MEDICAL BOARD OF CALIFORNIA

Executive Office

LICENSING COMMITTEE

MEMBERS OF THE COMMITTEE

Janet Salomonson, M.D., Chair
Jorge Carreon, M.D.
Hedy Chang
Gary Gitnick, M.D.
Sharon Levine, M.D.
Reginald Low, M.D.
Gerrie Schipske, R.N.P., J.D.

July 29, 2010

Medical Board of California
Hearing Room
2005 Evergreen Avenue
Sacramento, CA 95815
(916) 263-2389

Action may be taken on any item listed on the agenda.

AGENDA

3:45 p.m. – 5:00 p.m.
(or until conclusion of business)

This meeting will be webcast

ALL TIMES ARE APPROXIMATE AND SUBJECT TO CHANGE

Open Session:

1. Call to Order/Roll Call

2. Public Comment on Items Not on the Agenda
   Note: The Board may not discuss or take action on any matter raised during this public comment section, except to decide whether to place the matter on the agenda of a future meeting. [Government Code Sections 11125, 11125.7(a)]

3. Approval of the Minutes from the April 29, 2010 Meeting

4. Regulatory Proposal to Division 13 of Title 16, California Code of Regulations, Business and Professions Code 2088, Limited License – Ms. Boyd

5. Regulatory Proposal adding Chapter 7.8 to Division 2 of the Business and Professions Code for Polysomnographic Technologists – Ms. Simoes & Ms. Baldo

6. Update on Application Processing Times for Physician and Surgeon Applications – Ms. Whitney
   A. Status of Application Timeframes from Detailed Steps of the Process;
   B. Priorities

7. Business Process Reengineering Primary Recommendations – Ms.Whitney

    A. Revision of Physician and Surgeon Application and Streamlining Process – Ms. Boyd
    B. Update of Medical Board of California Web Site Related to Applications – Ms. Boyd
    C. Implementation of New Management Reports – Ms. Humphreys
    D. Revision and Updates of Policy and Procedure Manual – Ms. Taylor
    E. Study of Postgraduate Training Authorization Letter Process – Ms. Boyd

8. Discussion of Photo on I.D. or Web for License Verification – Ms. Humphreys

9. Discussion of Feasibility of Licensing Program Audit – Ms. Whitney

10. Update on Training Program for New Licensing Staff – Ms. Taylor

11. Agenda Items for November 5, 2010 Meeting in Long Beach, CA

12. Adjournment

The mission of the Medical Board of California is to protect healthcare consumers through the proper licensing and regulation of physicians and surgeons and certain allied healthcare professions and through the vigorous, objective enforcement of the Medical Practice Act, and to promote access to quality medical care through the Board's licensing and regulatory functions.
Meetings of the Medical Board of California are open to the public except when specifically noticed otherwise in accordance with the Public Meetings Act. The audience will be given appropriate opportunities to comment on any issue before the Board, but the Chair may apportion available time among those who wish to speak. For additional information call (916) 263-2389.
NOTICE: The meeting is accessible to the physically disabled. A person who needs disability-related accommodations or modifications in order to participate in the meeting shall make a request to the Board no later than five working days before the meeting by contacting Cheryl Thompson at (916) 263-2389 or sending a written request to Ms. Thompson at the Medical Board of California, 2005 Evergreen Street, Suite 1200, Sacramento, CA 95815. Requests for further information should be directed to the same address and telephone number.

MEDICAL BOARD OF CALIFORNIA
Licensing Program

Licensing Committee
Los Angeles, CA
April 29, 2010
MINUTES

The Licensing Committee convened in Open Session. Dr. Salomonson called the meeting to order on April 29, 2010, at 2:35p.m. Roll was taken and a quorum was present. Due notice was mailed to all interested parties.

Members Present:

Janet Salomonson, M.D., Chair
Jorge Carreon, M.D.
Hedy Chang
Gary Gitnick, M.D.
Sharon Levine, M.D.
Reginald Low, M.D.
Gerrie Schipske, R.N.P., J.D.

Members Absent:

None

Board Members, Staff and Guests Present:

Hilda Balaian, GME Coordinator, Kaiser Los Angeles
Fayne Boyd, Licensing Manager
Candis Cohen, Public Information Officer
Janie Cordray, Research Specialist
Julie D'Angelo Fellmeth, CPIL
Kurt Heppler, Department of Consumer Affairs, Staff Counsel
Breanne Humphreys, Licensing Manager
Teri Hunley, Business Services Manager
Ross Locke, Business Services Office
Armando Melendez, Business Services Office
Margaret Montgomery, Kaiser Permanente
Deborah Pellegrini, Chief of Licensing
Regina Rao, Business Services Office
Gregory Santiago, Department of Consumer Affairs
Kevin Schunke, Outreach Manager
Anita Scuri, Department of Consumer Affairs Supervising Legal Counsel
Jennifer Simoes, Chief of Legislation
Kathryn Taylor, Licensing Manager
Cheryl Thompson, Executive Assistant
Renee Threadgill, Chief of Enforcement
Linda Whitney, Interim Executive Director
Barbara Yaroslavsky, Board President

Agenda Item 1 Call to Order/Roll Call

Ms. Taylor called the roll. A quorum was present.

Dr. Salmonson stated Deborah Pellegrini, Chief of Licensing has an announcement. Ms. Pellegrini introduced the Licensing managers: Fayne Boyd, Kathryn Taylor and a new manager, Breanne Humphreys. Ms. Pellegrini announced that after 32 years of state service she will be retiring on June 24, 2010.

Dr. Salmonson thanked Ms. Pellegrini for her announcement and service.

Agenda Item 2 Public Comment for Items Not on the Agenda

In the interest of full disclosure, Dr. Salmonson stated she received a letter from Ms. Roberta De La Rosa, Director, Medical Staff Services of Centinela Hospital Medical Center. Ms. De La Rosa thanked the Committee for allowing her to address this issue and clarified she is here loosely representing the California Association of Medical Staff Services. She has been doing medical staff services and credentialing for over 25 years. One of the issues brought up at their meetings is why physician photos are not on the pocket licenses. The joint commission standards and some other standards require the credentialers to identify physicians before privileging them ensuring the appropriate individual is being awarded those privileges. The federal government set up the ability to apply for advanced registration and receive an identification card, but she doesn't believe that many physicians in California have taken advantage of that process. It would be much easier if they were able to easily identify the person as the physician who is licensed. It's understandable that this procedure would incur some expense. An alternative would be to add their photo on the licensing verification screen (LVS) which can be downloaded. As the biggest user of that service it would greatly benefit the users to be able to readily identify that physician.

Dr. Salmonson thanked Ms. De La Rosa for those comments and reminded the audience that with public comment no action can be taken except to place it on the agenda for a future meeting. Dr. Salmonson recommended this be placed on the agenda for the next meeting.

There was no additional public comment.

Agenda Item 3 Approval of Minutes from the January 28, 2010 Meeting

Ms. Chang moved to approve the minutes. It was seconded and the motion passed.

Agenda Item 4 Overview Presentation of Licensing Processes and Associated Timeframes

Ms. Pellegrini presented an overview of the five step Licensing process and timeframes associated with those processes.

