



MINUTES
St. Clair County Board of Commissioners

Board of Commissioners' Room
County Administrative Office Building, 2nd Floor
200 Grand River Avenue
Port Huron, MI 48060

June 18, 2026 at 6:00 PM

Moment of Silence, Prayer or Personal Reflection

1. Call to Order

Chairperson Simasko called the meeting to order at 6:00 p.m.

2. Pledge of Allegiance

Pledge of Allegiance was lead by Chairperson Simasko.

3. Roll Call

Present: Kerry Ange, Lisa Beedon, Joi Torello, Paul Zeller, Dave Rushing, Dave Vandenbossche and Steve Simasko

4. Additions/Deletions/Changes to the Agenda

Moved by Commissioner Rushing, seconded by Commissioner Torello, to add Dr. Nevin Tribute — Representative Pavlov under Proclamations 7A. Carried - Voice Vote Aye: Commissioner Simasko, Commissioner Beeedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

5. Approval of Agenda

Moved by Commissioner Torello, seconded by Commissioner Ange, to approve the agenda as amended. Carried - Voice Vote Aye: Commissioner Simasko, Commissioner Beeedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

6. Minutes of Previous Meeting

Moved by Commissioner Beedon, seconded by Commissioner Vandenbossche, to approve and file the minutes of the 05/21/2026 Commissioner Meeting and the 06/04/26 Standing Committee Meeting. Carried - Voice Vote Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

- A. 05-21-2026 Commission Meeting
- B. 06-04-2026 Standing Committee Meetings

7. Proclamations

Joe Pavlov, 64th State Representative, read the Dr. Nevin Tribute and presented the tribute to Dr. Nevin.

- A. Dr. Nevin Tribute - Representative Pavlov - Proclamations

8. Consent Agenda

Moved by Commissioner Vandenbossche, seconded by Commissioner Beedon, to approve items 8A through 8H on the Consent Agenda. Carried - Voice Vote Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

- A. Summary Budget to Actual Report — May 2026
- B. American Rescue Plan Spending Report — May 2026
- C. Backup Solution Renewal
- D. Performance Monitoring Solution Renewal
- E. Grant Amendment for Michigan Natural Resources Trust Fund Grant - North Channel County Park
- F. Grant Amendment for Michigan Natural Resources Trust Fund Grant - North Channel County Park .
- G. Library - Contract renewal with Cengage Learning for Gale Courses
- H. ProWest & Associates Professional Services

9. Reports of Standing and Special Committees

Commissioner Rushing - Advisory Board of Health - Oral

10. Citizens Wishing to Address the Board

Kevin Watkins - Wales Twp., MI
RE: Juneteenth

Laura Wilhelm-Bruzek - Casco, MI
RE: Animal Control Ordinance

Eileen Tesch - Algonac, MI
RE: CSCB

Mary Christine Fleischer - Algonac, MI

RE: Proposed Closing of Title X Family Planning Program
* Please see the attached letter — Written Citizen Comments

Sherry Mercurio - Clyde Twp., MI
RE: Board Conduct

Mary Lou Creamer - Port Huron, MI
RE: Dr. Nevin/OBGYN Services

Patrice Plott - Clay Twp., MI
RE: Family Planning

Dawn Fulk - Port Huron, MI
RE: Dr. Nevin
* Please see the following letters attached.
1) MDHHS Updated Letter - August 7, 2025
2) Health Department Letter — July 23, 2025
3) Major Victory for Michigan Families

Barbara Payton - Port Huron, MI
RE: Dr. Nevin/Title X

Deb Roberts - Lakeport, MI
RE: Dr. Nevin

Virginia Coury - Fort Gratiot, MI
RE: Dr. Nevin/Public Health

Dorothy Yope - St. Clair, MI
RE: Title 10 Funding

Rachelle Bonelli
RE: Dr. Nevin/Health Department Decisions

Kristyn Secory - Burtchville, MI
RE: Public Health

Tracy Birgy - Marysville, MI
RE: Health Department Deputy Needed

Jim Casha - Ontario, Canada
RE: Alcohol & RFK, Jr.

Diane Hulett - Riley, MI
RE: Deputy Assistant for Dr. Nevin

Kathy Swantek - St. Clair, MI
RE: Women's Services Title X

Carolyn Richards - Greenwood Twp, MI
RE: Dr. Nevin

Libby Prill - China Twp., MI
RE: Decorum/Health Department

Carrie Balmer - Clyde, MI
RE: Title X and Health Department Cuts

- A. Written Citizen Comments
- B. MDHHS Updated Letter - 08/07/25
- C. Health Department Letter - 07/23/25
- D. Major Victory for Michigan Families

11. Unfinished Business

None

12. New Business

- A. Approval of County Disbursements — May 2026

Moved by Commissioner Zeller, seconded by Commissioner Rushing, to approve the May 2026 County Disbursements in the amount of \$27,489,468.60 Carried - Roll Call Vote 7-0. Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

- B. Intervention Center Roof Architect - Spicer Group

Moved by Commissioner Vandenbossche, seconded by Commissioner Ange, to approve the proposal with Spicer Group for the Intervention Center Roof project in the amount of \$69,620. Carried - Roll Call Vote 7-0. Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

