STEP-BY-STEP USER GUIDE FOR PHYSICIANS TO RENEW ONLINE – www.breeze.ca.gov

If you previously registered in the BreEZe system, enter your User ID and Password in the **Returning User** section located on the right column, click the **Sign In** button then skip to Page 9 for instructions on renewing your license.

If you have never registered in the BreEZe system, click the **BreEZe Registration** link on the right column under the **New Users** section and follow the **New Registration** instructions:

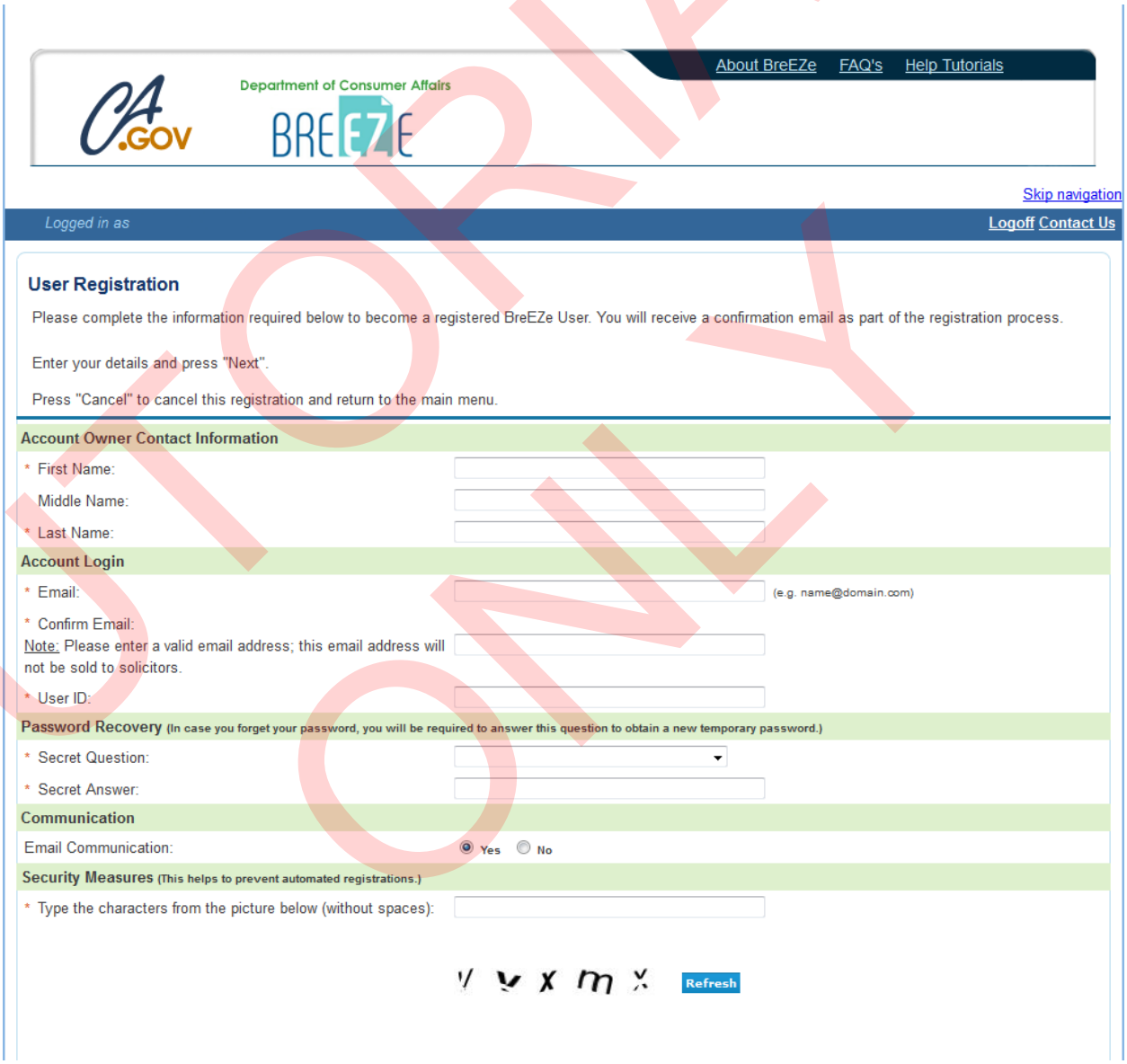
TUTORIAL ONLY

NEW REGISTRATION:

1. Create a new account - Complete the required fields marked with an asterisk (*), enter the security letters, and click the **Next** button. YOU CREATE YOUR OWN USER ID. The only criteria is that it be at least eight (8) characters.

   NOTE: In the Last Name field, enter only your last name. Do not include the suffix (i.e., Jr., Sr., I, II III).

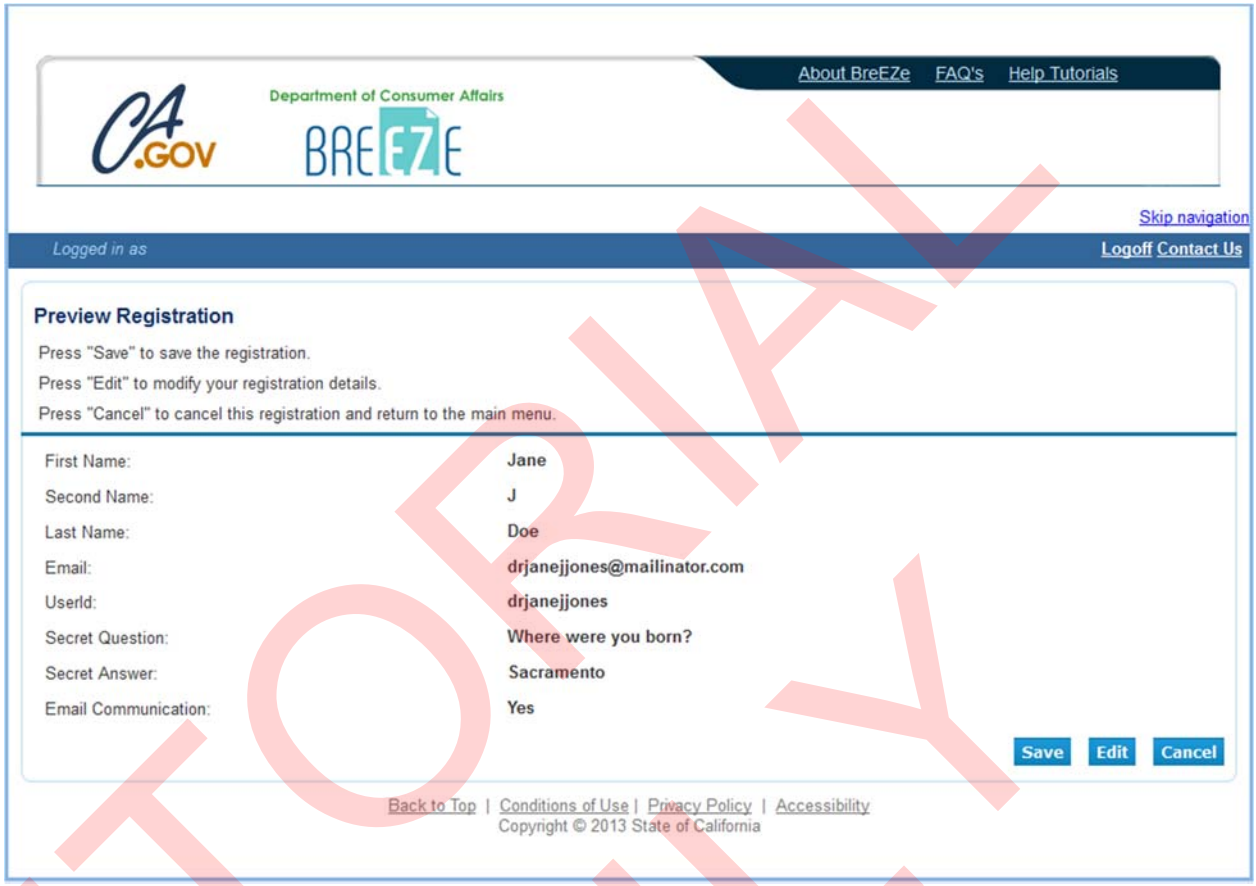
   The suffix is in a separate field in the BreEZe system and it will not recognize your license if you include it in the Last Name field.

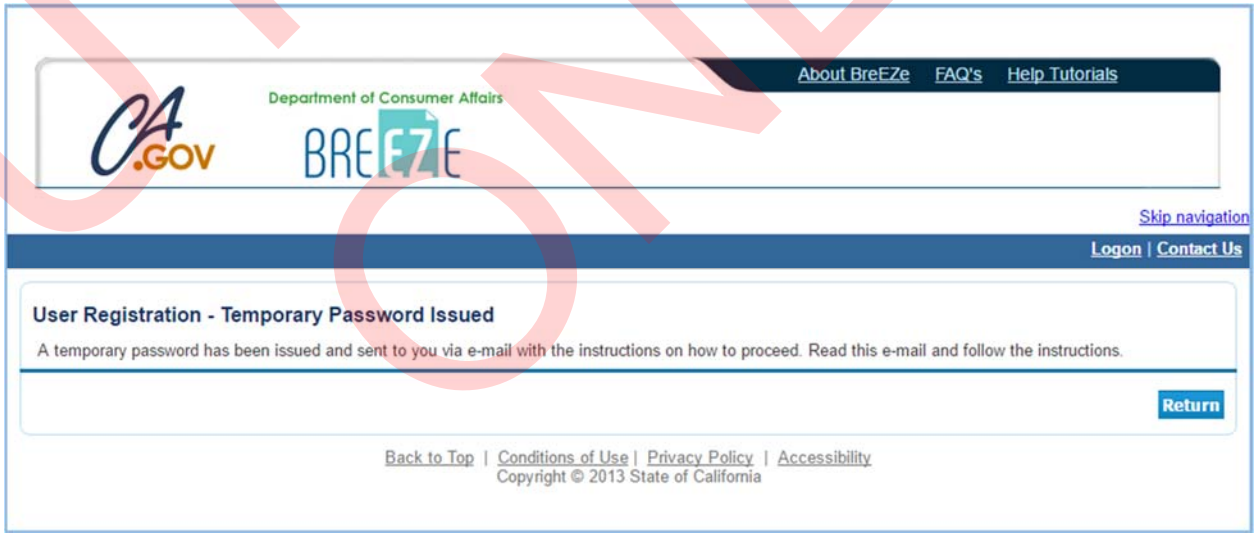


NOTE: If you have trouble reading the security characters, click the **Refresh** button until you can read them. These characters will be all lower case letters.

TUTORIAL ONLY

2 On the **Preview Registration** screen, verify the information entered is correct then click the **Save** button.





3 Next, **check your email account** for the temporary password (**please also check spam or junk mail folders**) for an email message from no-reply-breeze-online@dca.ca.gov.

TUTORIAL ONLY

no-reply-breeze-online@dca.ca.gov 9:00 AM

BreEZe Online Services - User Account

Retention Policy Enforced: Deleted Items 90 Days (90 days) Expires 11/2/2016

Hello Jane,

BreEZe Online Services has issued you a temporary password. Please reset your password by logging on to your account with the temporary password provided below. Please note that your online password is case sensitive.

Temporary Password: HCUyNzN5

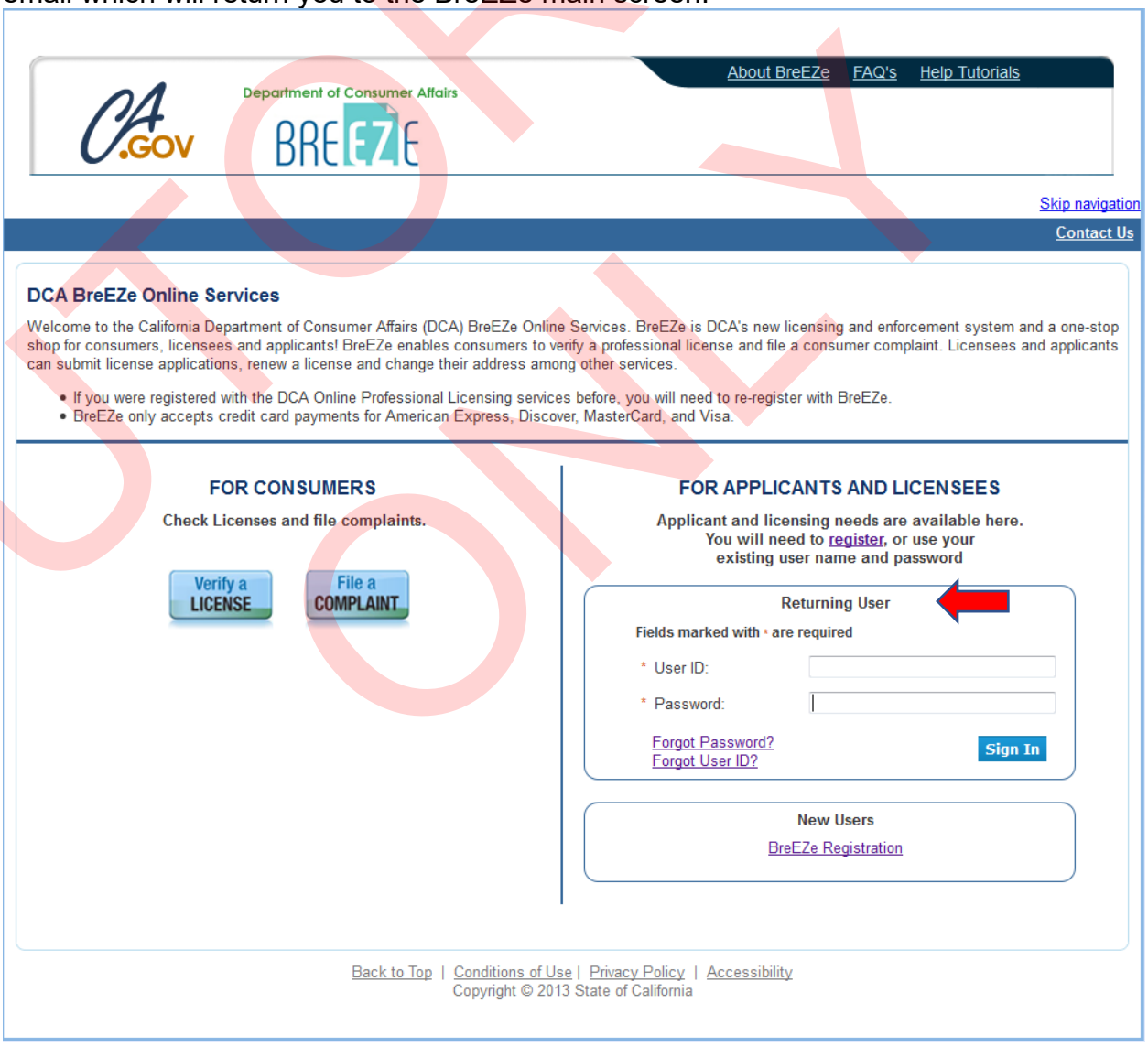
Complete your password reset at:

https://www.breeze.ca.gov/datamart/languageChoice.do

*** Note: This is an automated email. Do NOT reply to this message.

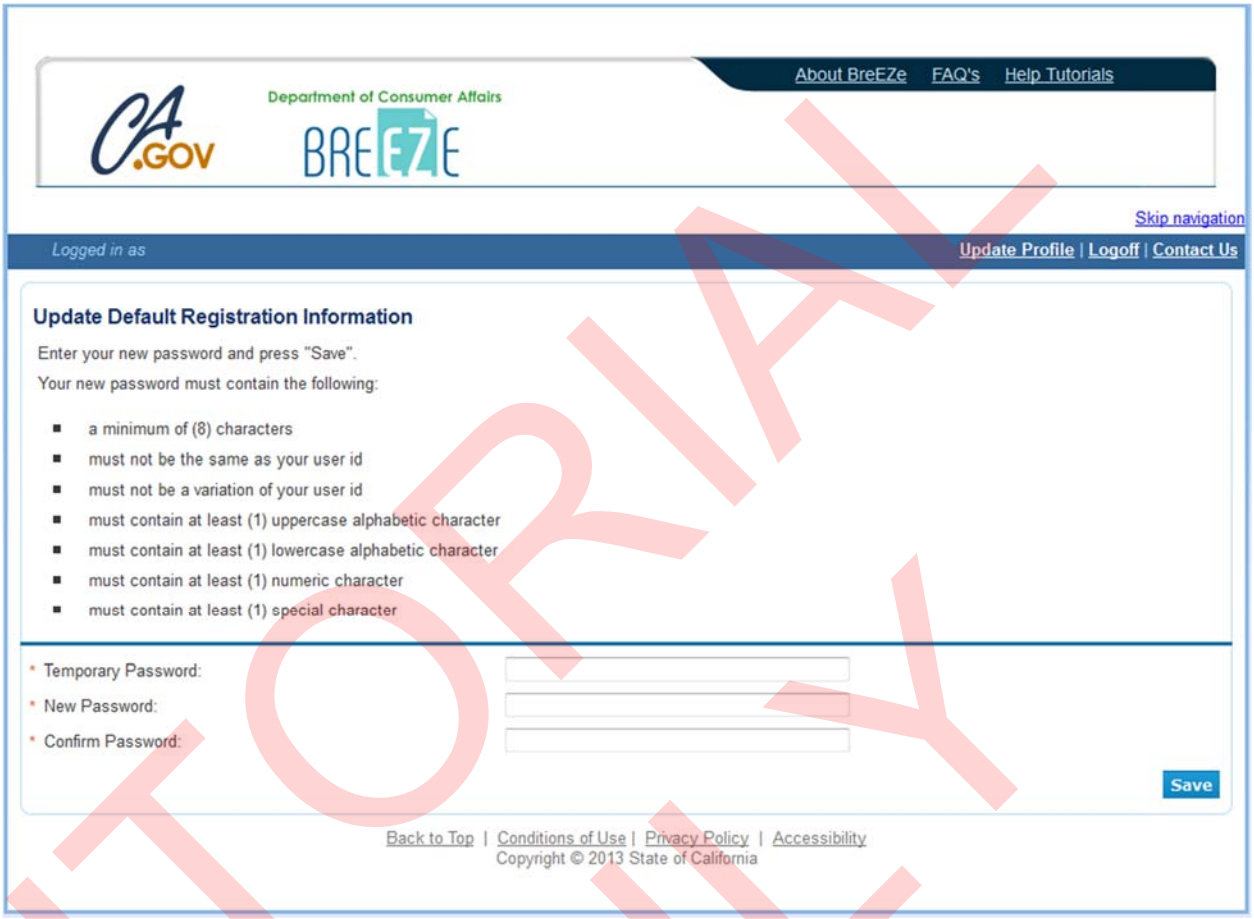
4 Once you receive the email, open it and write down the temporary password. **NOTE:** Password is case sensitive.

Click on the https://www.breeze.ca.gov/datamart/languagechoice.do link within the email which will return you to the BreEZe main screen.



TUTORIAL ONLY

5 In the **Returning User** field, enter the User ID you created, the temporary password, then click the **Sign In** button. The following screen will appear.



6 At the **Update Default Registration Information** screen, type the temporary password in the **Temporary Password** field.

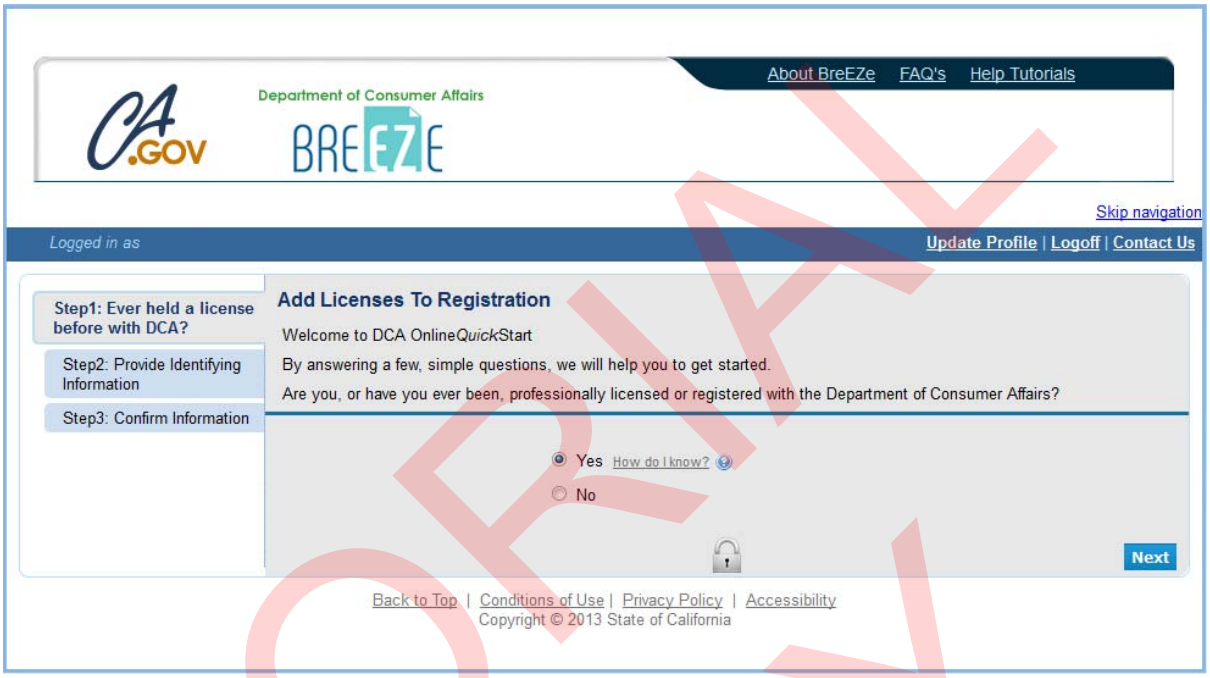
7 Tab to the **New Password** field and create a new password.

NOTE: Passwords must be a minimum of 8 characters and include one (1) uppercase alphabetic character, one (1) lowercase alphabetic character, one (1) numeric character, and one (1) special character from the upper numeric key row. For example: !@#$%^&*()_+

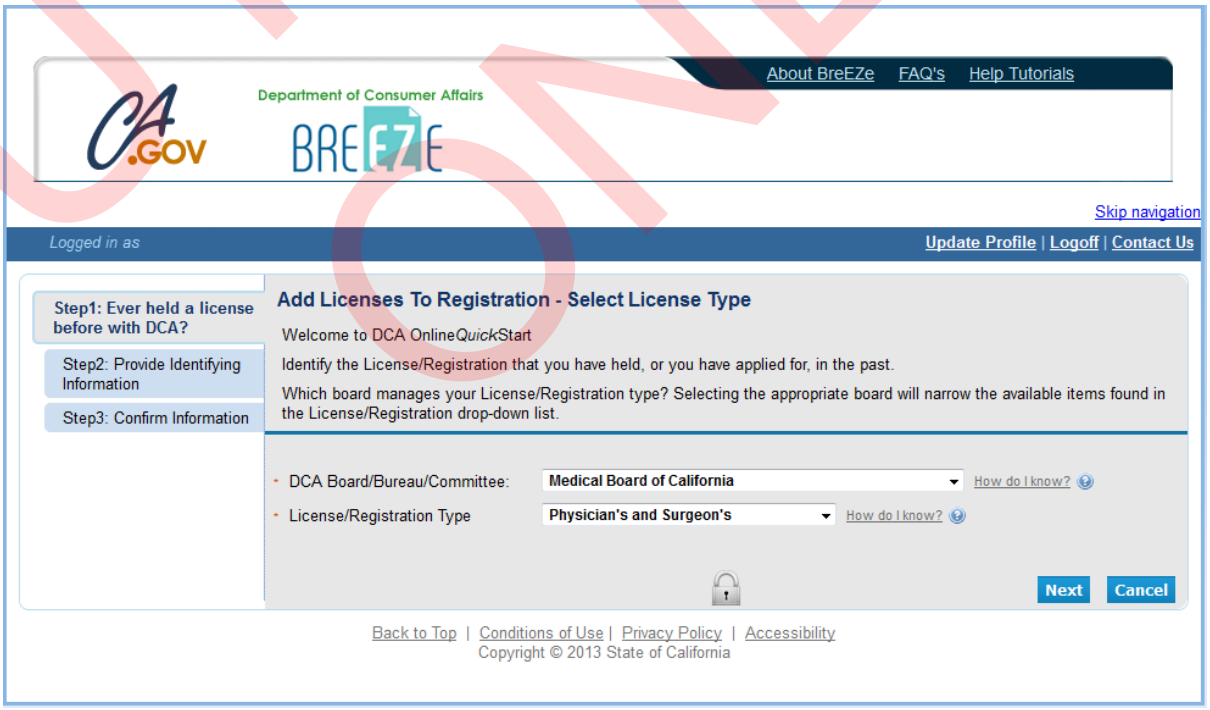
8 Tab to the **Confirm Password** field, reenter the **New Password**, then click the **Save** button.

TUTORIAL ONLY

9 At the **Add Licenses to Registration** screen asking if you have ever been professionally licensed with the Department of Consumer Affairs, select **Yes** then click the **Next** button.

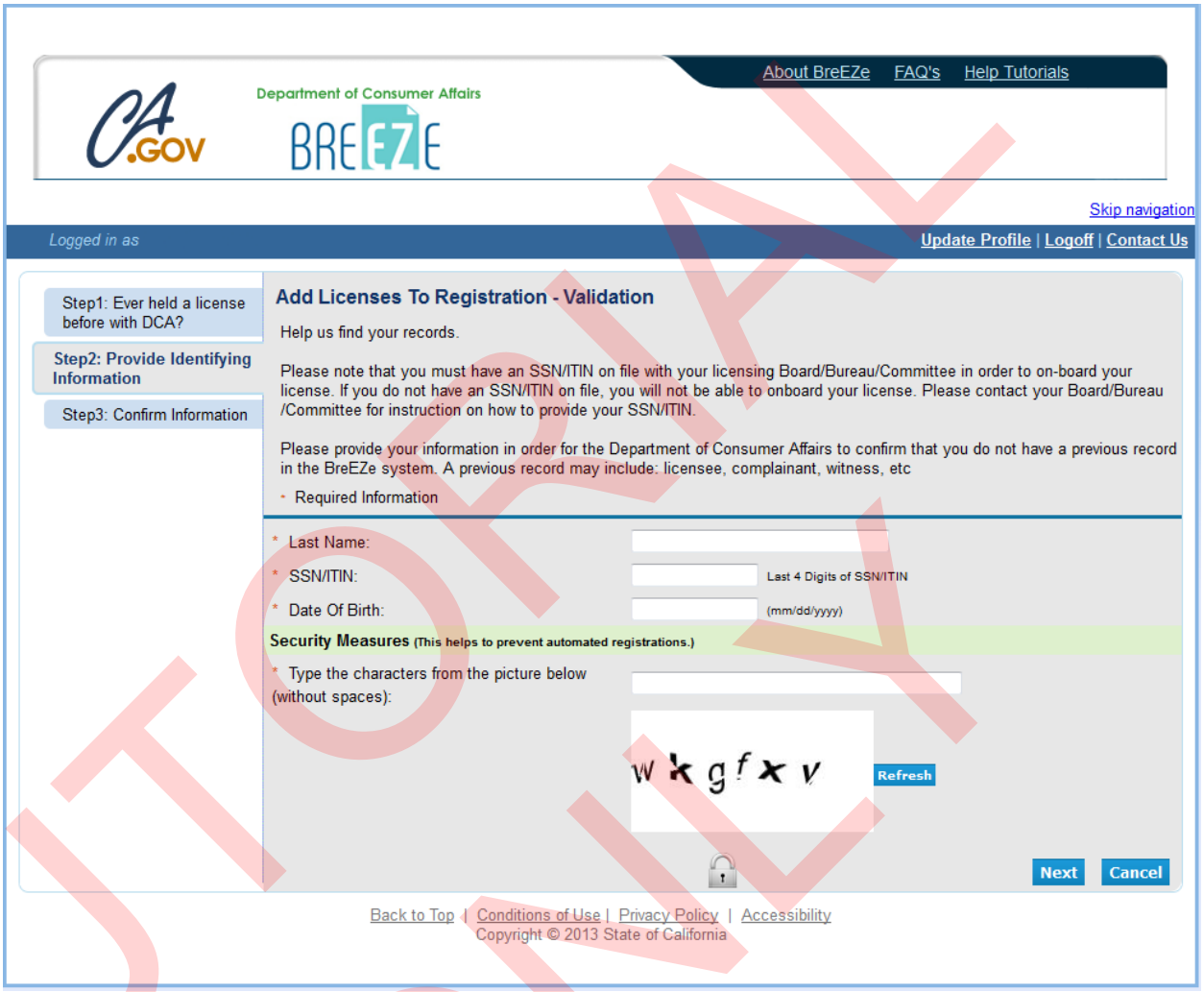


10 At the DCA Board/Bureau/Committee field, click on the **drop down arrow** and select "**Medical Board of California**". At the License/Registration Type field, click on the **drop down arrow** and select "**Physician's and Surgeon's**", then click the **Next** button.



