall receive electronic notifications from the portal reminding them to vote their ballot and return it before the close of polls in the time zone where they are registered to vote.

(5) Eligible voters shall return their ballot through the portal by the close of polls in the time zone where they are registered to vote for their ballot to be considered timely received.

(6) Eligible voters shall receive electronic notifications from the portal after the occurrence of any of the events in section 764c(2) of the act, MCL 168.764c, in satisfaction of that section's requirements.

(7) Other voters who become eligible under a future statutory change or court order are instructed to submit required electronic return identity verification on the certification to electronically return their ballot according to the law and receive all required electronic notifications.

R 168.107 Voter identity verification for electronic return program.

Rule 7. (1) The identity of an eligible voter is verified at the following times:

(a) When the eligible voter completes and submits an absent voter ballot application. The absent voter ballot application includes both the eligible voter's signature on file and the eligible voter's electronic return identity verification. When the eligible voter is an eligible member, the electronic return identity verification included is the eligible voter's United States Department of Defense verified electronic signature.

(b) When the eligible voter completes the certification that is submitted with their voted ballot to electronically return the ballot. The certification is completed by attaching the eligible voter's electronic return identity verification.

(2) The identity of any additional voters who participate in the electronic return program under a future statutory change or court order must be verified as required by law.

R 168.108 Clerk verification of voter identity on electronically returned ballots; processing of electronically returned ballots.

Rule 8. (1) The clerk shall comply with absent voter ballot return timelines and procedures set forth by sections 765 and 765a of the act, MCL 168.765 and 168.765a, as much as practicable, and do a final check for returned ballots in the portal at 8 p.m. on Election Day.

(2) The electronic return identity verification on the certification included with an electronically returned ballot is substituted for the signature on an absent voter ballot return envelope.

(3) The clerk shall examine the electronic return identity verification included on the certification and verify that the electronic return identity verification matches the electronic return identity verification on the voter's absent voter ballot application or other record as provided under R 168.105(1)(c).

(4) If the electronic return identity verification does not match, the clerk shall reject the ballot, notify the voter, and provide instructions on how to cure, following as near as is practicable the provisions of section 766a of the act, MCL 168.766a.

(5) If the electronic return identity verification is verified by matching it to the electronic return identity verification submitted on the voter's absent voter ballot application or other record on file in the clerk's office, the clerk shall accept the ballot.

(6) Accepted ballots must be tabulated as provided under section 759a(7) of the act, MCL 168.759a.

(7) Normal ballot storage and retention procedures apply.

R 168.109 Confidential voter information.

Rule 9. In the same manner as information protected under section 509gg of the act, MCL 168.509gg, and the freedom of information act, 1976 PA 442, MCL 15.231 to 15.246, the clerk shall maintain the confidentiality of a voter's United States Department of Defense verified electronic signature by taking all reasonable steps to prevent its disclosure.

R 168.110 Data retention.

Rule 10. All data in the portal is retained, to the extent required by law, in accordance with this state's records retention and disposal schedule.

R 168.111 Public inspection of portal prohibited.

Rule 11. (1) Except as provided in subrule (3) of this rule, only verified users of the portal may view the portal and any data in the portal.

(2) Except as provided in subrule (3) of this rule, verified users shall not provide access to the portal or any of its data to another individual who is not a verified user.

(3) As used in this rule, any individual assisting an eligible voter who requires assistance to vote their ballot as allowed under section 764a of the act, MCL 168.764a, may access and view the portal as necessary to assist the voter.

R 168.112 Absent voter procedures.

Rule 12. Except where superseded by these rules, the procedures provided for absent voters in the act also apply to absent voters who participate in the electronic return program.

R 168.113 Portal administration.

Rule 13. The department shall maintain the portal for electronic return of absent voter ballots by eligible voters and utilize security features determined appropriate by the secretary of state or the department of technology, management, and budget to prevent unauthorized access to data or information and to ensure that a user attempting to access the portal is an individual.

R 168.114 Construction.

Rule 14. These rules must be liberally construed in favor of voters' rights and not be read to limit participation in the electronic return program if access to additional voters is authorized by future statute or court order.

ADMINISTRATIVE RULES

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

DIRECTOR'S OFFICE

LICENSED MIDWIFERY

Filed with the secretary of state on October 2, 2025

These rules become effective immediately after filing with the secretary of state unless adopted under section 33, 44, or 45a(9) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.233, 24.244, or 24.245a. Rules adopted under these sections become effective 7 days after filing with the secretary of state.

(By authority conferred on the director of the department of licensing and regulatory affairs by sections 16145, 16148, 16186, 16201, 16204, 16287, 17105, 17107, 17111, 17112, and 17117 of the public health code, 1978 PA 368, MCL 333.16145, 333.16148, 333.16186, 333.16201, 333.16204, 333.16287, 333.17105, 333.17107, 333.17111, 333.17112, and 333.17117, and Executive Reorganization Order Nos. 1991-9, 1996-2, 2003-1, and 2011-4, MCL 338.3501, 445.2001, 445.2011, and 445.2030)

R 338.17101, R 338.17111, R 338.17113, R 338.17115, R 338.17121, R 338.17122, R 338.17123, R 338.17125, R 338.17131, R 338.17132, R 338.17137, R 338.17138, and R 338.17141 of the Michigan Administrative Code are amended, and R 338.17114 and R 338.17139 are added, as follows:

PART 1. GENERAL PROVISIONS

R 338.17101 Definitions.

Rule 101. (1) As used in these rules:

(a) "Appropriate health professional" means an individual licensed, registered, or otherwise authorized to engage in a health profession under article 15 of the code, MCL 333.16101 to 333.18838, who is referred to, consulted with, or collaborates with a licensed midwife.

(b) "Board" means the Michigan board of licensed midwifery created in section 17113 of the code, MCL 333.17113.

(c) "Code" means the public health code, 1978 PA 368, MCL 333.1101 to 333.25211.

(d) "Continuing education hour" means the cumulative number of program minutes divided by 60. If the fractional part of an hour is 55 minutes or more, it counts as 1 hour. Any portion of an hour between 30 and 54 minutes counts as half of an hour. Any part of an hour less than 30 minutes will not be counted. Breaks are not counted.

(e) "CPM" means a certified professional midwife who meets the standards for certification set by the North American Registry of Midwives.

(f) "Department" means the department of licensing and regulatory affairs.

(g) "MEAC" means the Midwifery Education Accreditation Council.

(h) "NARM" means the North American Registry of Midwives.

(i) “NCCA” means the National Commission for Certifying Agencies.

(j) “Peer-review” means the process utilized by midwives to confidentially discuss patient cases in a professional forum, including support, feedback, follow-up, and learning objectives.

(2) Unless otherwise defined in these rules, the terms defined in the code have the same meaning when used in these rules.

PART 2. PRELICENSURE LICENSED MIDWIFERY EDUCATION

R 338.17111 Training standards for identifying victims of human trafficking: requirements.

Rule 111. (1) Under section 16148 of the code, MCL 333.16148, an individual seeking licensure shall complete training in identifying victims of human trafficking that meets all the following standards:

(a) Training content must cover all of the following:

(i) Understanding the types and venues of human trafficking in the United States.

(ii) Identifying victims of human trafficking in healthcare settings.

(iii) Identifying the warning signs of human trafficking in healthcare settings for adults and minors.

(iv) Identifying resources for reporting suspected victims of human trafficking.

(b) Acceptable providers or methods of training include any of the following:

(i) Training offered by a nationally-recognized or state-recognized health-related organization.

(ii) Training offered by, or in conjunction with, a state or federal agency.

(iii) Training obtained in an educational program approved by the board for initial license or registration, or by a college or university.

(iv) Reading an article related to the identification of victims of human trafficking that meets the requirements of subdivision (a) of this subrule and is published in a peer-reviewed journal, healthcare journal, or professional or scientific journal.

(c) Acceptable modalities of training may include any of the following:

(i) Teleconference or webinar.

(ii) Online presentation.

(iii) Live presentation.

(iv) Printed or electronic media.

(2) The department may select and audit an individual and request documentation of proof of completion of training. If audited by the department, the individual shall provide acceptable proof of completion of training, including 1 of the following:

(a) Proof of completion certificate issued by the training provider including the date, provider name, name of training, and individual’s name.

(b) A self-certification statement by the individual. The self-certification statement must include the individual’s name and 1 of the following:

(i) For training completed pursuant to subrule (1)(b)(i) to (iii) of this rule, the date, training provider name, and name of training.

(ii) For training completed pursuant to subrule (1)(b)(iv) of this rule, the title of the article, author, publication name of the peer-reviewed journal, healthcare journal, or professional or scientific journal, and the date, volume, and issue of publication, as applicable.

(3) Pursuant to section 16148 of the code, MCL 333.16148, the requirements specified in subrule (1) of this rule apply for initial licenses issued after August 1, 2024.

R 338.17113 Licensed midwifery accrediting organizations.
Rule 113. (1) The board approves the MEAC, or its successor entity, as an accrediting organization for an educational program or pathway.

(2) A petition may be filed with the board for approval of a midwifery accrediting organization for an educational program or pathway, which is evaluated to determine the organization's equivalence to the standards of other board approved accrediting organizations. The board may approve a petition only if the standards and evaluative criteria of the organization are determined to be equivalent to the standards of the MEAC, or its successor entity.

R 338.17114 CPM credential.
Rule 114. The CPM credential is accredited by the NCCA. The CPM credential with the NARM requires a midwife to do all of the following:

(a) Validate education.

(b) Pass an examination.

(c) Complete a workshop, module, or course on cultural awareness.

(d) Meet general education requirements.

(e) Maintain current adult cardiopulmonary resuscitation (CPR) certification and current neonatal resuscitation program certification with a hands-on component.

R 338.17115 Licensed midwifery credentialing program.

Rule 115. The board may approve a licensed midwifery credentialing program if the program meets all of the following:

(a) It satisfies the standards and evaluative criteria are equivalent to the credential of a CPM from the NARM, or its successor entity.

(b) It satisfies the criteria of section 16148 of the code, MCL 333.16148.

(c) It is accredited by the NCCA, or its successor entity, or another accrediting organization approved by the board if the standards and evaluative criteria of the accrediting organization are determined to be equivalent to the standards of the NCCA, or its successor entity.

PART 3. LICENSURE

R 338.17121 Licensure.

Rule 121. (1) In addition to meeting the requirements of sections 16174 of the code, MCL 333.16174, and R 338.7001 to R 338.7005, an applicant for licensure shall submit a completed application on a form provided by the department, together with the requisite fee, and meet all of the following requirements:

(a) Meet 1 of the following:

(i) Submit proof to the department of completion of an educational program or pathway accredited by the MEAC, or its successor entity, or by another accrediting organization approved by the board under R 333.17113.

(ii) If before January 1, 2020, the applicant holds a current credential of CPM from the NARM, its successor entity, or an equivalent credential from another midwifery credentialing program that is approved by the board under R 383.17115, and satisfies both of the following:

(A) Submits proof to the department that the applicant holds a midwifery bridge certificate awarded by the NARM, its successor entity, or an equivalent credential from another midwifery credentialing program that meets the criteria of section 16148 of the code, MCL 333.16148.

(B) The midwifery credentialing program is accredited by the NCCA, its successor entity, or another accrediting organization approved by the board if the standards and evaluative criteria of the accrediting organization are determined to be equivalent to the standards of the NCCA, or its successor entity.

(b) Submit proof to the department of holding a current credential of CPM from the NARM, or its successor entity, or an equivalent credential from another midwifery credentialing program, that is approved by the board under R 383.17115.

(c) Submit proof to the department of successfully passing the examination developed and scored by the NARM or another exam approved by the board under subrule (3) of this rule.

(d) Submit proof to the department of completing the human trafficking training required in R 338.17111.

(2) The board approves and adopts the examination developed and scored by the NARM.

(3) An applicant for licensure may petition the board to evaluate whether another examination meets the requirements of section 16178(1) of the code, MCL 333.16178.

(4) A licensed midwife shall have obtained the recredential or maintain the CPM credential from the NARM, or equivalent credential approved by the board, pursuant to R 338.17115, during the license cycle.

R 338.17122 Nonrenewable temporary license.

Rule 122. (1) If an applicant holds a current CPM credential from a midwifery education program that is not accredited by the MEAC or accredited by an accrediting organization approved by the board under R 338.17113 the applicant may apply for a nonrenewable temporary license if the applicant satisfies both of the following:

(a) Meets the requirements of sections 16174 of the code, MCL 333.16174.

(b) Submits to the department a completed application on a form provided by the department, together with the requisite fee.

(2) An individual who holds a temporary license shall hold a midwifery bridge certificate from the NARM or an equivalent credential approved by the board pursuant to R 338.17115, to qualify for a license when the individual’s temporary license expires, pursuant to section 17116 of the code, MCL 333.17116.

(3) The term of a temporary license is 24 months and is not renewable.

R 338.17123 Licensure by endorsement from another state.

Rule 123. (1) An applicant who currently holds an active midwifery license in good standing in another state and has never been licensed as a midwife in this state may apply for a license by endorsement and is presumed to meet the requirements of section 16186 of the code, MCL 333.16186, if the applicant meets the requirements of section 16174 of the code, MCL 333.16174, and R 338.7001 to R 338.7005; submits a completed application, on a form provided by the department, together with the requisite fee; and complies with all of the following:

(a) Submits proof to the department of completion of an educational program or pathway accredited by the MEAC, or its successor entity, or by another accrediting organization approved by the board under R 333.17113.

(b) Submits proof to the department of holding a current credential of CPM from the NARM or another midwifery credentialing program approved by the board under R 333.17115.

(c) Submits proof of successfully passing the examination developed and scored by the NARM or another exam approved by the board under R 338.17121(3).

(d) Discloses each license, registration, or certification in a health profession or specialty issued by another state, the United States military, the federal government, or another country on the application form.

(e) Satisfies the requirements of section 16174(2) of the code, MCL 333.16174, including verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.

(f) Submits proof to the department of meeting the human trafficking training required in R 338.17111.

(2) An applicant who is licensed as a midwife in a state that does not require completion of an educational program or pathway that is approved by the MEAC, may apply to the department for a determination that the applicant has met the requirements of subrule (1)(a) of this rule if the applicant satisfies both of the following:

(a) The applicant meets all the other requirements for licensure.

(b) The applicant holds a midwifery bridge certificate awarded by the NARM or an equivalent credential from another midwifery credentialing program that meets the criteria of section 16148 of the code, MCL 333.16148, and is accredited by the NCCA, or another accrediting organization approved by the board, if the standards and evaluative criteria of the accrediting organization are determined to be equivalent to the standards of the NCCA or its successor entity.

R 338.17125 Relicensure requirements.

Rule 125. (1) An applicant for relicensure whose license from this state has lapsed, under the provisions of section 16201(3) or (4) of the code, MCL 333.16201, as applicable, may be relicensed by complying with the following requirements as noted by (√):

(a) For a midwife whose license from this state has lapsed and who does not hold a license in another state:	Lapsed less than 3 years	Lapsed more than 3 years, but less than 7 years	Lapsed 7 or more years
(i) Submit a completed application on a form provided by the department, together with the requisite fee.	√	√	√
(ii) Establish that the applicant is of good moral character as defined in, and determined under, 1974 PA 381, MCL 338.41 to 338.47.	√	√	√
(iii) Submit fingerprints as required under section 16174(3) of the code, MCL 333.16174.		√	√
(iv) Submit proof of having completed 30 continuing education hours in courses and programs and not less than 1 hour in pain and symptom management, 2 hours of cultural awareness, and 1 hour of pharmacology related to the practice of midwifery, as required under R 338.17141, and that the continuing education hours were earned within the 3-year period immediately before the application for relicensure. However, if the continuing	√	√	√

education hours submitted with the application are deficient, the applicant has 2 years after the date of the application to complete the deficient hours. The application must be held, and the license may not be issued until the continuing education requirements are met.			
(v) Complete a 1-time training in identifying victims of human trafficking that meets the standards in R 338.17111.	√	√	√
(vi) Meet the English language requirement under R 338.7002b and the implicit bias training required in R 338.7004.	√	√	√
(vii) Within the 3-year period immediately before the application for relicensure, retake and pass the examination approved by the board pursuant to R 338.17121.			√
(viii) An applicant who is or has been licensed, registered, or certified in a health profession or specialty by another state, the United States military, the federal government, or another country, shall do both of the following: (A) Disclose each license, registration, or certification on the application form. (B) Satisfy the requirements of section 16174(2) of the code, MCL 333.16174, including verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.	√	√	√
(ix) Submit proof of an active credential of CPM from the NARM or an equivalent credential from another midwifery credentialing program that is approved by the board and accredited by the NCCA or another accrediting organization approved by the board. A licensed midwife shall maintain the credential of CPM from the NARM, or equivalent credential approved by the board, during the license cycle.	√	√	√

(b) For a midwife whose license from this state has lapsed, but who holds a current midwife license in good standing in another state:	Michigan license lapsed less than 3 years	Michigan license lapsed more than 3 years, but less than 7 years	Michigan license lapsed 7 or more years

(i) Submit a completed application on a form provided by the department, together with the requisite fee.	√	√	√
(ii) Establish that the applicant is of good moral character as defined in, and determined under, 1974 PA 381, MCL 338.41 to 338.47.	√	√	√
(iii) Submit fingerprints as required under section 16174(3) of the code, MCL 333.16174.		√	√
(iv) Submit proof of having completed 30 continuing education hours in courses and programs and not less than 1 hour in pain and symptom management, 2 hours of cultural awareness, and 1 hour of pharmacology related to the practice of midwifery, as required under R 338.17141, and the continuing education hours were earned within the 3-year period immediately before the application for relicensure. However, if the continuing education hours submitted with the application are deficient, the applicant has 2 years after the date of the application to complete the deficient hours. The application must be held, and the license must not be issued until the continuing education requirements are met.		√	√
(v) Complete a 1-time training in identifying victims of human trafficking that meets the standards in R 338.17111.	√	√	√
(vi) Meet the English language requirement under R 338.7002b and the implicit bias training required in R 338.7004.	√	√	√
(vii) An applicant who is or has been licensed, registered, or certified in a health profession or specialty by another state, the United States military, the federal government, or another country, shall do both of the following: (A) Disclose each license, registration, or certification on the application form. (B) Satisfy the requirements of section 16174(2) of the code, MCL 333.16174, including verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application.	√	√	√

(viii) Submit proof of an active credential of CPM from the NARM or an equivalent credential from another midwifery credentialing program that is approved by the board and accredited by the NCCA, or another accrediting organization approved by the board. A licensed midwife shall maintain the credential of CPM from the NARM, or equivalent credential approved by the board, during the license cycle.	√	√	√

(2) If relicensure is granted and it is determined that a sanction has been imposed by another state, the United States military, the federal government, or another country, the disciplinary subcommittee of the board may impose appropriate sanctions under section 16174(5) of the code, MCL 333.16174.