- C. 2026 Marine Safety Program Grant Agreement

Moved by Commissioner Torello, seconded by Commissioner Vandenbossche, to approve the FY2026 Marine Safety Program Grant agreement in the amount of \$180,100. Carried - Roll Call Vote 7-0. Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

- D. Food Service Contract for the St. Clair Juvenile Intervention Unit - Aramark

Moved by Commissioner Ange, seconded by Commissioner Beedon, to approve the contract with Aramark for food service within the Juvenile Intervention Unit (JIU) as presented. Carried - Voice Vote 7-0. Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

- E. Community Center Heater Replacement - Goodells County Park - Dependable Heating and Cooling

Moved by Commissioner Rushing, seconded by Commissioner Torello, to approve Dependable Heating & Cooling's quote for the replacement of the forced Air Unit for the Community Center at Goodells County Park in the amount of \$28,525. Carried - Voice Vote 7-0. Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

F. BSA Cloud Conversion and Software Upgrade

Moved by Commissioner Beedon, seconded by Commissioner Vandenbossche, to approve the agreement with BSA for conversion and upgrade of assessing software for the County Treasurer and Equalization Departments in the total amount of \$177,060. Carried - Voice Vote 7-0. Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

13. Administrator's Report

The June 2026 Administrator's Report is included in the Board of Commissioners Packet.

Administrator Hull touched on a few key points from the June 2026 Administrator's Report.

- The Administrative/Legislature Coordinator has been temporarily reassigned to assist with the administration function at Animal Control. She is putting systems in place to make sure bills are paid, documents are being put in place for purchasing, and making sure we are compliant with FOIA requests. Administrator Hull has drafted a Memo of Understanding defining the rolls of Animal Control as they work with local municipalities and police departments. He met with Sheriff King and Captain Pohl to get their insight on the draft. The Director position was posted on June 9th and will remain open until June 23rd. Currently, we have four applicants for this position.
- Working on an agreement with Ascend Aviation to bring back a Flight School to St. Clair County Airport. Formal agreement will likely come before the board at the July committee meeting.
- The Landfill SEP was submitted to EGLE on June 5, 2026 — waiting for a response back from EGLE.
- Working on Strategic Planning software, an email was sent to Commissioners on April 9th about strategic planning priorities. Priorities set by the Board will provide the foundation for the strategic planning to allow departments to create long-term goals and day-to-day actions to work towards meeting those priorities. Administrator Hull will be recommending six priorities.
- Working on a conceptual initiative introduced by Commissioner Zeller for Economic Development.
- Discussion with Commissioners on how to move forward with the Opiod

Advisory Committee.

- Administrator Hull was looking for direction from Commissioners on how to move forward with the Deputy Medical Director position.
- Administrator Hull had discussion with Commissioners in regard to posting a Deputy Administrator position. The Board gave Administrator Hull the authority to post a Deputy Administrator position.
- Capital Improvement Plan proposals are due July 10th.
- Still working with maintenance on the Preventative Maintenance Plan.
- Recognized Employee of the Month, Don Patterson

Moved by Commissioner Ange, seconded by Commissioner Torello, to accept and file the Administrator's Report. Carried - Voice Vote 7-0. Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

A. June 2026

14. Miscellaneous Business

None

15. Receive and File Packets and all Information Present

Moved by Commissioner Zeller, seconded by Commissioner Rushing, to receive and file packets that were sent to Commissioners, packets at their places and any other information presented. Carried - Voice Vote 7-0. Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

16. Adjournment

Moved by Commissioner Torello, seconded by Commissioner Vandenbossche, to adjourn at 8:05 p.m. Carried - Voice Vote 7-0. Aye: Commissioner Simasko, Commissioner Beedon, Commissioner Torello, Commissioner Rushing, Commissioner Vandenbossche, Commissioner Ange, Commissioner Zeller Nay: None

Angie Waters

St. Clair County Clerk\Register

Dear Advisory Board of Health Members & County Commissioners:

My name is Jennifer Michaluk and I am a life long St. Clair County resident. I am unable to attend the ABOH meeting on June 17 and ask that you read and include my letter in the meeting minutes.

I also ask that the St. Clair County Board of Commissioners please include my letter in the minutes of your upcoming June BOC meeting.

I am one of many St. Clair County residents who care and am very concerned about the continued gutting of our health department's programs/services.

The ABOH has the ability to not let this go forward and not recommend the latest unsettling changes Dr. Nevin is proposing. The BOC has the ultimate power to stop this, by reining him in, by not allowing him to proceed any further or by overturning the process if the ABOH recommends in his favor.

The Medical Director at the St. Clair Health Department has fast tracked "his" latest agenda item on another one of his missions to eliminate another health department program/service. Family Planning (Title X funds) offers confidential birth control and related health screenings/exams, etc., to residents seeking them out or in need of these services. Why the expedited timeline? The Health Department has run this invaluable program for over 40+ years. Now he wants to see it eliminated? His memo really lacks careful thought and consideration for the future. It read to me like a lot of "what-ifs or maybes".

The county could hire new staff for this program, he doesn't want that to happen. His rationale that federally and state wide priorities may or could change in the future is just that, not for sure or definitive. As you know, he lacks the medical experience and comfort level of providing direct patient care to clients. Therefore, he doesn't want to oversee it. He prefers to cut, gut and or ship everything out medically he doesn't like or isn't invested in.