TUTORIAL ONLY

11 At the **Add Licenses to Registration** – **Validation** screen, enter the personal information requested. As a reminder, do not add a suffix in the Last Name field. Next, type the security characters displayed then click the **Next** button.

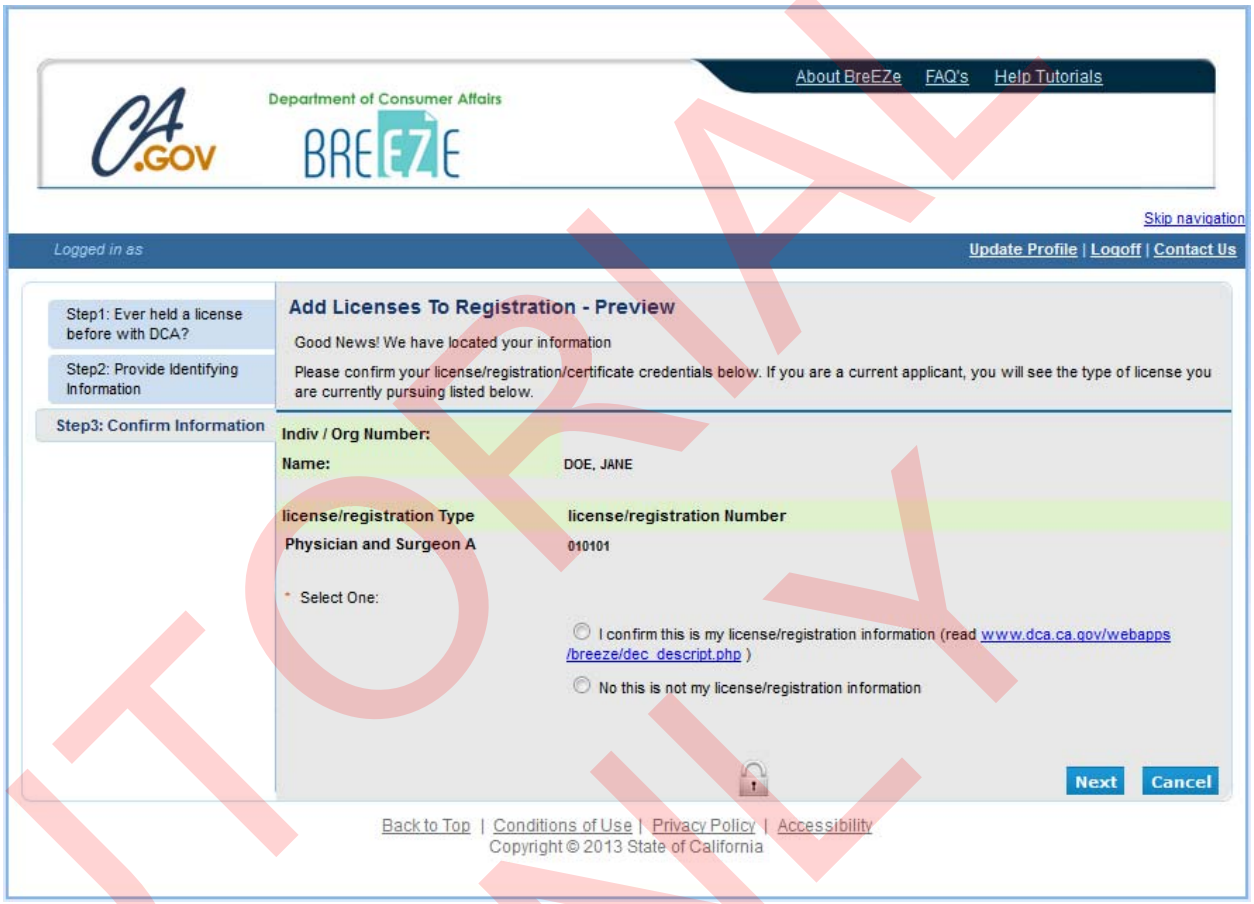


NOTE: If you have trouble reading the security characters, click the **Refresh** button until you can read them. These characters will be all lower case letters.

TUTORIAL ONLY

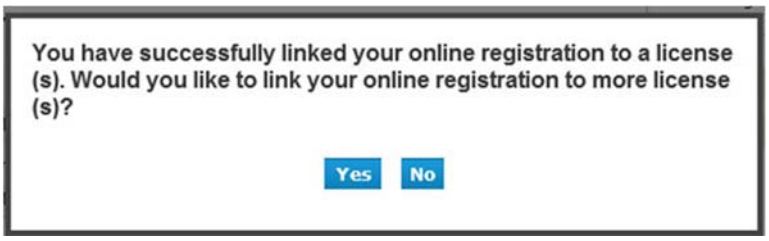
12 At the Preview screen, select the **I Confirm this is my license** option, then click the **Next** button.

NOTE: The **Indiv / Org Number** is a number the system assigns and does not pertain to your license number.



NOTE: If you receive an error message, **"Entity already associated with another User Id, cannot proceed"**, this indicates your license is already attached to an BreEZe account. Please call the Medical Board of California's Help Desk at (916) 263-2205 for assistance.

13 After successfully linking your online registration to a license, the following message will display:



Click the **No** button, which will bring you to the **Quick Start Menu**.

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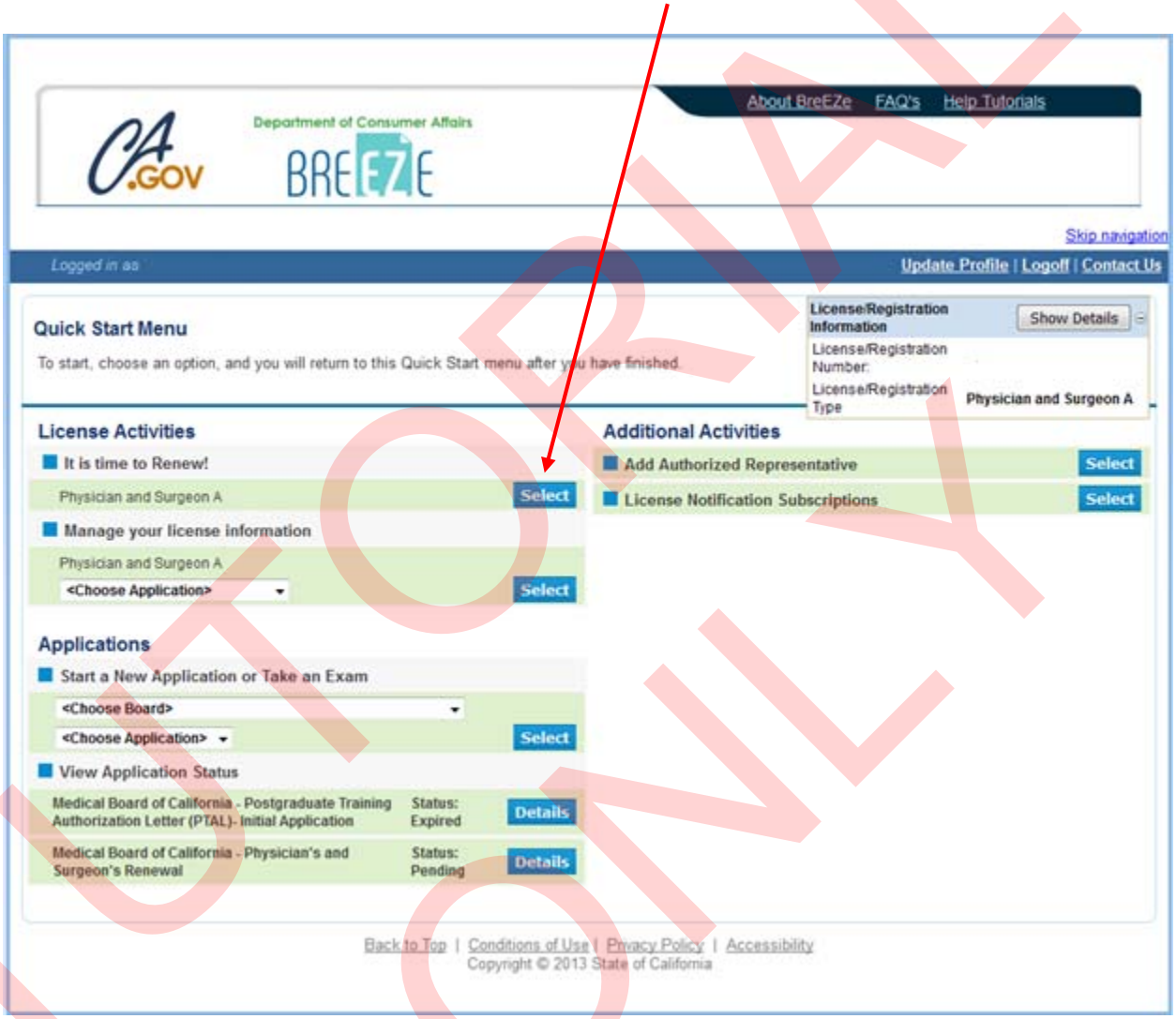
RENEWING YOUR LICENSE:

Once you have successfully logged onto the BreEZe system, you should see the **Quick Start Menu** screen.

1. On the left hand side of the screen, under the section License Activities, you should see **It is time to Renew!** Click on the blue **Select** button.



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2. **Physician's and Surgeon's Renewal – Introduction**

Please read the information then scroll to the bottom of the page/screen and click the **Next** button.

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Physician's and Surgeon's Renewal - Introduction

Review the detailed instructions and information regarding this renewal before proceeding at http://www.mbc.ca.gov/publications/renew_license.html.

If you are changing your license status to Disabled, Inactive, Military, Retired or Voluntary Service, please apply for the status change at least 4 weeks prior to your license expiration date and renewing your license.

You may **not** engage in the practice of medicine in the State of California without a current valid license from the Medical Board of California.

New from the Medical Board of California:

- Regulation updates can be viewed at http://www.mbc.ca.gov.

Physician Survey:
California B&P Code sections 2425.1 and 2425.3 require the Medical Board to collect and publish certain information on training and practice characteristics for each physician licensed in California. To comply with this law, the Board has developed a physician survey that must be completed by each physician when renewing their license.

Taxpayer Information:
Effective July 1, 2012, the State Board of Equalization and the Franchise Tax Board may share taxpayer information with the Board. You are obligated to pay your state tax obligation and your license may be suspended if the state tax obligation is not paid.

Contact Us:

- **Online/Technical Assistance:**
  For Online/Technical assistance, contact the Medical Board of California's Help Desk at:
  Phone: (916) 263-2205.
  Assistance is available Monday - Friday, 8:00 a.m. - 5:00 p.m. PST (except holidays).

- **Licensing Questions:**
  For licensing and renewal information, contact the Medical Board of California at:
  CA Toll-Free: 1 (800) 633-2322
  Phone: (916) 263-2382
  Fax: (916) 263-2944
  Assistance is available Monday - Friday, 8:00 a.m. - 5:00 p.m. PST (except holidays).

Press "Next" to continue.

Press "Cancel" to exit this application.

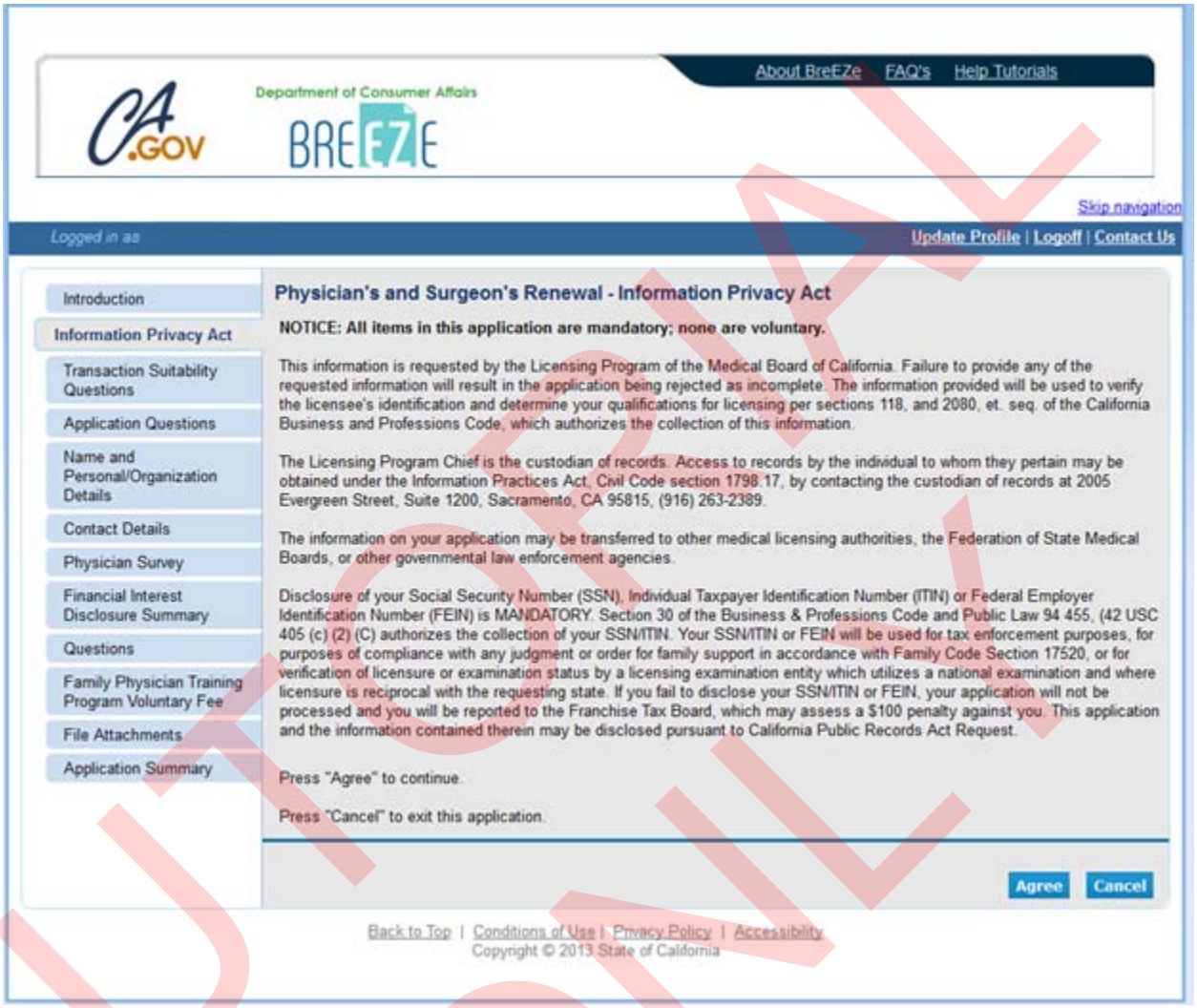
If you need to change your current address please go back to the quick start menu by pressing "Cancel" and select the "Address Change" application.

