

PUBLIC HEALTH CODE (EXCERPT)

Act 368 of 1978

333.16204a Advisory committee on pain and symptom management; creation; members; compensation; expenses; terms; duties; review of guidelines.

Sec. 16204a. (1) Subject to subsection (2), an advisory committee on pain and symptom management is created in the department. The committee consists of the following members appointed in the following manner:

(a) The Michigan board of medicine created in part 170 and the Michigan board of osteopathic medicine and surgery created in part 175 each shall appoint 2 members, 1 of whom is a physician specializing in primary care and 1 of whom is a physician certified in the specialty of pain medicine by 1 or more national professional organizations approved by the department of consumer and industry services, including, but not limited to, the American board of medical specialists or the American board of pain medicine.

(b) One psychologist who is associated with the education and training of psychology students, appointed by the Michigan board of psychology created in part 182.

(c) One individual appointed by the governor who is representative of the general public.

(d) One registered professional nurse with training in pain and symptom management who is associated with the education and training of nursing students, appointed by the Michigan board of nursing created in part 172.

(e) One dentist with training in pain and symptom management who is associated with the education and training of dental students, appointed by the Michigan board of dentistry created in part 166.

(f) One pharmacist with training in pain and symptom management who is associated with the education and training of pharmacy students appointed by the Michigan board of pharmacy created in part 177.

(g) One individual appointed by the governor who represents the Michigan hospice organization or its successor.

(h) One representative from each of the state's medical schools, appointed by the governor.

(i) One individual appointed by the governor who has been diagnosed as a chronic pain sufferer.

(j) One physician's assistant with training in pain and symptom management appointed by the Michigan task force on physician's assistants.

(k) The director of the department of consumer and industry services or his or her designee, who shall serve as chairperson.

(l) The director of the department of community health or his or her designee.

(2) Advisory committee members appointed under subsection (1)(a) through (j) shall receive per diem compensation as established by the legislature and shall be reimbursed for expenses under section 1216.

(3) The advisory committee members appointed under subsection (1)(a) through (j) shall be appointed by May 15, 1999. A member of the advisory committee shall serve for a term of 2 years or until a successor is appointed, whichever is later. A vacancy on the advisory committee shall be filled in the same manner as the original appointment.

(4) The advisory committee shall do all of the following, as necessary:

(a) At least once annually consult with all of the following boards to develop an integrated approach to understanding and applying pain and symptom management techniques:

(i) All licensure boards created under this article, except the Michigan board of veterinary medicine.

(ii) The Michigan board of social work created in section 18505.

(b) Hold a public hearing in the same manner as provided for a public hearing held under the administrative procedures act of 1969, within 90 days after the members of the advisory committee are appointed under subsection (1) to gather information from the general public on issues pertaining to pain and symptom management.

(c) Develop and encourage the implementation of model core curricula on pain and symptom management.

(d) Develop recommendations to the licensing and registration boards and the task force created under this article on integrating pain and symptom management into the customary practice of health care professionals and identifying the role and responsibilities of the various health care professionals in pain and symptom management.

(e) Advise the licensing and registration boards created under this article on the duration and content of continuing education requirements for pain and symptom management.

(f) Annually report on the activities of the advisory committee and make recommendations on the following issues to the director of the department of consumer and industry services and to the director of the department of community health:

(i) Pain management educational curricula and continuing educational requirements of institutions

providing health care education.

(ii) Information about the impact and effectiveness of previous recommendations, if any, that have been implemented, including, but not limited to, recommendations made under subdivision (d).

(iii) Activities undertaken by the advisory committee in complying with the duties imposed under subdivisions (c) and (d).

(g) Beginning in January of 2000, annually review any changes occurring in pain and symptom management.

(5) In making recommendations and developing written materials under subsection (4), the advisory committee shall review guidelines on pain and symptom management issued by the United States department of health and human services.

History: Add. 1994, Act 232, Imd. Eff. June 30, 1994;—Am. 1998, Act 421, Eff. Apr. 1, 1999;—Am. 2001, Act 234, Imd. Eff. Jan. 3, 2002.

Compiler's note: For transfer of the advisory committee on pain and symptom management to the department of community health by Type II transfer, see. E.R.O. No. 2003-1, compiled at MCL 445.2011.

Popular name: Act 368