He also claims he is proposing these changes “to be in alignment with the values of the majority of our residents.” What? Says who? Who does he survey and get his information from? I have never been surveyed about this nor have many similar minded people I know who don’t agree with him.

What about the hundreds of clients who use the program? What about the investment in their health and well being? I believe in the last year there were almost 900 program visits. That he boldly thinks they can just go to any pharmacy for certain items or just head over to McLaren’s residency program for other services, is insinuating people want to, can, or have the ability to do that. People use that health department program for a reason; because of the trusted, professional nursing staff they see and the quality services they feel safe receiving there. Eliminating this program or shipping things elsewhere dismisses the clients needs and values. Don’t these people matter? Not to mention we have a shortage of current medical providers. Lastly if this program does get eliminated, multiple staff may risk losing their jobs. There’s a trend here and it is alarmingly growing.

I used the Family Planning program and was a client for several years when I was younger. It allowed me the choice and ability, with education and medical guidance from the staff, to make thoughtful personal health decisions as I carefully planned for my future. Its impact for me was immense. The confidentiality component was key for me and what I needed. The caring and professional staff treated me with the utmost care and respect. I will always speak highly and be thankful of my experiences with the program. And I know I’m not the only one.

It is clear that his plan is to gut the health department until all that remains is the bare minimum, required local public health services. I keep reading that theme in his incessant and monotonous memos. Systematically dismantling a health department that was put into place to help protect, promote and serve the health of all our residents is wrong. Our county residents deserve better!

I ask you all this, please do not let this continue. Do not support getting rid of this program, its funding, or source it out to other entities. The health department is where this program belongs. If he isn’t comfortable overseeing it, working alongside the nursing staff, or

doesn't have the medical background and expertise to do so, please hire somebody who does. Dr. Nevin is not the end all or be all for this county!!

Thank you.

Sincerely,

Jennifer Michaluk

06/16/2026

Board of Commissioners:

I am exercising my right to have this communication read in my absence at the next convening of the Board of Commissioners.

I am concerned with Dr. Remington Nevin's judgement and actions as director of the St. Clair County Health Department. Several months ago, he ordered fluoride removed from drinking water. As justification for his decision, he cited one article appearing in one peer reviewed source in which a positive association was noted between fluoride and lower childhood IQ test results. Ostensibly based on this article he chose to support removing fluoride from drinking water for public water sources. This ignores all research conducted over a span of more than fifty years by hundreds of research institutions which overwhelmingly concluded that the benefits greatly outweigh the potential detriments of fluoride.

This fringe opinion being converted to actual policy by a medical director is unacceptable. This is not about "following the science". The medical director is paid for his expertise, ability to analyze data and make informed decisions which will benefit the community at large. It has long been accepted by the scientific community that fluoride in the water benefits a majority of members in the community. Since Dr. Nevin stands opposed to this regardless of evidence to the contrary, I've concluded that likely there is a motivating factor outside of community benefit. I'm forced to conclude that he is vying for a political objective rather than striving to improve or maintain the health of the community.

It is in direct opposition to the health of any community to close health care clinics which serve vulnerable populations. It is unconscionable and until recently unfathomable that a medical director would not only encourage but would be responsible for closing clinics voluntarily, especially in a country such as ours where health care providers are in severely short supply. And yet, that is exactly what Dr. Nevin did with the teen health clinics.

Dr. Nevin's determination to undermine vaccination programs and long-standing policies appears to be in line with current R.F. Kennedy and MAHA policy pursuits. These anti-vaccination sentiments have been rejected by the scientific community across the board and, until recently, those holding "anti-vax" views have been at best a fringe element. Even third world countries, through routine, inexpensive uses of vaccines have been able to virtually eliminate diseases that once drove up informant mortality statistics and ravaged populations.

Aside from the community health aspect, St. Clair County Commissioners and the County Board of Medical Advisors should be far more wary of the nexus between Dr. Nevins official duties and his collateral activities. On at least two occasions, Dr. Nevin has been featured as a

titled speaker at Republican Party functions. His name in the August minutes from the St. Clair County Republican meeting appears as "Guest Speaker - Dr. Remington Nevin, MD, MPH, DrPH, Medical Director". This partisan use of his title paves the way for county liability. As a non-elected public official he is likely covered under the HATCH Act (<https://osc.gov/Services/Pages/HatchAct-StateLocal.aspx>). The federal Office of Special Counsel is charged with finding fault in partisan support and/or actions of non-elected public servants. Furthermore, non-government organizations could bring suit in civil court if it is perceived that Nevin's partisan actions directly or indirectly "harmed" residents. His titles of "doctor" and "medical director" carry with them a heavy legal burden and a liability which county administrators have recklessly chosen to disregard.

Dr. Remington Nevin has failed his charge of making nonpartisan decisions to protect and improve the health of the community. He routinely has and continues to place the goal of improving community health subservient to his own political aspirations. Remington Nevin's apparent inability to place the public welfare ahead of his political aspirations has put him (and St. Clair County) in a legally dubious stance.