Next | Cancel

TUTORIAL ONLY

3. **Physician's and Surgeon's Renewal – Information Privacy Act**

Please read the information then click on the **Agree** button.



4. **Physician's and Surgeon's Renewal – Function Suitability**

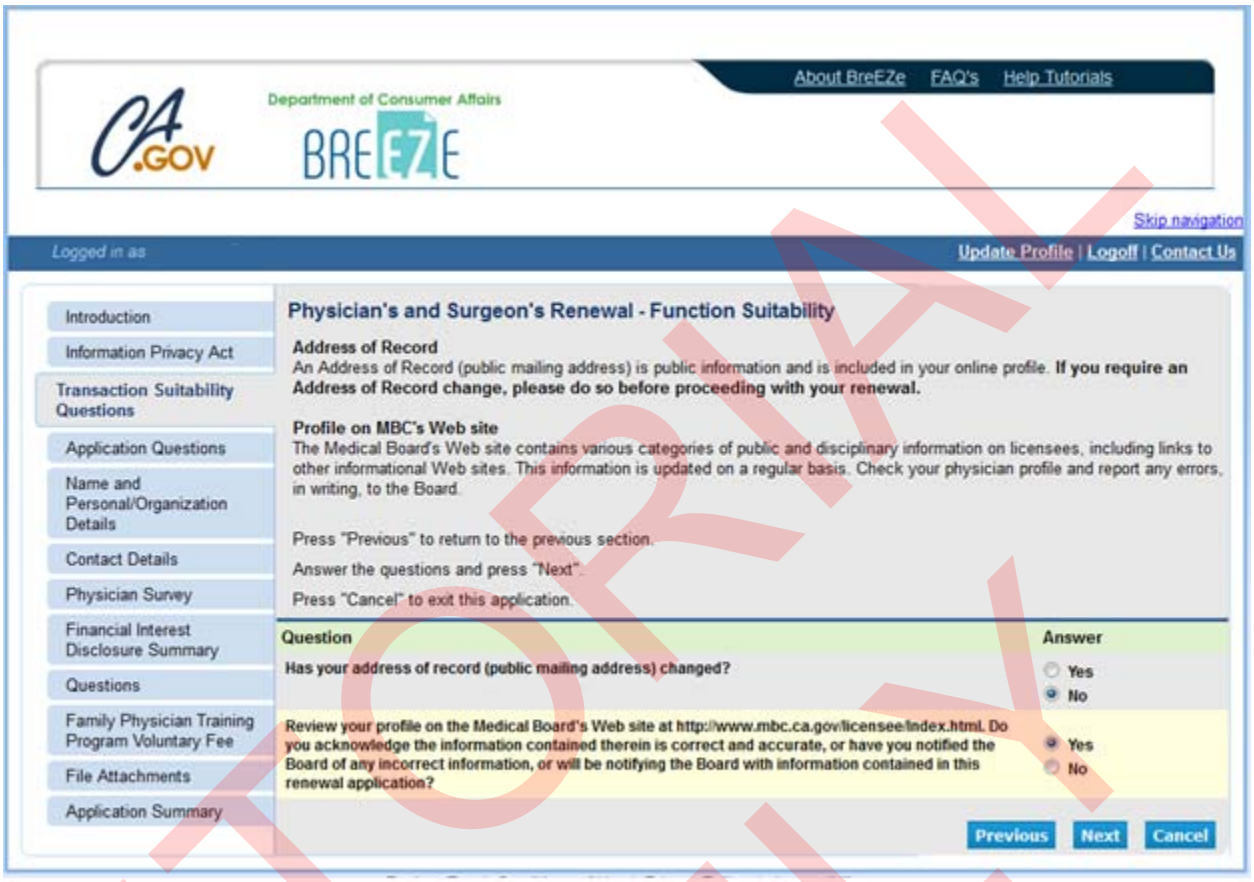
Please read the information regarding your Address of Record and Profile on the Board's website.

To view your profile, please go to www.breeze.ca.gov. On the left hand side of the screen, click the **Verify a License** button and select the third option "Search by License Number". Next complete the fields on the screen then click the **Search** button **If you need to complete an address change, STOP! Click the Cancel button to be taken back to the Quick Start Menu.**

Please go to http://www.mbc.ca.gov/Licensees/License_Renewal/Physicians_and_Surgeons.aspx and view the "Step-by-Step User Guide for Physicians to Change Address Online".

TUTORIAL ONLY

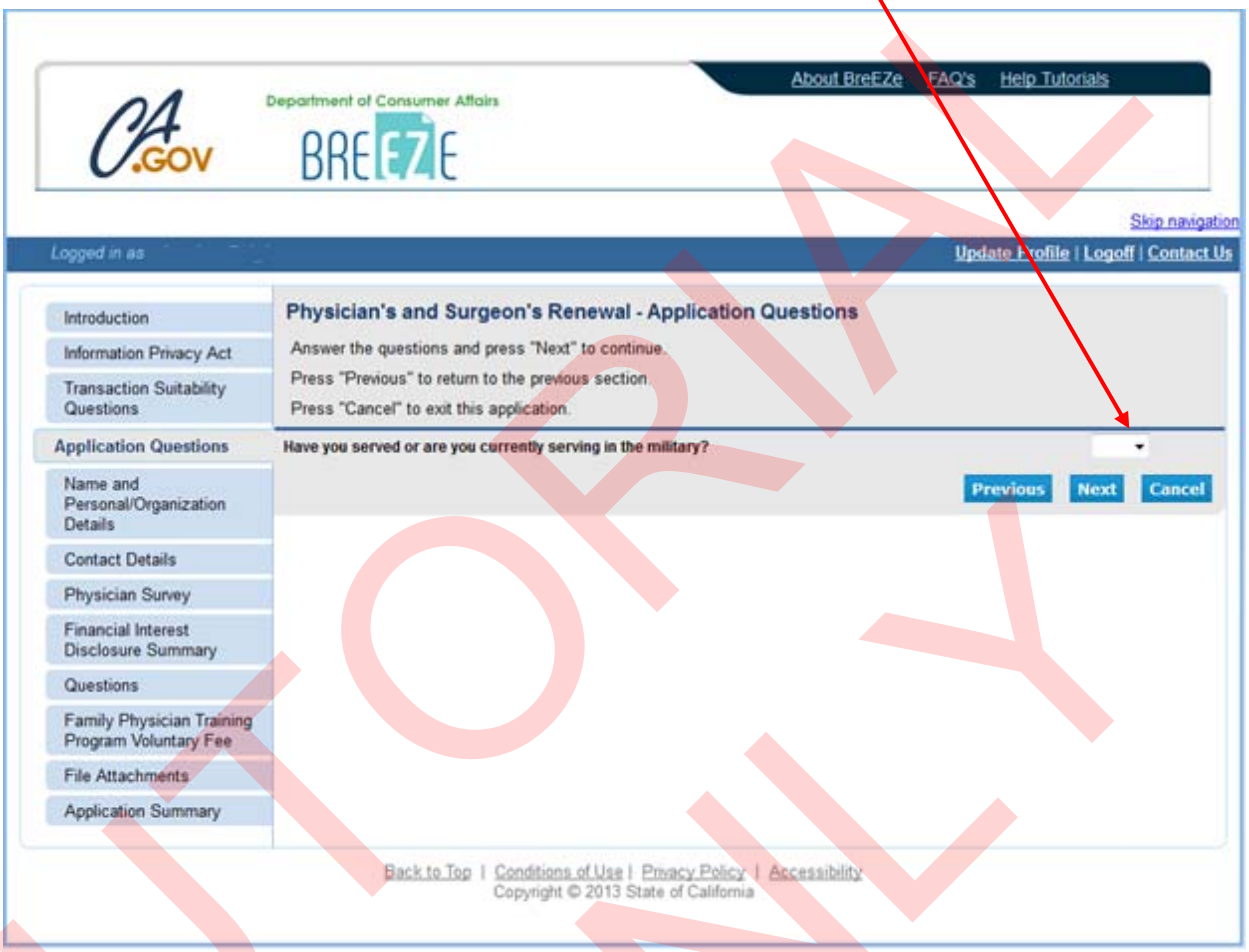
If your address of record has not changed, answer the questions on the screen then click the **Next** button to proceed.



TUTORIAL ONLY

5. **Physician's and Surgeon's Renewal – Application Questions**

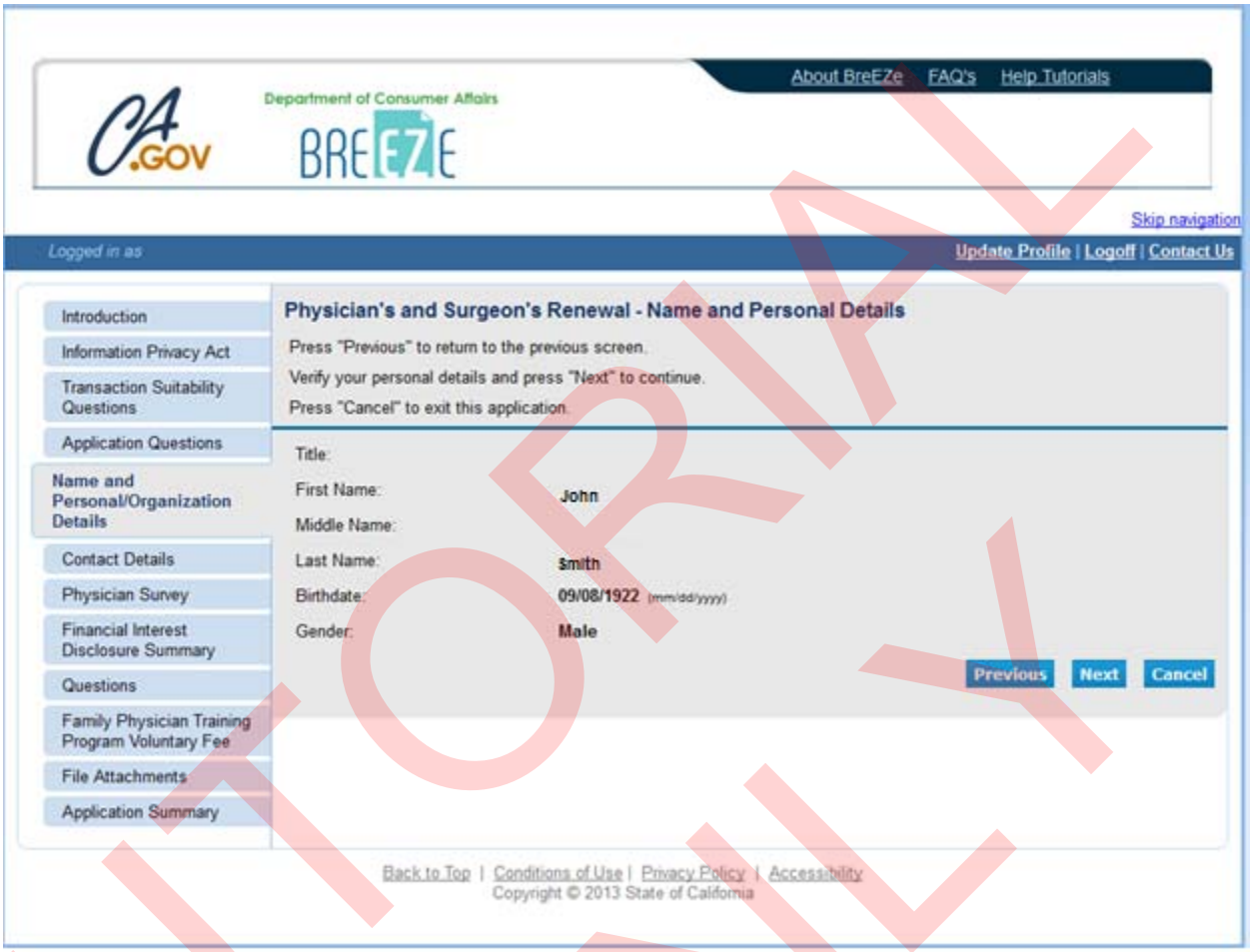
Select **Yes** or **No** from the down arrow on the white box to answer the question. Then click the **Next** button.



TUTORIAL ONLY

6. **Physician's and Surgeon's Renewal – Name and Personal Details**

Verify information is correct then click on the **Next** button.