Dr. Levine asked what occurs when someone wants to reactivate a license. Ms. Pellegrini stated there are two ways: 1) If the license has been inactive for less than 5 years, one may reactivate the license by paying all back renewal fees and penalties; or, 2) If the license has been inactive for more than 5 years and has been cancelled, the physician would be required to apply pursuant to Section 2428 of the Business and Professions Code, which requires submission of a new application and fees. Staff would pull any documentation submitted previously in support of the application for licensure. Anita Scuri, Legal Counsel added that if the applicant wishes to reactivate the license and it's been five years or less, at least one cycle of Continuing Medical Education (CME) would be required.

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Ms. Chang asked two questions: 1) How many stations does at an application go through to get to the reviewers desk? Ms. Pellegrini stated it goes through seven stations; 2) Is there a way for a manager to go on the computer and get the status of an applicant? Ms. Pellegrini stated, yes a manager can access the Applicant Tracking System (ATS) for this information.

Dr. Salomonson asked why PTAL is a shorter review time than the IMG license. Is the PTAL an easier process? Ms. Pellegrini stated that in the PTAL's process, applicants do not take Step 3 of USMLE until they have completed at least some postgraduate training.

Julie D'Angelo Fellmeth asked if the Board still processes applications in the order in which they are received. Is there some type of prioritization? Ms. Pellegrini stated staff process applications in date order, with the exception of those applications identified by a California Postgraduate Training program as needing licensure to continue training in California. She explained that this year staff are doing a balancing act, rotating to process both types of applications. We are also working pending mail coming in for the 2065/66. That mail is pulled to the front.

Dr. Gitnick commented that he was confused by this process. He asked if Ms. Pellegrini could offer assurances that those people going into their training programs are a priority.

Dr. Salmonson took the prerogative of the chair by referring to Agenda item #8 and suggested to hold further discussion until then.

Ms. Chang asked if once a PTAL is issued, does the file stay with the reviewer. Ms. Pellegrini stated, yes.

Hilda Balaian, GME Coordinator, Kaiser Los Angeles, asked for clarification on the issue of probationary licenses: What are the percent of people getting a full license after the probationary period ends? Ms. Pellegrini stated she does not have those statistics. Anita Scuri stated that upon conclusion of the probationary license, unless the Board takes additional action, a full license is issued. She can only remember one time when a full license wasn't issued. Ms. Balaian requested clarification as to why IMG's applications are re-reviewed even though they have their ECFMG certification. Ms. Pellegrini states the Board reviews both U.S. and IMG applications to ensure they meet the Board requirements. For IMG's that includes review of examinations taken and both medical school training and clinical training received from their medical schools. Ms. Balaian asked when to check ATS. Ms. Pellegrini states the system updates every evening documenting what has been received and what has been reviewed. As for telephone calls and e-mails, it is the expectation that both are responded to within 24 hours.

Karen Erlich, Midwifery Advisory Council, inquired whether midwives and the other allied health professionals go through the same system. Ms. Pellegrini stated they are processed differently and by different staff.

Agenda Item 5 Regulatory Changes to Title 16, California Code of Regulations, Section 1306, Abandonment of Applications

Ms. Taylor provided an overview of the staff report on Section 1306, Abandonment of Applications. Ms. Scuri explained the existing regulation reads, "your application can be closed for failure to exercise due diligence" and that means completing the application within one year. Staff took that to mean that someone who called up could keep their file open and active. The proposal specifies what criteria will trigger closure /abandonment of that application. Ms. Taylor stated we need to balance the needs of the applicants against the need to keep the file open for undetermined lengths of time. Ms. Scuri concluded by suggesting that the committee recommend to the Board that the proposal be set for regulatory hearing.

Agenda Item 6 **Update on Implementation of Business and Professions Code, Section 2088 – Limited Licenses**

Ms. Boyd provided an update on the implementation of Limited Licenses.

Dr. Salmonson asked if there are other states that have limited licenses and have you looked at those as possible models? Ms. Scuri stated we have looked at other states and we have come up with the framework we believe can be used to merge the existing disabled license with this other new version of limited practice.

Agenda Item 7 **Update on the Implementation of SB 132, Polysomnographic Technologists**

Ms. Pellegrini provided an update on the implementation of the Polysom Program and announced that we hired an analyst to implement this program, Ms. Rhonda Baldo.

Dr. Salmonson asked if we have any limitations on what the fee may be and are they set in the legislation. Ms. Pellegrini stated the maximum fees are set in legislation.

Agenda Item 8 **Update on Priorities for Processing Physician and Surgeon Applications**

Ms. Whitney referred members back to the weekly production report. One of the slides indicated that 13% of the US/Can and 1% of the IMGs are complete upon initial review at 68 days. Ms. Whitney stated that when the Board had a backlog of 165 days or 5.5 months, there was a reasonably high number of applicants whose files were complete and they were ready for licensure. As the days were reduced for initial review, the number of applications complete at the time of review were decreased. The logic is when an application is sent to the Board it takes a certain number of days before all of the supporting documents arrive. An application reviewed on the day it arrives or even 30 days from receipt will require staff to issue a deficiency letter. In most cases if the initial review takes place between 45 and 60 days and we are at 5 days or less for the review of pending mail, priorities will not need to be set, as the normal processing time will basically meet the needs of everyone. There will be some exceptions and they could be treated as such. Some expedited processing will be required for the fellowship and postgraduates, but that can be the exception rather than the rule. A matrix is sent out to the Board members every week. These files are flagged and are currently being worked in equally with the new applications, in date order. She suggested that the Board allow staff to report it weekly, so members can ensure licensure occurs. We will bring information in July on this issue. Dr. Gitnick stated we should be willing to work with Ms. Whitney as staff is trying to solve the problem in a way which Ms. Whitney is suggesting. But, it is our job as a Board is to protect the public. GME offices need to get these people licensed.

Ms. Whitney stated the critical element here is that once we have told the applicant what is missing, subsequent documents from applicants need to be processed timely.

Agenda Item 9 **Business Process Reengineering Primary Recommendations and Related Implementation Timeframes**

Ms. Pellegrini presented recommendations made by the Licensing Program:

1- Revise application/instructions; last revised in 2003- Fayne Boyd assigned; June start date
2- Complete policy/procedure manual – Kathryn Taylor assigned; continuous
3- Website revision – Fayne Boyd assigned; August start date
4- Management reports – Breanne Humphreys assigned; on-going
5- Study of Postgraduate Training Authorization Letter process - TBA

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Agenda Item 6: Agenda Items for the Next Meeting

Agenda for next meeting:

1- Revisit priorities of application review
2- Examine ways to streamline application process
3- Picture I.D. on license or ability to have the photo on the license verification screen
4- Limited License regulatory proposal
5- Polysom Program regulatory proposal

In addition to the items referenced above, the Committee members requested the following items to be discussed at the next meeting:

1. An update presentation of the detailed steps in the application review process and associated timeframes and any improvements
2. A discussion of the feasibility of conducting an audit of the Licensing Program similar to the one that the State Auditor conducts of the State Bar every two years.

Agenda Item 7: Adjournment

The meeting adjourned at 3:00 p.m.

