

HOUSE BILL NO. 4778

August 20, 2025, Introduced by Reps. Paquette, Pavlov, Outman, Meerman, Markkanen, Greene and Wortz and referred to Committee on Government Operations.

A bill to amend 1978 PA 368, entitled
"Public health code,"
by amending sections 9201 and 16221 (MCL 333.9201 and 333.16221),
section 9201 as amended by 2006 PA 91 and section 16221 as amended
by 2023 PA 209, and by adding section 9228.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 9201. (1) As used in this part:
- 2 (a) "Camping" means attendance at a residential, day, troop,
- 3 or travel camp conducted for more than 4 school-age children, apart
- 4 from their parents, guardians, or persons in loco parentis for 5 or

1 more days or parts of days in a 14-day period.

2 (b) "Gene-based vaccine" means a vaccine developed using
 3 messenger ribonucleic acid technology, modified messenger
 4 ribonucleic acid technology, self-amplifying messenger ribonucleic
 5 acid technology, or deoxyribonucleic acid technology.

6 (c) ~~(b)~~ "Immunizing agent" means a vaccine, antibody
 7 preparation, or other substance used to increase an individual's
 8 immunity to a disease or infectious agent. **Immunizing agent does**
 9 **not include a gene-based vaccine.**

10 (d) ~~(c)~~ "Infectious agent" means that term as defined in R
 11 325.9031 of the Michigan ~~administrative code~~. **Administrative Code.**

12 (e) ~~(d)~~ "Registry" means the childhood immunization registry
 13 or Michigan care improvement registry established under section
 14 9207.

15 (2) In addition, article 1 contains general definitions and
 16 principles of construction applicable to all articles in this code.

17 **Sec. 9228. A person or governmental entity shall not order or**
 18 **administer a gene-based vaccine.**

19 Sec. 16221. Subject to section 16221b, the department shall
 20 investigate any allegation that 1 or more of the grounds for
 21 disciplinary subcommittee action under this section exist, and may
 22 investigate activities related to the practice of a health
 23 profession by a licensee, a registrant, or an applicant for
 24 licensure or registration. The department may hold hearings,
 25 administer oaths, and order the taking of relevant testimony. After
 26 its investigation, the department shall provide a copy of the
 27 administrative complaint to the appropriate disciplinary
 28 subcommittee. The disciplinary subcommittee shall proceed under
 29 section 16226 if it finds that 1 or more of the following grounds

1 exist:

2 (a) Except as otherwise specifically provided in this section,
3 a violation of general duty, consisting of negligence or failure to
4 exercise due care, including negligent delegation to or supervision
5 of employees or other individuals, whether or not injury results,
6 or any conduct, practice, or condition that impairs, or may impair,
7 the ability to safely and skillfully engage in the practice of the
8 health profession.

9 (b) Personal disqualifications, consisting of 1 or more of the
10 following:

11 (i) Incompetence.

12 (ii) Subject to sections 16165 to 16170a, substance use
13 disorder as that term is defined in section 100d of the mental
14 health code, 1974 PA 258, MCL 330.1100d.

15 (iii) Mental or physical inability reasonably related to and
16 adversely affecting the licensee's or registrant's ability to
17 practice in a safe and competent manner.

18 (iv) Declaration of mental incompetence by a court of competent
19 jurisdiction.

20 (v) Conviction of a misdemeanor punishable by imprisonment for
21 a maximum term of 2 years; conviction of a misdemeanor involving
22 the illegal delivery, possession, or use of a controlled substance;
23 or conviction of any felony other than a felony listed or described
24 in another subparagraph of this subdivision. A certified copy of
25 the court record is conclusive evidence of the conviction.

26 (vi) Lack of good moral character.

27 (vii) Conviction of a criminal offense under section 520e or
28 520g of the Michigan penal code, 1931 PA 328, MCL 750.520e and
29 750.520g. A certified copy of the court record is conclusive

1 evidence of the conviction.

