Each osteopathic physician is required to accumulate 150 hours of continuing education in activities approved by the board during the 3 years immediately preceding the application for renewal of which a minimum of 60 hours of the required 150 hours must be earned through Category 1 programs. Following are other license requirements for:

### Controlled Substance Licenses:

**Opioids and Other Controlled Substances Awareness Training Standards for Prescribers and Dispensers of Controlled Substances**

This is a one-time training that is separate from continuing education for an individual seeking a controlled substance license or who is licensed to prescribe or dispense controlled substances. Licensees that prescribe or dispense controlled substances who renewed in 2019 must complete training by January 2023; renewals for 2020 by 2024, renewals for 2021 by 2025. Beginning in September 2019, completion of the training is a requirement for initial licensure.

Training content must cover all of the following topics:
- Use of opioids and other controlled substances.
- Integration of treatments.
- Alternative treatments for pain management.
- Counseling patients on the effects and risks associated with using opioids and other controlled substances.
- The stigma of addiction.
- Utilizing the Michigan Automated Prescription System (MAPS).
- State and federal laws regarding prescribing and dispensing controlled substances.
- Security features and proper disposal requirements for prescriptions.

### For Medical Licenses:

**Training Standards for Identifying Victims of Human Trafficking**

This is a one-time training that is separate from continuing education. Licensees renewing for 2017 must complete training by renewal in 2020; renewals for 2018 by 2021, and renewals for 2019 by 2022. Beginning in 2021, completion of the training is a requirement for initial licensure.

Training content shall cover all of the following:
- Understanding the types and venues of human trafficking in this state or the United States.
- Identifying victims of human trafficking in health care settings.
- Identifying the warning signs of human trafficking in health care settings for adults and minors.
- Resources for reporting the suspected victims of human trafficking.

**Education on Pain and Symptom Management**

A minimum of 3 hours of continuing education every 3-year relicensure cycle. At least 1 of the 3 hours must include controlled substances prescribing.

Continuing education hours may include, but are not limited to, any of the following areas:
- Public health burden of pain.
- Ethics and health policy related to pain.
- Michigan pain and controlled substance laws.
- Pain definitions.
- Basic sciences related to pain including pharmacology.
- Clinical sciences related to pain.
- Specific pain conditions.
- Clinical physician communication related to pain.
- Management of pain, including evaluation and treatment and nonpharmacological and pharmacological management.
- Ensuring quality pain care and controlled substances prescribing.
- Michigan programs and resources relevant to pain.

### Medical Ethics

A minimum of one-hour of continuing education every 3-year relicensure cycle.

### Implicit Bias

A minimum of 3 hours every 3-year relicensure cycle. New licensees need 2 hours within the 5 years immediately preceding.

Renewals from June 1, 2022 - May 31, 2023, need 1 hour; renewals from June 1, 2023 - May 31, 2024, need 2 hours; renewals from June 1, 2024 - May 31, 2025, need 3 hours. Then after, every 3-year renewal cycle will need to report 3 hours. (Any hours after June 2021 can be used.)

Training must include strategies to reduce disparities in access to and delivery of health care services and the administration of pre- and post-test implicit bias assessments.

Acceptable modalities of training include asynchronous teleconference or webinars, in addition to live activities and live webinars.

Training content must include, but is not limited to, 1 or more of the following topics:
- Information on implicit bias, equitable access to health care, serving a diverse population, diversity and inclusion initiatives, and cultural sensitivity.
- Strategies to remedy the negative impact of implicit bias by recognizing and understanding how it impacts perception, judgment, and actions that may result in inequitable decision making, failure to effectively communicate, and result in barriers and disparities in the access to and delivery of health care services.
- The historical basis and present consequences of implicit biases based on an individual’s characteristics.
- Discussion of current research on implicit bias in the access to and delivery of health care services.