PART 4. PRACTICE, CONDUCT, AND CLASSIFICATION OF CONDITIONS

R 338.17131 Definitions.

Rule 131. As used in this part:

(a) "Appropriate pharmacology training" means 8 hours of training related to pharmacology applicable to midwifery practice, approved by the MEAC or the board.

(b) "Consultation" means the process by which a licensed midwife, who maintains primary management responsibility for the patient's care, seeks the advice of another appropriate health professional or member of the healthcare team.

(c) "DOR" means the Division of Research for the Midwives Alliance of North America.

(d) "Emergency medical services personnel" means a medical first responder, emergency medical technician, emergency medical technician specialist, or paramedic.

(e) "Futility" means care offered that would not mitigate a patient's lethal diagnosis or prognosis of imminent death.

(f) "HIPAA" means the health insurance portability and accountability act of 1996, Public Law 104-191.

(g) "MANA" means the Midwives Alliance of North America.

(h) "Refer" means to suggest a patient seek discussion, information, aid, or treatment from a particular appropriate health professional.

(i) "Transfer" means to convey the responsibility for the care of a patient to a hospital, emergency medical services personnel, or another appropriate health professional. Transfer may occur at any point during care, during the prenatal, intrapartum, postpartum, or neonatal period, and may be either of an emergent or non-emergent nature.

(j) "Transport" means the physical movement of a patient from 1 location to another.

R 338.17132 Informed disclosure and consent.

Rule 132. (1) At the inception of care for a patient, a licensed midwife shall provide an informed disclosure in writing to the patient that includes all the following:

(a) A description of the licensed midwife's training, philosophy of practice, information regarding the care team, transfer of care plan, credentials and legal status, services to be provided, availability of a complaint process both with the NARM and this state, and relevant HIPAA disclosures.

(b) Access to the midwife's practice guidelines.

(c) Whether the licensed midwife is allowed to administer drugs and medications pursuant to R 338.17137, which medications the licensed midwife carries for potential use, if a medication is required by law, and if certain standard medications are not available from the midwife, how and where the medications can be obtained.

(d) Access to the board of licensed midwifery rules.

(e) Whether the licensed midwife has malpractice liability insurance coverage, and if so, the policy limitations of the coverage. The patient shall be informed of the coverage and policy limitations both verbally and in writing.

(2) If during care and shared decision making a patient chooses to deviate from a licensed midwife's recommendation, the licensed midwife shall provide the patient with an informed consent process that includes all the following:

(a) Explanation of the available treatments and procedures.

(b) Explanation of both the risks and expected benefits of the available treatments and procedures.

(c) Discussion of alternative procedures, including delaying or declining of testing or treatment, and the risks and benefits associated with each choice.

(d) Documentation of any initial refusal by the patient of any action, procedure, test, or screening that is recommended by the licensed midwife.

(3) A licensed midwife shall obtain the patient's signature acknowledging that the patient has been informed, verbally and in writing, of the disclosures.

(4) A licensed midwife shall provide an abbreviated informed consent appropriate to the emergent situation with documentation to follow once the situation has stabilized.

R 338.17137 Administration of prescription drugs or medications.

Rule 137. (1) Pursuant to section 17111 of the code, MCL 333.17111, a licensed midwife who has appropriate pharmacology training and holds a standing prescription from an appropriate health professional with prescriptive authority, is allowed to administer the following prescription drugs and medications:

(a) Prophylactic vitamin K to an infant, either orally or through intramuscular injection.

(b) Antihemorrhagic agents to a postpartum mother after the birth of the infant.

(c) Local anesthetic for the repair of lacerations to a mother.

(d) Oxygen to a mother or infant.

(e) Prophylactic eye agent to an infant.

(f) Prophylactic Rho(D) immunoglobulin to a mother.

(g) Agents for group B streptococcus prophylaxis, recommended by the federal Centers for Disease Control and Prevention, to a mother.

(h) Intravenous fluids, excluding blood products, to a mother.

(i) Antiemetics to the mother.

(j) Epinephrine.

(2) Administration of any of the drugs included in subrule (1) of this rule must comply with this rule. The indications, dose, route of administration, duration of treatment, and contraindications relating to the administration of drugs or medications identified under subrule (1) of this rule are shown in Table 1 and Table 2:

Table 1
Maternal - Administration of Prescription Drugs and Medications

Medication	Indication	Dose	Route of Administration	Duration of Treatment	Contraindications	Comments
Oxygen	Maternal distress or fetal distress.	10-12 liters per minute.	Free-flow, nasal cannula, mask.	Until stabilized or transfer of care.	None, with indications present.	
Pitocin 10 units per milliliter	Prevention and treatment of postpartum hemorrhage.	10 units per milliliter.	Intramuscular.	1-2 doses, PRN.		
Pitocin 10 units per milliliter	Prevention and treatment of postpartum hemorrhage.	20 units in 1000 milliliters IV fluids, initial bolus rate 1000 milliliters per hour bolus for 30 minutes (equals 10 units) followed by a maintenance rate 125 milliliters per hour over 3.5 hours (equals remaining 10 units).	Intravenous.	4 hours.		
Methyl-ergonovine (Methergine) 0.2 milligram per milliliter	Prevention and treatment of postpartum hemorrhage.	0.2 milligram per milliliter.	Intramuscular.	0.2 lligram IM q2-4 hours PRN; not to exceed 5 doses.	Contraindicated for patient with hypertension or Reynaud's disease. Can be used in conjunction with Pitocin after delivery of the placenta.	IM preferred for acute postpartum use. Oral methergine can help to lessen continued bleeding after hemorrhage.
Methyl-ergonovine (Methergine)		0.2 milligram tab.	Oral.	0.2-0.4 milligram PO q6-8 hours	Contraindicated for patient with hypertension or	IM preferred for acute postpartum use. Oral methergine can help to lessen continued bleeding after

0.2 milligram				PRN for 2-7 days.	Reynaud's disease.	hemorrhage.
Medication	Indication	Dose	Route of Administration	Duration of Treatment	Contraindications	Comments
Misoprostol (Cytotec)	Treatment of postpartum hemorrhage.	600 micrograms oral or 800 micrograms buccal or rectal.	Oral, buccal, rectal.	1 dose.		
Hemabate (Carboprost)	Treatment of postpartum hemorrhage.	0.25 milligram IM.		Every 15-90 minutes; not to exceed 8 doses.	Asthma.	Relative counterindications: hypertension.
Tranexamic Acid (TXA or Lysteda)	Treatment of postpartum hemorrhage.	1000 milligrams in 50 milliliters 0.9 normal saline administered over 15 minutes.	Intravenous piggy back (IVPB) or intravenous push (IV push).	Use within 3 hours and as early as possible after onset of postpartum hemorrhage.	Contraindicated for patient with deep vein thrombosis, history of coagulopathy, or active hypersensitivity to TXA.	TXA should be administered slowly as an IVPB or IV push over 15 minutes or longer because bolus injection carries a potential risk of hypotension. Should not be mixed with blood or solutions containing penicillin or mannitol.
RHo (D) Immune Globulin (Rhogam)	Prophylactic dose: RH- patient at 28-30 weeks gestation; RH- patient after a miscarriage; postpartum RH- patient with an RH+ baby. A prenatal dose can also be given after an injury under advisement of a physician.	300 micrograms pre-filled syringe.	Intramuscular.	Administer within 72 hours of birth or antenatal event.	RH positive; IgA deficiency.	
Penicillin G	Group Beta Strep (GBS) prophylaxis in labor.	Initial loading dose: 5 million units IV. Subsequent doses: 2.5–3.0 million units IV every 4 hours.	Administer via IV with prepared minibag.	Until delivery.	Allergy to penicillin.	No saline limitation when administering antibiotics.
Ampicillin	Group Beta Strep prophylaxis in labor.	Initial loading dose: 2 grams IV.	Administer via IV with prepared	Until delivery.	Allergy to penicillin.	No saline limitation when administering antibiotics.

		Subsequent doses: 1 gram IV every 4 hours.	minibag.			

Medication	Indication	Dose	Route of Administration	Duration of Treatment	Contraindications	Comments
Cefazolin	Group Beta Strep prophylaxis in labor.	Initial loading dose: 2 grams IV. Subsequent doses: 1gram IV every 8 hours.	Administer via IV with prepared minibag.	Until delivery.	Allergy to cefazolin.	Cefazolin is the first choice for patients who have a history of allergy to penicillin but no history of anaphylactic reaction to penicillin. Use clindamycin or vancomycin for patients who have a history of anaphylactic penicillin allergy. No saline limitation when administering antibiotics.
Clindamycin	Group Beta Strep prophylaxis in labor.	900 milligrams IV every 8 hours until delivery.	Administer via IV with prepared minibag.	Until delivery.	Allergy to clindamycin.	Use only with patient with history of anaphylactic reaction to penicillin and the GBS isolate is laboratory proven to be susceptible to Clindamycin. No saline limitation when administering antibiotics.
Vancomycin	Group Beta Strep prophylaxis in labor.	1 gram IV every 12 hours.	Administer via IV with prepared minibag.	Until delivery.	Allergy to vancomycin.	Use only with patient with history of anaphylactic reaction to penicillin and the GBS isolate is laboratory proven to be resistant to Clindamycin. No saline limitation when administering antibiotics.
Epinephrine	Severe allergic reaction.	Single dose of 0.3 milligram, USP, 1:1000 (0.3 milliliters) in a sterile solution.		5-15 minutes. Transport to hospital should be initiated.		Discontinue medication that is causing reaction; place patient supine and elevate lower extremities. Protect the airway. Transport to hospital should follow.
Lactated Ringers solution	Dehydration during labor.	Up to 2 liters.	Intravenous.	Over the course of 3-5 hours.		Most patients respond to intravenous hydration and a short period of gut rest, followed by

						reintroduction of oral intake. Preferred over normal saline.
Medication	Indication	Dose	Route of Administration	Duration of Treatment	Contraindications	Comments
0.9% Normal Saline solution	Dehydration during labor, when LR not available. Postpartum hemorrhage. Allergic reactions.	1- 2 liters bolus.	Intravenous.	During course of infusion.		Intrapartum: the addition of 5% Dextrose to solution can increase success rate with nausea or vomiting.
Lidocaine	Postpartum repair of vulvo-vaginal lacerations.	Injectable: up to 20 milliliters 2%, up to 30 milliliters 1%, or up to 60 milliliters 0.5%.	Injection.	2 hours.	Known allergy or signs or symptoms of allergic reaction.	Do not use lidocaine with epinephrine, max dose 4.5 milligrams per kilogram infiltration.
Lidocaine	Postpartum repair of vulvo-vaginal lacerations.		Topical cream, spray, or gel.		Known allergy or signs or symptoms of allergic reaction.	
Diphenhydramine (Benadryl)	To reduce vomiting during labor.	25 to 50 milligrams every 4 to 6 hours / 10-50 milligrams every 4-6 hours.	Oral; intravenous.			
Ondansetron (Zofran)	To reduce vomiting during labor.	4-8 IVP / 4 milligrams (up to twice PRN).	Oral; intravenous.			May produce headache as side effect.
Ibuprofen	To reduce post-partum discomfort.	200 milligrams up to 4 tablets every 6-8 hours.	Oral.	Until postpartum pain resolves.	History of gastritis; history of gastrointestinal bleed.	

Table 2
Neonatal – Administration of Prescription Drugs and Medications

Medication	Indication	Dose	Route of Administration	Duration of Treatment	Contraindications	Comments
Oxygen	Neonatal resuscitation, if indicated; abnormal pulse oximetry readings.	10 liters per minute, or as indicated.	Bag and mask, free-flow.	Until pulse-oximetry readings are within target range of infant age, or transfer of care.	None, with indications present.	Administration of oxygen to a neonate should be in accordance with NRP standards. When an oxygen blender is not accessible, free-flow oxygen may be used combined with pulse oximetry. Current research cautions that inappropriate use of oxygen can cause free radical and oxidative stress damage in the neonate.
0.5% Erythromycin Ophthalmic ointment	Prophylaxis of neonatal ophthalmia neonatorum due to N. gonorrhoeae or chlamydia trachomatis.	1 centimeter ribbon of 0.5% ointment in each eye within 24 hours of birth.	Ocular, in lower eyelid.	1 dose.	Hypersensitivity to drug class or component.	May cause ocular irritation or blurred vision.
Vitamin K 1.0 milligram per 0.5 milliliter	Prophylaxis and therapy of hemorrhagic disease of the newborn.	1.0 milligram for a newborn above 1500 grams.	Intramuscular.	1 dose.	Family history of hypoprothrombinemia; hypersensitivity to drug class or component.	Vitamin K 1.0 milligram per 0.5 milliliter.
Epinephrine	Neonatal resuscitation.	0.2 milliliter per kilogram (0.02 milliliter per kilogram) of body weight in a 1:10,000 concentration.	Administered in the umbilical venous catheter or interosseous route followed by 3 milliliter flush of sterile normal saline.	Repeat every 3-5 minutes if HR <60 beats per minute with chest compressions.		EMS services should be en route.
Epinephrine	Neonatal resuscitation.	1 milliliter per kilogram 1:10,000 concentration.	Endotracheal.	If heart rate remains less than 60 beats per minute, move on to Epinephrine		Max 3 milliliters per dose, EMS services should be en route.

				administered by IV or interosseous route.		

R 338.17138 Report patient's data.

Rule 138. (1) A licensed midwife shall report patient data to the statistics registry maintained by the MANA's DOR, or its successor organization, pursuant to the MANA's policies and procedures, or a similar registry maintained by a successor organization approved by the board, unless the patient refuses.

(2) A licensed midwife shall register with the MANA's DOR.

(3) A licensed midwife shall submit patient data on all completed courses of care in the licensed midwife's practice during the previous 12 months by the date determined by the MANA, annually.

(4) A licensed midwife shall submit data from the date of licensure to the date determined by the MANA, during the first year of licensure.

R 338.17139 Telehealth.

Rule 139. (1) A licensed midwife shall obtain consent for treatment before providing a telehealth service under section 16284 of the code, MCL 333.16284.

(2) A licensed midwife shall keep proof of consent for telehealth treatment in the patient's up-to-date medical record and satisfy section 16213 of the code, MCL 333.16213.

(3) A licensed midwife providing telehealth services shall do both of the following:

(a) Act within the scope of the licensed midwife's practice.

(b) Exercise the same standard of care applicable to a traditional, in-person health care service.

PART 5. LICENSE RENEWAL AND CONTINUING EDUCATION

R 338.17141 License renewals; requirements; applicability.

Rule 141. (1) In addition to meeting the requirements of section 16201 of the code, MCL 333.16201, an applicant for renewal shall submit a completed application on a form provided by the department, together with the requisite fee and, before renewal, shall hold the credential of CPM from the NARM, or equivalent credential approved by the board.