2 (viii) Conviction of a violation of section 492a of the Michigan
3 penal code, 1931 PA 328, MCL 750.492a. A certified copy of the
4 court record is conclusive evidence of the conviction.

5 (ix) Conviction of a misdemeanor or felony involving fraud in
6 obtaining or attempting to obtain fees related to the practice of a
7 health profession. A certified copy of the court record is
8 conclusive evidence of the conviction.

9 (x) Final adverse administrative action by a licensure,
10 registration, disciplinary, or certification board involving the
11 holder of, or an applicant for, a license or registration regulated
12 by another state or a territory of the United States, by the United
13 States military, by the federal government, or by another country.
14 A certified copy of the record of the board is conclusive evidence
15 of the final action.

16 (xi) Conviction of a misdemeanor that is reasonably related to
17 or that adversely affects the licensee's or registrant's ability to
18 practice in a safe and competent manner. A certified copy of the
19 court record is conclusive evidence of the conviction.

20 (xii) Conviction of a violation of section 430 of the Michigan
21 penal code, 1931 PA 328, MCL 750.430. A certified copy of the court
22 record is conclusive evidence of the conviction.

23 (xiii) Conviction of a criminal offense under section 83, 84,
24 316, 317, 321, 520b, 520c, 520d, or 520f of the Michigan penal
25 code, 1931 PA 328, MCL 750.83, 750.84, 750.316, 750.317, 750.321,
26 750.520b, 750.520c, 750.520d, and 750.520f. A certified copy of the
27 court record is conclusive evidence of the conviction.

28 (xiv) Conviction of a violation of section 136 or 136a of the
29 Michigan penal code, 1931 PA 328, MCL 750.136 and 750.136a. A

1 certified copy of the court record is conclusive evidence of the
2 conviction.

3 (xv) Conviction of a violation of section 90 of the Michigan
4 penal code, 1931 PA 328, MCL 750.90, or a violation of a state or
5 federal crime that is substantially similar to the violation
6 described in this subparagraph. A certified copy of the court
7 record is conclusive evidence of the conviction.

8 (c) Prohibited acts, consisting of 1 or more of the following:

9 (i) Fraud or deceit in obtaining or renewing a license or
10 registration.

11 (ii) Permitting a license or registration to be used by an
12 unauthorized person.

13 (iii) Practice outside the scope of a license.

14 (iv) Obtaining, possessing, or attempting to obtain or possess
15 a controlled substance or a drug as that term is defined in section
16 7105 without lawful authority; or selling, prescribing, giving
17 away, or administering drugs for other than lawful diagnostic or
18 therapeutic purposes.

19 (d) Except as otherwise specifically provided in this section,
20 unethical business practices, consisting of 1 or more of the
21 following:

22 (i) False or misleading advertising.

23 (ii) Dividing fees for referral of patients or accepting
24 kickbacks on medical or surgical services, appliances, or
25 medications purchased by or in behalf of patients.

26 (iii) Fraud or deceit in obtaining or attempting to obtain ~~third~~
27 ~~party~~ **third-party** reimbursement.

28 (e) Except as otherwise specifically provided in this section,
29 unprofessional conduct, consisting of 1 or more of the following:

1 (i) Misrepresentation to a consumer or patient or in obtaining
2 or attempting to obtain ~~third-party~~**third-party** reimbursement in
3 the course of professional practice.

4 (ii) Betrayal of a professional confidence.

5 (iii) Promotion for personal gain of an unnecessary drug,
6 device, treatment, procedure, or service.

7 (iv) Either of the following:

8 (A) A requirement by a licensee other than a physician or a
9 registrant that an individual purchase or secure a drug, device,
10 treatment, procedure, or service from another person, place,
11 facility, or business in which the licensee or registrant has a
12 financial interest.