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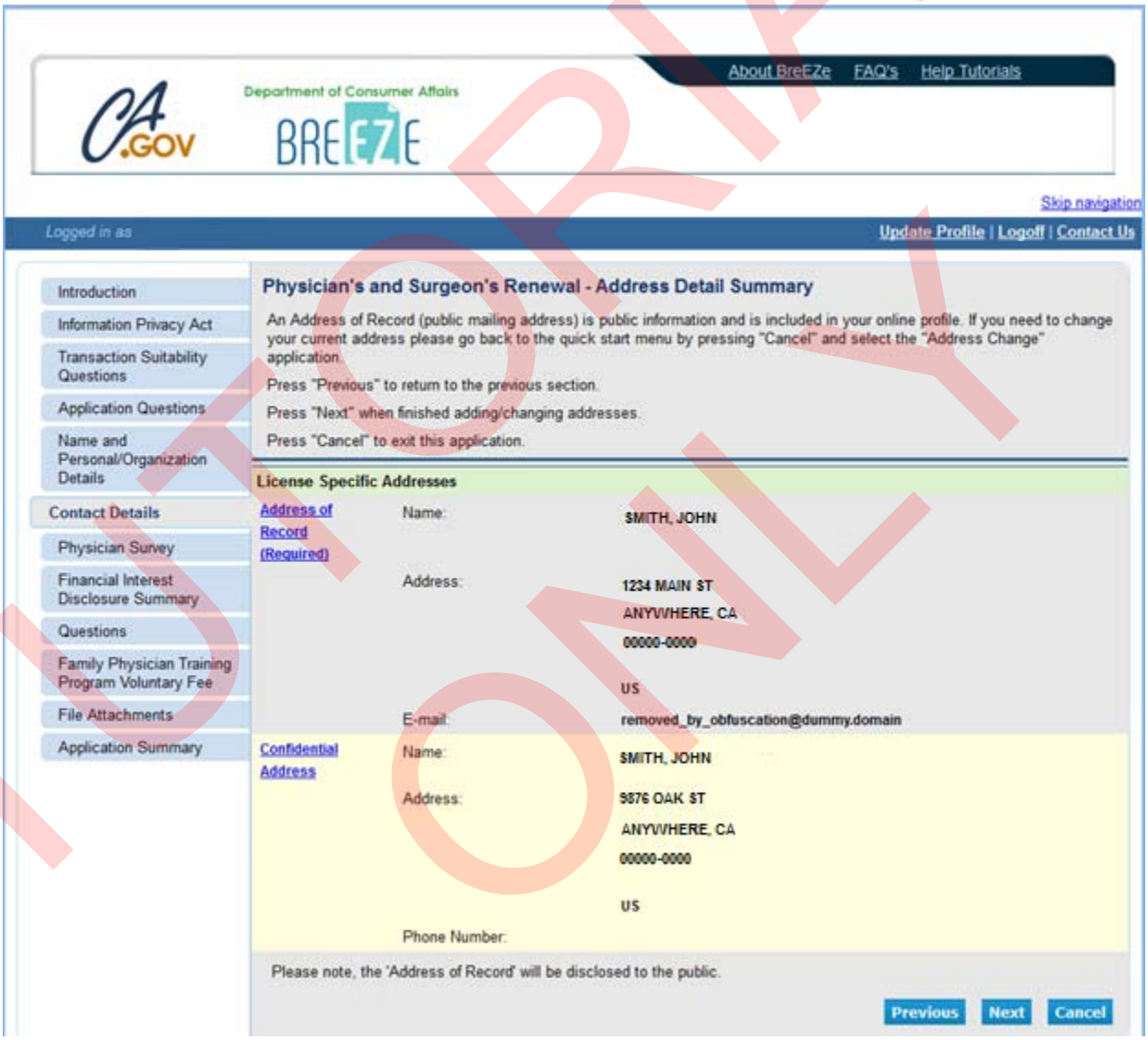
7. **Physician's and Surgeon's Renewal – Address Detail Summary**

NOTE: Licensee cannot update addresses on this screen. If your Address of Record is incorrect, STOP!

Please go to
http://www.mbc.ca.gov/Licensees/License_Renewal/Physicians_and_Surgeons.aspx
and view the "Step-by-Step User Guide for Physicians to Change Address Online".

If the address information displayed on the **Address Detail Summary** is correct, then click the **Next** button.



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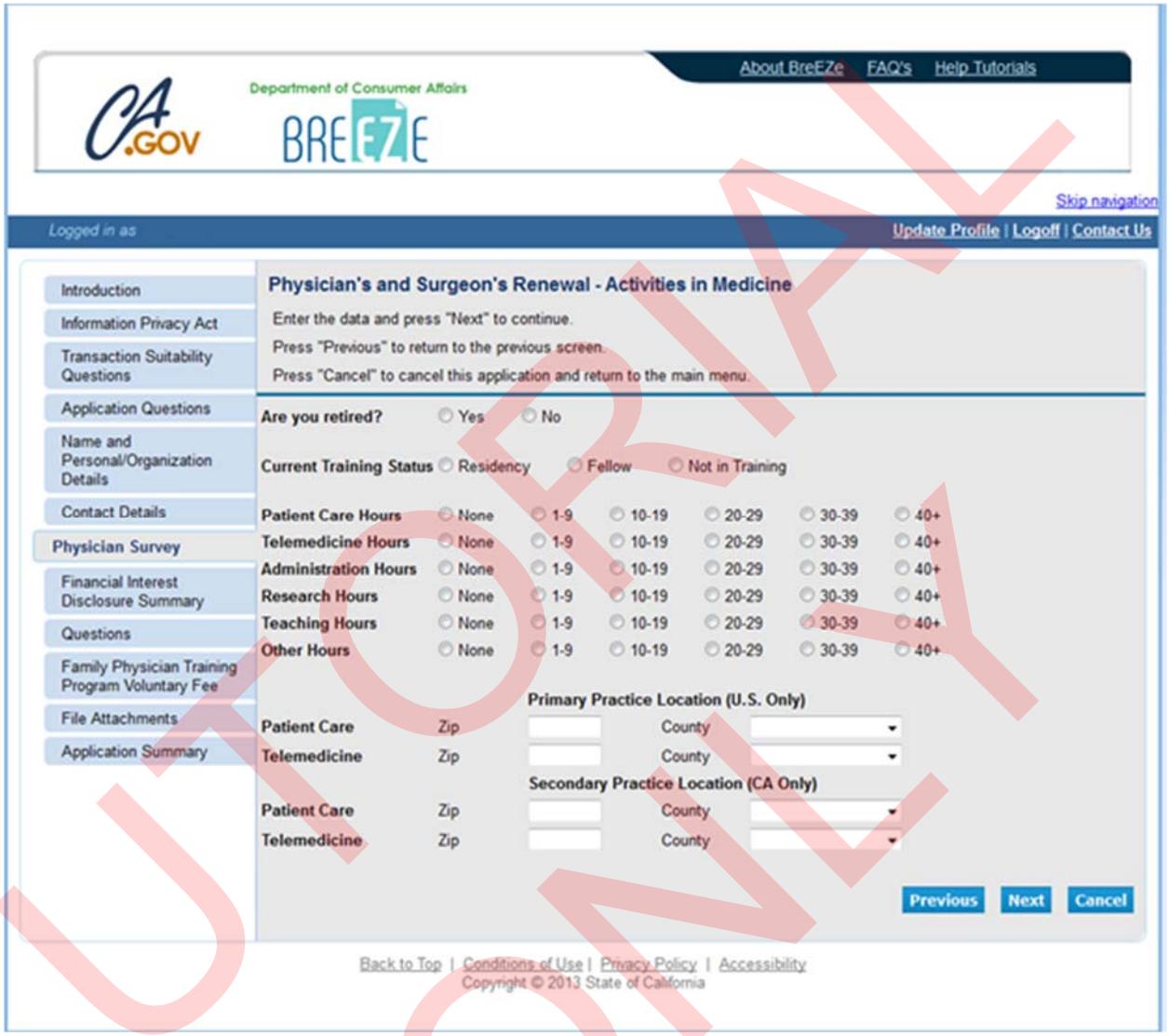
8. **Physician's and Surgeon's Renewal – Physician Survey Screens**

Complete the **Activities in Medicine** (per week) questions then click the next button.



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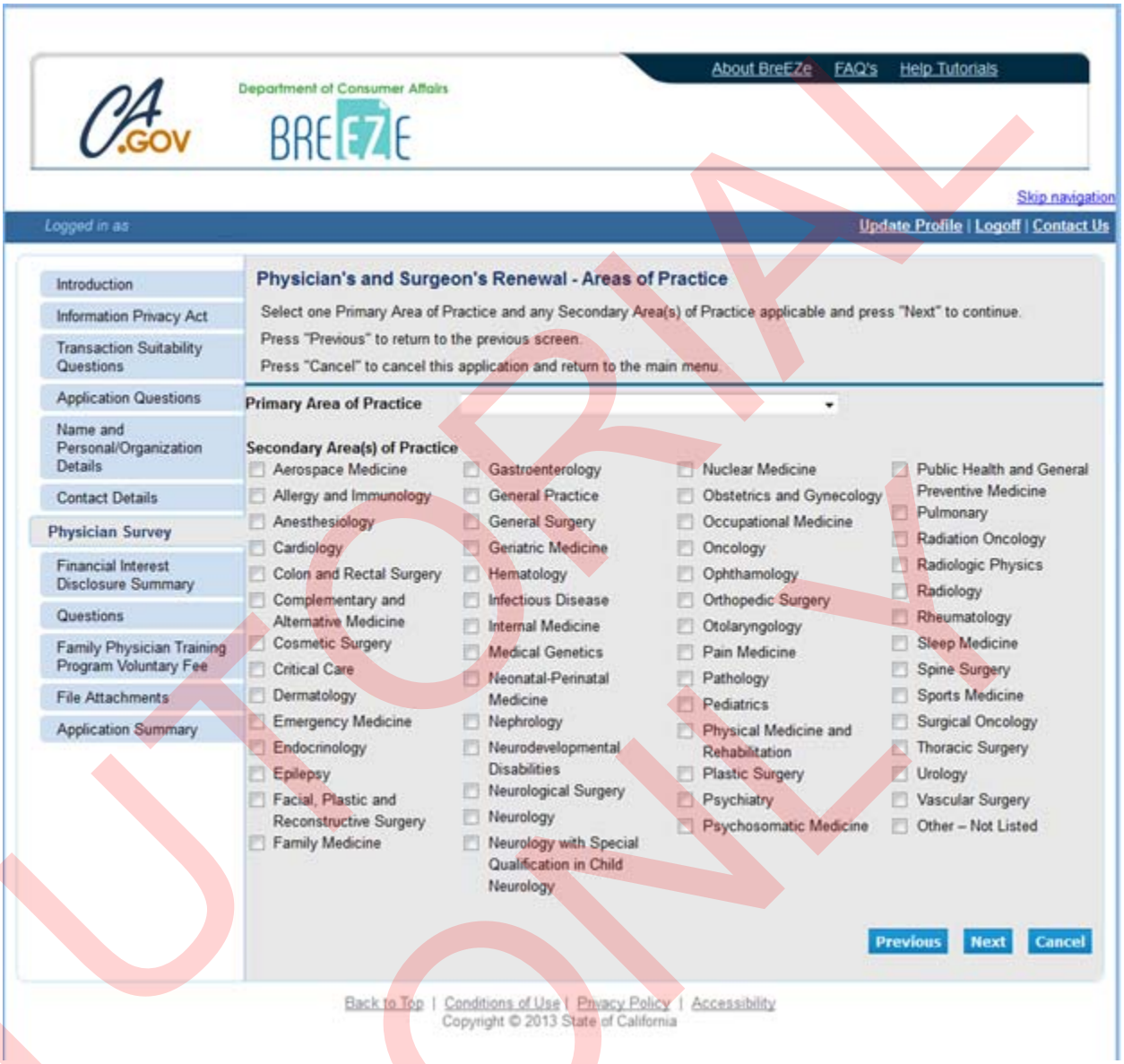
On the **Areas of Practice** screen, click on the dropdown box to select your primary area of practice. If applicable, click on the boxes for any secondary areas of practice. Then click the **Next** button to proceed to the next screen.



