Good afternoon,

I am Michele Kawabe, the Kindergarten Oral Health Assessment (KOHA) Program consultant for the Michigan Department of Health and Human Services (MDHHS). I am responsible for development and administration of the program and will be working with the local health departments, school districts, and other partners throughout the state on implementation.

As background, in December 2020, Michigan Governor Gretchen Whitmer signed Public Act 261 of 2020 into law. The primary purpose of the law is to ensure that Michigan children enrolling in kindergarten or first grade have an oral health assessment prior to starting school. I will be working on development of this newly established screening program over the upcoming months and will be rolling out information/guidance once the foundational pieces are in place.

The program will be implemented in a phased approach. In this current Phase 1 (FY22-FY23), MDHHS is contracting with 15 local health departments, and plans are to expand the reach to cover the entire state over the next 3 years; a coverage map of Phase 1 is attached. If you are located in an area where KOHA is in the early stages of implementation, expect to see screenings ramping up full-force starting in the late winter/early spring for enrollment into the 2023-2024 school year. If the program has not yet reached your area, no action is required at this time other than my ask that you raise awareness of the screening and garner support from relevant stakeholders within your sphere of influence in anticipation of eventual spread to your jurisdiction.

I do expect many (if not most) of you will have questions. I am developing a FAQ list and will share the questions and responses on a regular basis. I also plan to develop resource materials for health departments, schools, health professionals, parents and the public as we roll out the program; please look for these materials over the course of the year. In the meantime, I have attached the MDHHS Health Appraisal Form (aka "green form") that many school districts are using for their screenings and a flyer that can be customized with your logo and provided to parents along with a copy of P.A. 261 for your reference.

I look forward to working with all of you as we work together to improve the health of Michiganders. Feel free to reach out to me directly with any questions you may have, and I'll do my best to respond as quickly as I am able.

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Act No. 261
Public Acts of 2020
Approved by the Governor
December 29, 2020
Filed with the Secretary of State
December 29, 2020
EFFECTIVE DATE: March 29, 2021

STATE OF MICHIGAN
100TH LEGISLATURE
REGULAR SESSION OF 2020

Introduced by Reps. VanSingel, Cynthia Johnson, Chirkun, Marino, Cherry, Elder, Love, Cambensy, Ellison, Frederick, Kahle, Sabo, Brann and Wozniak

ENROLLED HOUSE BILL No. 4223

AN ACT to amend 1978 PA 368, entitled "An act to protect and promote the public health; to codify, revise, consolidate, classify, and add to the laws relating to public health; to provide for the prevention and control of diseases and disabilities; to provide for the classification, administration, regulation, financing, and maintenance of personal, environmental, and other health services and activities; to create or continue, and prescribe the powers and duties of, departments, boards, commissions, councils, committees, task forces, and other agencies; to prescribe the powers and duties of governmental entities and officials; to regulate occupations, facilities, and agencies affecting the public health; to regulate health maintenance organizations and certain third party administrators and insurers; to provide for the imposition of a regulatory fee; to provide for the levy of taxes against certain health facilities or agencies; to promote the efficient and economical delivery of health care services, to provide for the appropriate utilization of health care facilities and services, and to provide for the closure of hospitals or consolidation of hospitals or services; to provide for the collection and use of data and information; to provide for the transfer of property; to provide certain immunity from liability; to regulate and prohibit the sale and offering for sale of drug paraphernalia under certain circumstances; to provide for the implementation of federal law; to provide for penalties and remedies; to provide for sanctions for violations of this act and local ordinances; to provide for an appropriation and supplements; to repeal certain acts and parts of acts; to repeal certain parts of this act; and to repeal certain parts of this act on specific dates," by amending the heading of part 93 and sections 9307 and 9321 (MCL 333.9307 and 333.9321) and by adding sections 9312 and 9316.