(2) Pursuant to section 16201 of the code, MCL 333.16201, an applicant for license renewal who has been licensed for the 3-year period immediately before the expiration date on the license, shall accumulate not less than 30 continuing education hours. The continuing education hours must include all of the following, during the prior 3 years by the end of the license cycle:

(a) Obtain or maintain the credential of CPM from the NARM, or an equivalent credential approved by the board.

(b) One continuing education hour in pain and symptom management pursuant to section 16204(2) of the code, MCL 333.16204. Acceptable methods of continuing education in pain and symptom management include online and in-person presentations, courses, or programs and may include, but are not limited to, the following subject areas:

(i) Behavior management.

(ii) Psychology of pain.

(iii) Behavior modification.

(iv) Stress management.

(v) Clinical applications as they relate to professional practice.

(c) Two continuing education hours on cultural awareness that include examination of disparate maternal infant mortality and morbidity experienced by the African American, Indigenous populations,

the lesbian, gay, bisexual, transgender, and queer (LGBTQ+) community, and other vulnerable and marginalized populations. Acceptable methods of continuing education in cultural awareness include online and in-person presentations, courses, programs, or reading an article that is published in a peer-reviewed journal, healthcare journal, or professional or scientific journal.

(d) Three hours of implicit bias training required in R 338.7004. The implicit bias training required in R 338.7004 may also be used for credit for the cultural awareness training in subdivision (c) of this subrule if the training meets all of the requirements in subdivision (c) of this subrule.

(e) One continuing education hour in pharmacology applicable to the practice of midwifery.

(3) Submission of an application for renewal constitutes the applicant's certification of compliance with the requirements of this rule.

(4) A licensed midwife shall retain documentation of meeting the requirements of this rule for a period of 6 years after the date of applying for license renewal.

(5) The board may require an applicant or licensed midwife to submit evidence to demonstrate compliance with this rule.

(6) A self-certification statement by the individual that includes the title of the article, author, publication name, and the date, volume, and issue of publication, as applicable, is acceptable evidence of reading an article that is published in a peer-reviewed journal, healthcare journal, or professional or scientific journal.

(7) Failure to comply with this rule is a violation of section 16221(h) of the code, MCL 333.16221.

(8) A request for a waiver under section 16205 of the code, MCL 333.16205, must be received by the department before the expiration date of the license. A CPM credential from the NARM, or equivalent credential approved by the board, may not be waived.

ADMINISTRATIVE RULES

DEPARTMENT OF HEALTH AND HUMAN SERVICES

PUBLIC HEALTH ADMINISTRATION

BODY ART FACILITIES

Filed with the secretary of state on September 11, 2025

These rules become effective immediately after filing with the secretary of state unless adopted under section 33, 44, or 45a(9) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.233, 24.244, or 24.245a. Rules adopted under these sections become effective 7 days after filing with the secretary of state.

(By authority conferred on the department of health and human services by sections 2226, 2233, 2235, and 13108 of the public health code, 1978 PA 368, MCL 333.2226, 333.2233, 333.2235, and 333.13108; section 5 of the critical health problems reporting act, 1978 PA 312, MCL 325.75; and section 24 of the Michigan occupational safety and health act, 1974 PA 154, MCL 408.1024)

R 333.13101, R 333.13102, R 333.13103, R 333.13104, R 333.13105, R 333.13106, R 333.13107, R 333.13108, R 333.13109, R 333.13110, R 333.13111, R 333.13112, R 333.13113, R 333.13114, R 333.13115, R 333.13116, R 333.13117, R 333.13118, R 333.13119, R 333.13120, and R 333.13121 are added to the Michigan Administrative Code, as follows:

PART 1. DEFINITIONS

R 333.13101 Definitions.

Rule 1. (1) As used in these rules:

(a) "AAMI" means the Association for the Advancement of Medical Instrumentation.

(b) "Act" means the public health code, 1978 PA 368, MCL 333.1101 to 333.25211.

(c) "Aftercare instructions" means verbal and written instructions given to the client, specific to the body art procedure or procedures rendered regarding the care of the body art and surrounding area.

(d) "ANSI" means American National Standards Institute.

(e) "Antiseptic" means a product that is labeled as useful in preventing diseases caused by microorganisms present on the skin or on mucosal surfaces, or both, of humans. These products must comply with section 201(g)(1)(B) of the federal food, drug, and cosmetic act, 21 USC 321. Antiseptic includes products meant to kill germs and may also be referred to as, but not limited to, the following:

(i) Antiseptic.

(ii) Antimicrobial.

(iii) Antibacterial.

(iv) Microbicide.

(v) Germicide.

(f) "Aseptic technique" means a set of specific practices and procedures performed under carefully controlled conditions with the goal of minimizing contamination by pathogens.

(g) "ASTM" means the American Society for Testing and Materials International.

(h) “Autoclave” means a device that is intended to sterilize products by means of pressurized steam. An autoclave must comply with 1 or more of the 3 types of steam programs defined as B, N, and S by EN13060 / ISO 17665, and must be capable of sterilizing hollow items, or lumens. An autoclave can remove air from the load by means of any of the following:

(i) Gravity displacement.

(ii) Fractionated vacuum.

(iii) Steam flush-pressure pulse.

(i) “Automated instrument washer” means a mechanical washer designed specifically for the decontamination of instruments before sterilization. These devices must comply with ISO 15883-1/2. Automated instrument washer includes a washer-disinfector or washer-sterilizer.

(j) “Body art technician” means an individual who performs any of the following actions:

(i) Tattooing, including scarification.

(ii) Branding.

(iii) Body piercing.

(k) “Body jewelry” means an adornment placed into a body piercing and comprised of various materials including metals, non-metals, and organic materials as provided in R 333.13114.

(l) “Clean” means objects or surfaces are free from visible soil, organic material, or inorganic material, as usually accomplished by manual or mechanical means through water with detergents or enzymatic products.

(m) “Client” means an individual undergoing any of the following procedures:

(i) Tattooing, including scarification.

(ii) Branding.

(iii) Body piercing.

(n) “Contaminated” means the presence or the reasonably anticipated presence of blood or other potentially infectious material on an item.

(o) “Contaminated sharps” means any contaminated object that can penetrate the skin including, but not limited to, the following:

(i) Tattoo needles.

(ii) Body piercing needles.

(iii) Disposable razors.

(p) “Cycle number” means a unique number that corresponds to each individual autoclave cycle, is used as an identifier and may or may not include the date as part of the number.

(q) “Department” means the department of health and human services.

(r) “Disinfectant” means a tuberculocidal chemical or physical agent that kills vegetative forms of microorganisms, but not necessarily all microbial forms such as bacterial spores registered with the United States Environmental Protection Agency.

(s) “Disinfection” or “disinfected” means the process that kills most pathogenic microorganisms and other microorganisms on inanimate objects by physical or chemical means but does not ensure the margin of safety standards associated with sterilization processes.

(t) “EGLE” means the department of environment, Great Lakes, and energy.

(u) “EN” or “European standard” means a technical standard, established by consensus and approved by a recognized body that provides, for common and repeated use, rules, guidelines or characteristics for activities or their results, aimed at the achievement of the optimum degree of order in a given context.

(v) “Equipment” means all machinery, including fixtures, containers, tools, devices, sinks, and other apparatus used in connection with performing body art procedures.

(w) “Exposure” means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious material that may result from the performance of an individual’s assigned duties in the body art facility. It does not include incidental exposures that may take place on

the job, which are neither reasonably nor routinely expected, and which the individual is not required to incur in the normal course of employment.

(x) "Foot-candles" mean a measurement of light intensity.

(y) "Gloves" means medical grade or exam grade, sterile or nonsterile, disposable, single-use, full-hand coverings worn for protection against disease transmission.

(z) "Hand washing" means physically removing or reducing most microorganisms from the intact skin of the hands. The temperature for handwashing must be not less than 85 degrees Fahrenheit.

(aa) "Hand washing sink" means a sink equipped to provide water with both hot and cold temperatures through a mixing valve or combination faucet, used solely for washing hands, arms, or prosthetics.

(bb) "Instruments" means needles, needles attached to the needle bars, body piercing needles, razors, scarification implements, and other devices that may come in contact with a client's body or that may have possible exposure to blood or other potentially infectious material during the body art procedure.

(cc) "ISO" means the International Organization for Standardization.

(dd) "Material certificate" means all documents intended to state the specifics of a material used for body jewelry. Names for these documents include, but are not limited to, the following:

(i) Mill certificates.

(ii) ISO certificates.

(iii) Metal composition sheets.

(iv) Material certification sheets.

(ee) "Medical waste" means any of the following that are not generated from a household or care agency as required by part 138 of the act, MCL 333.13801 to 333.13832:

(i) Cultures and stocks of infectious agents and associated biologicals, including laboratory waste, biological production wastes, discarded live and attenuated vaccines, culture dishes, and related devices.

(ii) Liquid human and animal waste, including blood and blood products and body fluids.

(iii) Pathological waste.

(iv) Sharps.

(v) Contaminated wastes from animals, primarily research animals, that have been exposed to agents infectious to humans.

(ff) "MIOSHA standards" means the Michigan occupational safety and health standards promulgated by the Michigan occupational safety and health administration under the Michigan occupational safety and health act, 1974 PA 154, MCL 408.1001 to 408.1094.

(gg) "Mucosal surface" means the moisture-secreting membrane lining of all body cavities or passages that communicates with the exterior, including, but not limited to, the nose, mouth, vulva, and urethra.

(hh) "Municipal solid waste" means common trash or garbage that does not meet the definition of hazardous or biomedical waste.

(ii) "Non-critical violations" means any violation that is not a critical violation as that term is defined in section 13101 of the act, MCL 333.13101.

(jj) "Operator" means a person that controls any interest in, operates, or manages a body art facility and is responsible for compliance with these rules, whether or not actually performing body art activities.

(kk) "OPIM" or "other potentially infectious material" means human body fluids including, but not limited to, the following:

(i) Any body fluids visibly contaminated with blood.

(ii) Saliva in oral body art procedures.

(iii) Semen.

(iv) Vaginal secretions.

(v) All body fluids where it is difficult or impossible to differentiate between body fluids.

(ll) “Part 131” means part 131 of the act, MCL 333.13101 through 333.13112.

(mm) “Pathological waste” means any of the following:

(i) Human organs.

(ii) Tissues.

(iii) Body parts other than teeth.

(iv) Products of conception.

(v) Fluids removed by trauma or during surgery, autopsy, or another medical procedure and not fixed in formaldehyde.

(nn) “PPE” or “Personal protective equipment” means specialized clothing or equipment that is worn by an individual working in a body art facility to protect the individual from an exposure or hazard.

(oo) “Personnel” means employees, body artists, contracted body artists, and agents of the body art facility, whether or not actually performing body art activities.

(pp) “Procedure” means the act of performing body art.

(qq) “Procedure area” means the physical space that is used by 1 body art technician at a time to perform a procedure on 1 client at a time, and that contains all procedure surfaces, equipment, and instruments to perform the procedure.

(rr) “Procedure surface” means a surface utilized during the procedure that has the potential to become contaminated and that may require cleaning and disinfecting.

(ss) “Reprocessing” means a validated process used to render an instrument, which has been previously used or contaminated, fit for a subsequent single use. Reprocessing is designed to remove soil and contaminants by cleaning and to inactivate microorganisms by sterilization.

(tt) “Safety data sheet” means a document for a potentially harmful chemical that includes information such as the properties of each chemical; the physical hazards, health hazards, and environmental health hazards; protective measures; and safety precautions for handling, storing, and transporting the chemical under the Hazard Communication Standard, 29 CFR 1910.1200(g).

(uu) “Scarification” means the production of scars and includes the injury of the skin involving scratching, etching, or cutting of designs to produce a scar on a human being for ornamentation or decoration.

(vv) “Sharps” means objects that can purposely or accidentally cut or penetrate the skin or mucosa, including, but not limited to, presterilized single-use needles, scalpel blades, and razor blades.

(ww) “Sharps disposal container” means a puncture-resistant, leakproof on sides and bottom container made specifically to meet National Institute for Occupational Safety standards and can be closed for handling, storage, transportation, and disposal. A sharps container must be labeled with the international biohazard symbol.

(xx) “Single-use, disposable” means products or items that are intended for 1 time, 1 individual use, and are disposed of after use on each client, including, but not limited to, the following:

(i) Cotton swabs or cotton balls.

(ii) Tissues or paper products.

(iii) Paper or plastic cups.

(iv) Gauze and sanitary coverings.

(v) Razors.

(vi) Needles.

(vii) Scalpel blades.

(viii) Stencils, including marking pens, pencils, string, or other materials used for stencils.

(ix) Ink cups.

(x) Protective gloves.

(yy) “Smoke” or “smoking” means that term as defined in section 12601 of the act, MCL 333.12601.

(zz) “Sterilize” or “sterilization” means the complete elimination or destruction of all forms of microbial life including bacterial spores.

(aaa) “Ultrasonic cleaner” means a device that removes debris by a process called cavitation, in which waves of acoustic energy are propagated in aqueous solutions to disrupt the bonds that hold particulate matter to surfaces.

(bbb) “Vapor product” means a noncombustible product that employs a heating element, power source, electronic circuit, or other electronic, chemical, or mechanical means, regardless of shape or size, that can be used to produce vapor from nicotine or any other substance, and the use or inhalation of which simulates smoking. Vapor products include, but are not limited to, any of the following:

(i) Electronic cigarette.

(ii) Electronic cigar.

(iii) Electronic cigarillo.

(iv) Electronic pipe.

(v) Vapor cartridge or other container of nicotine or other substance in a solution or other form that is intended to be used with or in an electronic cigarette, electronic cigar, electronic cigarillo, electronic pipe, or similar product or device.

(2) The terms defined in the act have the same meaning when used in these rules.

PART 2. BODY ART FACILITY REQUIREMENTS; GENERAL

R 333.13102 General purpose; violations.

Rule 2. These rules provide the applicable processes for the establishment and maintenance of a body art facility in this state and guidance on the inspection and enforcement process to the local health departments to ensure that public health, safety, and welfare is protected.

R 333.13103 Physician exemption.

Rule 3. The licensing and inspection rules do not apply to procedures that are utilized as a part of a patient’s treatment and are performed by or under the control, direction, and on-site supervision of a physician who is licensed in this state.

R 333.13104 Procedures allowed at licensed body arts facilities.

Rule 4. Tattooing, branding, or body piercing, as defined by the act and these rules, are the only procedures allowed within a body art facility.

R 333.13105 Body art facility; applications; renewal licenses; temporary body art facility licenses.

Rule 5. (1) Applications and the fee for licensure must be received not less than 30 days before tattooing, branding, or body piercing services are to be provided.

(2) The department shall notify license holders that their license is due for renewal by mail, or email if a facility email address is submitted.

(3) When submission for the renewal of a body art license application and licensing fee for a body art facility are received by the department, the department shall notify the local health department responsible for the jurisdiction in which the facility is located.

(4) Annual licenses and renewal licenses are effective for the calendar year applied for and do not imply or guarantee a license of 365 days after initial approval.

(5) Applications and the required fee for temporary licenses must be received not less than 30 days before the first day on which tattooing, branding, or body piercing services are to be provided at the temporary location, and temporary licenses expire after 11:59 p.m. on the final date described on the

temporary license. No services are to be performed until an initial inspection has been completed and approved by the local health department.

(6) The license will be issued to a specific person at a specific location and is nontransferable. Mobile units will not be licensed as statewide transitory units.

(7) A renewal license will be issued to the facility upon application and payment provided the facility has had a satisfactory inspection within the previous licensing period.

(8) The license must be posted in the body art facility in a prominent and conspicuous area where it can be readily observed. Temporary facilities and newly approved permanent facilities must post their inspection report stating that the facility is approved for operation.

R 333.13106 Body art facility; inspections.

Rule 6. (1) A site plan submission by the applicant to the local health department and an initial inspection by the local health department representative responsible for the jurisdiction in which the body art facility is located are required for a new or a proposed remodel of a licensed body art facility.

(2) A detailed site plan must be reviewed by the local health department to determine whether the body art facility complies with the facility requirements found in R 333.13119.

(3) After passing an initial inspection, the local health department may allow the body art facility to begin offering approved procedures to clients provided the body art facility has applied for licensure in this state.

(4) Inspection of the body art facility must be conducted pursuant to section 13105 of the act, MCL 333.13105, under the department's authority under section 2241 of the act, MCL 333.2241. The local health department must convey the results of that inspection to the department.

(5) Each local health department retains the right to perform additional inspections as determined necessary.

(6) The local health department or its representative shall report to the department on the status of an initial inspection, an annual renewal inspection, or a temporary license inspection as either pass or fail, and whether licensure is recommended by use of the department's online reporting process.