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MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: June 29, 2010
ATTENTION: Licensing Committee
SUBJECT: Limited Practice License
STAFF CONTACT: Fayne Boyd, Licensing Manager

RECOMMENDED ACTION:

Staff recommends that the Licensing Committee approved the draft regulartory proposal provided on the attached copy of Sections 1315.5, 1315.53, and 1315.55, along with any edits or additional provisions that the Committee may suggest for inclusion in the regulations.

Upon approval, staff recommends the Licensing Committee recommend to the Board that it direct staff to schedule a public hearing at the November 5, 2010 Board meeting to adopt regulatory language to add Article 4.5 in Chapter 1 of Division 13 of Title 16, California Code of Regulations.

BACKGROUND AND ANALYSIS:

Legislation, AB 501, effective January 1, 2010, authorizes the Licensing Program to issue a limited practice license to an applicant who is otherwise eligible for a medical license in California, but is unable to practice all aspects of medicine safely due to a disability. Staff prepared a draft regulatory proposal to add language to Division 13 of Title 16, California Code of Regulations, to set forth the requirements and criteria for a limited practice license. In preparing the regulatory language, staff also considered current licensees who wish to go into this status due to a disability affecting their ability to practice some aspects of medicine safely. Therefore, parallel language was also prepared to ensure the limited practice license is consistent with the criteria for the current disability license and limited practice license. On May 26, 2010, the Board held an Interested Parties Meeting to review and discuss the proposed regulatory language. Based on feedback received at the meeting and in writing, suggestions were incorporated into the revised limited practice license proposed regulations.

PROJECT STATUS:

The implementation plan is on schedule. Staff will continue to complete tasks as follows:

Tasks to be completed August – September:

- Consider statutory language to amend Section 2441 to ensure criteria for a disability license and limited practice license are consistent.
- Identify Application Tracking System (ATS) changes to track applicants

- Identify license status for limited practice licenses on Consumer Affairs System
- Develop process for Senior Review Level 2 applicant that is identified by senior staff as a limited license candidate

Tasks to be completed for October – December:

- Hold public hearing at November Board Meeting to adopt the proposed regulations
- Develop limited practice license policies and procedures
- Develop process to request change from limited practice license/disabled status to full and unrestricted license status
- Develop new application forms, instructions, and FAQs
- Develop wall certificate and pocket license for limited practice license

Tasks to be completed after regulation package is adopted by the Board

- Develop language for License Look-up on Web site
- Train Licensing and CIU staff
- Update Web site with limited practice license application, information, and FAQ's
- Prepare article for Board's Newsletter
- Implement tasks upon approval by Secretary of State

Limited Practice Licenses
Draft Regulatory Proposal—5/26/2010

(1) Add Article 4.5 in Chapter 1 of Division 13 of Title 16, Cal.Code Regs, to read as follows:

1315.50. Requirement for Independent Clinical Evaluation

(a) This section applies both to applicants for an initial license and licensees who seek a limited practice license pursuant to Section 2441 of the code.

(b) An applicant for a limited practice license shall obtain and submit to the board with his or her application the report of an independent clinical evaluation that meets the requirements of this Article regarding the applicant's ability to practice medicine safely.

NOTE: Authority cited: Section 2018, Business and Professions Code. Reference: Sections 2088 and 2441, Business and Professions Code.

1315.53. Criteria for Reviewing Physician

The independent clinical evaluation shall be performed by a physician who specializes in the diagnosis and/or treatment of disabilities of the same nature as that of the applicant, who is familiar with the applicant's areas of medical practice, and who has no personal, professional, business, or social relationship with the applicant. The term "professional relationship" includes, but is not limited, to a current or previous physician-patient relationship with the applicant. The reviewing physician shall possess a current valid California license with no history of discipline.

NOTE: Authority cited: Section 2018, Business and Professions Code. Reference: Sections 2088 and 2441, Business and Professions Code.

1315.55. Required Contents of Report.

(a) A report submitted pursuant to this Article shall:

(1) Be on the reviewing physician's letterhead, dated, and signed under penalty of perjury, and shall contain the original signature of the reviewing physician.

(2) Describe how the reviewer meets the criteria set forth in section 1315.53.

(3) Include the applicant's name and the diagnosis or description of the applicant's disability.

(4) Describe all recommended practice limitations and how those limitations permit the applicant to practice medicine safely.

(5) Provide suggested intervals between evaluations, if the disability is caused by a disease that will progress or fluctuate in severity.

(6) Indicate whether the evaluation included a review of the applicant's medical records related to the disability.

(7) Describe the current treatment protocol and the applicant's compliance with that treatment protocol, if appropriate for the type of disability.

(b) The evaluation shall have occurred not more than sixty (60) days from the date on which the application was filed with the board.

NOTE: Authority cited: Sections 2018, Business and Professions Code.
Reference: Sections 2088 and 2441, Business and Professions Code.

MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: June 29, 2010
ATTENTION: Licensing Committee
SUBJECT: Polysomnography Program
STAFF CONTACT: Jennifer Simoes, Chief of Legislation

RECOMMENDED ACTION:

Staff recommends that the Committee approve the draft regulatory proposal provided on the attached copy of Section 1378.1, 1378.3, 1378.5, 1378.7, 1378.9, 1378.11, 1378.13, 1378.15, 1378.17, 1378.19, 1378.251378.271378.29, and 1378.35 along with any edits or additional provisions that the Committee may suggest for inclusion in the regulation. Staff may also suggest additional Regulations at a later date. An example of a possible addition to the Regulations could be adding continuing education requirements.

Upon approval, staff recommends the Licensing Committee recommend the Board direct staff to schedule a public hearing at the November 4, 2010, Board meeting to review proposed regulatory language to add Articles 1 through 6 in Chapter 3.5 of Division 13 of Title 16, California Code of Regulations.

BACKGROUND AND ANALYSIS:

Legislation, SB 132, effective October 23, 2009, requires the Medical Board of California to adopt regulations within one year after the effective date of this act relative to the qualifications for certified polysomnographic technologists, technicians and trainees. SB132 prohibits a person from using the title "certified polysomnographic technologist" or engaging in the practice of polysomnography unless he or she is registered as a certified polysomnographic technologist in California.

Staff prepared a draft regulatory proposal to add language to Division 13 of Title 16, California Code of Regulations, to set forth the requirements and criteria for polysomnography registration. On June 16, 2010, the Board held an Interested Parties Meeting to review and discuss the proposed regulatory language. Based on feedback received at the meeting and in writing, suggestions were incorporated into the polysomnography program proposed regulations.

PROJECT STATUS:

The implementation plan is on schedule. Staff will continue to complete tasks as follows:

Tasks to be completed August – September

- Create and test the Applicant Tracking System for new registration categories
- Identify license status for Polysomnography Registration on Consumer Affairs System
- Create wall certificate for each registrant category
- Draft new forms, applications and instructions

Tasks to be completed for October – December:

- Hold public hearing at November Board Meeting to adopt the proposed regulations
- Begin to develop Polysomnography Program policies and procedures manual
- Work with the Department of Justice regarding contracted data
- Develop and execute appropriate contracts for fingerprint services, printing services, etc

Tasks to be completed after regulation package is approved

- Develop language for License Look-up on Web site
- Train Licensing and CIU staff
- Update Web site with polysomnography registration application, information, and FAQ's
- Begin to prepare outreach pamphlets and prepare article for Board's Newsletter
- Implement tasks/program upon approval by the Secretary of State

Polysomnography Program
Draft Regulations—6-30-2010

Add Chapter 3.5 to Division 13 of Title 16, California Code of Regulations, to read as follows:

Chapter 3.5. Polysomnography

Article 1. General Provisions

1378.1. Definitions.

For the purposes of the regulations contained in this chapter and for purposes of Chapter 7.8 of Division 2 (commencing with section 3575) of the code:

(a)"Approved polysomnographic education program" means (1) a polysomnographic education program accredited either by the Commission on Accreditation of Allied Health Education Programs ("CAAHEP") or by the Commission on Accreditation for Respiratory Care; or (2) a sleep technologist program accredited by the American Academy of Sleep Medicine.