The People of the State of Michigan enact:

PART 93

HEARING, VISION, AND DENTAL

Sec. 9307. (1) A parent, guardian, or person in loco parentis applying to have a child registered for the first time in kindergarten or first grade in a school in this state shall present to school officials, at the time of registration or not later than the first day of school, a certificate of hearing and vision testing or screening or statement of exemption under section 9311.

(2) Before November 1 of each year, the principal or administrator of each school shall give the state and local health departments a summary of the hearing and vision reports at the time of school entry of new entering kindergarten and first grade students. The reports must be made on forms provided or approved by the department.

Sec. 9312. Records of hearing or vision testing and screening administered and conducted under this part and of dental oral assessments administered and conducted under this part must be made and preserved as provided by the department. The records must be available to health agencies and other persons to assist in obtaining proper and necessary health, dental, and educational care, attention, and treatment as permitted by the department. Individual records are confidential as required by section 2637.

Sec. 9316. (1) By the 2021-2022 school year, the department shall establish and maintain a dental oral assessment program to provide dental oral assessments to children residing in this state whose parents, guardians, or persons in loco parentis do not have dental oral assessments conducted as described in subsection (5)(a) but otherwise decide to have dental oral assessments conducted on their children under this section.

(2) Subject to subsection (3), the department shall accomplish the program by contracting with a government entity or person, which may include a grantee health agency described in section 16625. The following apply to the government entity or person selected by the department under this subsection:

(a) The government entity or person shall conduct the program in each area served by a local health department and shall publicize the dental oral assessment service and the time and place of the clinics.

(b) A dental oral assessment administered under the program must include a limited clinical inspection, performed by a dentist or a dental hygienist, to identify possible signs of oral or systemic disease, malformation, or injury, and the potential need for referral for diagnosis and treatment.

(3) If a school district has entered into a contract with a government entity or person to administer dental oral assessments to the school district's students, the school district may continue to use the government entity or person to conduct the dental oral assessments if the school district ensures that the dental oral assessments are conducted by May 31 of each year and the requirements of subsections (4) and (7) are met and provides all of the following information to the department:

(a) The name of the government entity or person that conducts the dental oral assessments.

(b) Each date the government entity or person is scheduled to provide the dental oral assessments.

(c) The total number of dental oral assessments that are scheduled.

(4) When the result of a dental oral assessment indicates that a child requires follow-up care, the dentist or dental hygienist or government entity or person conducting the assessment shall present to the individual bringing the child a written statement clearly indicating that follow-up treatment is encouraged and, upon request, provide information concerning the availability and sources of dental treatment required to eliminate or reduce an identified problem.

(5) Beginning in the 2021-2022 school year, a parent, guardian, or person in loco parentis applying to have a child registered for the first time in kindergarten or first grade in a school in this state may do the following:

(a) Have a dentist or dental hygienist conduct a dental oral assessment on the child not earlier than 6 months before the date of the child's registration with the school and obtain from the dentist or dental hygienist a written statement certifying that the child has received the dental oral assessment within the time frame required under this subdivision. The written statement must be on a form prescribed by the department.

(b) If the parent, guardian, or person in loco parentis of the child does not have a dental oral assessment conducted as described in subdivision (a), have a dental oral assessment conducted on the child by the government entity or person selected by the department under subsection (2).

(6) Beginning in the 2021-2022 school year, a parent, guardian, or person in loco parentis applying to have a child registered for the first time in kindergarten or first grade in a school in this state who chooses to have a dental oral assessment conducted on the child as described in subsection (5) may present to school officials, at the time of registration or not later than the first day of school, the statement described in subsection (5) or a written statement indicating that the parent, guardian, or person in loco parentis of the child will provide for the child's dental oral assessment by a government entity or person selected by the department under subsection (2). A child shall not be excluded from school attendance if the parent, guardian, or person in loco parentis of the child does not present a statement to school officials under this section.

(7) Before November 1 of each year, beginning in the 2021-2022 school year, the principal or administrator of each school shall give the department a summary of any dental reports that it receives at the time of school entry of new kindergarten and first grade students. The reports must be made on forms provided or approved by the department.