(7) The inspection of a body art facility must document whether the body art facility has met the requirements in the act and rules and a recommendation of whether the facility should be licensed. This determination must be noted on the initial license or temporary license inspection report form completed by the local health department, and a copy of the signed and dated documentation must be given to the owner or operator at the end of the inspection. A signed copy of a department inspection report form stating the facility is approved to operate can be posted temporarily until a state-issued license is received.

(8) The inspection report must delineate inspection items that are violations. If violations are identified, the local health department must mark them on the form and note remedies for correction in the comment section of the inspection form.

(9) Violations noted on the inspection report may require an inspection by the local health department to ensure corrective action has been taken. If an inspection is needed, the time frame for the inspection must be noted in the comment section of the inspection report form.

R 333.13107 Variance.

Rule 7. A variance may be granted to a licensed body art facility by the local health department under the conditions set forth in section 13111 of the act, MCL 333.13111.

PART 3. EMPLOYEE REQUIREMENTS; RECORDS

R 333.13108 Body art facility requirements; adoption of MIOSHA standards;

violations considered a critical violation.

Rule 8. (1) Failure to comply with the requirements in this rule, including training, is a critical violation, which may lead to immediate closure or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(2) Pursuant to section 32(4) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.232, the department adopts by reference the following MIOSHA regulations:

(a) Occupational Health Standards "Part 430. Hazard Communication," R 325.77001 to R 325.77004.

(b) General Industry Safety and Health Standard "Part 554. Bloodborne Infectious Diseases," R 325.70001 to R 325.70018.

(3) The standards referenced in subrule (2) of this rule are available from the MIOSHA standards section at website: www.michigan.gov/mioshastandards at no charge.

(4) The standards are available for inspection, and copies of the standards may be obtained from the Department of Labor and Economic Opportunity, MIOSHA Standards Section, 530 West Allegan Street, P.O. Box 30645, Lansing, Michigan 48909-8143. Up to 5 copies of these standards may be obtained at no charge. For quantities greater than 5, the cost as of the time of the adoption of these rules is 4 cents per page.

R 333.13109 Requirements for body art technicians and other individuals with potential exposure to blood and OPIM; adoption of youth employment standards; violations considered critical violations.

Rule 9. (1) Failure to comply with the requirements in this rule is a critical violation, which may lead to immediate closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(2) A body art facility shall not employ a minor in violation of the youth employment standards act, 1978 PA 90, MCL 409.101 to 409.124.

(3) Body art technicians shall refuse body art services to an individual who shows signs of being under the influence of alcoholic liquor or a controlled substance.

(4) Body art technicians shall not perform tattooing, branding, or body piercing on non-intact skin, non-intact mucosal surfaces, or surfaces with a suspected rash or visible infection.

(5) Body art technicians shall not perform body art procedures on skin or mucosal surfaces that have been affected by any topical anesthetic, external analgesic, or another product that contains an anesthetic active ingredient, unless the product, dosage, and directions for use are appropriately prescribed by a licensed physician for use before or during body art procedures. Documentation of the prescription must be made part of the client record.

(6) Body art technicians shall not perform a procedure on the nipple or genital area of a minor regardless of written consent and presence of a parent or legal guardian of that minor.

(7) All personnel working in the body art facility with the potential for exposure to blood and OPIM shall ensure all the following:

(a) Maintain a high degree of cleanliness; conform to hygienic practices, including hand washing; and wear proper personal protective equipment with clean clothes when performing procedures.

(b) Maintain hair, skin, and clothes that are free of visible particulate matter and debris.

(c) Maintain fingernails in a manner to allow thorough cleaning and prevent glove tears.

(8) If the clothes of a body art technician, or any other individual with the potential exposure to blood or OPIM, become visibly contaminated, contaminated clothing must be removed as soon as possible in a way that prevents additional exposure to the contaminated areas of the clothing. Contaminated clothing must be replaced with clean clothing before commencing any further procedures.

(9) Before assuming responsibilities, personnel with potential exposure shall meet the same requirements as body art technicians.

(10) All personnel working in the body art facility with the potential for exposure to blood and OPIM shall not be involved in procedures if they have any of the following that would result in uncontained drainage and contamination of body art instruments, equipment, procedure surfaces, or the client:

(a) Open wounds.

(b) Cuts.

(c) Sores.

(d) Burns.

(e) Skin abnormalities on any portion of the body.

(11) All personnel working in the body art facility with the potential for exposure to blood and OPIM, shall not do any of the following in work areas where tattooing, branding, or body piercing are performed or other areas where there is a likely exposure to blood and other OPIM:

(a) Eat.

(b) Drink.

(c) Smoke.

(d) Use vapor products.

(e) Use marijuana.

(f) Apply cosmetics or lip balm.

(g) Handle contact lenses.

(h) Store food.

(12) Body art technicians and other individuals, such as assistants, with the potential for exposure to blood and OPIM shall perform appropriate hand washing when performing, setting up for, or cleaning up after procedures. At a minimum, hand washing must be performed at all of the following times:

(a) Immediately before donning gloves to set-up equipment and instruments used for conducting procedures.

(b) Immediately before donning gloves to perform a procedure.

(c) Immediately after removing gloves at the conclusion of performing a procedure and after removing gloves at the conclusion of procedures performed in the reprocessing area.

(d) When leaving the work area.

(e) As soon as possible after coming in contact with blood or OPIM or a potentially contaminated surface, including after cleaning and disinfecting after each client.

(f) Before and after the following activities:

(i) Eating

(ii) Drinking.

(iii) Smoking.

(iv) Using vapor products.

(v) Applying cosmetics or lip balm.

(vi) Handling contact lenses.

(vii) Using the bathroom.

(viii) When hands are visibly soiled.

(13) Body art technicians shall perform tattooing, branding, or body piercing in a manner that minimizes splashing, spraying, or splattering of blood.

(14) When involved in procedures, body art technicians and other individuals involved in setting up for, performing, or cleaning up after procedures with the potential exposure to blood and OPIM, shall wear disposable medical-grade exam gloves using aseptic technique to ensure that the instruments and gloves are not contaminated to minimize the possibility of transmitting infections during procedures.

(15) A minimum of 1 pair of disposable, medical-grade exam gloves must be used for each of the following stages of the procedure:

(a) Set-up of equipment or instruments used for conducting procedures and skin preparation, applying stencils, or drawing designs on the skin of the procedure area.

(b) The procedure and post-procedure teardown.

(c) Cleaning and disinfection of the procedure area after each use between clients.

(16) If personnel working in the body art facility involved in setting up for, performing, or cleaning up after procedures leaves the procedure area during a procedure, gloves must be removed before leaving the procedure area and a new pair of gloves put on when returning to the procedure area.

(17) When involved in procedures, if the body art technician's glove or gloves, or the glove or gloves of another individual involved, is pierced or torn, or if the glove or gloves become potentially contaminated, the glove or gloves must be changed immediately.

(18) To ensure adequate protection for the technician, latex gloves must not be used in conjunction with petroleum-based products.

(19) All personnel working in the body art facility involved in performing the procedure must not use gloves in place of hand washing procedures.

(20) Gloves and other disposable PPE must be disposed of in an appropriate, covered waste receptacle.

(21) Reusable PPE must be placed in an appropriate provided receptacle for storage until it can be cleaned and disinfected.

(22) If an item or instrument used in a procedure is contaminated by coming in contact with a surface other than the procedure surface or the client, the item must be discarded or removed from service and replaced immediately with a new disposable item or a new sterilized item or instrument before the procedure continues.

(23) Body art technicians shall immediately dispose of all needles, including the needle bar, and other contaminated sharps including razors, directly into a conveniently placed and secured sharps disposal container. Body art technicians shall not do any of the following with a contaminated sharp:

(a) Bend.

(b) Recap.

(c) Break.

(d) Shear.

(e) Disassemble

(f) Manipulate.

(24) For individuals performing microblading or manual procedures, once the needle grouping is attached to the hand piece, it cannot be removed and must be fully disposed of into a sharps container.

R 333.13110 Body art facility requirements; disclosure; consent; violation of rules considered critical violations.

Rule 10. (1) Failure to comply with the requirements in this rule is a critical violation that may lead to immediate closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(2) Before starting a procedure, the body art facility shall provide each client with the following department-approved documents to be completed:

(a) Disclosure statement and notice for filing complaints. This statement must include both the following:

(i) Risks and possible consequences of procedures.

(ii) Information on how to lodge complaints about the body art facility related to compliance with the department's rules for body art facilities.

(b) Aftercare instructions and when to seek medical treatment, if necessary.

(c) Client body art record and consent form. This record must include the following:

(i) If the client is a minor, proof of minor's identification, parental or legal guardian identification, and a copy of documentation verifying the legal guardian's relationship with the minor.

(ii) Documentation of completing a health questionnaire of the client's medical condition as it relates to receiving body art and notification to follow-up with a physician, if necessary.

(iii) Client identification and contact information.

(iv) The design, location, type of procedure, and name of body art technician completing the procedure.

(v) An informed consent statement that documents the client's receipt and completion of the documents in this subrule, including a signature obtained from the client or legal guardian.

(3) An individual shall not sell, give, or provide to a minor a tattooing, branding, or body piercing kit or other tattooing, branding, or body piercing device.

(4) Facility created or altered documents must be at least as comprehensive as state-provided sample documents in order to be approved by the department.

R 333.13111 Client contact in event of communicable disease outbreak; disclosure.

Rule 11. Pursuant to the authority under sections 2221, 2226, and 2231 of act, MCL 333.2221, 333.2226, and 333.2231, the body art facility shall request the client to provide contact information in the event of a communicable disease outbreak investigation, recalls, or other issues pertaining to the client's health.

R 333.13112 Record retention.

Rule 12. (1) All client and body art personnel records, print or digital form, must be retained in a confidential manner in compliance with the following:

(a) All paper records must be retained in a locked filing cabinet or a locked room.

(b) All electronic records must be password protected.

(c) Access to client records must be limited to the following:

(i) Individuals working at the body art facility that need access to the client records in order to carry out the responsibilities of their position at the body art facility.

(ii) Department or local health department staff who need access to records to document body art facility compliance with requirements delineated in these rules, investigate a laboratory confirmed infection, investigate a communicable disease outbreak investigation, or investigate a complaint.

(iii) Other persons authorized by law to access the records.

(2) All client and body art personnel records must be retained on the business premises for 1 year. All records must be maintained for a minimum of 3 years. These records include, but are not limited to, the following:

(a) Safety data sheets for all hazardous chemicals that clients may be exposed to.

(b) Complete record keeping of all instruments, body jewelry, sharps, and inks used for tattooing, branding, or body piercing at the body art facility. Invoices or purchase orders can satisfy this requirement.

(3) After the 3-year minimum for record retention, all client and body art personnel records may be destroyed. Destruction of records include any of the following methods:

(a) Shredding

(b) Incineration.

(c) Electronic deletion.

(d) Disposal in another manner that protects the confidentiality of all client and employee-related documents.

(4) Body art facilities that close and cease operations are required to retain records securely for 3 years. Destruction of records include any of the following methods:

(a) Shredding
(b) Incineration.
(c) Electronic deletion.
(d) Disposal in another manner that protects the confidentiality of all client and employee-related documents.

(5) Body art facilities that are sold or where the business interest has been transferred to another body art facility shall transfer their records or properly dispose of their records in accordance with subrule (4) of this rule, depending on the conditions of the sale or transfer of the business interest.

PART 4. PROTECTIVE PROCEDURES; CRITICAL VIOLATIONS

R 333.13113 Preparation and care of body art area; conducting procedure; violations considered critical violations.

Rule 13. (1) Failure to comply with the requirements in this rule is a critical violation that may lead to immediate closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(2) If reusable instruments are used for procedures, the procedure area must have a separate disposable container or a container capable of being cleaned and disinfected available and used to hold and transport all post-procedure contaminated instruments and equipment from the procedure area to the reprocessing area.

(3) Procedure areas must be organized to prevent cross-contamination of clean, disinfected, or sterile instruments and equipment with contaminated equipment. The organization of the procedure area must include all the following:

(a) A cleaned and disinfected field that contains all cleaned, disinfected, and sterilized instruments and equipment and supplies to be used in the procedure.
(b) All supplies before the procedure begins organized in a manner to minimize contamination of the field.
(c) All sterilized supplies must remain in its sterile package or autoclave cartridge or cassette, or both, until opened in front of the client.

(4) Before a procedure is performed, the immediate skin area and the areas of the skin surrounding where the artist will be touching and where body art is to be placed must be cleaned and then prepared with an appropriate skin preparation antiseptic in accordance with the manufacturer’s instructions.

(5) Washing pads must be disposed of in a covered waste receptacle after a single use.

(6) If shaving is necessary, single-use, disposable razors must be used. Used razors must not be recapped or broken and must be immediately disposed of in an approved, properly labeled, and secured sharps disposal container.

(7) For an oral procedure, the mouth must be rinsed out with an oral antiseptic mouth rinse for at least 30 seconds.

(8) Topical anesthetics, external analgesics, or any other products containing an anesthetic active ingredient must not be applied to any skin or mucosal surface, unless the use is appropriately prescribed and delegated by a licensed physician in this state.

(9) Documentation of the prescription referenced in subrule (8) of this rule must be made part of the client record, and the delegation of duties to anyone other than a physician must comply with section 16215 of the act, MCL 333.16215.

(10) All tattoo pigments or inks, tattoo needles, piercing needles, and all other body art instruments and supplies used for procedures must be used according to the manufacturer’s instructions.

(11) All needles used for body art must be single-use, sterile needles. After use, needles, including the needle bar, or microblading handle must be immediately disposed of in an approved, properly labeled, and secured sharps disposal container.

(12) Expired needles must not be used for procedures.

(13) Expired needles must be disposed of in an approved, properly labeled, and secured sharps disposal container or must be re-packaged and re-sterilized as prescribed in R 333.13116, if approved by the needle manufacturer.

(14) All products and devices applied to the skin, including, but not limited to, stencils, markers, pencils, and pens, must be single-use and disposed of immediately after use. All bulk products must be portioned out for the individual in a manner to prevent contamination of the original container and its contents and must be discarded upon completion of the procedure.

(15) If rotary pen tattoo machines are used, only machines that utilize presterilized, single-use needle cartridge systems with appropriate backflow prevention devices, such as membranes or barriers, or those equipped with detachable, single-use disposable sterile combo couplers and detachable, single-use disposable casings or casings that can be cleaned and sterilized, are allowed for use.

(16) When employing a needle cartridge with an appropriate backflow prevention device, the rotary pen tattoo machine must be covered with an appropriate single-use disposable barrier while in operation, and it must be cleaned and disinfected immediately after each use.

(17) Cartridges used in rotary pen tattoo machines must have manufacturer-provided proof and verification of the backflow prevention device's effectiveness and have undergone testing to ensure compliance, or the artist must demonstrate effectiveness through field testing.

(18) To field test, a needle cartridge must be filled with fluid, such as water or ink, held upright with the tips or needles facing upwards, and the plunger operated at least 100 times to assess for any indications of backflow or leakage.

(19) The use of a rotary pen tattoo machine that utilizes a sponge at the opening of the chamber to prevent the entry of pigment, blood, or other potentially infectious materials into the machine is strictly prohibited.

(20) Sterilized instruments may not be used if the package integrity has been breached, compromised, is wet or stained, or the expiration date has been exceeded without first repackaging and re-sterilizing as prescribed in R 333.13116, if approved by the manufacturer.

(21) Immediately before and while a tattoo is applied, the quantity of tattoo pigment or ink to be used must be transferred from the tattoo pigment or ink bottle and placed in a single-use pigment container.

(22) Tattoo pigment or ink or other contaminated liquid must be absorbed by placing absorbent materials into the containers to absorb the liquid. On completion of the tattoo, these single-use, disposable pigment containers and their contents must be properly discarded.

(23) Tattoo pigment or ink must not be reused on another client or placed back in the original stock container.

(24) Tattoo pigment or ink bottles must be tightly closed when not in use. Tattoo pigments or ink may not be stored on the procedure surface. If tattoo pigment or ink bottles are stored in the procedure area, they may not be accessed during the performance of a procedure without first removing and disposing of contaminated gloves and performing hand washing. New gloves must be used to complete the procedure.

(25) Expired products must not be used for procedures and must be discarded on expiration. Products that have a secondary expiration date, such as a period of time after opening, must be labeled with both the date opened and the new expiration date and must be discarded on expiration.

(26) After performing a tattoo, the following actions must be performed:

(a) Excess pigment or ink must be removed from the skin with a clean, single-use, disposable paper towel or wipe.

(b) The completed tattoo must be washed with an appropriate cleansing solution.

(c) The tattooed area must be allowed to dry.

(d) If an ointment is applied, the ointment must either be from a single-use packet or by using an applicator in such a way that the original container is not contaminated.

(e) A protective product or dressing appropriate to the procedure performed must be applied under the manufacturer's instructions.