(b) "Board" means the Medical Board of California.

(c) "Code" means the Business and Professions Code.

(d) "National certifying examination" means the examination given by the Board of Registered Polysomnographic Technologists.

(e) "Polysomnography registrant" includes any person registered as a trainee, technician or technologist under this chapter.

(f) "Supervising physician and surgeon" means physician and surgeon who holds a valid license in California and who (1) possesses a current certification or subspecialty certification or is eligible for such a certification in sleep medicine by a member board of

the American Board of Medical Specialties ("ABMS"); or (2) holds active staff membership at a sleep center or laboratory accredited by the American Academy of Sleep Medicine or by the Joint Commission.

(g) "Valid, current credentials as a polysomnographic technologist issued by a national accrediting agency approved by the board" means current valid registration as a polysomnographic technologist issued by the Board of Registered Polysomnographic Technologists.

NOTE: Authority cited: Sections 2018 and 3575, Business and Professions Code. Reference: Section 3575, Business and Professions Code.

1378.3. Delegation of Functions.

Except for those powers reserved exclusively to the "agency itself" or for the adoption of stipulated settlements under the Administrative Procedure Act (Section 11500 et seq. of the Government Code), the board delegates and confers upon the executive director of the board, or his/her designee, all functions necessary to the dispatch of business of the board in connection with investigative and administrative proceedings under the jurisdiction of the board.

NOTE: Authority cited: Sections 2018 and 3575, Business and Professions Code. Reference: Section 3575-3577, Business and Professions Code.

Article 2. Applications

1378.5. Application for Registration as a Polysomnographic Technologist, Technician or Trainee.

An application for registration as a polysomnographic technologist, technician, or trainee shall be filed with the board at its principal office on the prescribed application form (Polysomnography Registration Application—**insert form no. and revision date,** which is incorporated by reference. The application shall be accompanied by such evidence, statements or documents as therein required and filed with the fee required by section 1378.23.

NOTE: Authority cited: Sections 2018 and 3577, Business and Professions Code. Reference: Section 3575-3577, Business and Professions Code.

1378.7. Abandonment of Applications.

An applicant shall be deemed to have abandoned an application if he or she does not complete the requirements for registration within one year from the date on which the application was filed. An application submitted subsequent to an abandoned application shall be treated as a new application.

NOTE: Authority cited: Sections 2018 and 3575, Business and Professions Code. Reference: Section 3575-3577, Business and Professions Code.

Article 3. Qualifications for Registration

1378.9. Examination

(a) The certification examination offered by the Board of Registered Polysomnographic Technologists is approved by the board for purposes of qualifying for registration pursuant to Chapter 7.8 of Division 2 of the code:

(b) An applicant who applies for registration as a polysomnographic technologist on or before October 22, 2012, may, in lieu of successful completion of the examination

approved by the board, submit any of the following as proof that the applicant has been practicing polysomnography safely for at least five years:

(1) One or more declarations under penalty of perjury by a supervising physician attesting to the period of time the physician supervised the applicant, the tasks performed by the applicant, and the applicant's ability to practice polysomnography safely.

(2) A letter of good standing from each state in which the applicant is registered or licensed.

NOTE: Authority cited: Sections 2018 and 3575, Business and Professions Code. Reference: Section 3575-3577, Business and Professions Code.

1378.11. Registration Requirements.

(a). Polysomnographic Trainee. In addition to the requirements set forth in Section 3575(c) of the code, an applicant for registration as a polysomnographic trainee shall meet the following requirements:

(1) Not be subject to denial under Section 3576 of the code; and

(2) Have either (A) a high school diploma or GED and six months of supervised direct polysomnographic patient care experience; or (B) be currently enrolled in an approved polysomnographic education program; and

(3) Possess at the time of application a current certificate in Basic Life Support issued by the American Heart Association.

(b) Polysomnographic Technician. In addition to the requirements set forth in Section 3575(c) of the code, an applicant for registration as a polysomnographic technician shall meet the following requirements:

(1) Not be subject to denial under Section 3576 of the code; and

(2) Have successfully completed an approved polysomnographic education program; and

(3) Possess a minimum of six months experience as a registered polysomnographic trainee; and

(4) Possess at the time of application a current certificate in Basic Life Support issued by the American Heart Association.

(c) Polysomnographic Technologist. An applicant for registration as a polysomnographic technologist shall meet the requirements set forth in Sections 3575 and 3576 of the code and shall possess at the time of application a current certificate in Basic Life Support issued by the American Heart Association.

NOTE: Authority cited: Sections 2018 and 3575, Business and Professions Code. Reference: Section 3575-3577, Business and Professions Code.

Article 4. Polysomnography Practice

1378.13. Employment and Supervision of Registrants.

(a) A physician and surgeon who does not meet one of the requirements set forth in section 1378.1(e) shall not supervise polysomnography registrants . No physician and surgeon shall supervise more than eight polysomnographic technologists at any one time. A physician and surgeon shall comply with the supervision requirement of Section 3575(a) of the code.

(b) A supervising physician and surgeon, supervising polysomnographic technologist or other licensed health care professional shall not supervise more than a total of eight polysomnographic technicians and/or trainees at any one time. If a supervising

physician and surgeon is not physically present on the premises, a supervising polysomnographic technologist or other licensed health care professional shall be physically present on the premises and available to the polysomnographic technicians and/or trainees under his/her supervision. For purposes of this section, "other licensed health care professional" means registered nurse, physician assistant and respiratory care practitioner who possesses a current California license.

(c) A supervising polysomnographic technologist and his or her supervising physician and surgeon shall establish written guidelines for the adequate supervision by the technologist of polysomnographic technicians and trainees. This requirement may be satisfied by the supervising physician and surgeon adopting protocols for some or all of the tasks performed by the technicians and trainees. Protocols shall be signed and dated by the supervising physician and surgeon and the polysomnographic technologist.

(d) The delegation of procedures to a registrant or other licensed health care professional shall not relieve the supervising physician of primary continued responsibility for the welfare of the patient.

NOTE: Authority cited: Sections 2018 and 3575, Business and Professions Code.
Reference: Section 3575-3577, Business and Professions Code.

1378.15. Scope of Services—Polysomnographic Trainee.

Under the direct supervision of a supervising physician and surgeon, polysomnographic technologist or other licensed health care professional, a polysomnographic trainee may provide basic supportive services as part of the trainee's educational program, including but not limited to gathering and verifying patient information, testing preparation and

monitoring, documenting routine observations, data acquisition and scoring, and assisting with appropriate interventions for patient safety.