(8) This section does not apply in a fiscal year in which the legislature does not appropriate money for the program.

(9) As used in this section, "program" means the dental oral assessment program described in subsection (1).

(10) This section does not apply beginning January 1, 2024.

Sec. 9321. The department may promulgate rules to implement this part, including, but not limited to, the age and frequency for hearing and vision testing and screening under section 9302 and the maintenance and disclosure of records under section 9312.

Enacting section 1. This amendatory act takes effect 90 days after the date it is enacted into law.

Clerk of the House of Representatives

Secretary of the Senate

Approved_____

_____

Governor

HEALTH APPRAISAL

Michigan Department of Health and Human Services

Dear Parent or Guardian: The following information is requested so that the school can work with the parent to meet the physical, intellectual, and emotional needs of the child. Fill out the information requested in Section I. Section III may be certified by the transcription of information from the certificate of immunization. The remaining sections are to be completed by a doctor, nurse, dentist, dental therapist, and dental hygienist.
(**BE SURE TO BRING YOUR CHILD'S IMMUNIZATION RECORDS TO THE EXAMINATION**).

PERSONAL

Child's Name (Last, First, Middle)	Date of Birth (mm/dd/yy)
Address (Number, Street, City, Zip Code)	Today's Date (mm/dd/yy)
Parent/Guardian (Last, First, Middle)	Home/Cell Phone Number
Address (Number, Street, City, Zip Code)	Work Phone Number

SECTION I – HEALTH HISTORY

Yes	No	Resolved	#	Is your child having any of the problems listed below?	Birth History
☐	☐	☐	1	Allergies or Reactions (for example, food, medication or other)	
☐	☐	☐	2	Anaphylaxis	
☐	☐	☐	3	Does your child take any medication(s) regularly?	If yes, list medications
☐	☐	☐	4	Hay Fever, Asthma, or Wheezing	
☐	☐	☐	5	Eczema or Frequent Skin Rashes	
☐	☐	☐	6	Convulsions/Seizures	
☐	☐	☐	7	Heart Trouble	
☐	☐	☐	8	Diabetes	
☐	☐	☐	9	Frequent Colds, Sore Throats, Earaches (4 or more per year)	Are there any current or past diagnosis(es) ☐ Yes ☐ No
☐	☐	☐	10	Trouble with Passing Urine or Bowel Movements	If yes, please describe
☐	☐	☐	11	Shortness of Breath	
☐	☐	☐	12	Speech Problems	
☐	☐	☐	13	Menstrual Problems	
☐	☐	☐	14	Dental Problems Date of Last Exam _____ **OR** Date of Last Assessment _____	
☐	☐	☐		Other (please describe) _____	

Reason for Medication		
Concussion History		
Parent/Guardian Signature	Date	Was the health history reviewed by a health professional? ☐ Yes ☐ No **Examiner's Initials** ____

SECTION II – PHYSICAL EXAMINATION, INSPECTION, TESTS AND MEASUREMENTS
Required for Child Care and Head Start / Early Head Start

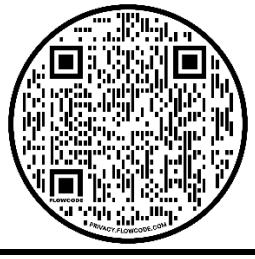
Test and Measurements

Yes	No	Was child tested for	Tests and results	Normal	Referred	Under care
☐	☐	Vision Date _____	Visual Acuity	☐	☐	☐
			Muscle Imbalance	☐	☐	☐
			Other	☐	☐	☐
☐	☐	Hearing Date _____	☐ Audiometer (R= Right, L=Left)	R/L	R/L	☐
			☐ OAE (R= Right, L=Left)	R/L	R/L	☐
			☐ Other (R= Right, L=Left)	R/L	R/L	☐
☐	☐	Urinalysis	Sugar	☐	☐	☐
			Albumin	☐	☐	☐
			Microscopic	☐	☐	☐
☐	☐	Blood Lead Level Date _____	Level _____ ug/dl	☐	☐	☐

Note: All children in Medicaid need to be tested at 1 and 2 years of age, or once between 3 and 6 years of age if not previously tested. All children, regardless of Medicaid status, should be tested at those same ages if they live in an area where lead risk is high.