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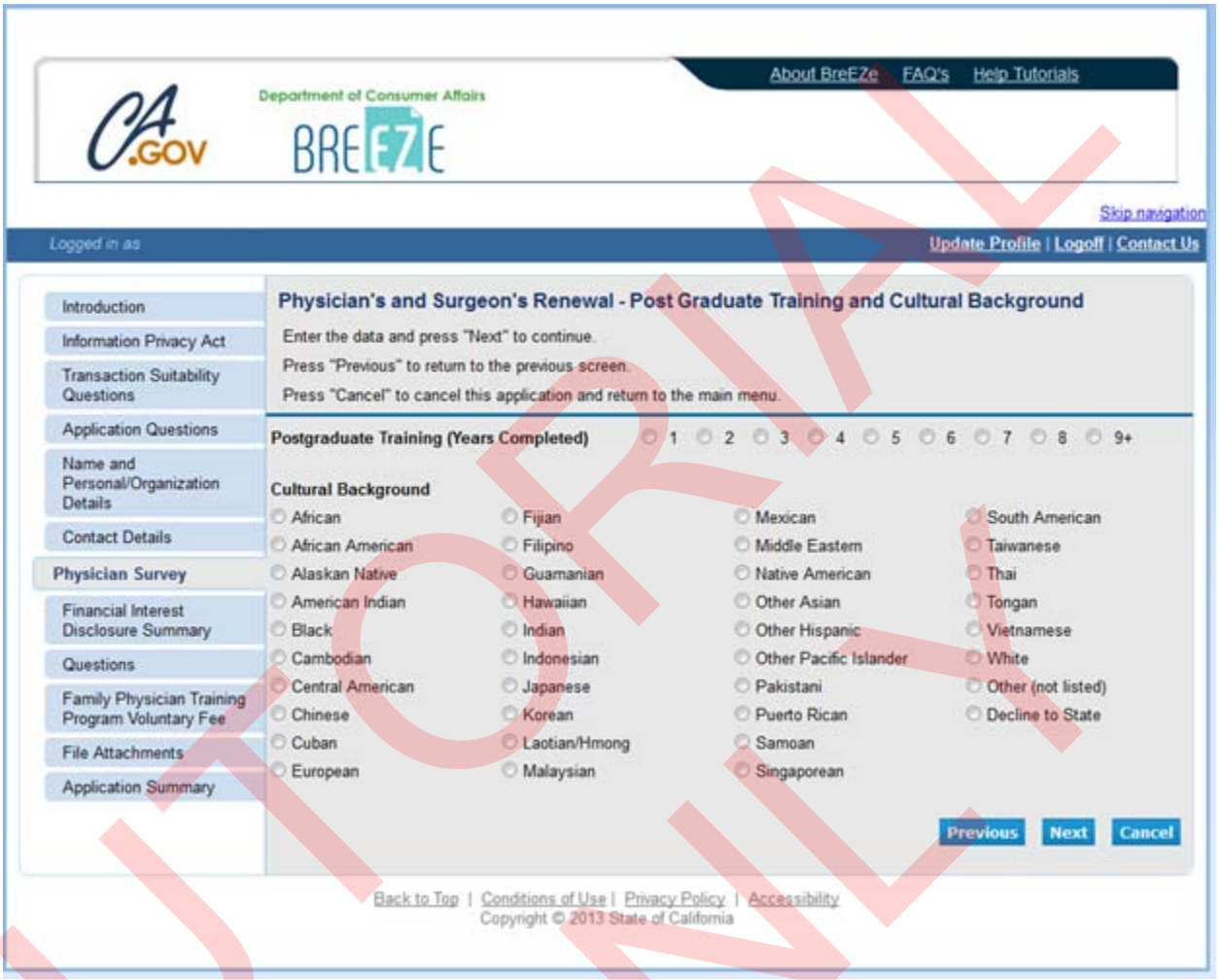
On the **Board Certifications** screen (listed by the board), select any that apply by clicking on the box then scroll down to click the **Next** button.

TUTORIAL ONLY

On the **Post Graduate Training and Cultural Background** screen, select the number of years of Postgraduate Training you completed after finishing medical school and your Cultural Background, then click the **Next** button.



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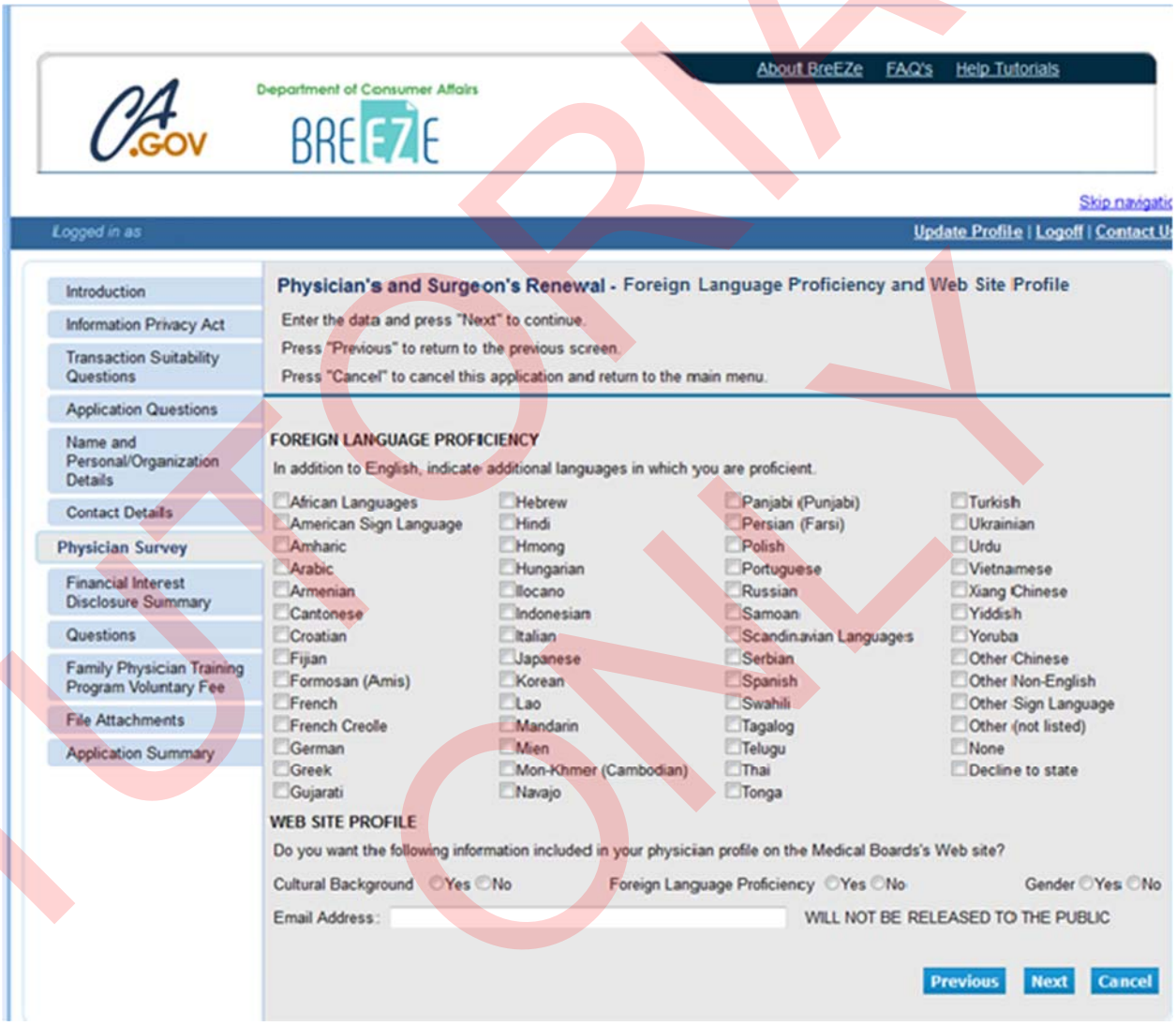
On the **Foreign Language Proficiency and Web Site Profile** screen, select additional languages in which you are proficient.

Answer the Website Profile questions to determine what information you want displayed on your Physician Profile.

As required by law, enter your email address (your email address will NOT be released to the public).

Click the **Next** button.



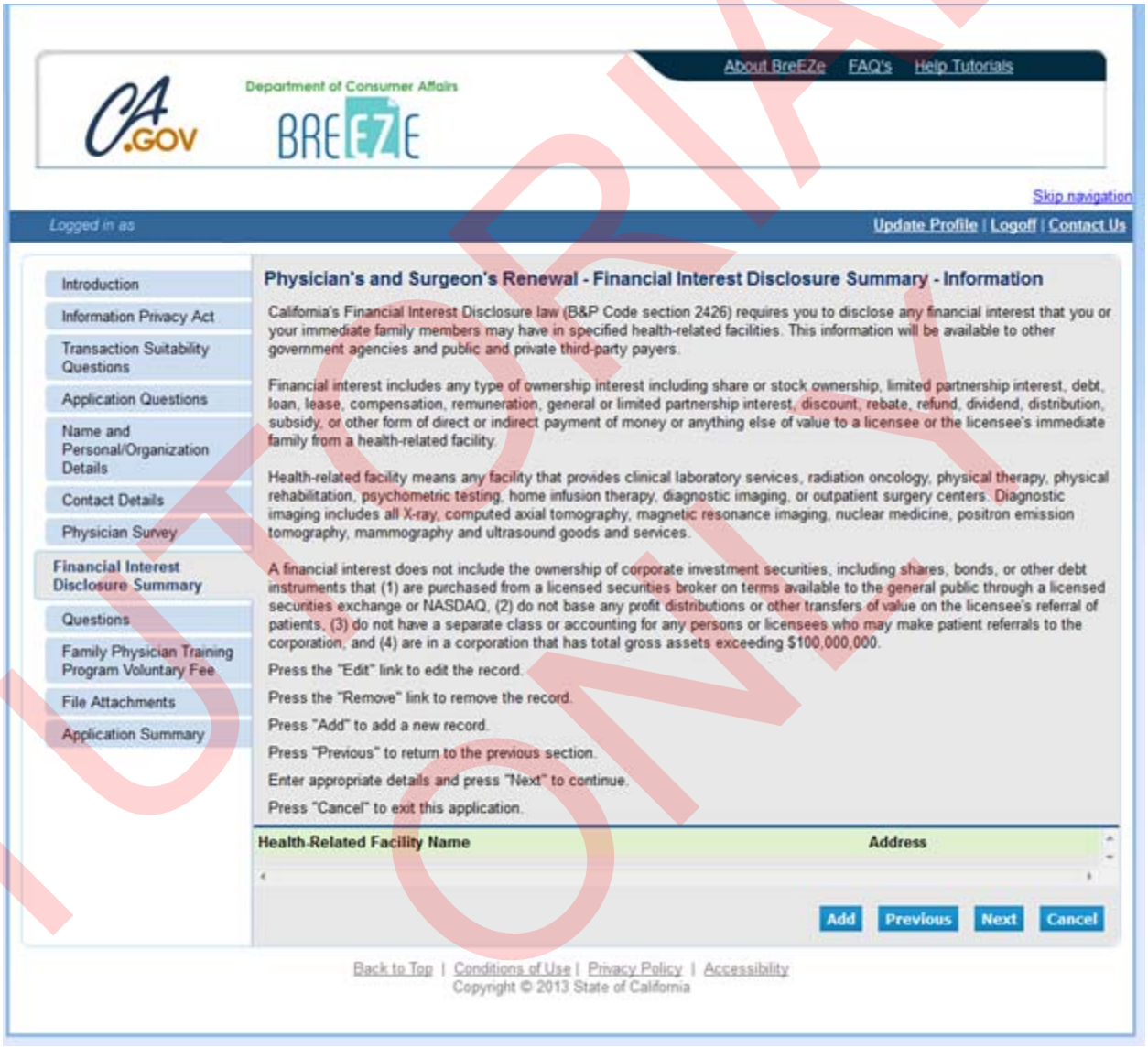
TUTORIAL ONLY

9. **Physician's and Surgeon's Renewal – Financial Interest Disclosure Summary - Information**

Read the information regarding the Financial Interest Disclosure Summary.

If you have financial interest to disclose, click on the **Add** button and enter the information.

If you have no financial interest to disclose, click the **Next** button.



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10. **Physician's and Surgeon's Renewal – Questions – Information**

Carefully read and answer the renewal questions then click the **Next** button.

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Physician's and Surgeon's Renewal - Questions - Information

Continuing Medical Education (CME)

The laws of the State of California require CME certification. To promote compliance, the Board conducts a random audit. Those physicians selected for the audit are required to submit acceptable documentation of their CME attendance to verify their compliance with the CME requirement. For further information, go to http://www.mbc.ca.gov/licensee/continuing_education.html

California law requires all licensed physicians to complete not less than 50 hours of approved continuing medical education (25 hours of approved CME if the initial license was issued for less than 13 months) during each two-year period immediately preceding the expiration date of the license as a condition of license renewal.

- General internists and family physicians who have 25% of their patient population aged 65 years or older must have completed at least 20% of the required CME in geriatric medicine or the care of older patients.
- As part of the 50 hours, there is a one-time requirement of 12 hours of pain management and end-of-life care. Radiologists and pathologists are exempt from this requirement.

Conviction Disclosure

You must disclose if, since your last renewal, you have had any license disciplined by a government agency, or have been convicted of, or pled guilty, to any crime. "Conviction" includes a plea of no contest and any conviction that has been set aside or deferred pursuant to Penal Code section 1000 or 1203.4, including infractions, misdemeanor, and felonies. You do not need to report a conviction for an infraction with a fine of less than $300.00 unless the infraction involved alcohol or controlled substances. You must, however, disclose any conviction which you entered a plea of no contest and any convictions that were subsequently set aside pursuant to Penal Code sections 1000 or 1203.4. "License" includes permits, registrations, and certificates. "Discipline" includes, but is not limited to, suspension, revocation, voluntary surrender, probation, or any other restrictions.

Press "Previous" to return to the previous section.

Enter appropriate details and press "Next" to continue.

Press "Cancel" to exit this application.