NOTE: Authority cited: Sections 2018 and 3575, Business and Professions Code. Reference: Section 3575-3577, Business and Professions Code.

1378.17. Scope of Services—Polysomnographic Technician.

A polysomnographic technician may perform the services described in section 1378.15 under general supervision and may implement appropriate interventions necessary for patient safety.

NOTE: Authority cited: Sections 2018 and 3575, Business and Professions Code. Reference: Section 3575-3577, Business and Professions Code.

1378.19 . Notice to Consumers.

(a) A polysomnography registrant shall provide notice to each patient of the fact that the person is registered and regulated by the board. The notice shall include the following statement and information:

NOTICE TO CONSUMERS
Medical doctors and polysomnographic technologists,
technicians, and trainees are licensed and regulated
by the Medical Board of California
(800) 633-2322
www.mbc.ca.gov

(b) The notice required by this section shall be provided by one of the following methods:
(1) Prominently posting the notice in an area visible to patients on the premises where the registrant provides the services for which registration is required, in which case the notice shall be in at least 48-point type in Arial font.
(2) Including the notice in a written statement, signed and dated by the patient or the patient's representative and retained in that patient's medical records, stating the patient understands the polysomnographic registrant is registered and regulated by the board.
(3) Including the notice in a statement on letterhead, discharge instructions, or other document given to a patient or the patient's representative, where the notice is placed immediately above the signature line for the patient in at least 14-point type.

NOTE: Authority cited: Section 2018, Business and Professions Code; Reference: Sections 138 and 680, Business and Professions Code.

Article 5. Enforcement

1378.25. Substantial Relationship Criteria.

For the purpose of denial, suspension, or revocation of the registration of a polysomnography registrant pursuant to Division 1.5 (commencing with Section 475) of the code, a crime or act shall be considered substantially related to the qualifications, functions, and duties of a polysomnographic registrant if to a substantial degree it evidences present or potential unfitness of a polysomnographic registrant to perform the functions authorized by his or her registration in a manner consistent with the public health, safety, or welfare. Such crimes or acts shall include, but not be limited to, those involving the following:
(a) Violating or attempting to violate, directly or indirectly, or assisting or abetting the violation of or conspiring to violate any provision or term of Chapter 7.8 of Division 2 of the code.

(b) Conviction of a crime involving fiscal dishonesty, or theft.

(c) Battery or assault

(d) Sexual misconduct or abuse.

(e) Conviction of a crime involving lewd conduct, prostitution or solicitation thereof, or pandering and/or indecent exposure, as defined by the Penal Code.
Note: Authority cited: Sections 481 and 2558, Business and Professions Code.
Reference: Sections 481, 2555.1 and 2556, Business and Professions Code.

1378.27. Criteria for Rehabilitation—Denial and Reinstatement

When considering the denial of a registration under Section 480 of the code, or a petition for reinstatement under Section 11522 of the code, the board in evaluating the rehabilitation of the applicant and his or her present eligibility for registration, shall consider the following criteria:
(a) The nature and severity of the act(s) or crime(s) under consideration.

(b) Evidence of any act(s) committed subsequent to the act(s) or crime(s) under consideration which also could be considered as grounds for denial under Section 480 of the Business and Professions Code.

(c) The time that has elapsed since commission of the act(s) or crime(s) referred to in subdivision (a) or (b).

(d) The extent to which the applicant or petitioner has complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against him or her.

(e) Evidence, if any, of rehabilitation submitted by the applicant or petitioner.

Note: Authority cited: Sections 482, 2018, and 3576, Business and Professions Code. Reference: Sections 482, 3576, Business and Professions Code.

1378.29. Rehabilitation Criteria for Suspensions and Revocations.

When considering the suspension or revocation of a registration on the grounds that the registrant has been convicted of a crime, the board, in evaluating the rehabilitation of such person and his or her present eligibility for a registration, shall consider the following criteria:
(a) Nature and severity of the act(s) or offense(s).

(b) Total criminal record.

(c) Extent of time that has elapsed since commission of the act(s) or offense(s).

(d) Whether the registrant has complied with any or all terms of parole, probation, restitution or any other sanctions lawfully imposed against the registrant.

(e) If applicable, evidence of expungement proceedings pursuant to Section 1203.4 of the Penal Code.

(f) Evidence, if any, of rehabilitation submitted by the registrant.

Note: Authority cited: Sections 482 and 3576, Business and Professions Code. Reference: Sections 482, 3576, Business and Professions Code.

Article 6. Fees.

1378.35. Fees.

The polysomnography registrant fees are fixed as follows:

(a) The application fee shall be $100.00.

(b) The registration fee shall be $100.00.

(c) The biennial renewal fee shall be $150.00.

(d) The delinquency fee shall be $75.00.

NOTE: Authority cited: Sections 163.5, 2018 and 3577, Business and Professions Code. Reference: Section 163.5 and 3577, Business and Professions Code.

AGENDA ITEM 7

MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED:	July 6, 2010
ATTENTION:	Licensing Committee
SUBJECT:	Business Process Reengineering Primary Recommendations
STAFF CONTACT:	Various Managers

SUMMARY

Revision of Physician and Surgeon Application and Streamlining Process, Priority 1:
The Physician and Surgeon application forms and instructions were last revised in 2005. Over these last five years both licensing staff and applicants have shared their frustration with the application instructions and the completing of the application forms. Licensing staff have provided their ideas for both clarifying and improving the application forms and instructions. Staff has also received feedback from applicants regarding ambiguously worded and confusing questions, lengthy instructions, and yes/no questions to avoid incomplete or incorrect answers.

The team is comprised of both U.S. and International Medical School license reviewers, associate analysts, and management. This project has been set to begin August 2010, with an estimated completion date of May 2011. *Responsible Manager: Fayne Boyd*

Update of Medical of California Web Site Related to Applications, Priority 2:
The MBC Web site "Applicants" tab has not had a full review since 2000 and as you know we have had many changes and new additions. The MBC Web site should be updated as changes to the application forms occur as this provides applicants more information regarding eligibility for a California physician and surgeon license and clarifying information for completing the application process. In addition, staff will be assigned to periodically update the "Applicants" tab to align it with changes in statutes, regulations, policies and procedures.

The team has been formed and is comprised of the same staff as those revising the application. The project has been set to begin August 2010, with an estimated completion date of March 2011 (the same time as revised application). *Responsible Manager: Fayne Boyd*

Implementation of New Management Reports, Priority 3:
We have completed the automation of nine reports to assist us in managing our workload: Applications Received, Applications Reviewed, Applications With Out Review

(>90 days; 61-90 days; 31-60 days; 0-30 days), Licenses Issued, PTAL's Issued, Applications Complete for Licensure at Time of Review, Applications with Deficiencies at Time of Review, PTAL's Complete at Time of Review, Exception Report.

We have three reports under construction: Initial File Reviewer, Number of PTALs issued per Applicant, License Date for 2065/2066 Applicants. These reports are anticipated to be completed by October 2010. *Responsible Manager: Breanne Humphreys*

Revision and Updates of Policy and Procedure Manual, Priority 4:
A project plan has been developed that identifies the status of each chapter of the manual and the staff member who is responsible for writing or updating each chapter. The project plan establishes the start date for writing or updating each chapter, the time frame for quality assurance review of each chapter, and the date the chapter is to be finalized. As of July 1, 2010, there are 28 identified chapters of which 13 need to be written, and the remaining chapters are in either draft form or have been previously approved and may required updating to reflect the current policies and procedures. Additional chapters may be identified and added during this process.