13 (B) A referral by a physician for a designated health service
14 that violates 42 USC 1395nn or a regulation promulgated under that
15 section. For purposes of this subdivision, 42 USC 1395nn and the
16 regulations promulgated under that section as they exist on June 3,
17 2002 are incorporated by reference. A disciplinary subcommittee
18 shall apply 42 USC 1395nn and the regulations promulgated under
19 that section regardless of the source of payment for the designated
20 health service referred and rendered. If 42 USC 1395nn or a
21 regulation promulgated under that section is revised after June 3,
22 2002, the department shall officially take notice of the revision.
23 Within 30 days after taking notice of the revision, the department
24 shall decide whether or not the revision pertains to referral by
25 physicians for designated health services and continues to protect
26 the public from inappropriate referrals by physicians. If the
27 department decides that the revision does both of those things, the
28 department may promulgate rules to incorporate the revision by
29 reference. If the department does promulgate rules to incorporate

1 the revision by reference, the department shall not make any
2 changes to the revision. As used in this sub-subparagraph,
3 "designated health service" means that term as defined in 42 USC
4 1395nn and the regulations promulgated under that section and
5 "physician" means that term as defined in sections 17001 and 17501.

6 (v) For a physician who makes referrals under 42 USC 1395nn or
7 a regulation promulgated under that section, refusing to accept a
8 reasonable proportion of patients eligible for Medicaid and
9 refusing to accept payment from Medicaid or Medicare as payment in
10 full for a treatment, procedure, or service for which the physician
11 refers the individual and in which the physician has a financial
12 interest. A physician who owns all or part of a facility in which
13 the physician provides surgical services is not subject to this
14 subparagraph if a referred surgical procedure the physician
15 performs in the facility is not reimbursed at a minimum of the
16 appropriate Medicaid or Medicare outpatient fee schedule, including
17 the combined technical and professional components.

18 (vi) Any conduct by a licensee or registrant with a patient
19 while the licensee or registrant is acting within the health
20 profession for which the licensee or registrant is licensed or
21 registered, including conduct initiated by a patient or to which
22 the patient consents, that is sexual or may reasonably be
23 interpreted as sexual, including, but not limited to, sexual
24 intercourse, kissing in a sexual manner, or touching of a body part
25 for any purpose other than appropriate examination, treatment, or
26 comfort.

27 (vii) Offering to provide practice-related services, such as
28 drugs, in exchange for sexual favors.

29 (viii) A violation of section 16655(4) by a dental therapist.

1 (f) Failure to notify under section 16222(3) or (4).

2 (g) Failure to report a change of name or mailing address as
3 required in section 16192.

4 (h) A violation, or aiding or abetting in a violation, of this
5 article or of a rule promulgated under this article.

6 (i) Failure to comply with a subpoena issued pursuant to this
7 part, failure to respond to a complaint issued under this article,
8 article 7, or article 8, failure to appear at a compliance
9 conference or an administrative hearing, or failure to report under
10 section 16222(1) or 16223.

11 (j) Failure to pay an installment of an assessment levied
12 under the insurance code of 1956, 1956 PA 218, MCL 500.100 to
13 500.8302, within 60 days after notice by the appropriate board.

14 (k) A violation of section 17013 or 17513.

15 (l) Failure to meet 1 or more of the requirements for licensure
16 or registration under section 16174.

17 (m) A violation of section 17015, 17015a, or 17515.

18 (n) Failure to comply with section **9228 or** 9206(3).

19 (o) A violation of section 5654 or 5655.

20 (p) A violation of section 16274.

21 (q) A violation of section 17020 or 17520.

22 (r) A violation of the medical records access act, 2004 PA 47,
23 MCL 333.26261 to 333.26271.

24 (s) A violation of section 17764(2).

25 (t) Failure to comply with the terms of a practice agreement
26 described in section 17047(2)(a) or (b), 17547(2)(a) or (b), or
27 18047(2)(a) or (b).

28 (u) A violation of section 7303a(2).

29 (v) A violation of section 7303a(4) or (5).

- 1 (w) A violation of section 7303b.
- 2 (x) A violation of section 17754a.
- 3 (y) ~~Beginning January 1, 2021, a~~ A violation of section 24507
- 4 or 24509.