(f) In the event of excessive bleeding at any time during a procedure, all products used to check the flow of blood or to absorb blood must be unused, single-use items and must be disposed of immediately after use in appropriate, covered waste receptacles, unless the disposal product meets the definition of medical waste. Styptic pencils, alum blocks, or other solid styptics must not be used to stop excessive bleeding.

R 333.13114 Body art jewelry; prohibitions; composition; violations considered critical violations.

Rule 14. (1) Failure to comply with the requirements in this rule is a critical violation that may lead to immediate closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(2) Material certificates from jewelry suppliers for jewelry used for piercings must meet the following:

(a) Be available to the department upon request.

(b) Be updated from the supplier for each new lot of material

(3) Piercing guns, stud-and-clasp piercing systems, or other similar devices, instruments, or systems are prohibited in body piercings.

(4) All body jewelry used for piercing must be new and unused, cleaned in accordance with the jewelry manufacturer's instructions, and sterilized before use. If the manufacturer does not provide instructions for use, the item must be inspected for cleanliness and sterilized in an autoclave according to the autoclave manufacturer's instructions. Jewelry that is individually packaged and appropriately sterilized by the manufacturer does not need to be cleaned and autoclaved at the facility.

(5) The composition of body jewelry used for piercing must be comprised of only the following materials:

(a) Any and all materials that meet ASTM or ISO standards for implantation.

(b) Solid 14 karat or higher yellow, white, or rose gold that is nickel free and cadmium free. Gold jewelry used for piercing may not be any of the following:

(i) Plated, unless using materials approved by this standard over solid 14 karat or higher yellow, white, or rose gold that is nickel-free and cadmium-free.

(ii) Gold filled.

(iii) Gold overlay or vermeil.

(c) Solid unalloyed or alloyed platinum that is nickel-free and cadmium-free.

(d) Unalloyed niobium that is ASTM B392 compliant.

(e) Lead free glass.

(6) All threaded or press-fit jewelry must have internal tapping.

(7) Body jewelry surfaces and ends must be smooth, and free of nicks, scratches, burrs, stamps, hallmarks, and visible polishing compounds.

(8) Metals must have a consistent finish on surfaces that frequently meet tissue.

R 333.13115 Cleaning and disinfection of procedure surfaces; violations considered critical violations.

Rule 15. (1) Failure to follow the procedures in this rule is a critical violation that may lead to immediate closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(2) All procedure surfaces must be cleaned and disinfected with a disinfectant after each use and between clients, regardless of whether contamination is visible. Disinfectants must be used according to the manufacturer's instructions.

(3) Non-procedure surfaces and equipment must not be touched during the procedure.

(4) If an object is likely to be touched or contaminated during the procedure, it must be covered with an appropriate barrier such as barrier film, a clip cord sleeve, dental bib, or table paper. A barrier used to cover equipment must be discarded at the end of each procedure.

(5) The underlying surface must be cleaned and disinfected after each use between clients and before a new barrier covering is applied.

(6) Cloth or fabric items must not be used in the procedure area.

R 333.13116 Cleaning, and sterilization procedures; violations considered critical violations.

Rule 16. (1) Failure to follow the procedures in this rule is a critical violation that may lead to immediate closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(2) All equipment and devices used to clean and sterilize body art materials and instruments must be suitable for their intended use.

(3) For the cleaning of single-use, disposable instruments before sterilization, follow the instrument manufacturer's instructions. If the manufacturer does not provide instructions for use, the item should be inspected for cleanliness and sterilized in an autoclave according to the autoclave manufacturer's instructions.

(4) All reusable instruments are to be cleaned and sterilized after each use in the reprocessing area. When warm water is used, it should not exceed 104 degrees Fahrenheit or 40 degrees Celsius.

(5) All hinged equipment, such as piercing forceps, must be in the open position.

(6) Instruments must be disassembled.

(7) When using reusable instruments for body art procedures, the instruments must be cleaned as follows:

(a) Soaked or immersed in an enzymatic or other appropriate solution.

(b) Scrubbed to remove debris.

(c) Rinsed and inspected.

(d) Processed through an appropriately covered ultrasonic cleaner.

(e) Rinsed and dried.

(f) Inspected.

(g) Sterilized.

(8) Processes in subrule (7)(a) to (e) of this rule may be accomplished using an automated instrument washer.

(9) All sterilization loads must include a Class V or better chemical indicator.

(10) Chemical indicator results must be recorded for each sterilization cycle.

(11) After being cleaned, all reusable instruments used for body art must be processed for sterilization by either of the following methods:

(a) Contained in sterilization packaging and subsequently sterilized, with the date noted on packaging or indicator strips. This information must match up with the sterilization log and all sterilization packaging must have a color-changing chemical indicator.

(b) Sterilized without packaging, stored, and sterilized again immediately before use.

(12) After completing the sterilization process, sterilized instruments and jewelry must be stored in a cabinet, drawer, or tightly covered container reserved for the storage of sterilized instruments and jewelry.

(13) All instruments used for procedures must remain stored in either of the following:

(a) A sterile package marked with the cycle number until just before a procedure.

(b) A clean container ready for sterilization immediately before the procedure.

(14) The expiration date for reusable sterilized instruments must follow the packaging manufacturer's instructions.

(15) Tools used for reassembly must be cleaned and disinfected immediately before use.

(16) All jewelry must be clean and disassembled before sterilization.

(17) Ultrasonic cleaners, instrument washers, and autoclaves must be used, cleaned, and maintained in accordance with manufacturer's instructions, and a copy of the recommended procedures for the operation of the autoclave must be kept on file at the body art facility. All sterilization procedures must be compliant with ANSI/AAMI ST79 (4.28).

(18) All personnel working in the facility must comply with all of the following procedures when sterilizing non-disposable instruments and handling sterilized instruments:

(a) Either gloves or other required PPE must be worn when preparing materials for sterilization and loading materials into the autoclave.

(b) Appropriate hand washing must be performed immediately before preparing the materials for sterilization and loading materials into the autoclave.

(c) Appropriate hand washing must be performed before donning gloves, unloading materials from the autoclave, and placing them into storage.

(d) Appropriate hand washing must be performed before donning gloves and retrieving sterilized materials from the storage area in preparation for setting up for a procedure.

(19) A different pair of gloves must be used for each of the stages in subrule (18) of this rule for cleaning, disinfecting, and sterilization.

R 333.13117 Spore test; procedures; notification to local health department of positive spore test result; violations considered critical violations.

Rule 17. (1) Failure to follow the procedures in this rule is a critical violation that may lead to immediate closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(2) A license must not be issued until documentation of the autoclave's ability to destroy spores is received by the department if on-site sterilization is performed at the facility.

(3) The owner or operator of a body art facility shall demonstrate that the autoclave used is capable of attaining sterilization by weekly spore detection tests. These tests must be verified through an independent laboratory. Test records must be retained by the owner or operator for a period of at least 3 years and be made available on request.

(4) If a spore test result is positive, the body art facility shall discontinue the use of that autoclave and shall not put that autoclave back into service until it has been serviced and a negative spore test has been recorded.

(5) In the event of a positive spore test, the following procedure must be followed:

(a) If the mechanical indicators, including time, temperature, and pressure, and chemical indicators, including internal and external, suggest that the autoclave is functioning properly, a single positive spore test may not indicate autoclave malfunction. The autoclave must be removed from service and sterilization operating procedures reviewed to determine if operator error could be responsible.

(b) Document procedures taken to remedy the situation in the sterilization log.

(c) To the extent possible reprocess all items processed since the last negative spore test in a separate autoclave that has negative spore test results.

(d) Retest the autoclave by using biological, mechanical, and chemical indicators after correcting identified procedural problems.

(e) If the repeat spore test is negative, and mechanical and chemical indicators are within normal limits, put the autoclave back in service.

(f) If the repeat spore test remains positive, the following procedure is required:

(i) Do not use the autoclave until it has been inspected or repaired and the exact reason for the positive test has been determined. This work should be done by a factory authorized service professional who is certified to repair and maintain the specific autoclave that is being worked on.

(ii) Before placing the autoclave back in service, rechallenge the autoclave with biological indicator tests in 3 consecutive empty chamber sterilization cycles after the cause of the autoclave failure has been determined and corrected.

(iii) Maintain sterilization records, including sterilization cycles, maintenance, and spore tests.

(6) Until a negative spore test has been received, the body art facility shall use an alternative autoclave or either of the following:

(a) Instruments that have a sterilization date on or before the date before the last negative spore test was recorded.

(b) Only single-use, disposable and pre-sterilized instruments.

(7) The owner or operator of the body art facility shall notify the local health department that inspects body art facilities in the jurisdiction in which the body art facility is located of the positive spore test within 24 hours after the positive spore testing result.

R 333.13118 Medical waste; medical waste management plan; storage and containment; disposal procedures.

Rule 18. (1) Pursuant to section 32(4) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.232, the department adopts by reference the EGLE regulations as they relate to medical waste regarding the on-site generation, treatment, packaging, and storage of medical waste under part 138 of the act, MCL 333.13801 to 333.13832, and R 325.1541 to 325.1549.

(2) These standards may be obtained at no charge from the Michigan Department of Environment, Great Lakes, and Energy, Constitution Hall, 525 West Allegan Street
P.O. Box 30473, Lansing, MI 48909-7973, or via the internet at the following website: https://www.michigan.gov/egle/-/media/Project/Websites/egle/Documents/Regulatory-Assistance/Guidebooks/MI-Guide-to-Environmental-Regulations/MI-Guide-Environmental-Regulations-Entire-Book.pdf?rev=690e0fdb00d64ac1b45c7c513333a6ee&hash=FC40A5A66A52C2F530BB391F3070D152 .

(3) All body art establishments shall register as a medical waste producing facility under part 138 of the act, MCL 333.13801 to 333.13832.

PART 5. FACILITY REQUIREMENTS

R 333.13119 Facility requirements; violations considered critical violations.

Rule 19. (1) For new body art facilities and for body art facilities undergoing renovation, an 8-1/2 by 11 or larger scale drawing and floor plan of the proposed facility or the proposed renovation of the facility must be submitted to the local health department that inspects body art facilities in the

jurisdiction in which the body art facility is located. This drawing and a copy of the floor plan must show the accurate placement of each of the following, if applicable:

(a) Walls.
(b) Windows.
(c) Doors.
(d) Waiting area.
(e) Procedure area or areas.
(f) Bathroom or bathrooms.
(g) Reprocessing area.
(h) Equipment and instrument storage area or areas.
(i) Chairs.
(j) Tables.
(k) Sinks.
(l) Light fixtures.

(2) The scale drawing and floor plan in subrule (17) of this rule must be submitted to the local health department at least 30 days before the proposed opening or planned renovation.

(3) The owner or operator of the body art facility shall send the site plan to the local health department for approval before construction or renovation of the body art facility.

(4) Failure to follow the requirements in subrules (5) to (31) of this rule is a critical violation that may lead to immediate closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(5) All body art facilities shall be completely separated by solid walls extending from floor to ceiling, from any room or area used for human habitation, non-body art activities, or another activity that may cause potential contamination of work or procedure surfaces. Doors between these rooms or areas must be self-closing and must remain closed unless entering or exiting the facility, room, or area.

(6) Exterior doors must be self-closing and windows equipped with screens in good repair if the windows are intended to be used for ventilation.

(7) If the body art facility has a check-in room, retail area, or waiting room and retail area, procedure areas must be separated from both the customer waiting area and retail area by a partition or barrier.

(8) There must be a minimum of 45 square feet of floor space for each body art technician’s procedure area in the facility.

(9) Walls, partitions, and floors of a body art facility must be smooth, non-absorbent, maintained in a clean condition, and in good repair.

(10) Carpeting is allowed in the check-in, waiting, or retail area if the area is separate from procedure areas.

(11) All procedure surfaces in the procedure area, including chairs, tables, benches, and counters, must be smooth, free of open holes or cracks, non-absorbent, in good repair, and must be of such construction as to be easily cleaned and disinfected after each use between clients.

(12) No reusable cloth or similar material items, including furniture, may be used in a procedure area.

(13) No multiple use materials may be employed for procedures unless they are non-absorbent and can be cleaned and disinfected.

(14) The facility must be well-ventilated.

(15) The facility must be provided with an artificial light source equivalent to at least 20 foot-candles, 3 feet off the floor, except that 100 foot-candles must be provided at the level where the procedures are being performed, where instruments and sharps are either handled cleaned or assembled, or where handwashing stations are located.

(16) Spot lighting may be utilized to achieve the required degree of illumination for the purpose of conducting procedures. Fluorescent tube lighting over a procedure area must be protected from accidental breakage during a procedure by an appropriate covering.

(17) Body art facilities that use only single-use disposable instruments are not required to have a separate room or area for the sole purpose of reprocessing contaminated tools and equipment.

(18) If on-site sterilization of disposable instruments or new unused jewelry, or both, for piercing is performed at the facility, the cleaning and sterilization must occur in a location that is not subject to reasonably anticipated contamination.

(19) A lined, covered waste receptacle must be provided in every procedure area and restroom. The receptacles must be cleanable, kept clean, and have self-closing lids with hands-free controls. The receptacles must be emptied weekly or when needed. Municipal solid waste removal must meet all local or state regulations, or both.

(20) The facility must be free of pests, including insects, vermin, and rodents.

(21) An initial inspection of the premises is required before body art services can be performed in this new facility or renovated area.

(22) All sinks in the body art facility must only be used for their designated purpose.

(23) All sinks must be plumbed and connected directly to an approved water supply system and an approved sewage disposal system. Sinks must have warm running water under pressure. Portable sinks must not be approved in a permanent facility.

(24) Liquid soap and single-use, disposable paper towels must be readily accessible at handwashing sinks. There must be a covered waste receptacle by each sink for the disposal of paper towels.

(25) A separate permanent sink designated for hand washing only must be provided. The sink must not be located in the lavatory.

(26) One hand sink must serve no more than 3 body art technicians with readily accessible and unobstructed access where the body artists can go to and from their workstations without having to touch anything with their hands.

(27) A body art facility must have a minimum of 1 lavatory with a toilet, a separate sink, and a self-closing door.

(28) Body art facilities that use reusable instruments must have a separate room or area for the sole purpose of reprocessing contaminated tools and instruments. Both of the following are required:

(a) This area must be separated from the remainder of the facility by a minimum of a wall or partition and must be an area that does not allow client access.

(b) The reprocessing area must be organized to prevent cross-contamination of clean, disinfected, or sterile equipment with dirty equipment.

(29) All chemical or cleaning supply containers, including skin antiseptics and cleansers, must be labeled with contents.

(30) Animals are not allowed in the body art facility except service animals in accordance with the Americans with Disabilities Act of 1990, 42 USC 12101to 12213, and 8 CFR 35.136(a). This subrule does not apply to aquariums located in the lobby or client waiting area.

(31) Live plants are not allowed in procedure areas or reprocessing areas.

(32) In addition to receiving construction and renovation authority, water supply, plumbing, and sewage disposal must also comply with the requirements of the local health authority under sections 2235 and 2433 of the act, MCL 333.2235 and 333.2433, and under sections 8a and 8b of the Stille-DeRossett-Hale single state construction code act, 1972 PA 230, MCL 125.1508a and 125.1508b.

R 333.13120 Temporary facility license requirements for owners and operators of body art facilities; facilities; violations considered critical violations.

Rule 20. (1) An owner or operator may have more than 1 technician working under the temporary license if there is a single set-up where individual procedure areas are adjacent or contiguous with one another. If there are multiple procedure areas at the event that are not adjacent or contiguous with one another, the owner or operator shall apply for separate temporary licenses.

(2) If the local health department that has jurisdiction for the on-site inspection of a temporary license documents compliance in accordance with these rules, the department shall grant a license to the applicant for the operation of a temporary body art facility. A body art facility inspection report form approved, dated, and signed by the representative of the local health department that has jurisdiction for the inspection must be posted on site instead of a formalized department license.

(3) The temporary body art facility license must be posted in a prominent and conspicuous place within the temporary body art facility where it may be readily seen by all clients.

(4) The department-provided disclosure statement and notice for filing complaints must be posted in a prominent and conspicuous place where it may be readily seen by all clients.

(5) Failure to follow the following requirements is a critical violation that may lead to immediate closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a:

(a) The temporary body art facility must be contained in a completely enclosed structure protected from wind, dust, and outdoor elements.

(b) The temporary body art facility must comply with the requirements in these rules. However, the following adaptations are allowed for requirements related to hand washing, facility size, lighting, and sterilization of instruments:

(i) The facility must have a minimum of 80 square feet of floor space. The space must have smooth, non-absorbent flooring that can be cleaned and disinfected or disposed of.

(ii) No more than 2 artists working at the same time in a single 80 square foot area.

(iii) Provide enough temporary hand washing sinks with warm water under pressure, liquid soap, and single-use disposable paper towels to adequately service the number of body art technicians present.