The target completion date of the procedure manual is December 31, 2010. *Responsible Manager: Kathryn Taylor*

Study of Postgraduate Training Authorization Letter Process, Priority 5:
The PTAL authorizes international medical school graduates to begin training in California in an Accredited Council for Graduate Medical Education (ACGME) postgraduate training program. A team will be formed to study current statutes, regulations, policies and procedures to determine a more efficient and effective way to process these applications. The recommended process improvements may include: new statutory and regulatory requirements which include renewal limits and fees; create new policy and procedures; update the application and instructions; and MBC Web site and resolve ATS constraints.

The team will be comprised of an associate analyst, a international medical graduate license reviewer and management. This project is set to begin January 2011 with an estimated completion date of December 2011. *Responsible Manager: Fayne Boyd*

MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED:	July 9, 2010
ATTENTION:	License Committee
DEPARTMENT:	Licensing Program
SUBJECT:	Physician and Surgeons Photo Identification
STAFF CONTACT:	Breanne Humphreys, Manager

UPDATE:

The Committee has been asked to consider including a photograph on the pocket license and/or License Verification System (LVS) to assist those responsible for credentials of physicians.

SUMMARY:

This is a follow up from the April 2010 Board Meeting where the Director of Medical Staff Services of Centinela Hospital made a request that photos be included on the license, thus providing those responsible for physician credentialing an extra security measure for ensuring patient safety. Avenues by which this could be accomplished include, adding a photograph to the pocket license or to our LVS .

Further research will need to be conducted on associated costs relative to placing a photograph on the pocket license and/or downloading it in to LVS for the Board's 127,000 licensed physicians.

THINGS TO CONSIDER:

- Identify vendor capability and costs.
- Develop implementation timeline/processes for 127,000 licensed physicians.
- Identify criteria for authenticating photographs.
- Identify staffing and equipment needs.
- FSMB replied they are unaware of any boards including photos and that is probably due to associated costs.

Staff will continue to research this issue after completion of the top five Business Processing Reengineering recommendations that the Licensing Program is currently undertaking. As time permits, staff will precede with the research approximately mid 2011 and bring results back to the committee for consideration.

AGENDA ITEM 10

MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: July 1, 2010
ATTENTION: Licensing Committee
SUBJECT: Staff Training and Related Training Plan
STAFF CONTACT: Kathryn Taylor, Manager

SUMMARY:
The Licensing Section developed a training plan for new Licensing Program managers, Staff Services Analysts who review international medical school graduate (IMG) applications, and Management Services Technicians who review United States and Canada (US/CAN) applications.

The training plan is utilized to ensure the trainees have the necessary tools to provide thorough review and analysis of a physician and surgeon application. The training plan is broken down in approximately 23 categories. Each category contains training dates, trainee goals, required tools and resources, and an area for a trainee evaluation, which is provided to the staff member's manager at the end of training. The training plan is also utilized to provide remedial training for existing staff that require additional training or clarification for specific categories outlined on the training plan.

The Licensing Section concluded training this week for a new IMG staff member and is in the process of training one US/CAN staff member. Additional training is being provided to the two new Licensing Program managers.

POLICY:

Training New Review Staff
The following topics are covered during the training of Staff Services Analysts (SSAs), Management Services Technicians (MSTs) and Managers who work in the Licensing Section's File Review Section. All of the following topics are covered during the training of Staff Services Analyst (SSAs) and Managers; topics pertaining to the licensing or issuance of a Postgraduate Training Authorization Letter for international medical school graduates are excluded from the MST training. An estimated training time is provided for each section. This time may vary depending on the trainee's prior experience working for the Board, experience in the Licensing Section, experience with the Applicant Tracking System (ATS), and experience with the Consumer Affairs Systems (CAS).

PROCEDURES:

Training Topics
The Management Services Technicians (MST) review license applications from graduates of United States and Canadian medical schools. Most of the following topics are covered during this training. The topics relative to the licensing and issuance of a Postgraduate Training Authorization Letter to international medical school graduates are excluded from the Management Services Technician's (MST) training. All of the following topics are covered during the training of Staff Services Analysts (SSA) and new Staff Services Managers (SSM1) who work in the licensing section.

Training Tools and Resources
Trainers shall ensure that their trainee has the tools referenced in the following sections and is provided the necessary links to access online resources and G (group) drive resources, i.e., school code list, Decision Log, and the Non-Senior Staff Review Level 1 and 2 Log (SR1 and SR2) containing a list of the less serious issues of concern that do not require Level 1 or Level 2 review. The trainee shall compile and maintain the provided reference materials (both paper and electronic) in a folder – either electronic or hard copy. Samples of licensed files are useful training tools as they provide the trainee with a picture of a completed application and the mandatory order of files. As such, licensed files shall be provided during training and returned to their original location at the end of each day.

Trainee Evaluation
Trainers shall provide weekly e-mail updates to the trainee's manager advising of his/her progress highlighting any concerns and/or noting the trainee's strengths. The update shall include the subjects covered to date and the trainee's progress. Once training is completed, the trainer shall provide the manager with a copy of this training plan including the notes for each section completed. The trainer shall advise the manager of the trainee's next step – proceed to handling work load and work with the Quality Assurance Staff, or obtain additional training. The trainee's manager shall be advised of the trainees mentoring schedule once the trainee is approved to move on to handling his/her own caseload.

Overview of the Medical Board Departments and Staff: *Estimated Training Time: 1 Hour* Licensing, Enforcement, Business Services, Information Services Branch, Executive Office Staff and Board Members, Publications, and Web Site	
Trainee Goals	Develop a general understanding of the functions performed by the different sections of the Board, and how staff members from the various offices support/interact with Licensing Section Staff.
Tools/Resources	Organizational Charts, Medical Board of California (MBC) Web site information, Phone Roster, Tour of Offices.
Trainer/Date	
Notes	

Breakdown of the Licensing Section: *Estimated Training Time: 1 Hour* • Cashiering Office – Functions related to licensing • Physician and Consumer Information Unit • Licensing Operations • Licensing Section (Review Staff)	
Trainee Goals	Understanding of how the various sections of the Licensing section work together, how the work flows through the various offices, support provided.
Tools/Resources	Organizational charts, notes from tour of office and lecture regarding work flow and support provided between different sections.
Trainer/Date	
Notes	

Types of Applicants: *Estimated Training Time: 30 Minutes* • United States/Canadian graduates seeking licensure • International graduates seeking licensure • Postgraduate Training Authorization Letters (PTALs) • Limited License (United States/Canadian and international medical school graduates)	
Trainee Goals	Ability to identify the type of applicant, i.e., United States/Canadian seeking licensure, or International applicant seeking licensee or Postgraduate Training Authorization Letters (PTAL)
Tools/Resources	Business and Professions Code, California Code of Regulations, practice review to determine type of applicant, training notes
Trainer/Date	
Notes	