* Since you last renewed your license, have you had any license disciplined by a government agency or other disciplinary body, or, have you been convicted of any crime in any state, the U.S.A. and its territories, military court or a foreign country? ○ Yes ○ No

* Have you successfully completed, and can document, the mandatory courses and hours of CME within the last two years, or you meet the conditions which would exempt you from all or part of the CME requirements, or you hold a permanent CME waiver? ○ Yes ○ No

* I certify under penalty of perjury, under the laws of California, that I have disclosed the names of those health-related facilities in which I or my family have a financial interest OR I declare under penalty of perjury I have no financial interests to disclose. ○ Yes ○ No

Previous | Next | Cancel

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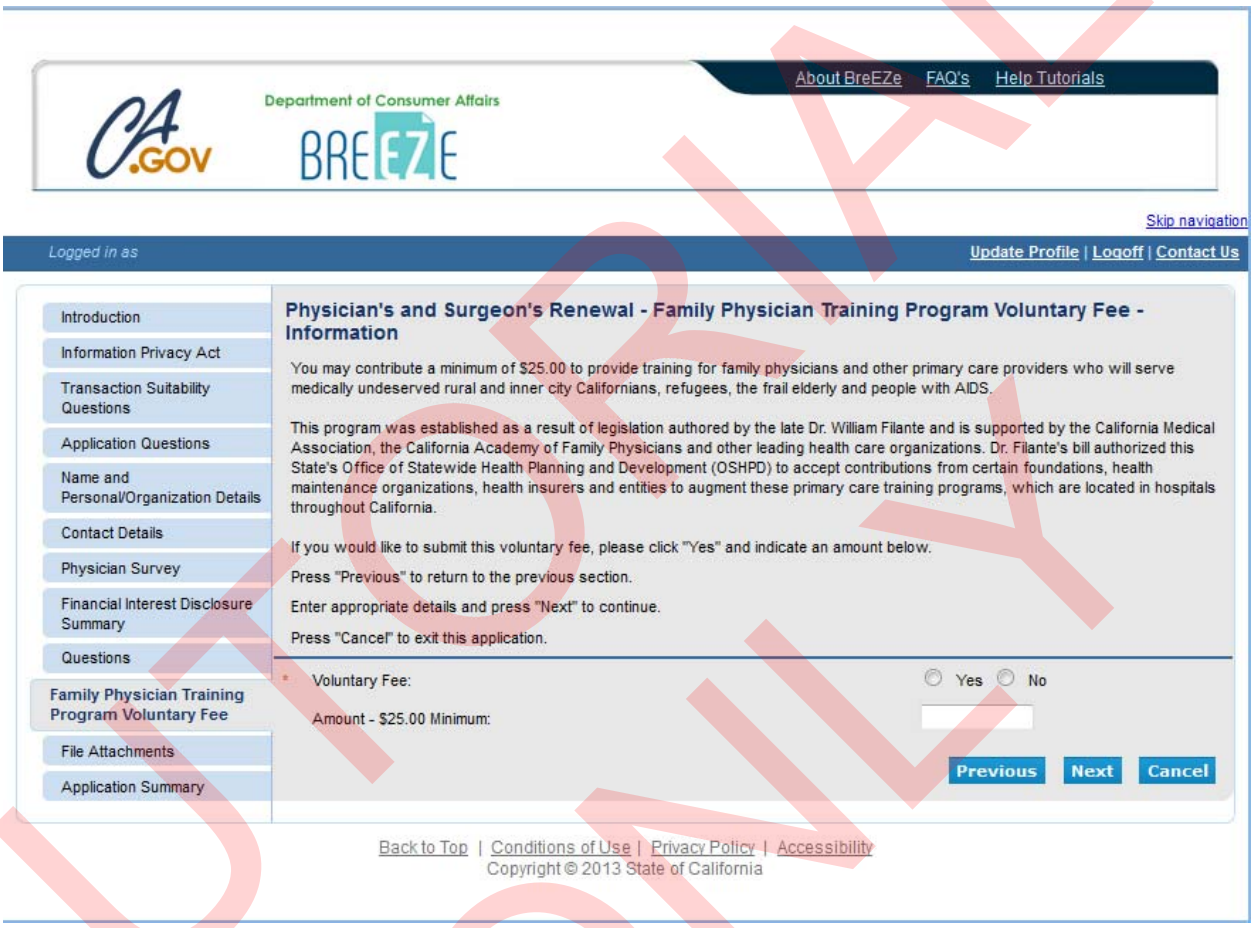
11. **Physician's and Surgeon's Renewal – Family Physician Training Program Voluntary Fee - Information**

Please read the information, then choose **Yes** or **No** by clicking the appropriate radio button then click the **Next** button.

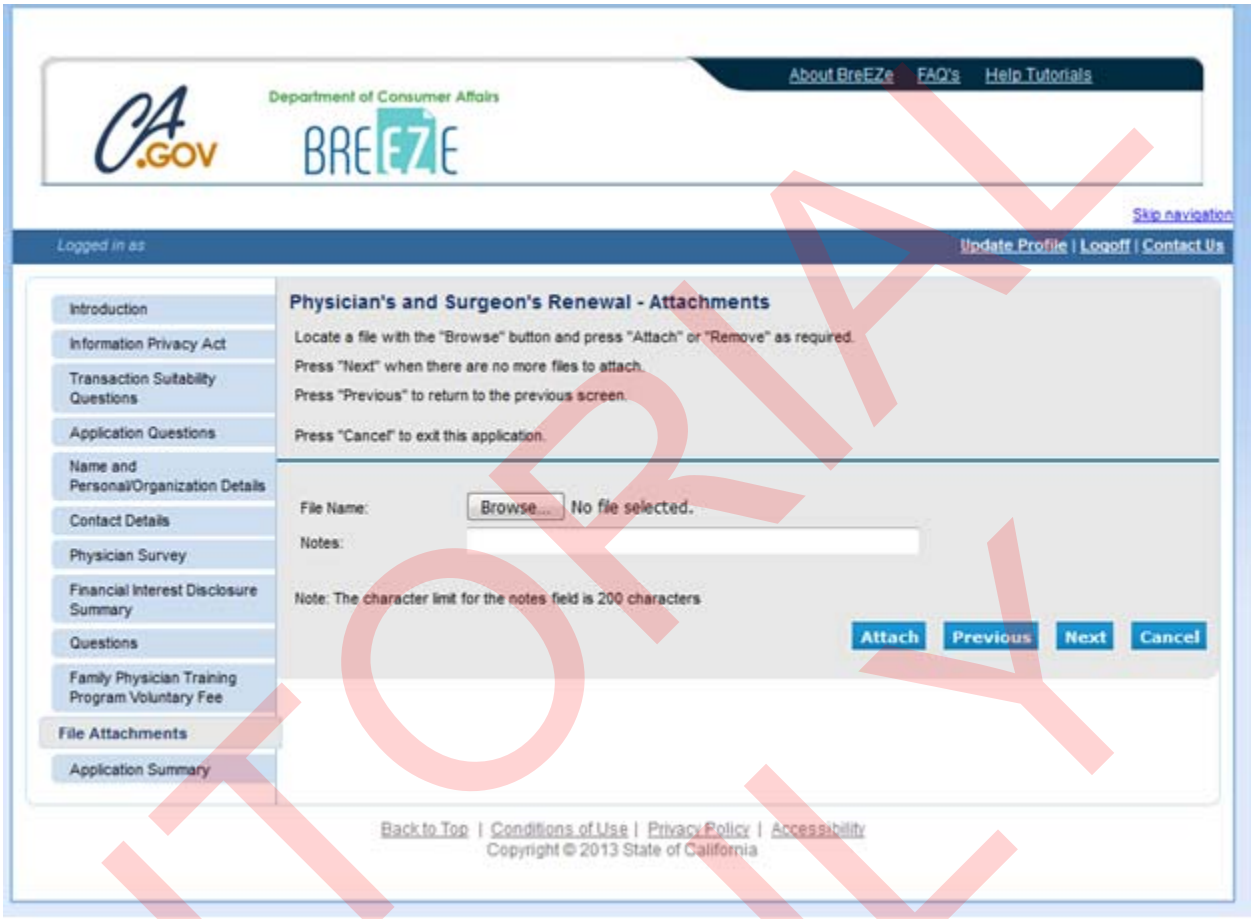
NOTE: If you choose **Yes**, please enter the amount in dollars and cents (25.00).



TUTORIAL ONLY

12. **Physician's and Surgeon's Renewal – Attachments**

Physicians and Surgeons will not have any attachments. Please click the **Next** button.



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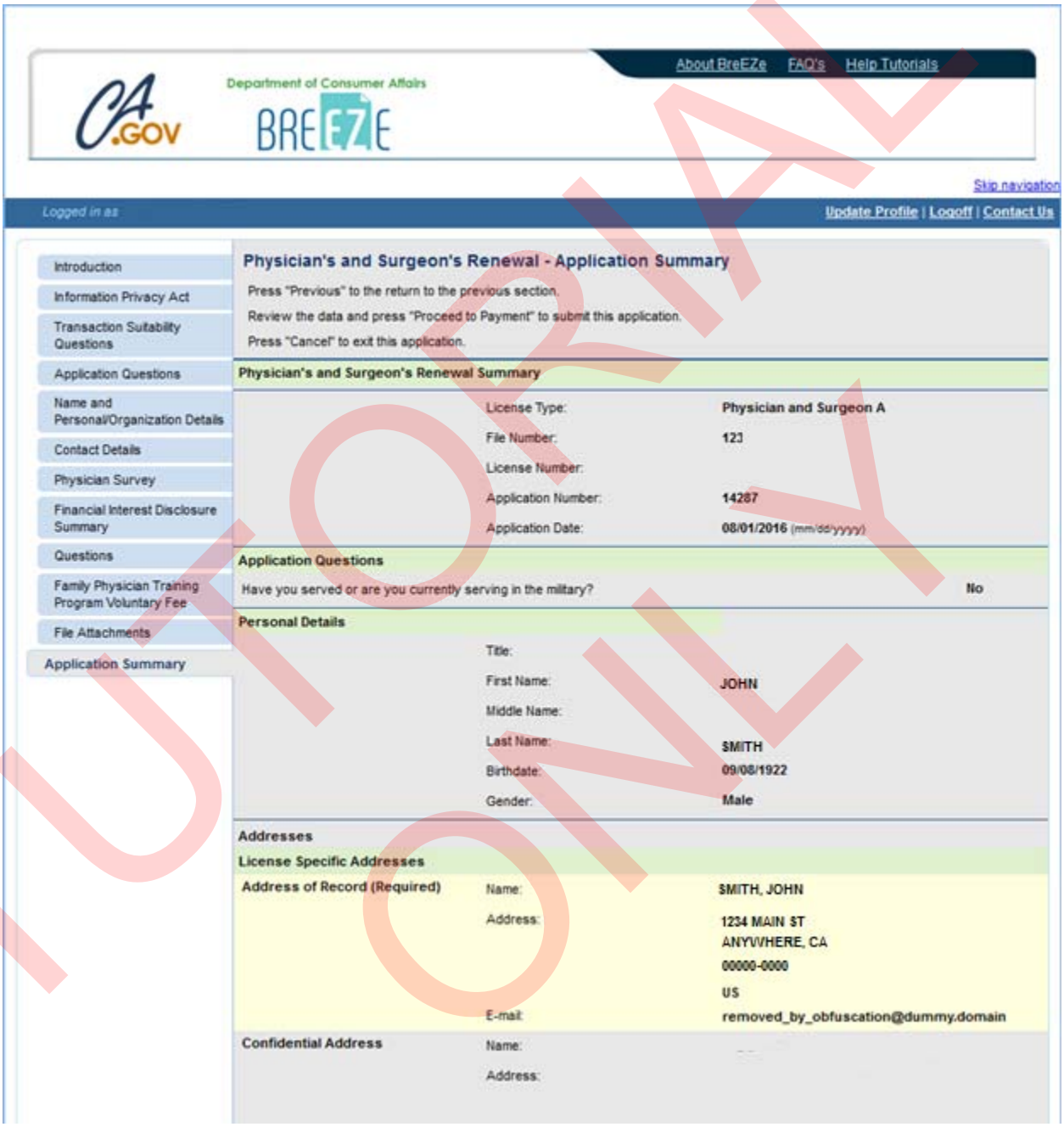
13. **Physician's and Surgeon's Renewal – Application Summary**

Please review the information on the screen. If anything needs to be changed, scroll down and click the **Previous** button to back up and make corrections. Otherwise, click the **Proceed to Payment** button.

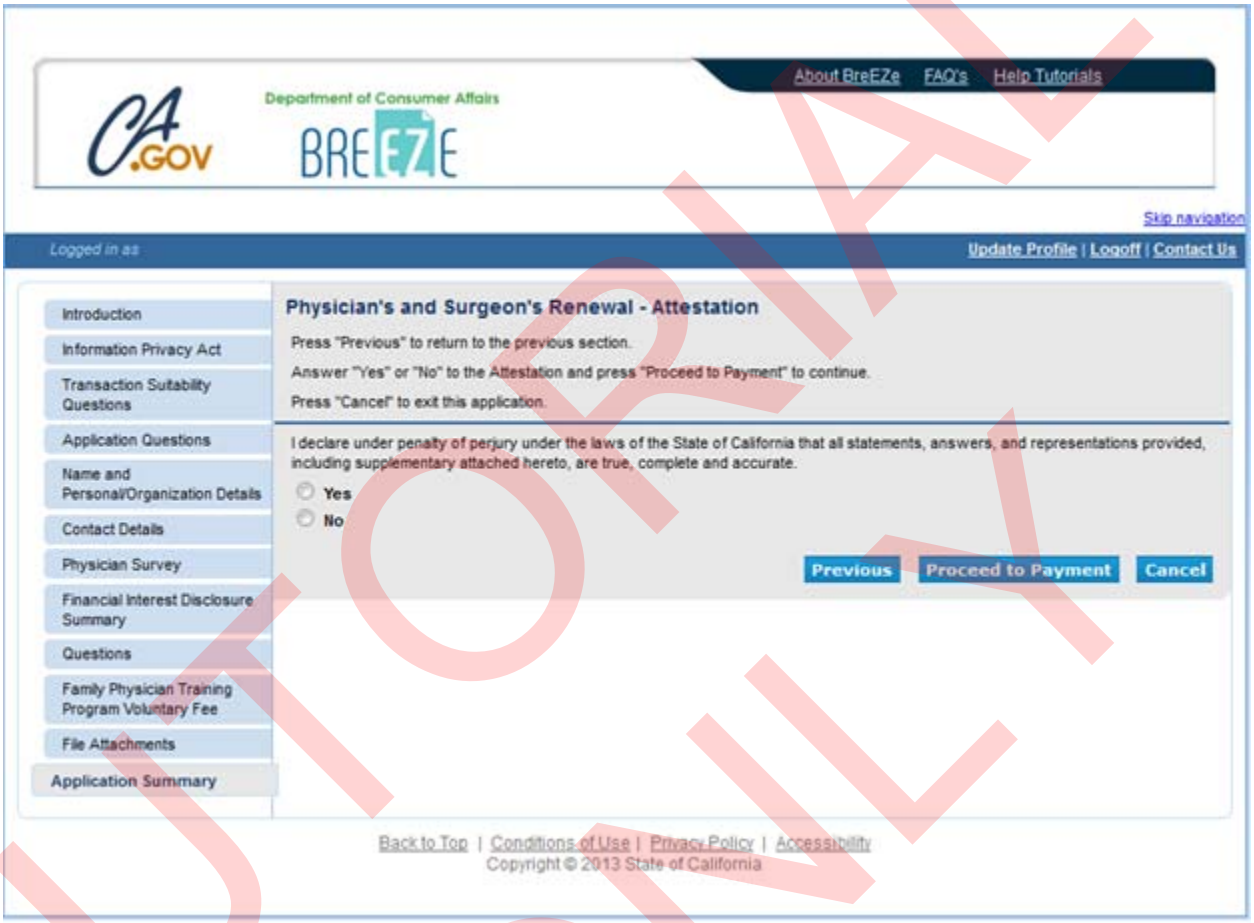


TUTORIAL ONLY

14. **Physician's and Surgeon's Renewal – Attestation**

Read the penalty of perjury statement, click the **YES** radio button, then click **Proceed to Payment.**