Remington Nevin has also managed to alienate the Michigan Nurses Association which has filed a ULP (unfair labor practice) complaint against the St. Clair County Health Department and Dr. Nevin for causing a hostile work environment. It should be noted this is not his first or only complaint of this nature and is unlikely to be his last.

County residents expect that a licensed physician, hired by the county and paid to make choices and policies promoting the health of the community, will do exactly that. This man, however, has chosen to not only systematically dismantle the St Clair County Health Department but also alienate bargaining units, and incite litigation against himself and the county.

Remington Nevin is unsuited for the position he occupies and should be replaced immediately.

Respectfully,

T. D. Brown



Outlook

My Letter - St. Clair County

From Rachel Verrelli <Rachel.Verrelli@macombgov.org>

Date Wed 6/17/2026 2:42 PM

To Mary Fleischer <Mary.Fleischer@macombgov.org>; Patrice Plott <Patrice.Plott@macombgov.org>

Dear Commissioners, Citizens, and Health Department Staff,

It has been brought to my attention that there are plans to shut down the St. Clair County Health Department Family Planning Program in 2026. This news came as a shock to me for many reasons. For those who may not be familiar with the services Family Planning provides, I would like to share some information about the program. Family Planning provides care to vulnerable patient populations by helping detect cervical cancer through Pap smears and breast cancer through clinical breast exams. The program serves an important public health role by preventing and treating sexually transmitted infections and helping reduce the spread of communicable diseases. Family Planning works with individuals and families to achieve their reproductive goals, whether that involves preconception counseling or pregnancy prevention. This is not an exhaustive list of the services Family Planning provides there is much, much more.

As you may know, several Planned Parenthood clinics throughout Michigan closed last year, leaving many individuals without access to reproductive healthcare. These closures forced patients to travel hundreds of miles to obtain care. Many were left without treatment for sexually transmitted infections, while others missed important cervical cancer screenings because they no longer had access to Pap smears. Neighboring health departments and clinics experienced a influx in patient, resulting in waitlist for appointments.

A few months ago, I had the privilege of visiting the St. Clair County Health Department, which recently underwent a beautiful remodel. The remodel was quite a significant undertaking, costing \$5.5 million (source: Times Herald), and an additional \$250,000 was invested in updating the Teen Program (source: Times Herald). My question is this: why was \$250,000 spent updating the Teen Program in 2025 for it be closed just one year later?

Dr. Nevin has proposed the cut of the Family Planning program because birth control pills are now available over the counter. While this is true, the cost is approximately \$20 per pack, or about \$240 per year. It is important to note that this option does not work for every patient, and the cost may not be feasible for many individuals. This proposal also overlooks patients who prefer long-term contraceptive methods or those who cannot safely use over-the-counter birth control pills due to medical conditions.

I strongly encourage the Board of Commissioners and the Medical Director to reconsider the closure of this program. I also encourage citizens to advocate for themselves and to support those who may not be able to advocate for themselves. Reproductive healthcare is essential and should remain accessible to all.

Thank you for your time and attention,

Rachel Verrelli, RN, BSN

Jul 18, 2025 · 4 min read

Michigan Department of Health and Human Services Creates Its Own Vaccine Information Statements Without Federal Approval, Violating State and Federal Laws

Updated: Aug 7, 2025

June 9, 2026 › [Censorship/Surveillance](https://childrenshealthdefense.org/defender_category/censorship-surveillance/) › [Toxic Exposures](https://childrenshealthdefense.org/defender_category/toxic-exposures/) › [News](https://childrenshealthdefense.org/defender-news/)

TOXIC EXPOSURES

Under Pressure, Michigan Makes It Easier to Opt Out of Vaccine Tracking

In the latest development in efforts to get Michigan's health department to stop adding a thick layer of bureaucratic red tape that makes it difficult for families to opt out of vaccines and vaccination tracking, the department will now give parents a form that clearly explains what the tracking system is and that they have the right to opt out.

by [Suzanne Burdick, Ph.D.](https://childrenshealthdefense.org/authors/suzanne-burdick-ph-d/)

JUNE 9, 2026



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8 min

Michigan health freedom and privacy advocates **scored a win** (<https://www.michiganvaccinechoice.org/single-post/major-victory-for-michigan-families-mdhhs-ends-use-of-non-compliant-michigan-specific-vis>) this month when the state's health department stopped using a vaccine information handout that failed to explain to parents how they can opt out of the state's vaccine tracking program, and didn't include an opt-out form.

It's the latest development in health freedom and privacy advocates' efforts to get the state health department to stop adding a thick layer of bureaucratic red tape — which isn't even required under state law — that makes it difficult for families to opt out of **vaccine** (https://childrenshealthdefense.org/defender_category/toxic-exposures/vaccines-toxic-exposures/) and vaccination tracking.

"While this is definitely a win, there is still a long way to go," said journalist and Michigan resident [Jeremy R. Hammond](https://www.jeremyhammond.com/) (<https://www.jeremyhammond.com/>), who has a 13-year-old unvaccinated son.

Until now, the **Michigan Department of Health & Human Services** (<https://www.michigan.gov/mdhhs>) (MDHHS) largely avoided telling parents what the tracking system is and how they can opt out of it, Hammond said.