☐	☐	Height & Weight	Height	☐	☐	☐
			Weight	☐	☐	☐
		Other _____	Other _____	☐	☐	☐
☐	☐	Hemoglobin/Hematocrit	⇨	☐	☐	☐
☐	☐	Blood Pressure	Reading _____	☐	☐	☐

Complete pediatric tuberculosis risk assessment available at:
https://www.michigan.gov/documents/mdhhs/4._MI_Pediatric_TB_Risk_Assessment_661537_7.pdf **OR** feel free to use the attached QR code instead of the full link text.



Examinations and/or Inspections

Essential Findings Deviating from Normal
Exam Date _____

SECTION III – IMMUNIZATIONS

Statements such as "UP-TO-DATE" or "COMPLETE" will not be accepted. Admission to school may be denied based on this information.*

Vaccines (Circle Type)	Date Administered mm/dd/yy		Vaccines (Circle Type)	Date Administered mm/dd/yy	
Hepatitis B (HepB)	1	3	Hepatitis A (HepA)	1	3
	2	4		2	
DTaP/DTP/DT/Td	1	4	Influenza (IIV/LAIV)	1	3
	2	5		2	4
	3	6	Meningococcal MenACWY (MCV4)	1	3
				2	
Tdap	1		Meningococcal B (Bexsero, Trumenba)	1	3
				2	
Haemophilus Influenzae type b (HIB)	1	3	Human Papillomavirus (9vHPV, 4vHPV, 2vHPV)	1	3
				2	
	2	4	Additional Vaccines Specify Date & Type	Type of Vaccine(s)	Date of Vaccine(s)
Polio (IPV/OPV)	1	4		1	
	2	5		2	
	3			3	
Pneumococcal Conjugate (PCV7/PCV13)	1	3	Indicate and attach physician diagnosis or laboratory evidence of immunity as applicable.		
	2	4			
Rotavirus (RV1/RV5)	1	3	***Note:** According to Public Act 368 of 1978, any child enrolling in a Michigan school for the first time must be adequately immunized, vision tested and hearing tested. Exemptions to these requirements are granted for medical, religious, and other objections, provided that the waiver forms are properly prepared, signed and delivered to school administrators. Forms for these exemptions are available at your provider office for medical waiver forms and through your local health department for nonmedical waiver forms.		
	2				
Measles, Mumps, Rubella (MMR/MMRV)	1	3			
	2				
Varicella (Chickenpox), (Var, MMRV)	1	2			
History of Chickenpox Disease? ☐ Yes ☐ No If yes, date _____			Parent/Guardian refused recommended immunizations at visit: ☐		
I certify that the immunization dates are true to the best of my knowledge ☐					
Health Professional's Signature		Title		Date	

SECTION IV – RECOMMENDATIONS

(Required for Child Care and Head Start/Early Head Start)

Yes	No	
☐	☐	Is there any defect of vision, hearing, or other condition for which the school could help by seating or other actions? If yes, please explain: _____

☐ ☐ Should the child's activity be restricted because of any physical defect or illness?
If yes, check and explain degree of restriction(s):

☐ Classroom ☐ Playground ☐ Gymnasium
☐ Swimming Pool ☐ Competitive Sports ☐ Other

Other Recommendations

SECTION V – DENTAL EXAM OR ASSESSMENT RECOMMENDATIONS (OPTIONAL)

Child's Name	Has received ☐ Dental Exam ☐ Dental Assessment

Findings and Recommendation (Check all that apply)