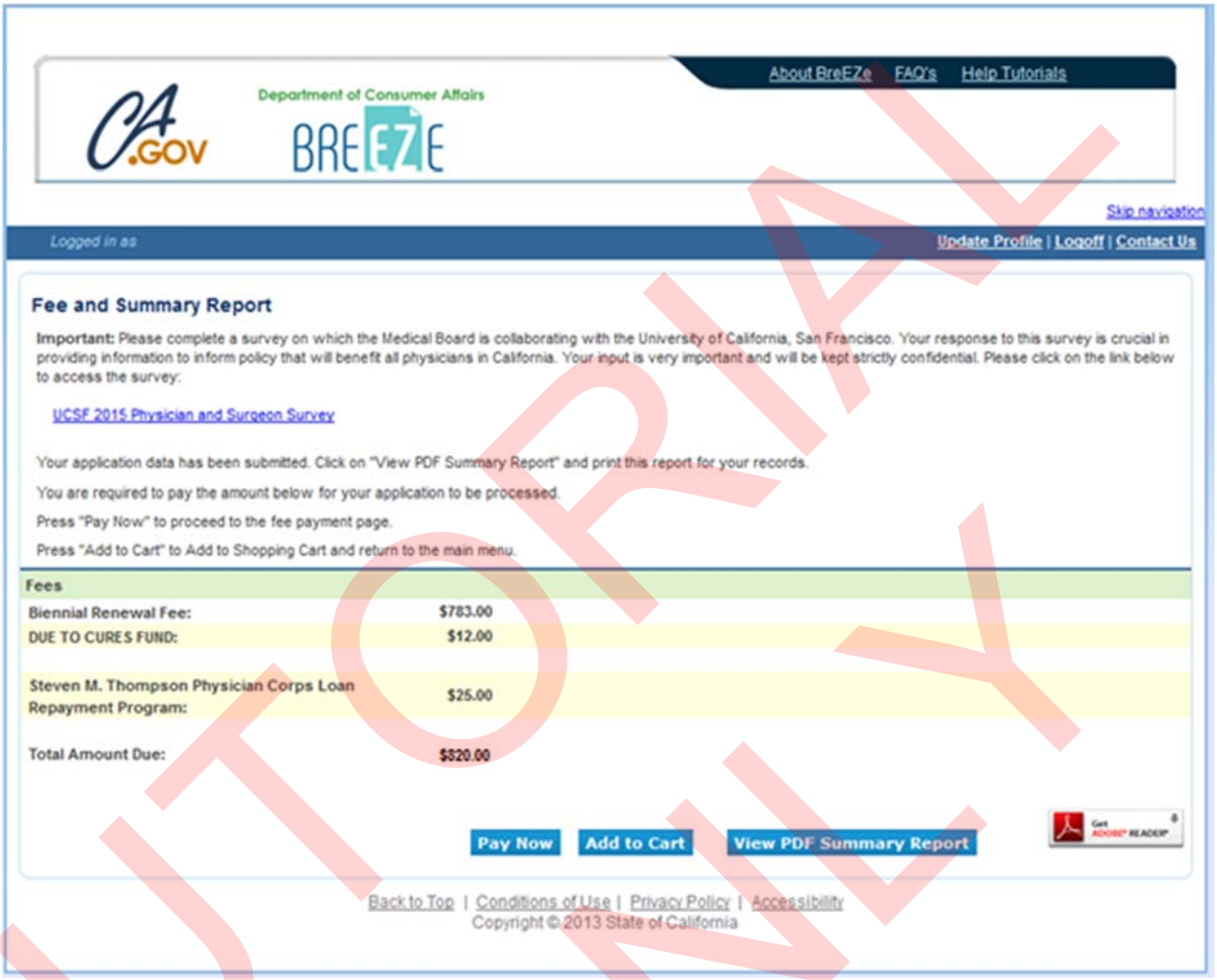
NOTE: If you click **NO** you will not be able to proceed to payment.



TUTORIAL ONLY

15. **Fee and Summary Report**

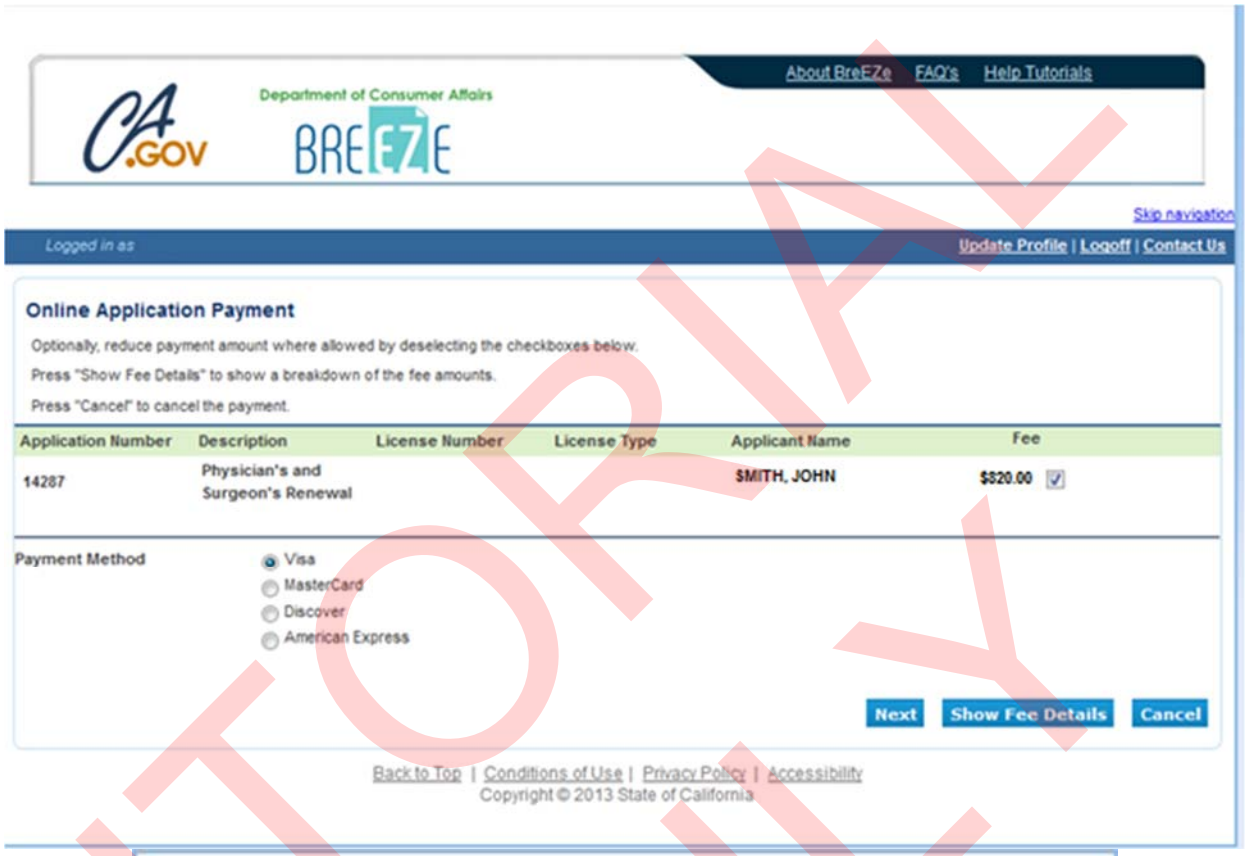
Click **Pay Now** to complete the renewal or **Add to Cart** to pay later.

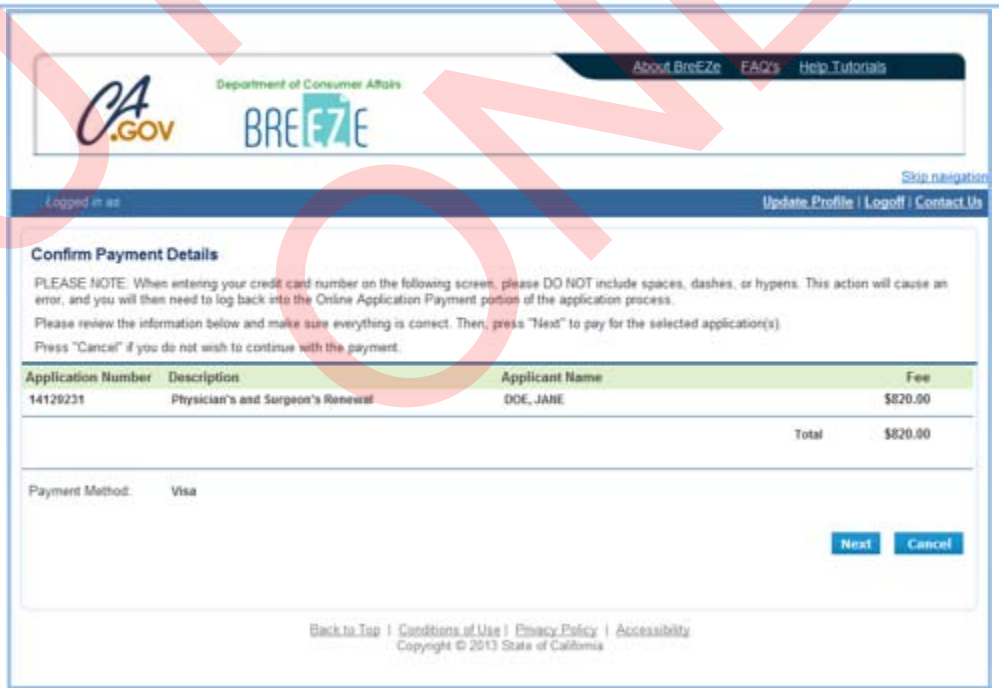


TUTORIAL ONLY

16. **Online Application Payment and Confirm Payment Details**

Select which credit card to use and click **Next**, then click **Next** again.





TUTORIAL ONLY

17. **Payment Screen**

Enter your credit card information.

NOTE:

1. The credit card expiration date must be four numeric characters only. For example, if the expiration date is 02/2020 – enter 0220 (no spaces dashes or slashes)
2. When inputting the name that is on the credit card, if there is a middle initial or middle name, type it in the **First name** field. If there is a Jr. Sr. or MD after the last name, type it in the **Last name** field. For example:

   John M. Doe MD would look like:
   "First name": John M
   "Last name": Doe MD

3. Click the **Process** button.

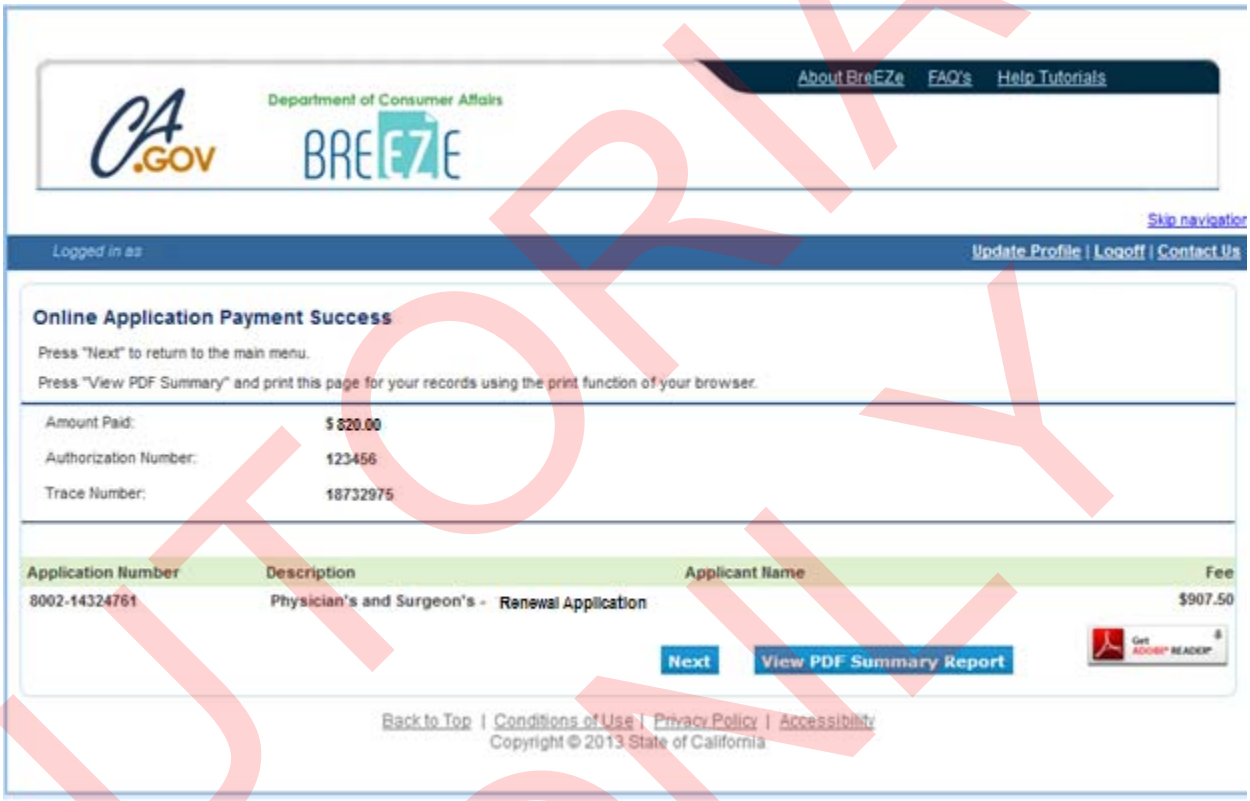
TUTORIAL ONLY

18. **Online Application Payment Success**

If payment completed successfully, you will receive the message below. Click the **Next** key to return to the **Quick Start Menu**.

NOTE: If you receive an error message regarding payment, please call the Medical Board of California's Help Desk at (916) 263-2205 for assistance.

Once your renewal is completed, you will receive a new pocket card within 3 to 4 weeks at your public Address of Record.



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