This matters because the state's vaccination tracking system, **Michigan Care Improvement Registry** (<https://childrenshealthdefense.org/wp-content/uploads/MDHHS-6310-MCIR-Notice-Form.pdf>) (MCIR), causes "pressure and coercion" for families who prefer not to vaccinate, according to **Dr. Remington Nevin** (<https://www.remingtonnevin.com/>), medical director for the St. Clair County Health Department in rural eastern Michigan.

Dubbed "**Michigan's 'RFK Jr.'**" (<https://bridgemi.com/michigan-health-watch/michigans-rfk-jr-who-is-dr-remington-nevin/>) by Bridge Michigan, Nevin is an epidemiologist with multiple degrees from Johns Hopkins University. He is also a former U.S. Army major and preventive medicine officer.

Nevin spoke with **The Defender** (<https://childrenshealthdefense.org/defender/>) about why it's crucial for parents to be able to opt out of MCIR — and how he submitted Freedom of Information Act (FOIA) requests that likely led the state health department to stop using the old form and start making it easier for parents to opt out.

State health department violated Michigan law

The MCIR system sends reminders to medical staff to encourage them to keep their pediatric patients up to date with the **American Academy of Pediatrics** (<https://downloads.aap.org/AAP/PDF/AAP-Immunization-Schedule.pdf>) or the **American Academy of Family Physicians** (<https://www.aafp.org/clinical-insights/immunizations-and-vaccines/immunizations-schedules-resources>)

childhood vaccine schedule.

When a child visits a clinic, front desk staff and nurses may tell parents their child is due for a particular vaccine, even though “the parent and the child’s physician may have decided together through shared clinical decision-making to not give that shot until later on in the child’s life,” Nevin said.

Michigan law (<https://www.legislature.mi.gov/Laws/MCL?objectName=MCL-333-9206>) requires the state health department to give parents a form — before vaccinating a child — notifying parents that they can object to having their child automatically enrolled in MCIR.

But for years, MDHHS failed to give parents any such form.

Instead, the health department interpreted state law to mean that giving parents a revised version of the Centers for Disease Control and Prevention (CDC) **Vaccine Information Statement** (<https://childrenshealthdefense.org/wp-content/uploads/VIS-Michigan-Example.pdf>) (VIS) — which included a blurb at the bottom saying parents can object to the tracking system — was enough to satisfy the legal requirement.

The blurb on the modified VIS handout stated, “Individuals have the right to request that their medical care provider not forward immunization information to the Registry.”

However, the handout failed to tell parents how they could opt out.

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Compliance became virtue.
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(https://childrenshealthdefense.org/ebook-sign-up/stigma-and-its-consequences-during-the-covid-19-pandemic/?itm_term=shortcode)

‘State public health agencies do make mistakes’

The modified VIS handout wasn’t an opt-out form as technically required by Michigan law. However, MDHHS officials defended the form on the basis that the CDC had approved its use of the handout, Nevin said.

Nevin decided to push MDHHS to back up its claim. Last summer, he sent repeated **FOIA requests to the MDHHS** (<https://childrenshealthdefense.org/wp-content/uploads/20250724-FOIA-H028900-062625-VIS-Federal-Guidance-Final.pdf>), asking for the paper trail showing the CDC’s approval. X

On Sept. 8, 2025, the health department said it was **unable to produce any record** (<https://childrenshealthdefense.org/wp-content/uploads/20250812-FOIA-H029176-072125-MCL-MCIR-Out-Out-Form-Request-Appeal-Denied.pdf>) showing that the CDC had greenlit MDHHS’ use of the modified VIS handout.

During a June 2 webinar about its “**updated VIS process for vaccination**” (<https://content.govdelivery.com/accounts/MDHHS/bulletins/41a1473>), MDHHS quietly announced that it would no longer be using the modified VIS handout.

An MDHHS spokesperson told The Defender a recording of the webinar will soon be made available, along with an FAQ answering questions received during the webinar.

When asked why MDHHS stopped using the modified VIS handout, the spokesperson said that “a review of this process determined that a separate form provided individuals a more defined and clearer process on how to opt out.”

Now, parents are given a form that tells them **what MCIR is** (<https://childrenshealthdefense.org/wp-content/uploads/MDHHS-6310-MCIR-Notice-Form.pdf>) and that they can opt out.

However, parents still have to jump through another hoop by locating and signing a different form that officially **opts them out of MCIR** (<https://mcir.org/wp-content/uploads/2014/09/OptOutForm.pdf>), according to a **Michigan for Vaccine Choice** (<https://www.michiganvaccinechoice.org/single-post/major-victory-for-michigan-families-mdhhs-ends-use-of-non-compliant-michigan-specific-vis>) press release.

Nevin said:

"The big lesson here is that when a state public health agency interprets a law or makes a claim, it's perfectly appropriate to question them. What this shows is that state public health agencies do make mistakes."

The MDHHS spokesperson defended MCIR, saying it "reduces vaccine-preventable diseases by ensuring individuals are up to date on vaccines and prevents over-vaccination by allowing providers to view complete patient immunization history in one system."

Fear of national attention likely led health department to change its tune

According to Nevin, MDHHS likely stopped using its modified VIS out of fear that the issue could draw national attention.