(iv) At least 100 foot-candles of light at the level where the procedure is to be performed and where instruments and sharps are assembled. Spot lighting may be used to achieve this required degree of illumination for the purpose of conducting procedures.

(v) Only single-use, disposable sterilized instruments must be used.

(vi) If new and unused jewelry or instruments are sterilized on site, there must be documentation that a spore test was performed on the autoclave not more than 7 days before the first date that the temporary license is in effect.

(vii) Sharps containers may be transported to an accepting medical waste treatment facility if in compliance with United States Department of Transportation materials of trade exemptions guidelines under 45 CFR parts 171 to 180.

PART 6. ENFORCEMENT

R 333.13121 Enforcement.

Rule 21. (1) Violations of these rules must be cited on the inspection report by the local health department for the jurisdiction in which the body art facility is located. The inspection report must delineate both critical and non-critical violations. Non-critical violations must be corrected by the next renewal inspection, or such period of time as specified. Critical violations must be corrected as required by the compliance schedule under section 13105a of the act, MCL 333.13105a.

(2) Critical violations, if not corrected in the time specified, may lead to closure, or suspension or revocation, or both, of the body art facility license, as provided under section 13105a of the act, MCL 333.13105a.

(3) The owner or operator may appeal an order to cease operation in writing to the department or local health department that recommended the cessation. The appeal must ask for a re-determination and request a follow-up inspection by the local health department.

(4) If the local health department denies the appeal redetermination based on a follow- up inspection, the state or local health department, whichever governmental entity has initiated the enforcement action, shall inform each applicant in writing of the right to a fair hearing under chapter 4 of the administrative procedures act of 1969, 1969 PA 306, MCL 24.271 to 24.288. The notice of right to a fair hearing must include the method by which a hearing must be requested, and that any positions or arguments on behalf of the individual may be presented personally or by legal counsel.

(5) On receipt of a letter from a body art facility requesting an administrative hearing regarding suspension of licensure, the state or local health department shall schedule a date and time for an administrative hearing and notify the department and the applicant.

(6) In addition to enforcement action authorized by law, a civil action may be brought for injunctive relief.

(7) Complaints concerning an unlicensed or licensed body art facility submitted to the department must be referred to the local health department that has jurisdiction for the complaint pursuant to the act.

ADMINISTRATIVE RULES

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

DIRECTOR'S OFFICE

ACCOUNTANCY – GENERAL RULES

Filed with the secretary of state on September 29, 2025

These rules become effective immediately after filing with the secretary of state unless adopted under section 33, 44, or 45a(9) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.233, 24.244, or 24.245a. Rules adopted under these sections become effective 7 days after filing with the secretary of state.

(By authority conferred on the department of licensing and regulatory affairs by sections 205, 308, 721, 725, 726, 728, and 729 of the occupational code, 1980 PA 299, MCL 339.205, 339.308, 339.721, 339.725, 339.726, 339.728, and 339.729, and Executive Reorganization Order Nos. 1991-9, 1996-2, 2003-1, 2008-4, and 2011-4, MCL 338.3501, 445.2001, 445.2011, 445.2025, and 445.2030)

R 338.5102, R 338.5115, and R 338.5116 of the Michigan Administrative Code are amended, as follows:

PART 1. GENERAL PROVISIONS

R 338.5102 Standards of professional practice adopted by reference.

Rule 102. (1) The following standards are approved and adopted by reference:

(a) The standards issued by the American Institute of CPAs (AICPA), 220 Leigh Farm Road, Durham, North Carolina, 27707, in the publication titled “AICPA Professional Standards” updated June 15, 2024, and any statements issued as of the effective date of this rule, which are available at a cost of $335.00 from the institute’s website at https://www.aicpa.org/cpe-learning/publication or at no cost from the institute’s website at https://www.aicpa-cima.com/resources/landing/standards-and-statements.

(b) The standards issued by the Public Company Accounting Oversight Board (PCAOB), 1666 K Street NW, Suite 300, Washington, D.C., 20006, in the publication titled “PCAOB Standards and Related Rules” 2025 edition, and any updates issued as of the effective date of this rule, which are available at a cost of $235.00 from the AICPA’s website at https://www.aicpa.org/cpe-learning/publication or at no cost from the AICPA’s website at https://pcaobus.org/oversight/standards.

(c) The auditing standards issued by the Government Accountability Office, 441 G Street, NW, Washington, D.C., 20548, in the publication titled “Government Auditing Standards” 2018 Revision Technical Update April 2021, which are available at no cost on the Office’s website at https://gaoinnovations.gov/yellowbook/.

(d) The standards issued by the International Auditing and Assurance Standards Board (IAASB), 529 5th Avenue, New York, New York, 10017, in the publication titled “2023-2024 Handbook of International Quality Management, Auditing, Review, Other Assurance, and Related Services Pronouncements” issued on August 29, 2024, and any related pronouncements issued as of the effective

date of this rule, which are available at no cost from the IAASB's website at https://www.iaasb.org/standards-pronouncements.

(e) The accounting standards issued by the Financial Accounting Standards Board (FASB), 801 Main Avenue, P.O. Box 5116, Norwalk, Connecticut, 06856, in the publication titled "FASB Accounting Standards Codification" as of November 2024, and any updates published as of the effective date of this rule, which are available at no cost from the board's website at https://asc.fasb.org.

(f) The accounting standards issued by the Governmental Accounting Standards Board (GASB), 801 Main Avenue, P.O. Box 5116, Norwalk, Connecticut, 06856, in the publication titled "GASB Codification" as of June 30, 2024, and any pronouncements published as of the effective date of this rule, which are available at no cost from the board's website at https://gars.gasb.org/.

(g) The accounting standards issued by the International Accounting Standards Board, Columbus Building, 7 Westferry Circus, Canary Wharf, London E14 4HD, United Kingdom, in the publication titled "2024 International Financial Reporting Standards IFRS®" issued on January 1, 2024, and any pronouncements issued as of the effective date of this rule, which are available at a cost of £99.00 from the board's website at http://www.ifrs.org.

(h) The United States Securities and Exchange Commission (SEC) rules contained in 17 CFR chapter 2 and the SEC's interpretative releases and policy statements issued as of the effective date of this rule. The SEC rules may be obtained free of charge at https://www.ecfr.gov/. The SEC's interpretative releases and policy statements may be obtained free of charge at https://www.sec.gov.

(2) Copies of the standards adopted in this rule are available for inspection and distribution at the cost of 25 cents per page from the Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 W. Ottawa Street, P.O. Box 30670, Lansing, Michigan, 48909.

(3) A licensee shall satisfy the applicable standards adopted in subrule (1) of this rule.

PART 2. LICENSURE REQUIREMENTS

R 338.5115 Educational requirements for the uniform CPA exam; approved educational institutions; adoption of accreditation standards by reference.

Rule 115. (1) To satisfy section 725(1)(b) and (2) of the code, MCL 339.725, an individual shall provide proof, as directed by the department, verifying both the following requirements:

(a) Completion of a curriculum required for a baccalaureate degree consisting of not less than 120 semester hours at a higher education institution approved under subrule (3) or (4) of this rule or considered substantially equivalent under subrule (5) of this rule.

(b) Completion of a concentration in accounting at a higher education institution approved under subrule (3) or (4) of this rule or considered substantially equivalent under subrule (5) of this rule, which includes both the accounting and general business requirements under subrule (2) of this rule.

(2) A concentration in accounting must include both the following accounting and general business requirements:

(a) Not less than 24 semester hours of accounting courses in all the following accounting content areas:

(i) Accounting information systems.

(ii) Auditing and attestation services.

(iii) Cost or managerial accounting.

(iv) Financial accounting and reporting.

(v) Governmental or fund accounting.

(vi) Taxation.

(b) Not less than 24 semester hours of general business courses, other than accounting, which may include any of the following general business content areas:

(i) Business communications.

(ii) Business ethics.

(iii) Business law.

(iv) Economics.

(v) Finance.

(vi) Management.

(vii) Marketing.

(viii) Information systems or technology.

(ix) Quantitative methods.

(x) Statistics.

(xi) Other general business content areas approved by the department.

(3) The standards for recognition of accrediting organizations developed and adopted by the Council for Higher Education Accreditation (CHEA), One Dupont Circle NW, Suite 510, Washington, D.C. 20036, in the publication titled "CHEA Standards and Procedures for Recognition," effective October 4, 2021, which are available at no cost on the council's website at https://www.chea.org, are approved and adopted by reference. If a higher education institution is accredited by the accrediting body of the region in which the institution is located and the accrediting body satisfies the recognition standards of CHEA, then the institution is approved.

(4) The criteria for recognition and the recognition process for the secretary's recognition of accrediting agencies of the United States Department of Education, 400 Maryland Avenue SW, Washington, D.C. 20202, in 34 CFR 602.10 to 602.39, effective July 1, 2020, which are available at no cost on the United States Department of Education's website at https://www.ed.gov/, are approved and adopted by reference. If a higher education institution is accredited by the accrediting body of the region in which the institution is located and the accrediting body satisfies the recognition criteria and process of the United States Department of Education, then the institution is approved.

(5) An individual who attended an unaccredited higher education institution shall establish that the applicant has completed educational requirements at a higher education institution that satisfies accreditation requirements substantially equivalent to those recognized in subrule (3) or (4) of this rule, by providing a credential evaluation completed by either the National Association of State Boards of Accountancy (NASBA) or a credential evaluation organization that is a current member of the National Association of Credential Evaluation Services (NACES).

(6) Copies of the standards and criteria approved and adopted by reference in this rule are available for inspection and distribution at a cost of 25 cents per page from the Board of Accountancy, Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, 611 W. Ottawa Street, P.O. Box 30670, Lansing, Michigan, 48909.

R 338.5116 Educational requirements for certificate of CPA.

Rule 116. (1) To satisfy section 725(1)(e) of the code, MCL 339.725, an individual shall provide proof, as directed by the department, verifying all the following requirements:

(a) Completion of not less than 150 semester hours at a higher education institution approved under R 338.5115(3) or (4) or considered substantially equivalent under R 338.5115(5).

(b) Completion of a baccalaureate degree or higher degree from a higher education institution approved under R 338.5115(3) or (4) or considered substantially equivalent under R 338.5115(5).

(c) Completion of a concentration in accounting under R 338.5115(1)(b) and (2) at a higher education institution approved under R 338.5115(3) or (4) or considered substantially equivalent under R 338.5115(5).

(2) A person may earn credit only once for an accounting or general business topic. If the department decides that 2 courses are duplicative, then only the semester hours of the first course are counted toward the semester hour requirement.

ADMINISTRATIVE RULES

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

DIRECTOR'S OFFICE

SANITARIANS REGISTRATION – GENERAL RULES

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These rules become effective immediately after filing with the secretary of state unless adopted under section 33, 44, or 45a(9) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.233, 24.244, or 24.245a. Rules adopted under these sections become effective 7 days after filing with the secretary of state.

(By authority conferred on the director of the department of licensing and regulatory affairs by sections 16145, 16148, and 18413 of the public health code, 1978 PA 368, MCL 333.16145, 333.16148, and 333.18413, and Executive Reorganization Order Nos. 1991-9, 1996-2, 2003-1, 2009-10, and 2011-4, MCL 338.3501, 445.2001, 445.2011, 333.26364, and 445.2030)

R 338.3911, R 338.3921, R 338.3925, R 338.3927, R 338.3929, and R 338.3931 of the Michigan Administrative Code are amended, as follows:

PART 2. EDUCATION

R 338.3911 Accreditation standards; adoption by reference.

Rule 11. (1) The standards for accrediting environmental health baccalaureate programs developed and adopted by the National Environmental Health Science and Protection Accreditation Council (EHAC), P.O. Box 66057, Burien, Washington 98166 in the publication entitled "Requirements for the Accreditation of Environmental Health Science and Protection Baccalaureate Degree Programs," in force January 1, 2024, which is available at no cost from the council's website at https://www.nehspac.org/, are approved and adopted by reference.

(2) The standards for accrediting environmental health graduate programs developed and adopted by EHAC, P.O. Box 66057, Burien, Washington 98166 in the publication entitled "Guidelines for the Accreditation of Environmental Health Science and Protection Graduate Degree Programs," in force January 1, 2025, which is available at no cost from the council's website at https://www.nehspac.org/, are approved and adopted by reference.

(3) The standards for recognition of accrediting organizations developed and adopted by the Council for Higher Education Accreditation (CHEA), One Dupont Circle NW, Suite 510, Washington D.C. 20036, in the publication entitled "CHEA Standards and Procedures for Recognition," effective October 4, 2021, which are available at no cost on the council's website at https://www.chea.org, are approved and adopted by reference.

(4) The criteria for recognition and the recognition process for the secretary's recognition of accrediting agencies of the United States Department of Education, 400 Maryland Avenue, S.W., Washington, D.C. 20202, in 34 CFR 602.10 to 602.39, effective July 1, 2020, which are available at no

cost on the United States Department of Education's website at https://www.ed.gov/, are approved and adopted by reference.

(5) Copies of the standards and criteria approved and adopted in this rule are available for inspection and distribution at a cost of 25 cents per page from the Bureau of Professional Licensing, Department of Licensing and Regulatory Affairs, 611 West Ottawa Street, P.O. Box 30670, Lansing, Michigan 48909.

PART 3. REGISTRATION

R 338.3921 Training standards for identifying victims of human trafficking; requirements.

Rule 21. (1) Under section 16148 of the code, MCL 333.16148, the individual seeking registration or who is registered shall have completed training in identifying victims of human trafficking that satisfies all the following:

(a) Training content must cover all the following:

(i) Understanding the types and venues of human trafficking in this state or the United States.

(ii) Identifying victims of human trafficking in healthcare settings.

(iii) Identifying the warning signs of human trafficking in healthcare settings for adults and minors.

(iv) Identifying resources for reporting the suspected victims of human trafficking.

(b) Acceptable providers or methods of training include any of the following:

(i) Training offered by a nationally recognized or state-recognized, health-related organization.

(ii) Training offered by, or in conjunction with, a state or federal agency.

(iii) Training obtained in an educational program that has been approved by the department for initial registration, or by a college or university.

(iv) Reading an article related to the identification of victims of human trafficking that satisfies the requirements of subdivision (a) of this subrule and is published in a peer review journal, healthcare journal, or professional or scientific journal.

(c) Acceptable modalities of training include any of the following:

(i) Teleconference or webinar.

(ii) Online presentation.

(iii) Live presentation.

(iv) Printed or electronic media.

(2) The department may select and audit a sample of individuals and request documentation of proof of completion of training. If audited by the department, the individual shall provide an acceptable proof of completion of training, including either of the following:

(a) Proof of completion certificate issued by the training provider that includes the date, provider name, name of training, and individual's name.

(b) A self-certification statement by the individual. The certification statement must include the individual's name and 1 of the following:

(i) For training completed under subrule (1)(b)(i) to (iii) of this rule, the date, training provider name, and name of training.

(ii) For training completed under subrule (1)(b)(iv) of this rule, the title of article, author, publication name of the peer review journal, healthcare journal, or professional or scientific journal, and the date, volume, and issue of publication, as applicable.

R 338.3925 Registration; requirements.

Rule 25. (1) An applicant for a sanitarian registration shall satisfy the requirements of the code and the rules promulgated under the code, and all the following requirements:

(a) Provide the required fee and a completed application on a form provided by the department.

(b) Provide proof, as directed by the department, verifying completion of 1 of the following:

(i) The requirements of R 338.3913(1)(a). No proof of prior work experience is required.

(ii) The requirements of R 338.3913(1)(b) and verification from the applicant's employer that the applicant has completed 4,000 hours in planning, developing, or implementing systems to improve the quality of air, water, food, or other environmental factors that affect the health of the public.

(iii) The requirements of R 338.3913(1)(c), subject to the following requirements:

(A) If the credential evaluation required under R 338.3913(3) determines that the applicant's educational credentials are substantially equivalent to R 338.3913(1)(a), no proof of prior work experience is required.

(B) If the credential evaluation required under R 338.3913(3) determines that the applicant's educational credentials are substantially equivalent to R 338.3913(1)(b), verification is required from the applicant's employer that the applicant has completed 4,000 hours in planning, developing, or implementing systems to improve the quality of air, water, food, or other environmental factors that affect the health of the public.

(c) Provide proof, as directed by the department, verifying a passing score on the examination adopted under R 338.3923.

(2) If an applicant for a sanitarian registration provides proof, as directed by the department, that the applicant is a current holder in good standing of the REHS/RS credential, then it is presumed that the applicant satisfies the requirements of subrule (1)(b) and (c) of this rule.

R 338.3927 Registration by endorsement.

Rule 27. (1) An applicant for a sanitarian registration by endorsement shall satisfy the requirements of the code and the rules promulgated under the code, and all the following requirements:

(a) Provide the required fee and a completed application on a form provided by the department.

