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3 Title: New Consolidated Appropriations Act Law and Michigan CME Requirements
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5 Introduced by: David Whalen, MD, for the Kent County Delegation
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7 Original Author: Megan Edison, MD
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9 Referred To: Reference Committee E
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11 House Action: **APPROVED AS AMENDED**

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14 Whereas, Congress passed the Consolidated Appropriations Act (CAA) that was signed into
15 law at the federal level on December 27, 2022, and

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17 Whereas, Congress recently passed the Consolidated Appropriations Act of 2023 (CAA) on
18 December 29, 2022, which eliminated the "DATA-waiver Program" (Drug Addiction Treatment Act
19 of 2000, or DATA 2000), and

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21 Whereas, the CAA has eliminated the "X-waiver" registration requirement for licensure to
22 prescribe buprenorphine for any prescribers who have a DEA license with coverage for Schedule III,
23 IV, and V narcotic medications (Schedule III for buprenorphine), and

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25 Whereas, the Drug Enforcement Administration (DEA) and Substance Abuse and Mental
26 Health Services Administration (SAMHSA) provided input into the CAA with the intent of improving
27 access to the prescribing of buprenorphine for the treatment of Opioid Use Disorder (OUD), and

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29 Whereas, the CAA also introduced new training requirements for all prescribers who have a
30 DEA license which will become effective on June 21, 2023, with the requirements yet to be
31 determined by the DEA and SAMHSA, and

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33 Whereas, the federal CAA does not impact any applicable state laws or regulations, and

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35 Whereas, the state of Michigan has extensive Continuing Medical Education (CME)
36 physician licensure requirements that include CME hours for a one-time requirement for "Opioids
37 and Controlled Substances Awareness Training Standards for Prescribers and Dispensers of
38 Controlled Substances" (effective January 4, 2019) and an every three-year licensing/relicensing
39 cycle requirement for three hours in the area of pain and symptom management, with at least one
40 hour specifically focused on controlled substance prescribing, and

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42 Whereas, the Michigan Department of Licensing and Regulatory Affairs (LARA) has not yet
43 determined how to implement the new CAA training requirements, and

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45 Whereas, MSMS has existing policy that no additional CME requirements should be added
46 to the current state of Michigan physician licensure requirements; therefore be it

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48 RESOLVED: That MSMS work with Michigan Department of Licensing and Regulatory
49 Affairs to include the Consolidated Appropriations Act training requirements (once determined by

50 the DEA and SAMHSA) in the current Michigan CME requirements for physician licensure; and be it
51 further

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53 RESOLVED: That MSMS advocate that the Consolidated Appropriations Act training
54 requirements replace the current Michigan CME requirements for the one-time opioids training
55 standards requirement and the ongoing three-year licensure/re-licensure cycle requirement for
56 pain and symptom management/controlled substance prescribing.

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59 WAYS AND MEANS COMMITTEE FISCAL NOTE: \$2,000-\$4,000

Relevant MSMS Policy:

Opposition to Compulsory Content of Mandated Continuing Medical Education

MSMS opposes any attempt to introduce compulsory content of mandated Continuing Medical Education (CME) in the state of Michigan.

Eliminate the X Waiver

MSMS supports eliminating the requirement for obtaining a waiver to prescribe buprenorphine for the treatment of opioid use disorder.

Expand Access to Medication for the Treatment of Opioid Use Disorder

MSMS recommends the removal of legislative, regulatory, and other barriers to the use of medications for opioid use disorder.

Relevant AMA Policy:

Expanding Access to Buprenorphine for the Treatment of Opioid Use Disorder D-95.972

1. Our AMA's Opioid Task Force will publicize existing resources that provide advice on overcoming barriers and implementing solutions for prescribing buprenorphine for treatment of Opioid Use Disorder.
2. Our AMA supports eliminating the requirement for obtaining a waiver to prescribe buprenorphine for the treatment of opioid use disorder.