Governing Laws and Regulations: *Estimated Training Time: 30 Minutes* • California Business and Professions Code (Medical Practice Act) • California Code of Regulations	
Trainee Goals	Understanding of the difference between the laws and regulations, ability to locate the laws and regulations applicable to the licensing process (application requirements and licensure requirements) on the Internet, Board's Web site, and the code books.
Tools/Resources	Business and Professions Code book, copy of the California Code of Regulations, Internet links and the laws/regulations on the Board's Web site.
Trainer/Date	
Notes	

Application Forms and Supporting Documentation:
Estimated Training Time: 1 Hour

- Business and Professions Code Sections 2081 and 2082 (Application and Supporting Documents)
- Form L1A Questions/Supporting Documents
- Form L1B Questions/Supporting Documents
- Form L1C Questions/Supporting Documents
- Form L1D Questions/Supporting Documents
- Form L1E Questions/ Photograph and Notary Requirements

Trainee Goals	Understanding of the application requirements, fingerprint and fee requirements, and questions posed to the applicant and supporting materials required in response to answers (standard response information and those relative to criminal history, disciplinary action, etc...), know how to review the supporting documents and determine acceptability, and where to locate the law/regulation/policy requiring materials.
Tools/Resources	B &P Code, California Code of Regulations, sample application with training notes, Policy and Procedure Manual, Decision Log, Non-Senior Staff Review Level 1 and 2 Log (SR1 and SR2) , and "Issues of Concern" handout from Cindi Oseto relative to criminal history, disciplinary action, etc...).
Trainer/Date	
Notes	

Errors or Questions Left Blank on the Application Forms:
Estimated Training Time: 15 Minutes

- Addendum Required –versus – Letter of Explanation
- Errors in the Notary Block
- Unacceptable Photographs

Trainee Goals	Know when an addendum is required and when a letter of explanation is required. Understanding of the photo requirements, and how to review and determine acceptability. Understanding of notary requirements and how to determine acceptability of both domestic and international "notary" official stamps/seals.
Tools/Resources	Sample application with training notes, Policy and Procedure Manual, Decision Log
Trainer/Date	
Notes	

Medical School Documents:
Estimated Training Time: 1 Hour 45 Minutes

- Form L2 – Resource Information from WHO Book/IMED (International Medical School Graduates)
- Transcripts and Diplomas – Acceptable Format
- Form L5 – Business and Professions Code Section 2089.5 (International Medical School Graduates)
- Form L6 – Approval of Training Locations, ACGME Directory, Binders for Approved Schools (International Medical School Graduates)

Trainee Goals	Know how to review and determine the acceptability of supporting documents, available resources used in verification of documentation, calculating undergraduate clinical clerkships (International Medical School Graduates), and determine when an L6 form is required (International Medical School Graduates), and determine the acceptability of "away rotations" reported on an L6 form. Additional training regarding the Mexico and Philippine curricula and application of Standard Curriculum policies.
Tools/Resources	Sample application/training notes, Business and Professions Code, California Code of Regulations. ACGME directories, Affiliation Agreement binders for recognized schools, list of facilities approved for undergrad clinical training per California Code of Regulations Section 1327, School code list, Policy and Procedure Manual, Decision Log, and Non-Senior Staff Review Level 1 and 2 Log (SR1 and SR2). Process to request new school code for recognized schools.
Trainer/Date	
Notes	

Distribution of Case Loads and Processing Times:
Estimated Training Time: 30 Minutes

- Applications Reviewed in Date Order Received
- Processing Times per California Code of Regulations Section 1319.4
- Manager Reports

Trainee Goals	Understanding of how the International Medical School Graduate files are distributed to staff, the central filing system for new United States/Canadian files and the location for pending United States/Canadian files. Understanding of the legally mandated review time frames, statistical manager reports. Issuing Due Diligence letters to inactive applicants.
Tools/Resources	File Distribution Log, training notes and California Code of Regulations, Applicant Tracking System (ATS) Notice (Due Diligence Letter)
Trainer/Date	
Notes	

Policy and Procedures Manual: *Estimated Training Time: 30 Minutes (plus time referred to during training)* • Review Table of Contents and Information in Manual	
Trainee Goals	Develop familiarity with the manual contents; know where to look for answers. Understand how the Decision Log and Non-Senior Staff Review Level 1 and 2 Log (SR1 and SR2) work with the manual. How to submit suggestions for the manual.
Tools/Resources	Copy of the Policy and Procedure Manual, Decision Log, and Non-Senior Staff Review Level 1 and 2 Log (SR1 and SR2), training notes
Trainer/Date	
Notes	

Approved and Recognized Medical Schools: *Estimated Training Time: 30 Minutes* • Excel School Code List – Location on G drive • List of Approved Schools on Board's Web Site • "Recognized" –versus – "Approved "	
Trainee Goals	Know how to use the Excel School Code list, know how to locate school code list on Board's web site, and understand the difference between recognized and approved schools. Pat Park's role relative to the new school application and review/ approval process.
Tools/Resources	Copy of the school code list, information on the Board's Web site (school code list approved and disapproved schools), training notes, Business and Professions Code, California Code of Regulations, and Policy and Procedure Manual
Trainer/Date	
Notes	

Recognized Written Examinations – Laws/Regulations: *Estimated Training Time: 1 Hour* • California Code of Regulations Section 1328 – List of Recognized Exams • California Code of Regulations Section 1329.2 - Exam Validity not Tolled • Business and Professions Code Section 2184 – Validity of Passing Scores	
Trainee Goals	Know where to find information on recognized examinations, determine the validity of each passing score, steps to take if scores are no longer valid, how postgraduate training, "additional training", and "good cause" impact exam validity, senior staff's role in determining exam validity.
Tools/Resources	California Code of Regulations Sections 1328, 1329.2, Business and Professions Code Section 2184, training notes, Policy and Procedure Manual.
Trainer/Date	
Notes	

Accredited Postgraduate Training – Terms, Laws/Regulations: *Estimated Training Time: 1 Hour* • Commonly Used Terms – Resident, Intern, Fellowship, etc… • California Code of Regulations Section 1321 (a) – Approved Training • B &P 2096 – Minimum Required Training • Business and Professions Code Sections 2065/2066 – Exemption from licensure • California Code of Regulations Section 1320 (a) – Training Counted • California Code of Regulations Section 1321 (b) – Continuous Training	
Trainee Goals	Know the commonly used terms in describing postgraduate training and trainees, what is approved postgraduate training, licensure requirements.
Tools/Resources	Business and Professions Code, California Code of Regulations, Policy and Procedure Manual, sample L3A/B and L4 with training notes.
Trainer/Date	
Notes	

Postgraduate Training Authorization Letter (PTAL): *Estimated Training Time: 2 Hours* • Identifying Postgraduate Training Authorization Letters (PTAL) Applicants (International Medical School Graduate) • Eligibility for Postgraduate Training Authorization Letters (PTAL) • Authorized Postgraduate Training • Issuance of Postgraduate Training Authorization Letters (PTAL)	
Trainee Goals	Know how to identify Postgraduate Training Authorization Letters (PTAL) applicants, determine eligibility to train in CA, components of the Postgraduate Training Authorization Letters (PTAL).
Tools/Resources	Business and Professions Code, California Code of Regulations, sample Postgraduate Training Authorization Letters (PTAL) (create and copy Applicant Tracking System (ATS) and Word versions, update Applicant Tracking System (ATS) Notice record), training notes.
Trainer/Date	
Notes	