On April 15, St. Clair County's health department **unanimously voted** (<https://www.thetimesherald.com/story/news/local/2026/04/17/st-clair-county-michigan-board-approves-vaccine-consent-updates/89652539007/>) to start providing parents with the MCIR opt-out form, as the law requires.

Around that time, KFF Health News reporter **Kate Wells** (<https://radio.wpsu.org/2026-06-02/michigan-found-a-way-to-reduce-school-vaccine-waivers-until-it-backfired>), who was investigating **Michigan vaccine uptake** (<https://www.npr.org/2026/06/05/nx-s1-5798710/michigan-drops-requirement-for-parents-seeking-to-opt-out-of-school-mandated-vaccines>), interviewed Nevin about the county's move away from using the state's modified VIS handout and toward the opt-out form. He said:

"Her questioning was implying that we were out of line, that we were ignoring state guidance, that the state was not recommending this and therefore we were wrong.

"I suspect that on her discussing this with the state and preparing to report on this, the state probably realized, 'Wait a second, this is going to get national attention. We probably want to get our practices in line with what the law actually requires.'"

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'My own family has experienced that discrimination'

Failing to give parents an opt-out form for the MCIR isn't the only way the state health department has skirted Michigan law on vaccines and informed consent, Hammond said.

For years, both MDHHS and public school officials have lied to Michigan parents about what they must do to get their child an exemption from a school-based **vaccine mandate** (<https://childrenshealthdefense.org/defender/category/censorship-surveillance/mandates-censorship-surveillance/>), according to Hammond.

"Parents are told that the law requires them to go to the local health department to attend what they perversely call a vaccine education session and obtain a certified 'waiver' form," he said.

However, under both the **Revised School Code** (<https://www.legislature.mi.gov/Laws/MCL?objectName=MCL-380-1177>) Act 451 of 1976 (Michigan Compiled Law 380.1177) and the Michigan Public Health Code (**MCL 333.9208** (<https://www.legislature.mi.gov/Laws/MCL?objectName=MCL-333-9208>), **MCL 333.9215**

(<https://www.legislature.mi.gov/Laws/MCL?objectName=MCL-333-9215>), the exemption requirement is met "if a parent ... of the child presents a written statement to the administrator of the child's school ... to the effect that the requirements of this part cannot be met because of religious convictions or other objection to immunization," Hammond said.

In other words, Michigan law requires only that parents who seek a vaccine exemption for their child submit a written request to the school administrator, stating that they have a religious or other objection to vaccination.

Hammond criticized MDHHS for adding extra requirements. He said:

"By imposing extrastatutory requirements on parents, this executive agency is claiming legislative authority, which is completely unconstitutional. And many schools are complicit in this scheme by denying admission to children whose parents have fully met the requirements of the law by submitting a written exemption statement. My own family has experienced that discrimination.

"So, the end of modified VISs and proper use of MCIR opt-out forms is just one important step on an ongoing battle here in Michigan to end the systematic discrimination and violations of privacy and the right to informed consent."

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Suzanne Burdick, Ph.D. (<https://childrenshealthdefense.org/authors/suzanne-burdick-ph-d/>)

Suzanne Burdick, Ph.D., is a senior reporter for The Defender based in Austin, Texas.

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ST. CLAIR COUNTY HEALTH DEPARTMENT

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July 23, 2025

Congresswoman Lisa McClain
Washington DC Office
562 Cannon House Office Building
Washington, DC 20515

Dear Congresswoman McClain,

As Medical Director of the St. Clair County Health Department, I have responsibility to ensure that vaccines are administered within our county safely and in accordance with all pertinent laws and regulations.

In my role as Medical Director, and as your constituent, I am requesting the assistance of your office in clarifying with the Secretary of the U.S. Department of Health and Human Services (HHS) the validity of conflicting guidance from the Michigan Department of Health and Human Services (MDHHS) regarding the use of mandated Vaccine Information Statements (VIS).

The National Childhood Vaccine Injury Act (NCVIA, 42 U.S.C. § 300aa-26) requires that all vaccine providers give the appropriate federal VIS to the patient (or their parent or legal representative) prior to every dose of specific vaccines covered under the NCVIA. VIS are developed and distributed by the U.S. Centers for Disease Control and Prevention (CDC). Per current CDC website guidance, "Providers may add the name, address, and contact information of their practice to an existing VIS, **but may not make any substantive changes** [emphasis added]." (<https://www.cdc.gov/vaccines/hcp/vis/about/facts-vis.html>).

However, according to conflicting MDHHS guidance (<https://www.michigan.gov/mdhhs/adult-child-serv/childrenfamilies/immunizations/michiganvis>):

"In Michigan, vaccine recipients, their parents, or their legal representatives must be given the Michigan versions of VIS because they include information about the Michigan Care Improvement Registry (MCIR). By state law in Michigan, parents must be informed about MCIR. Vaccine Information Statements that are obtained from other sources (e.g., from the CDC or IAC [Immunization Action Coalition] websites) do not contain information about MCIR [emphasis in the original]."

I have several concerns with this MDHHS guidance. MDHHS makes what appear to be substantive and unauthorized modifications to the federal VIS, adding information related to the MCIR unrelated to vaccine safety. MDHHS directs the use of this modified Michigan VIS in place of the original federal VIS, potentially delaying dissemination of federal VIS changes. MDHHS also directs use of this modified federal document in place of other designated forms for state-specific MCIR-related purposes. These practices may conflict with federal and state law.