☐ No Urgent Needs ☐ Routine Care Needed ☐ Treated Decay
☐ Restorative/Urgent Needs for Dental Care ☐ Untreated Decay ☐ Further Referral for Specialist

Signature	Date

Check One

☐ Dentist ☐ Dental Therapist ☐ Dental Hygienist

PHYSICIAN'S SIGNATURE

Examiner's Signature	Date	Examiner's Name (Print)		Degree or License
Number & Street	City	MI	Zip Code	Telephone Number

Information required for:

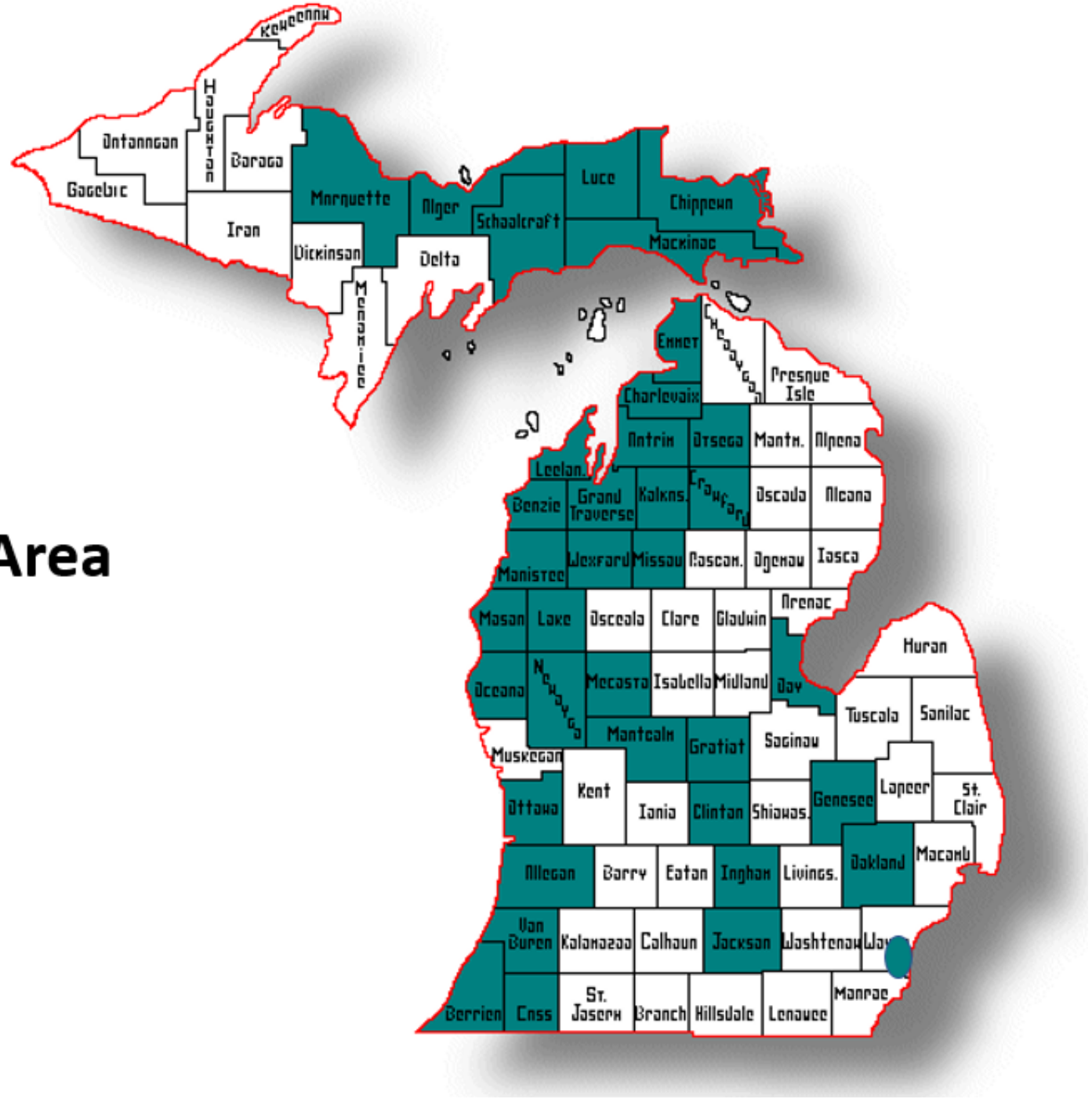
Early On – Hearing and Vision Status; Diagnosis; Health status