(b) Provide proof, as directed by the department, verifying a current and full sanitarian license or registration in another state.

(c) Provide proof, as directed by the department, verifying that the applicant completed the educational requirements in the United States for licensure or registration as a sanitarian in the United States.

(d) Provide proof, as directed by the department, verifying a passing score on the examination adopted under R 338.3923.

(2) If an applicant for a sanitarian registration provides proof, as directed by the department, that the applicant is a current holder in good standing of the REHS/RS credential, then it is presumed that the applicant satisfies the requirements of subrule (1)(c) and (d) of this rule.

(3) An applicant who is or has been licensed, registered, or certified in a health profession or specialty by another state, the United States military, the federal government, or another country shall disclose that fact on the application form. The applicant shall satisfy the requirements of section 16174(2) of the code, MCL 333.16174, including verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application. If registration is granted and it is determined that sanctions have been imposed, the department may impose appropriate sanctions under section 16174(5) of the code, MCL 333.16174.

R 338.3929 Application for sanitarian reregistration; requirements.

Rule 29. (1) An applicant whose sanitarian registration has lapsed may be reregistered within 3 years after the expiration date of the registration under section 16201(3) of the code, MCL 333.16201, if the

applicant satisfies the requirements of the code and the rules promulgated under the code, and both of the following requirements:

(a) Provides the required fee and a completed application on a form provided by the department.

(b) Establishes good moral character as that term is defined in, and determined under, 1974 PA 381, MCL 338.41 to 338.47.

(2) An applicant whose sanitarian registration has lapsed may be reregistered more than 3 years after the expiration date of the registration under section 16201(4) of the code, MCL 333.16201, if the applicant satisfies the requirements under the code and the rules promulgated under the code, and all the following requirements:

(a) Establishes good moral character as that term is defined in, and determined under, 1974 PA 381, MCL 338.41 to 338.47.

(b) Provides fingerprints as required under section 16174(3) of the code, MCL 333.16174.

(c) Provides proof, as directed by the department, verifying a passing score on the examination adopted under R 338.3923 during the 3-year period immediately preceding the date of application for reregistration.

(3) If an applicant for a sanitarian reregistration provides proof, as directed by the department, that the applicant is a current holder in good standing of the REHS/RS credential, then it is presumed that the applicant satisfies the requirement of subrule (2)(c) of this rule.

(4) An applicant who is or has been licensed, registered, or certified in a health profession or specialty by another state, the United States military, the federal government, or another country shall disclose that fact on the application form. The applicant shall satisfy the requirements of section 16174(2) of the code, MCL 333.16174, including verification from the issuing entity showing that disciplinary proceedings are not pending against the applicant and sanctions are not in force at the time of application. If registration is granted and it is determined that sanctions have been imposed, the department may impose appropriate sanctions under section 16174(5) of the code, MCL 333.16174.

R 338.3931 Registration renewal; requirements.

Rule 31. An applicant for renewal shall satisfy the requirements of the code and the rules promulgated under the code, and provide the required fee and a completed application on a form provided by the department.

PROPOSED ADMINISTRATIVE RULES, NOTICES OF PUBLIC HEARINGS

MCL 24.242(3) states in part:

"… the agency shall submit a copy of the notice of public hearing to the Office of Regulatory Reform for publication in the Michigan register. An agency's notice shall be published in the Michigan register before the public hearing and the agency shall file a copy of the notice of public hearing with the Office of Regulatory Reform."

MCL 24.208 states in part:

"Sec. 8. (1) The Office of Regulatory Reform shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:

* * *

(d) Proposed administrative rules.

(e) Notices of public hearings on proposed administrative rules."

PROPOSED ADMINISTRATIVE RULES

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

PUBLIC SERVICE COMMISSION

GAS SAFETY

Filed with the secretary of state on

These rules become effective immediately after filing with the secretary of state unless adopted under section 33, 44, or 45a(9) of the administrative procedures act of 1969, 1969 PA 306, MCL 24.233, 24.244, or 24.245a. Rules adopted under these sections become effective 7 days after filing with the secretary of state.

(By authority conferred on the public service commission by section 2 of 1969 PA 165, MCL 483.152**,** and section 231 of the Executive organization act of 1965, 1965 PA 380, MCL 16.331, and Executive Reorganization Order Nos. 1996-2, 2003-1, 2008-4, 2011-4, and 2015-3, MCL 445.2001, 445.2011, 445.2025, 445.2030, and 460.21)

R 460.20503 and R 460.20606 of the Michigan Administrative Code are amended, and R 460.20319 is added, as follows:

PART 3. ADDITIONAL MINIMUM SAFETY STANDARDS

R 460.20319 Filing of operation and maintenance manual with commission staff required.
Rule 319. In addition to the requirements contained in 49 CFR 192.605, which is adopted by reference in R 460.20606, an operator shall file the procedures, program, or operation and maintenance manual required by 49 CFR 192.12, 192.605, 192.805, 192.907, and 192.1005 with the commission staff in paper or electronic form. The operation and maintenance manual must include procedures that address both the federal rules and the rules contained in the gas safety standards of this state. An operator shall file a change in the operation and maintenance manual with the commission staff within 90 calendar days after the change is made. An operator shall identify the specific changes.

PART 5. RECORDS AND REPORTS

R 460.20503 Reports of incidents; telephonic notice to the commission staff.
Rule 503. (1) At the earliest practicable moment following discovery, an operator shall notify the commission staff ~~of any~~ of the following situations:
(a) An incident that is reportable pursuant to 49 CFR 191.5, which is adopted by reference in R 460.20606.
(b) An event resulting in estimated property damage of $**25**~~10~~,000.00 or more including loss to the operator and others, or both, but excluding the cost of gas lost. As used in this subdivision, an “event” means on or relating to an operator’s facilities that may or may not involve a release of gas.
(c) An event resulting in the loss of service to more than 100 customers.

(d) An event involving a customer's gas facility that results in a fatality or an explosion causing structural damage.

(e) An event resulting in an unintentional release of gas estimated by the operator to be 1 million cubic feet or more or an unintentional activation of an emergency shutdown system of ~~any~~ **a** portion of a compressor station involving a release of gas.

(f) An event that causes the pressure of ~~any~~ **a** portion of a pipeline system to rise above its maximum allowable operating pressure plus the build-up allowed for operation of pressure limiting or control devices.

(g) An event that receives or is likely to receive extensive news coverage or is significant in the judgment of the operator, even though it did not meet the criteria of subdivision (a), (b), (c), (d), (e) or (f) of this subrule. This subdivision is not subject to the penalty provisions of section 11 of 1969 PA 165, MCL 483.161.

(2) If additional information is received by the operator after the initial report that indicates a different cause, more serious injury, or more serious property damage than was initially reported, then the operator shall make a supplemental telephone report to the commission staff as soon as practicable.

(3) When requested by the commission staff, an operator shall supplement a report made in accordance with subrule (1) of this rule within a reasonable time, with a written report giving full details, such as the cause of the incident or occurrence, the extent of injuries or damage, and the steps taken, if any, to prevent a recurrence of the incident or occurrence.

PART 6. ADOPTION OF STANDARDS

R 460.20606 Pipeline and hazardous materials safety administration standards; adoption by reference.

Rule 606. (1) The following pipeline and hazardous materials safety administration standard is adopted by reference in these rules and is available from the U.S. Government Publishing Office ~~via the internet~~ at ~~www.ecfr.gov~~ **www.eCFR.gov** at no charge at the time of adoption of these rules and is also available for public inspection from the Michigan Public Service Commission, 7109 West Saginaw Highway, Lansing, Michigan 48917: 49 CFR part 40 entitled “Procedures for Transportation Workplace Drug and Alcohol Testing Programs,” (revised October 1, 202**4**~~3~~ edition).

(2) The following Office of Pipeline and Hazardous Materials Safety Administration standards are adopted by reference in these rules and may be ordered from the U.S. Government Publishing Office ~~via the internet~~ at ~~www.ecfr.gov~~ **www.eCFR.gov** at no charge at the time of adoption of these rules and are also available for public inspection from the Michigan Public Service Commission, 7109 West Saginaw Highway, Lansing, Michigan 48917:

(a) 49 CFR part 191 entitled “Transportation of Natural and Other Gas by Pipeline: Annual Reports, Incident, and Other Reporting,” (October 1, 202**4**~~3~~ edition).

(b) 49 CFR part 192 entitled “Transportation of Natural and Other Gas by Pipeline: Minimum Federal Safety Standards,” (October 1, 202**4**~~3~~ edition).

(c) 49 CFR part 199 entitled “Drug and Alcohol Testing,” (October 1, 202**4**~~3~~ edition).

NOTICE OF PUBLIC HEARING

Department of Licensing and Regulatory Affairs
Public Service Commission
Administrative Rules for Gas Safety
Rule Set 2025-27 LR

NOTICE OF PUBLIC HEARING
Tuesday, October21, 2025
09:00 AM

Lake Michigan Hearing Room
7109W. Saginaw Highway, Lansing Michigan 48917

The Department of Licensing and Regulatory Affairs will hold a public hearing to receive public comments on proposed changes to the Gas Safety rule set.

The purpose of the proposed rule changes is to adopt by reference current federal regulations governing gas safety and to raise the minimum threshold for state reportable incidents from $10,000 to $25,000.

By authority conferred on the public service commission by section 2 of 1969 PA 165, MCL483.152, and section 231 of the Executive organization act of 1965, 1965 PA 380, MCL 16.331, and Executive Reorganization Order Nos. 1996-2, 2003-1, 2008-4, 2011-4, and 2015-3, MCL 445.2001, 445.2011, 445.2025, 445.2030, and 460.21.

The proposed rules will take effect immediately after filing with the Secretary of State. The proposed rules are published on the State of Michigan's website atwww.michigan.gov/ARD and in the 10/15/2025 issue of the Michigan Register. Copies of these proposed rules may also be obtained by mail or electronic mail at the following email address: renfrob@michigan.gov.

Comments on these proposed rules may be made at the hearing, by mail, or by electronic mail at the following addresses until 11/4/2025 at 05:00PM.

Michigan Public Service Commission: Attention Executive Secretary, Case No. U-21847.

7109 W Saginaw Hwy, Lansing MI 48917

LARA-MPSC-Edockets@michigan.gov

The public hearing will be conducted in compliance with the 1990 Americans with Disabilities Act. If the hearing is held at a physical location, the building will be accessible with handicap parking available. Anyone needing assistance to take part in the hearing due to disability may call 517-284-8090 to make arrangements.

CORRECTION OF OBVIOUS ERRORS IN PUBLICATION

MCL 24.256(1) states in part:

"Sec. 56. (1) The Office of Regulatory Reform shall perform the editorial work for the Michigan register and the Michigan Administrative Code and its annual supplement. The classification, arrangement, numbering, and indexing of rules shall be under the ownership and control of the Office of Regulatory Reform, shall be uniform, and shall conform as nearly as practicable to the classification, arrangement, numbering, and indexing of the compiled laws. The Office of Regulatory Reform may correct in the publications obvious errors in rules when requested by the promulgating agency to do so…"

CORRECTION OF OBVIOUS ERRORS IN PUBLICATION

October 2, 2025

Ms. Deidre O'Berry
The Michigan Office of Administrative Hearings and Rules
Ottawa Building, 2nd Floor
611 West Ottawa Street
Lansing, Michigan 48909

RE: Request for a correction of the Michigan Administrative Code, Licensed Midwifery rules filed with the Office of the Great Seal on October 2, 2025.

Dear Ms. O'Berry:

The Licensing and Regulatory Affairs Agency, Bureau of Professional Licensing, is writing to request that the Michigan Office of Administrative Hearings and Rules exercise its discretion to correct an obvious error in the Michigan Administrative Code, pursuant to Section 56(1), MCL 24.256, of the Administrative Procedures Act of 1969, 1969 PA 306, as amended.

The Agency requests the following corrections to Table 1 and Table 2 in R 338.17137 as follows:

- Table 1 Maternal – Administration of Prescription Drugs and Medications
  - In the fifth row of this table, the unit of measure under "Duration of Treatment" for Methylergonovine (Methergine) should be corrected from "lligram" to "milligram". The complete phrase should read, "0.2 milligram IM q2-4 hours PRN; not to exceed 5 doses."
  - In the 25th row of this table (second row from the bottom) pertaining to Ondansetron (Zofran) under the column labeled "Dose", the language should be corrected from "4-8 IVP" to add "milligrams". The complete phrase should read, "4-8 milligrams IVP / 4 milligrams (up to twice PRN)."

- In Table 2 Neonatal – Administration of Prescription Drugs and Medications, in the second row from the bottom of the table, the information under "Dose" for epinephrine administered by the umbilical venous catheter or interosseous route contains a parenthetical. The unit of measure within the parenthetical should be corrected to be "milligram per kilogram". The complete phrase should read, "0.2 milliliter per kilogram (0.02 milligram per kilogram) of body weight in a 1:10,000 concentration."

The above errors occurred in the draft rules dated October 2, 2024, when the units of measure in the draft were edited to use whole words instead of abbreviations. In the fifth row of Table 1, "milligram" was incorrectly formatted with a strike through "mi." In the 25th row of Table 1, "milligrams" was incorrectly formatted with a strike line through "mg" and "milligrams" instead of only through "mg". In Table 2, the abbreviation "mg/kg" was incorrectly written as "milliliter per kilogram" instead of "milligram per kilogram."

Please amend the rule set to reflect these corrections in both the *Michigan Register* and the Michigan Administrative Code.

Sincerely,

Liz Arasim
Regulatory Affairs Officer
Department of Licensing and Regulatory Affairs

MICHIGAN ADMINISTRATIVE CODE TABLE
(2025 SESSION)

MCL 24.208 states in part:

"Sec. 8. (1) The Office of Regulatory Reform shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:

* * *

"(2) The office of regulatory reform shall publish a cumulative index for the Michigan register."

The following table cites administrative rules promulgated during the year 2023 and indicates the effect of these rules on the Michigan Administrative Code (1979 ed.).

MICHIGAN ADMINISTRATIVE CODE TABLE
(2025 RULE FILINGS)

R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue
14.31	A	8	168.843	*	12	257.4	*	12
14.32	A	8	168.844	*	12	299.9101	*	8
14.33	A	8	168.845	*	12	299.9102	*	8
14.34	A	8	168.846	A	12	299.9013	*	8
14.35	A	8	168.901	*	12	299.9104	*	8
14.36	A	8	168.901a	A	12	299.9105	*	8
14.37	A	8	168.902	*	12	299.9106	*	8
14.38	A	8	168.903	*	12	299.9107	*	8
14.39	A	8	168.904	*	12	299.9108	*	8
168.1	*	12	168.905	*	12	299.9109	*	8
168.5	A	12	168.906	*	12	299.9201	*	8
168.6	A	12	168.906a	*	12	299.9202	*	8
168.771	*	12	168.907	R	12	299.9203	*	8
168.772	*	12	168.908	*	12	299.9204	*	8
168.773	*	12	168.909	*	12	299.9206	*	8
168.774	*	12	168.910	*	12	299.9207	*	8
168.775	*	12	168.911	*	12	299.9208	*	8
168.775a	A	12	168.912	*	12	299.9209	*	8
168.776	*	12	168.913	R	12	299.9210	*	8
168.777	*	12	168.914	R	12	299.9211	*	8
168.778	*	12	168.915	*	12	299.9212	*	8
168.779	*	12	168.916	*	12	299.9213	*	8
168.780	*	12	168.917	*	12	299.9214	*	8
168.780a	A	12	168.918	R	12	299.9215	*	8
168.781	*	12	168.919	R	12	299.9216	*	8
168.782	*	12	168.920	R	12	299.9217	*	8
168.783	R	12	168.921	R	12	299.9219	*	8
168.784	*	12	168.922	*	12	299.9220	*	8
168.785	*	12	168.923	*	12	299.9222	*	8
168.786	*	12	168.924	R	12	299.9224	*	8
168.787	R	12	168.925	*	12	299.9225	*	8
168.788	*	12	168.925a	R	12	299.9226	*	8
168.789	*	12	168.925b	*	12	299.9227	*	8
168.790	*	12	168.926	R	12	299.9228	*	8
168.791	*	12	168.927	*	12	299.9229	*	8
168.792	*	12	168.928	*	12	299.9231	*	8
168.793	*	12	168.929	*	12	299.9232	*	8
168.841	*	12	168.930	*	12	299.9233	*	8
168.842	*	12	257.3	*	12	299.9234	*	8

(***** Amendment to Rule, **A** Added Rule, **N** New Rule, **R** Rescinded Rule)