Elizabeth King, RN, BSN
Director/Health Officer

Greg Brown, BS
Administrator

Remington Nevin, MD, MPH, DrPH
Medical Director

1. MDHHS guidance risks delays in the public's receipt of new safety information in updated versions of federal VIS.

As noted by the CDC in their Frequently Asked Questions on VIS (<https://www.cdc.gov/vaccines/hcp/about-vis/faq.html>):

"The date for a new VIS's required use is announced when the final draft is published in the Federal Register. **Ideally, providers will begin using a new VIS immediately....** As a general rule, **when changes to a VIS concern the safety of the vaccine (e.g., contraindications or precautions, or adverse events), it is essential that the new edition be used immediately upon publication** [emphasis added]."

However, as currently noted on the Vaccine Information Statements for Michigan webpage (<https://www.michigan.gov/mdhhs/adult-child-serv/childrenfamilies/immunizations/michiganvis>):

"CDC recently posted revisions of 17 VISs, dated January 31, 2025, on its Current VISs web page. The revisions comply with the January 20, 2025, Presidential Executive Order. Federal law allows up to 6 months for a new VIS to be used. MDHHS is in the process of printing these new versions, **however they will be unavailable for approximately 4-6 weeks.**"

The delays introduced by MDHHS in directing providers to use Michigan VIS in place of current federal VIS run contrary to federal guidance to immediately use updated VIS. Such delays may result in Michigan residents receiving outdated VIS that differ substantively from updated versions, potentially undermining current and future HHS efforts to improve safety guidance in federal VIS.

2. No current formal coordination or authorization exists between MDHHS and HHS for use of Michigan VIS.

In response to a Michigan Freedom of Information Act (FOIA) request (H028900-062625), MDHHS confirmed that it had no records of federal approval from HHS or CDC for use of a Michigan VIS. Although MDHHS responded that "Michigan worked with CDC several years ago to obtain permission to add a MCIR statement on the VIS," MDHHS was unable to provide any records of formal coordination or authorization and merely stated in response to the FOIA request that "The approval took place in 1995, and the Department [MDHHS] no longer has those records."

The absence of any apparent current formal coordination or authorization suggests the possibility that whatever temporary approvals, if any, may have been granted MDHHS for this modification three decades earlier may no longer be valid, nor reflect current HHS or CDC policy regarding use of federal VIS.

3. No Michigan state law or regulation specifically mandates that adult patients be provided a document regarding the MCIR.

Although Michigan Compiled Laws (MCL) 333.9207(3) provides that adult patients be permitted to opt-out of the MCIR, the law does not require that adults be informed of this through distribution of a Michigan VIS. Specifically, the law reads:

"Upon receipt of a written request from an individual who is 20 years of age or older, the department shall make any immunization information in the registry pertaining to that individual inaccessible. **The written request shall be in a form prescribed or otherwise authorized by the department** [emphasis added]."

To the extent that MDHHS may properly wish to inform adult patients of their statutory right, under MCL 333.9207(3), to opt-out of MCIR, this may be accomplished more directly through distribution of the designated MCIR opt-out form developed by MDHHS for this purpose (<https://mcir.org/wp-content/uploads/2014/09/OptOutForm.pdf>), than through the unnecessary modification of a federal VIS. Accordingly, the substitution of federally approved VIS for a Michigan VIS is wholly without justification for adult patients.

4. No Michigan state law or regulation specifically authorizes a Michigan version of the VIS for childhood immunization.

The cited rationale for mandating use of a Michigan VIS for childhood immunization, namely that parents "must be informed about MCIR," appears to be a reference to MCL 333.9206(2) and (3), which read:

"(2) Before administering an immunizing agent to a child, a health care provider shall notify the parent, guardian, or person in loco parentis of the child, **on a form provided by the department**, of the right to object to the reporting requirement described in subsection (3) [emphasis added].

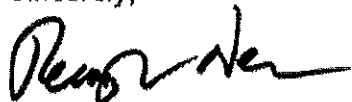
(3) Unless the parent, guardian, or person in loco parentis of the child who received the immunizing agent objects **by written notice** received by the health care provider prior to reporting, a health care provider shall report to the department each immunization administered by the health care provider, pursuant to rules promulgated under section 9227. If the parent, guardian, or person in loco parentis of the child who was immunized objects to the reporting requirement of this subsection **by written notice** received by the health care provider prior to notification, the health care provider shall not report the immunization [emphasis added]."

As noted above, MDHHS already produces a designated MCIR opt-out form (<https://mcir.org/wp-content/uploads/2014/09/OptOutForm.pdf>) which satisfies both the requirements of MCL 333.9206(2) and (3) and which meets the requirements of the MDHHS guidance above that parents "must be informed about MCIR." However, contrary to the requirements of MCL 333.9206(2) for distribution of such a form, this specific MCIR opt-out form is not routinely distributed prior to childhood vaccination, with the Michigan VIS instead seemingly serving the role of the required "form" per MDHHS guidance.