Verification of Postgraduate Training: *Estimated Training Time: 4 Hours 45 Minutes* • Form L3A/B • Form L4 and the Reduced Initial License Fee • ACGME and RCPSC Web Sites and Directories • AMA Physician Profile	
Trainee Goals	Know how to review and verify reported training, determine whether licensure requirements met, evaluate positive responses regarding unusual issues and know required supporting documents, how to use the AMA to verify postgraduate training.
Tools/Resources	Business and Professions Code, California Code of Regulations, sample of Form L3A/B and L4, training notes, training handouts, Decision and Non-Senior Staff Review Level 1 and 2 Log (SR1 and SR2), "Issues of Concern" handout from Cindi Oseto.
Trainer/Date	
Notes	

Verification of Out-of-State Licenses: *Estimated Training Time: 45 Minutes* • Format of Written Verifications • Online Resources (AIM Web Site)	
Trainee Goals	Identify official Letters of Good Standing, know when they are required, understand significance of out of state licensure and an applicant's qualification method, know the online resources for verifying licensure history, how to use the AMA profile in determining licensure history. How to request disciplinary information.
Tools/Resources	Samples of LGS', online resources (AIM, FSMB), AMA profile, training notes.
Trainer/Date	
Notes	

ABMS Certification: *Estimated Training Time: 30 Minutes* • When Verification Required • Written Verification and Online Resources	
Trainee Goals	Know when verification is required – which qualification methods require ABMS certification (B&P Codes 2135.5, and 2428). Know how to obtain verification.
Tools/Resources	Training notes, which staff are authorized to access ABMS online, and ABMS web site.
Trainer/Date	
Notes	

Licensure Pathways – Qualification Methods: *Estimated Training Time: 2 Hours 30 Minutes* • Determining Pathways – Business and Professions Codes Qualifying Applicant for License/Postgraduate Training Authorization Letter (PTAL) • Color Coding File Tabs • Applicant Tracking System (ATS) Qualification Method and Application Requirements	
Trainee Goals	Know the different licensure pathways, a.k.a. Qualification Methods, how to determine an applicant's QM, requirements for licensure, what information should be on Applicant Tracking System (ATS).
Tools/Resources	Business and Professions Code, Policy and Procedure Manual, Qualification Method matrix w/ color code tabs, Training Notes
Trainer/Date	
Notes	

Mandatory Order of Files (MOF): *Estimated Training Time: 4 Hours 30 Minutes* • Review of the MOF (United States/Canadian or International Medical School Graduate) • Review Examples of Licensed Files • Practice Putting Files in Mandatory Order	
Trainee Goals	Know how to put a file into mandatory order, which materials belong in the correspondence bundle.
Tools/Resources	Mandatory Order of Files, training notes.
Trainer/Date	
Number of Files Put into MOF Correctly	
Number of Files Put into MOF Correctly	
Notes	

File Review – Demonstration by Trainer, Practice Review with Trainer, and Practice Review and Findings *Estimated Training Time: 8 Hours, multiple days*	
Trainee Goals	Learn how to review an application file using above training notes, tools/resources, verifying the correct qualification method is on Applicant Tracking System (ATS) and pathway/status color coded stickers are on file, determining application status and next step in the process for the applicant. Quality Assurance Review staff – responsibility, common errors/reasons files returned from licensing. Manager reports
Tools/Resources	As noted in previous sections, common errors as provided from the Quality Assurance staff.
Trainer/Date	
Number of Files Reviewed Independently	
Files Returned for Corrections (what needed correcting)	
Number of Files Reviewed Correctly	
Notes	

Applicant Tracking System (ATS) and Consumer Affairs Systems (CAS) Training:
Estimated Training Time: 8 Hours

- Applicant Tracking System (ATS) Overview including the ATS Liaisons and ATS Cashiering, Consumer Affairs Systems (CAS) Overview including the CAS Enforcement and CAS Licensing Information

Applicant Tracking System (ATS):

- Logon/Main Menu and License Application Screen
- Person Details (Address, SSN, DOB, Names)
- Keying in Qualification Methods
- Updating Person Details
- Updating the License Application Screen, creating Applicant Tracking System (ATS) Notices
- Updating Applicant Tracking System (ATS) Notes with Review Findings, Correspondence, Phone Calls, E-mails
- Word Deficiency Letters and Copying Word Letters to Applicant Tracking System (ATS)

Trainee Goals	Once file reviewed, learn how to update Applicant Tracking System (ATS) and check Consumer Affairs Systems (CAS), create deficiency letters using Applicant Tracking System (ATS) and Word, how to copy Word letters into Applicant Tracking System (ATS).
Tools/Resources	Policy and Procedure Manual, How To instructions for Applicant Tracking System (ATS), training notes from hands-on training.
Trainer/Date	
Notes	

Support Staff Functions:
Estimated Training Time: 2 Hours

- Returning Original Documents, Requesting AMA Profiles, Fingerprint Requests/Processing

Trainee Goals	Understand Support Staff's role in the application review process, learn about returning original documents, how AMA profiles are requested, fingerprint process with Cindy Rogalski.
Tools/Resources	Training notes, sample Return Original form, Certified and Registered Mail samples, sample fingerprint cards and live scan forms.
Trainer/Date	
Notes	

Senior Staff Files – Review Samples and Required Supporting Documents:
Estimated Training Time: 8 Hours (Time is approximate based on availability of "senior staff" files to be reviewed)

- Decision Log
- Non-Senior Staff Review Level 1 and 2 Log (SR1 and SR2)
- Postgraduate Training Issues, L1B questions, Explanations, Supporting Documents
- Criminal Convictions, Explanations and Supporting Documents
- Malpractice Explanations and Supporting Documents
- Practice Impairment, Explanations, and Supporting Documents
- Disciplinary History, Explanations and Supporting Documents

Trainee Goals	Know what supporting materials are required and from where they are obtained, how to determine next step in review process Non-Senior Staff Review Level 1 and 2 Log (SR1 and SR2), required summary information in Applicant Tracking System (ATS) notes, how to use the "Issues of Concern" handout, interaction with applicant and/or legal representative or other authorized individuals, Form L1E – release of information.
Tools/Resources	Policy and Procedures Manual, Decision Log, Non-Senior Staff Review Level 1 and 2 Log (SR1 and SR2), Issues of Concern handout, training notes.
Trainer/Date	
Number of Files Reviewed Independently	
Files Returned for Corrections (what needed correcting)	
Number of Files Reviewed Correctly	
Notes	

Cubicle Set-Up
Estimated Training Time: 1 Hour

- New Files
- Pending Files
- Pending Mail Files
- In-Basket
- Labeling Location For Each File Type
- Work Flow – Schedule Development
- Phone Calls and E-Mails – Response Time

Trainee Goals	Know how to set up cubicle area to ensure that staff can locate files, know how the work flows through the cubicle and develop a schedule to ensure all tasks are covered weekly. Return all calls and e-mails within 24 hours.
Tools/Resources	Tour cubicles of other staff, training notes, policy/procedures, Decision Log.
Trainer/Date	
Notes	

Additional Training Notes:
Mentoring Schedule:
Recommended Additional Training: (training provided by Licensing staff or outside training such as computer skills, writing skills, etc....)