R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue
299.9301	*	8	299.9518	*	8	299.9637	*	8
299.9302	*	8	299.9519	*	8	299.9638	*	8
299.9303	*	8	299.9520	*	8	299.9639	*	8
299.9304	*	8	299.9521	*	8	299.9640	*	8
299.9305	*	8	299.9522	*	8	299.9701	*	8
299.9306	*	8	299.9523	*	8	299.9702	*	8
299.9307	*	8	299.9524	*	8	299.9703	*	8
299.9308	*	8	299.9525	*	8	299.9704	*	8
299.9309	*	8	299.9601	*	8	299.9705	*	8
299.9310	*	8	299.9602	*	8	299.9706	*	8
299.9311	*	8	299.9603	*	8	299.9707	*	8
299.9312	*	8	299.9604	*	8	299.9708	*	8
299.9314	*	8	299.9605	*	8	299.9709	*	8
299.9315	*	8	299.9606	*	8	299.9710	*	8
299.9316	*	8	299.9607	*	8	299.9711	*	8
299.9401	*	8	299.9608	*	8	299.9712	*	8
299.9404	*	8	299.9609	*	8	299.9713	*	8
299.9405	*	8	299.9610	*	8	299.9801	*	8
299.9406	*	8	299.9611	*	8	299.9803	*	8
299.9407	*	8	299.9612	*	8	299.9804	*	8
299.9408	*	8	299.9613	*	8	299.9808	*	8
299.9409	*	8	299.9614	*	8	299.9809	*	8
299.9410	*	8	299.9615	*	8	299.9810	*	8
299.9501	*	8	299.9616	*	8	299.9812	*	8
299.9502	*	8	299.9617	*	8	299.9813	*	8
299.9503	*	8	299.9618	*	8	299.9814	*	8
299.9504	*	8	299.9619	*	8	299.9815	*	8
299.9505	*	8	299.9620	*	8	299.9816	*	8
299.9506	*	8	299.9621	*	8	299.9817	*	8
299.9507	*	8	299.9622	*	8	299.9818	*	8
299.9508	*	8	299.9623	*	8	299.9819	*	8
299.9509	*	8	299.9628	*	8	299.9820	*	8
299.9510	*	8	299.9629	*	8	299.9821	*	8
299.9511	*	8	299.9630	*	8	299.9822	*	8
299.9512	*	8	299.9632	*	8	299.9823	*	8
299.9513	*	8	299.9633	*	8	299.9824	A	8
299.9514	*	8	299.9634	*	8	299.9825	A	8
299.9515	*	8	299.9635	*	8	299.9826	A	8
299.9516	*	8	299.9636	*	8	299.9827	A	8

(***** Amendment to Rule, **A** Added Rule, **N** New Rule, **R** Rescinded Rule)

R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue
299.9828	A	8	325.3263	*	9	338.332	*	11
299.9829	A	8	325.3264	R	9	338.333	*	11
299.9830	A	8	325.3266	*	9	338.2525	*	11
299.9831	A	8	325.3267	*	9	338.2529	*	11
299.9832	A	8	330.101	A	10	338.2541	*	11
299.9833	A	8	330.102	A	10	338.2543	*	11
299.11001	*	8	330.103	A	10	338.2545	*	11
299.11002	*	8	330.104	A	10	338.2549	*	11
299.11003	*	8	330.105	A	10	338.2551	*	11
299.11004	*	8	330.301	A	9	338.2553	*	11
299.11005	*	8	330.302	A	9	338.2555	*	11
299.11006	*	8	330.303	A	9	338.2561	*	11
299.11007	*	8	330.304	A	9	338.2567	*	11
299.11008	*	8	336.1801	*	8	338.2569	*	11
299.11009	*	8	336.1802	*	8	338.2571	*	11
325.3205	*	9	336.1803	*	8	338.2573	*	11
325.3206	*	9	336.1810	*	8	338.2581	*	11
325.3207	*	9	336.1818	*	8	338.2583	*	11
325.3208	*	9	336.1840	A	8	338.8101	*	11
325.3209	*	9	336.1841	A	8	338.8102	*	11
325.3210	*	9	336.1842	A	8	338.8103	R	11
325.3211	*	9	336.1843	A	8	338.8104	R	11
325.3212	*	9	336.1844	A	8	338.8105	A	11
325.3213	*	9	336.1845	A	8	338.8107	R	11
325.3215	*	9	336.1846	A	8	338.8109	R	11
325.3216	*	9	336.1902	*	8	338.8110	R	11
325.3217	*	9	338.111	*	11	338.8113	R	11
325.3218	*	9	338.114	*	11	338.8121	*	11
325.3219	*	9	338.119	*	11	338.8122	*	11
325.3220	*	9	338.120	*	11	338.8126	R	11
325.3221	*	9	338.121	*	11	338.8127	R	11
325.3251	*	9	338.123	*	11	338.8128	R	11
325.3252	*	9	338.125	*	11	338.8141	A	11
325.3253	*	9	338.301	*	11	338.8143	A	11
325.3254	*	9	338.321	*	11	338.8145	R	11
325.3255	*	9	338.322	*	11	338.8147	A	11
325.3259	*	9	338.325	*	11	338.8149	A	11
325.3261	*	9	338.328	*	11	338.8151	A	11
325.3262	*	9	338.331	*	11	338.8153	A	11

(***** Amendment to Rule, **A** Added Rule, **N** New Rule, **R** Rescinded Rule)

R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue
339.10030	*	8	339.22111	A	12	339.22623	R	12
339.15101	*	11	339.22115	A	12	339.22624	R	12
339.15201	*	11	339.22121	A	12	339.22625	R	12
339.15304	*	11	339.22125	A	12	339.22626	R	12
339.15401	*	11	339.22131	A	12	339.22627	R	12
339.15404	*	11	339.22132	A	12	339.22628	R	12
339.15501	*	11	339.22134	A	12	339.22629	R	12
339.15502	*	11	339.22135	A	12	339.22630	R	12
339.16025	*	11	339.22137	A	12	339.22632	R	12
339.16026	*	11	339.22139	A	12	400.2001	*	10
339.16040	*	11	339.22141	A	12	400.2005a	A	10
339.16041	*	11	339.22143	A	12	400.2009	*	10
339.17303	*	11	339.22145	A	12	400.2022	*	10
339.17403	*	11	339.22147	A	12	400.3101	*	9
339.17505	*	11	339.22149	A	12	400.3104	*	9
339.17506	*	11	339.22152	A	12	400.3151	*	9
339.18901	*	10	339.22154	A	12	400.3169	*	9
339.18921	*	10	339.22155	A	12	408.1	R	12
339.18922	A	10	339.22157	A	12	408.2	R	12
339.18923	*	10	339.22158	A	12	408.22301	*	5
339.18925	*	10	339.22159	A	12	408.22303	*	5
339.18927	R	10	339.22161	A	12	408.22305	*	5
339.18928	A	10	339.22163	A	12	408.22307	*	5
339.18928a	A	10	339.22165	A	12	408.22309	*	5
339.18929	A	10	339.22203	R	12	408.22311	*	5
339.18929a	A	10	339.22217	R	12	408.22321	*	5
339.18929b	A	10	339.22219	R	12	408.22322	*	5
339.18929d	A	10	339.22221	R	12	408.22323	*	5
339.18930	R	10	339.22305	R	12	408.22324	*	5
339.18931	*	10	339.22307	R	12	408.22325	*	5
339.18932	A	10	339.22313	R	12	408.22326	*	5
339.18933	R	10	339.22315	R	12	408.22331	*	5
339.18935	A	10	339.22321	R	12	408.22333	*	5
339.18937	*	10	339.22333	R	12	408.22338	*	5
339.18941	*	10	339.22618	R	12	408.22339	*	5
339.18942	A	10	339.22619	R	12	408.22342	*	5
339.18943	*	10	339.22620	R	12	408.22344	*	5
339.18945	*	10	339.22621	R	12	408.22346	*	5
339.22101	*	12	339.22622	R	12	408.22348	*	5

(***** Amendment to Rule, **A** Added Rule, **N** New Rule, **R** Rescinded Rule)

R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue
408.22349	*	5	408.30533c	A	10	408.31071	R	10
408.22351	*	5	408.30534	*	10	408.31071a	R	10
408.22352	*	5	408.30535	*	10	418.10106	*	12
408.22353	*	5	408.30536	*	10	418.10107	*	12
408.22354	*	5	408.30536a	R	10	418.10201	R	12
408.22355	*	5	408.30537	R	10	418.10205	*	12
408.22356	*	5	408.30537a	R	10	418.10206	R	12
408.22358	*	5	408.30537b	R	10	418.10404	*	12
408.22361	*	5	408.30537c	R	10	418.10901	*	12
408.30500	*	10	408.30537d	R	10	418.10904	*	12
408.30501a	R	10	408.30538	R	10	418.10915	*	12
408.30501b	*	10	408.30539a	*	10	418.10920	*	12
408.30505	*	10	408.30540	R	10	418.101002	*	12
408.30506	R	10	408.30541a	*	10	418.101004	*	12
408.30507	R	10	408.30542	R	10	432.629	*	9
408.30509	R	10	408.30544	*	10	432.629a	A	9
408.30510	R	10	408.30544a	R	10	432.654	*	9
408.30510a	R	10	408.30544b	*	10	432.729	*	9
408.30513	*	10	408.30545	R	10	432.729a	A	9
408.30515	*	10	408.30545a	R	10	432.754	*	9
408.30516	*	10	408.30547b	R	10	436.1313	*	3
408.30518	*	10	408.30547c	R	10	436.1329	R	3
408.30519	*	10	408.30547d	*	10	436.1621	*	3
408.30521	R	10	408.30547e	R	10	436.1633	R	3
408.30521a	*	10	408.30547f	R	10	436.1725	*	3
408.30522a	R	10	408.30547g	R	10	436.1953	*	3
408.30522b	R	10	408.31059	*	10	436.1959	*	3
408.30523	R	10	408.31060b	*	10	436.1438	R	3
408.30523a	R	10	408.31060c	R	10	460.813	*	10
408.30524	*	10	408.31060e	R	10	500.121	A	9
408.30525a	R	10	408.31061	R	10	500.122	A	9
408.30528	R	10	408.31062	R	10	500.123	A	9
408.30528a	R	10	408.31063	R	10	500.124	A	9
408.30529	*	10	408.31063a	R	10	500.125	A	9
408.30530	*	10	408.31064	R	10	500.126	A	9
408.30532	*	10	408.31065	R	10	500.127	A	9
408.30533	*	10	408.31066	*	10	500.128	A	9
408.30533a	*	10	408.31069	*	10	792.10201	*	6
408.30533b	*	10	408.31070	R	10	792.10203	*	6

(***** Amendment to Rule, **A** Added Rule, **N** New Rule, **R** Rescinded Rule)

R Number	Action	2025 MR Issue	R Number	Action	2025 MR Issue
792.10205	*	6	792.10283	*	6
792.10207	*	6	792.10285	*	6
792.10209	*	6	792.10287	*	6
792.10211	*	6	792.10289	*	6
792.10213	*	6	792.10291	*	6
792.10215	*	6			
792.10217	*	6			
792.10219	*	6			
792.10221	*	6			
792.10223	*	6			
792.10225	*	6			
792.10227	*	6			
792.10229	*	6			
792.10231	*	6			
792.10233	*	6			
792.10235	*	6			
792.10237	*	6			
792.10239	*	6			
792.10241	*	6			
792.10243	*	6			
792.10245	*	6			
792.10247	*	6			
792.10249	*	6			
792.10251	*	6			
792.10253	*	6			
792.10255	*	6			
792.10257	*	6			
792.10259	*	6			
792.10261	*	6			
792.10263	*	6			
792.10265	*	6			
792.10267	*	6			
792.10269	*	6			
792.10271	*	6			
792.10273	*	6			
792.10275	*	6			
792.10277	*	6			
792.10279	*	6			
792.10281	*	6			

(***** Amendment to Rule, **A** Added Rule, **N** New Rule, **R** Rescinded Rule)

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ENROLLED SENATE AND HOUSE BILLS
SIGNED INTO LAW OR VETOED
(2025 SESSION)

Mich. Const. Art. IV, §33 provides: "Every bill passed by the legislature shall be presented to the governor before it becomes law, and the governor shall have 14 days measured in hours and minutes from the time of presentation in which to consider it. If he approves, he shall within that time sign and file it with the secretary of state and it shall become law . . . If he does not approve, and the legislature has within that time finally adjourned the session at which the bill was passed, it shall not become law. If he disapproves . . . he shall return it within such 14-day period with his objections, to the house in which it originated."

Mich. Const. Art. IV, §27, further provides: "No act shall take effect until the expiration of 90 days from the end of the session at which it was passed, but the legislature may give immediate effect to acts by a two-thirds vote of the members elected to and serving in each house."

MCL 24.208 states in part:

"Sec. 8. (1) The Office of Regulatory Reform shall publish the Michigan register at least once each month. The Michigan register shall contain all of the following:

* * *

(b) On a cumulative basis, the numbers and subject matter of the enrolled senate and house bills signed into law by the governor during the calendar year and the corresponding public act numbers.

(c) On a cumulative basis, the numbers and subject matter of the enrolled senate and house bills vetoed by the governor during the calendar year."

2025 Michigan Public Acts Table

Legislative Service Bureau
Legal Division, Statutory Compiling and Law Publications Unit
124 W. Allegan, Lansing, MI 48909

October 01, 2025
Compiled through PA 14 of 2025

PA No.	ENROLLED		I.E.* Yes/No	Governor Approved	Filed Date	Effective Date	SUBJECT
	HB	SB					
1		0008	Yes	2/21/2025	2/21/2025	2/21/2025 #	***Labor: hours and wages;*** *minimum hourly wage rate;* modify ***(Sen. Kevin Hertel)***
2	4002		Yes	2/21/2025	2/21/2025	2/21/2025	Labor: benefits; requirements for an employer to provide earned sick time, modify. ***(Rep. Jay DeBoyer)***
3		0099	Yes	5/14/2025	5/14/2025	5/14/2025	***Public employees and officers: ethics;*** *reporting requirements and definition of gift;* modify and provide standard report form. ***(Sen. Jeremy Moss)***
4		0100	Yes	5/14/2025	5/14/2025	5/14/2025	***Campaign finance: statements and reports;*** *definition of gift;* modify. ***(Sen. Edward McBroom)***
5	4345		Yes	6/2/2025	6/2/2025	6/2/2025	***School aid: penalties;*** *exception to minimum days of pupil instruction requirement for district closure during a declared state of emergency;* provide for. ***(Rep. Cam Cavitt)***
6	4090		Yes	6/27/2025	6/27/2025	6/27/2025	***Property: conveyance of state property;*** *transfer of certain state-owned property in Detroit;* provide for. ***(Rep. Alabas Farhat)***
7	4003		Yes	8/15/2025	8/15/2025	8/15/2025	***Highways: memorial;*** *portion of US-131;* designate as the "Sgt. Matthew Webber Memorial Highway". ***(Rep. Tom Kunse)***
8	4046		Yes	8/15/2025	8/15/2025	8/15/2025	***Highways: memorial;*** *portion of highway US-31;* designate as the "Trooper James E. Boland Memorial Highway". ***(Rep. John Roth)***

* - I.E. means Legislature voted to give the Act immediate effect.
** - Act takes effect on the 91st day after sine die adjournment of the Legislature.
*** - See Act for applicable effective date.
+ - Line item veto.
++ - Pocket veto.
# - Tie bar.

PA No.	ENROLLED		I.E.* Yes/No	Governor Approved	Filed Date	Effective Date	SUBJECT
	HB	SB					
9	4403		No	8/15/2025	8/15/2025	**	***Liquor: other;*** *leasing, selling, and transferring portions of certain alternating proprietors under approval of commission;* allow. ***(Rep. Pauline Wendzel)***
10		0070	No	8/26/2025	8/26/2025	**	***Highways: memorial;*** *portion of M-34;*designate as the "Deputy Sheriff William Butler, Jr. Memorial Highway". ***(Sen. Joseph Bellino)***
11	4047		Yes	8/26/2025	8/26/2025	8/26/2025	***Civil procedure: civil actions;****cause of action for media that falsely depicts an individual engaging in sexual conduct;* provide for. ***(Rep. Matthew Bierlein)***
12	4048		Yes	8/26/2025	8/26/2025	8/26/2025 #	***Criminal procedure: sentencing guidelines;*** *guidelines for dissemination of deep fake sexual images;* enact. ***(Rep. Penelope Tsernoglou)***
13	4524		Yes	9/29/2025	9/29/2025	9/29/2025	***Property: recording;*** *marketable record title act;* revise. ***(Rep. Douglas Wozniak)***
14	4161		Yes	10/1/2025	10/1/2025	10/1/2025	***Appropriations: omnibus;*** *appropriations for multiple departments and branches for October 1 to 8, 2025;* provide for. ***(Rep. Ann Bollin)***

* - I.E. means Legislature voted to give the Act immediate effect.
** - Act takes effect on the 91st day after sine die adjournment of the Legislature.
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