As the Michigan VIS is a document, and does not contain any form elements, such as fields or prompts for specific information (e.g., name, date, checkboxes) to be filled out by the parent, the Michigan VIS cannot meet the legal requirements of "form" as required by MCL 333.9206(2). Likewise, unlike use of the designated MCIR opt-out form, distribution of the non-form Michigan VIS cannot facilitate the parent providing the appropriate written notice at the time of immunization to opt-out of MCIR reporting as required by MCL 333.9206(3).

I respectfully request that your office contact the HHS Secretary to obtain written clarification on whether the MDHHS guidance discussed above complies with federal law under the NCVIA, including confirmation of any current authorization for MDHHS modifications to federal VIS. Please provide this clarification to my office at your earliest convenience to ensure safe and lawful vaccine administration in St. Clair County.

Sincerely,



Remington Nevin, MD, MPH, DrPH
Medical Director
St. Clair County Health Department



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The content in this blog is for informational purposes only and is not legal advice. We are not attorneys, and no attorney-client relationship is established by its use. Any decision to pursue a vaccine exemption under Michigan Compiled Laws (MCL) 333.9215 or other laws is made at your own risk.

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Jun 4 • 3 min read

Major Victory for Michigan Families: MDHHS Ends Use of Non-Compliant Michigan-Specific VIS

Michigan for Vaccine Choice • June 2026 After years of advocacy and persistent public records requests, Michigan families have scored a significant win for informed consent and parental rights.

VICTORY FOR MICHIGAN PARENTS!



Champion: Dr. Remington Nevin, MD, MPH, DrPH

Medical Director, St. Clair County Health Department

Thanks to Dr. Nevin's persistent FOIA fight, MDHHS has ended the non-compliant Michigan-specific VIS! Parents now receive the official MCIR opt-out form BEFORE every vaccine — at doctor's offices, pharmacies, health departments, and EVERY vaccination site.

A MAJOR WIN FOR INFORMED CONSENT & PARENTAL RIGHTS

Michigan for Vaccine Choice
www.michiganforvaccinechoice.org
#ParentalRights #InformedConsent

Dr. Remington Nevin, Medical Director, St. Clair
County Health Department

Today, the Michigan Department of Health and Human Services (MDHHS) formally announced it is **discontinuing production and distribution of its Michigan-specific Vaccine Information Statements (VIS)**. For the first time in decades, the state is acknowledging what the law has always required: **every parent must receive the official state MCIR opt-out form prior to their child receiving any vaccine — at every location where vaccines are given.**

What Changed — and Why It Matters

For years, Michigan health officials relied on a customized VIS that included language about the Michigan Care Improvement Registry (MCIR). MDHHS claimed this version had received federal approval from the CDC “several years ago” — specifically citing 1995. When pressed through a Freedom of Information Act (FOIA) request (H028900-062625), however, the department admitted it could not produce **a single document** showing that approval ever existed.

St. Clair County Health Department Medical
Director **Dr. Remington Nevin** filed the original

FOIA request in June 2025 seeking emails, correspondence, reports, memoranda, and agreements related to federal approval of the Michigan-specific VIS. MDHHS denied the request, claiming the records were from 1995 and no longer retained. Dr. Nevin appealed, pointing out:

- **The department's own admission that the approval occurred in 1995 proved *some* record or institutional knowledge must exist. -**
- **Ongoing use of the Michigan VIS required current supporting documentation. -**
- **Michigan's records retention policies likely required preservation of such significant policy records.**

MDHHS upheld the denial but could not produce any records — not the original 1995 approval, not subsequent references, and not even internal emails confirming the approval's validity.

The New Reality for Parents

Effective immediately, this change applies everywhere vaccines are administered in Michigan, including: -

- **Doctor's offices and pediatric clinics -**
- **Local health departments -**
- **Pharmacies (CVS, Meijer, Walgreens, etc.) -**
- **Hospitals, urgent care centers, and any other vaccination site**

Under Michigan law (MCL 333.9206(3)), any health care provider giving a vaccine must, before administering the shot:

- **Provide the parent/guardian with the official MCIR Participation in MCIR Reporting / Opt-Out Form -**
- **Explain the right to opt out of the state registry If a parent completes the initial opt-out form, they will *still be required to fill out a separate formal opt-out form* — an extra step that adds some friction, but one that finally brings the state into compliance with the law.**

This is a clear improvement over the previous Michigan-specific VIS, which many families and advocates argued blurred or downplayed parents' rights to decline vaccines and opt out of the registry.

This Victory Belongs to You

This outcome did not happen by accident. It happened because parents and advocates like Dr. Nevin refused to accept vague claims of "federal approval" without evidence. It happened because FOIA requests forced MDHHS to confront the lack of documentation supporting decades of non-compliant practice.

What you can do now: -

- Share this update with your pediatrician, school nurse, pharmacist, and local health department.
- Ask providers (at **any** vaccination site) to confirm they are now using the official MCIR opt-out form **before** every vaccine.
- If you encounter resistance, politely reference MCL 333.9206 and request the form.

At Michigan for Vaccine Choice, our mission remains unchanged: **every parent deserves full, honest information and the right to make medical decisions for their children without coercion.** This is a step in the right direction. Let's build on it by monitoring implementation and pushing to remove the redundant second form. Stay informed. Stay involved.

Michigan for Vaccine Choice

[www.michiganforvaccinechoice.org]

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