Child Care Licensing – Physical Exam, Restrictions, Immunizations

Head Start/Early Head Start – Determination that child is up-to-date on a schedule of age-appropriate preventative and primary health care, including medical, dental, and mental health. The schedule must incorporate the well-childcare visit required by EPSDT and the latest immunizations schedule recommended by the Centers for Disease Control and Prevention, State, tribal, and local authorities. An EPSDT well-child exam includes height, weight, and blood tests for anemia at regular intervals based on age.

Developed in Cooperation with the Department of Health and Human Services, Education, Michigan American Association of Pediatrics, Early Childhood Investment Corporation, Child Care Licensing, Head Start, Michigan State Medical Society, Michigan Association of Osteopathic Physicians and Surgeons.

Phase 1 Coverage Area
FY22-FY23



New Kindergarten Dental Screening Law

On December 29th, 2020, a new law was made in Michigan. This law is to help students entering school have a dental screening before starting school.

Below are some commonly asked questions

What do teeth have to do with school?

Dental cavities are the #1 most common childhood illness and cavities can cause pain. Cavities can prevent kids from eating and can keep Kids awake at night and both eating and sleep help kids learn. It is important to screen kids for health issues before they start school so if they do have cavities, then the cavities can be fixed and the kids will be well-rested, able to eat, and ready to learn!

Are other screenings completed for students?

Yes, It is Michigan law that students are also screened for hearing and vision, and these are done to make sure students can see and hear in the classroom, so they are able to learn.

Do my older students have to have a dental screening too?

This law is specifically for students entering Kindergarten, but it is highly recommended that all kids see a dentist at least once a year.

What will a parent or guardian need to do?

The school will give you a form, called *MDHHS Health Appraisal* form, that is all about the health of your student. The form will need to be completed by professionals, such as a doctor and dentist. On the *MDHHS Health Appraisal* form, **Section V**- Dental Exam or Assessment is the section that will need to be completed by a dental provider.

Is there a difference between a dental exam and a dental assessment?

In **Section V** of the *MDHHS Health Appraisal* form, it asks if a child received a dental exam or dental assessment. This is language specific to dental providers, a dentist completes a dental exam, and dental hygienists/dental therapists will complete a dental assessment. You only need to have one dental provider complete the screening.

What if my student has cavities?

If you learn your student has a cavity or cavities, they will need to have the cavities filled. A cavity does not stop growing on its own, it will need to be treated by a dentist. The person who completes your student's dental screening will be able to help with appointments for follow up care.

Who can complete Section V on the Health Appraisal form?

Any dentist, dental therapist or registered dental hygienist licensed in Michigan can complete the form

What is a dental therapist?

A dental therapist is a newer type of provider allowed in Michigan, so they are included under the new law. However, at this time they are not many dental therapists, so you will more than likely have your student seen by a dentist or a dental hygienist.

What if I do not have a dentist?

Contact your Local Health Department for help finding a dental provider to do the screening. The school nurse or secretary may also be able to help. The school staff members are aware of this law and will know who to contact in your community for help.

What if I cannot afford to take my student to the dentist?

There are a variety of ways to have kids in Michigan seen by a dentist or dental professional. Consider enrolling in the **Michigan's Health Kids Dental Program** and contacting your Local Health Department for help finding a dental home. Michigan's Healthy Kid Dental Program: Healthy Kids Dental Program (michigan.gov)

Brought to you by your Local Health Department: