A MESSAGE FROM THE PRESIDENT OF THE BOARD:

Recently I was honored to be elected President of the Medical Board of California. My term in office began the same day the Board assumed its new name. I believe this will be a dynamic year! Our members have a wide variety of backgrounds and expertise, and I will be relying on their advice and consent throughout my term as President.

I have established several committees to assist in the business of the Board: The Executive Committee, made up of the Division officers and others will meet at regular intervals to recommend policies for adoption by the full Board. A Legislative Committee will keep close tabs on bills in the Legislature, and will meet with key legislators. We hope to be able to significantly affect the language and impact of bills before they are passed.

A Public Information Committee has been appointed to assure that California physicians and consumers are informed about the Board and aware of our role in public protection.

Priorities for the coming year include consolidating the improvements made in the Division of Medical Quality’s Enforcement Program over the past couple of years. We also will be evaluating the role of the Division of Allied Health Professions to assure it is effective in its relationship with non-physician health occupations. The relationship of the Board to the Administrative Branch of the state government also will be studied, with an eye to improving our effectiveness.

The Division of Licensing will continue its direction of assuring fair treatment to all applicants for the physician and surgeon license, while assuring that all licensees have a solid medical education. We will be pursuing the concept of requiring new applicants to complete additional post graduate (i.e. residency) training before becoming fully licensed.

I would like to invite each of you to let us know, in writing or by telephone, if there are issues or problems you believe the Board should address. I also would like to invite you to read the special section of the Action Report on pages 3-4 to learn about what the Board does, and a little of its history.

Sincerely,

J. ALFRED RIDER, M.D.
PRESIDENT

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DISCIPLINARY ACTIONS
August 1, 1989 to November 30, 1989

ADEN, Gary C., M.D. (C-026644) - San Diego, CA
226, 2221, 2234 B&P Code
Bizarre sexual misconduct with patients. Failed to comply with Board order compelling psychiatric exam. Revoked. Default. October 9, 1989

BELCHER, Jonathan K., M.D. (G-024460) - Los Gatos, CA
2234(a), 2238 B&P Code
Stipulated Decision. Violated statutes regulating drugs. After prior warning, failed to clean up office fully of old, outdated, expired prescription drugs, some kept in old containers or spice jars and misbranded. Revoked, stayed, 3 years probation on terms and conditions. September 14, 1989

BROWN, Stuart, M.D. (C-021461) La Jolla, CA
2234(b), 2238 B&P Code
Stipulated Decision. Sexual misconduct with patients constituting gross negligence. Revoked. September 21, 1989

BURMEISTER, Edward A., M.D. (A-038384) - Modesto, CA
2234(a), (e), 2238, 2264 B&P Code
Aided and abetted unlawful practice; violated statutes regulating controlled substances by pre-signing 60 to 100 blank prescription forms for prescribing by his nurse during his absence. Revoked. Default. September 14, 1989

DeLILLY, Mayo R., M.D. (A-014103) - Penn Valley, CA
725, 2234(b), (c), (d), 2242 B&P Code
Excessive prescribing of narcotics and other controlled substances without good faith prior examination and medical indication, constituting gross negligence, incompetence and repeated negligent acts. Revoked. Default. August 24, 1989

GERBER, Michael L., M.D. (C-035438) - Mill Valley, CA
725, 2234(b), (c), (d) B&P Code; 1701.1 H&S Code
Orthomolecular practitioner grossly negligent and incompetent in treating cancer patient with ineffective, unproven therapy, including Hoxey's method barred by cancer laws. Also, grossly negligent and incompetent in treating chronic otitis media (middle ear infection) of 3 year old twin boys with coffee enemas twice daily, and 120,000 units of vitamin A daily for a week and then 70,000 units of vitamin A per day for weeks. Revoked. June 20, 1984
JUDICIAL REVIEW COMPLETED

GRAHL, Arthur J., M.D. (G-018894) - New York, NY
2234 B&P Code
Disciplined by New York Medical Board for conviction for prescribing controlled substances not in good faith and not in the course of regular professional practice; and for other causes. Revoked by default in California. November 13, 1989

HAW, Dante L., M.D. (A-039880) - North Hollywood, CA
2238(a) B&P Code

JARET, Leroy, M.D. (G-018199) - San Diego, CA
726, 2234(b) B&P Code
Sexual misconduct and gross negligence in engaging in sexual relationship with patient under psychoanalysis. Revoked, stayed, 7 years probation on terms and conditions, including 60 days suspension. November 6, 1989

LEIBOLD, Werner, M.D. (A-025223) - Canbyville, OR
2305 B&P Code

MARMET, Joseph, M.D. (A-023134) - Beverly Hills, CA
Failed to comply with several requirements of prior probation, under extenuating circumstances. Revoked, stayed, 5 years probation on terms and conditions. November 2, 1989

McINTOSH, Abraham, M.D. (C-017869) - Sacramento, CA
JUDICIAL REVIEW COMPLETED

MILLER, Deborah L., M.D. (A-021648) - La Puente, CA

This case was reported in the May 1986 Action Report. Judicial review was filed. The court reversed several violations and ordered reconsideration of the penalty. 30 day suspension, stayed, 2 years probation on terms and conditions. September 15, 1989
JUDICIAL REVIEW COMPLETED

MIRACLE, Max Vernon, M.D. (A-018031) - Troutdale, OR
Disciplined by Oregon Medical Board for inappropriate prescribing of Ritalin to hyperactive pupils without examination and independent evaluation. Revoked. Default. October 13, 1989

MONTESINO, Juan Antonio, M.D. (G-058893) - Enna, CA
2234(b) B&P Code
Stipulated Decision. Gross negligence in treating infant with rickets. Revoked, stayed, 3 years probation on terms and conditions. October 2, 1989

MOSLER, Frank, M.D. (A-019694) - Van Nuys, CA
2234(b) 2240 B&P Code
Stipulated Decision. Gross negligence in administering hyperalimentation and DMSO by injection for treatment of atherosclerosis and a gangrenous foot. Repeatedly authorized unlicensed individuals to administer intravenous hyperalimentation. Revoked, stayed, 3 years probation on terms and conditions. September 5, 1989

PHELAN, Geoffrey Louis, M.D. (C-036207) - North Hollywood, CA
2234(b), (d) B&P Code
Gross negligence and incompetence in doing home delivery, lack of usual obstetrical procedures and after-care. One year suspension, stayed, 2 years probation on terms and conditions, including no obstetrics. September 1, 1987
JUDICIAL REVIEW COMPLETED

RAND, Jerry Neil, M.D. (G-025749) - Irvine, CA
821, 2239(a), 2240 B&P Code
Stipulated Decision. Mental or physical illness as a result of substance abuse impairing ability to practice safely; intoxicated while attending patient.

Copies of complete disciplinary Decisions and Accusations (Statements of Charges) may be ordered by writing to:
MBC Enforcement
1426 Howe Avenue
Sacramento, CA 95825-3236
For quick, orderly processing, please send your request by letter and enclose a check based on $2.00 for each copy of a decision or an accusation, give complete name and license number of doctor, as listed here. PLEASE, NO TELEPHONE REQUESTS.
CALIFORNIA - THE MEDICAL MECCA

...A brief history of the Medical Board of California

Shortly after the gold rush of 1849 began to ebb, a new rush of settlers began flooding into California -- this time to the southern part of the state. Because of its year-round sunshine, the state became a mecca for invalids, particularly those with tuberculosis and other respiratory problems. In the period just after the Civil War, fewer than 40,000 people resided south of the Tehachapi mountains. By 1880 they numbered 76,000, and twenty years later, 325,000.

Doctors of every cult and persuasion flocked on the heels of the ailing immigrants. One new arrival in 1888 found 165 doctors listed in the Los Angeles city directory, for a population of 70,000. Colonies in Anaheim, Ojai and elsewhere advertised aggressively for patients seeking a cure.

By the mid 1870's, conservatively trained, college educated physicians were dismayed by the proliferation of practitioners of every imaginable system of healing. Cults, fads, quackery, magnetism, herbs, patent medicines, hot springs, mud baths, "specifics" and miraculous boxes competed for advertising space in newspapers, business directories and barn roofs.

In 1876, the California Legislature responded to the public and professional concern by passing the state's first medical practice act. The new law provided for the California State Medical Society to appoint a board of examiners consisting of seven members. The board reviewed the credentials of physicians and determined whether they qualified for licensure. Candidates who had not graduated from a medical school or been licensed in another state were required to pass an examination.

Since the Society was located in San Francisco, four of the seven original members were from that city, and one each were from Sacramento, Colusa [1] and Los Angeles. For reasons of expense, meetings were held only in San Francisco although examinations were conducted in Sacramento, Chico and Los Angeles as well as San Francisco.

TURF WARS AND EMPTY COFFERS

For much of the first quarter century of its existence, the Board was beset by legal controversy, primarily stemming from conflicts among allopathic, homeopathic, osteopathic and chiropractic adherants. Until the initiative acts of 1922 created separate boards for osteopaths and chiropractors, the board included members of those professions at various times. In 1878, separate boards of examiners in "Eclectic Medicine" and homeopathy were created by the Legislature. By 1901, when a new medical practice act consolidated them, the three boards had licensed 8,535 practitioners.

A peculiarity of early practice acts was that any surplus board funds reverted to the general fund of the state at the end of each year. The $5 fee for a license actually was enough to create small surpluses; however, as each year began, the board was penniless and could not conduct any business. Particularly hard-hit were efforts to enforce the law against unlicensed, incompetent or dangerous practitioners.

The 1901 act required all applicants to pass an examination, for which the fee was $20. This large fee enabled the board to pay its member $2,400 per year, and to hire an attorney and clerical staff. However, the year-end fund balance still reverted to the general fund.

In the early years of this century, California, along with the rest of the country, focused its concern on the quality of medical education. Various lawsuits questioned the legality of the board itself, its treatment of eclectic and homoeopathic schools, and the objectivity of its examinations.

A 1904 ruling of the California Supreme Court upheld the Medical Practice Act of 1901, prompting the San Francisco Chronicle to editorialize:

The object of the law is clearly to protect the public from being preyed upon by a class of unscrupulous professional charlatans whose knowledge of medicine and surgery is the most sham. If there is any fault to be found with the law in its present form, it is because its terms are not sufficiently stringent. But it is clear that the standard of efficiency exacted of practitioners the better it will be for the medical profession and the public.

EXAMINATIONS AND SCANDALS

The examinations of the period were in essay form, with board members writing the questions. One early critic, Peter Redmondino, described a proctor at one examination:

He would charge down, to and fro, like a stamping Apache waving his old blanket, circling among the students employed at their desk; would peek over their shoulders, apparently to familiarize himself with their handwriting, and generally comport himself in the most disturbing manner, as if he were a rustic bucolic judge at a Kansas cattle fair moving around the exhibited steers.

Questions on the 1902 examination led to a legal shootout between the board member who wrote the pathology section and representatives of several colleges with low pass rates. When the September 1902 examination included a question on "Hanoi's Cirrhosis" one college president publicly objected, claiming he had never heard of Hanoi and that his name did not appear in current medical literature. The author of the question and another Board member alleged their critic was "an illegal practitioner, who formerly wore stripes at San Quentin." The two board members were promptly sued for criminal libel.

NEW LAWS -- NEW LAWSUITS

Amendments to the practice act in 1907 increased membership on the board from seven to eleven, and switched appointing authority from the medical societies to the Governor. The board received authority to set fees and staff salaries, and to approve medical schools. However, county medical societies found it necessary to assist the board in funding investigations and prosecutions.

One position was cut from the board in 1913, and terms were set at four years. Financially, things improved, as did the board's effectiveness at both licensing and monitoring medical quality. Control of funds was given to the board, and surpluses no longer reverted to the state. However, the 1913 amendments led to a suit by a drugless practitioner who had been prosecuted by the board, and sought to have the act declared unconstitutional.

An annual registration fee of $2 was imposed by the Board in 1917. It began publishing a physician directory in 1916, at a charge of $2.50 per copy, and also published quarterly and annual reports. Staffing gradually increased, and by 1920 the "Enforcement Department" included a chief counsel and associate counsel, three special prosecutors, two special agents and two assistants, and regional attorneys in northern and southern California.

This was also the period when the board began licensing other health occupations including chiropractors, [lay] midwives and drugless practitioners. The board also was beginning to wrestle with the problem of evaluating the education of physicians trained outside California. By 1920, the board had reciprocity agreements with 25 other states. Agreements were reached with all 48 states and the U.S. territories by 1945.

Beginning in 1915, a College Investigating Committee reviewed the courses and facilities of all California medical schools every year. On its recommendation, the Board voted to approve or disapprove, or to set requirements for attaining approval. The committee evaluated instructional and laboratory facilities, libraries, clinical facilities, credentials and faculty appointments.
MEDICAL MECCA
Continued from Page 3

of instructors, and overall organization. Ongoing weaknesses in corporation law made it easy for diploma mills to appear virtually overnight in California. Probably the most notorious, Pacific Medical College of Los Angeles was never approved by the board, but thousands of its "diplomas" were issued. Even after Pacific folded under threat of prosecution for fraud, its diplomas continued to be sold by a diploma mill ring in Missouri. The board continued to fight such operations well into the 1930's, although after 1925 the board had the power to revoke a license procured through fraud. Legislation in 1928 and 1931 tightened the requirements for incorporation of colleges. This effectively ended the proliferation of diploma mills in California.

As the diploma mills were waning, the board faced increasing challenges in another area of credentialing. Following both world wars, there were dramatic increases in the number of physicians coming to California from other nations. Many had few or no documents to establish their professional credentials. In 1933 the board adopted the recommended national standards of the Federation of State Medical Boards for medical education. The American Medical Association's 1936 proposal to require a one year Internship of foreign medical graduates also was embraced by the board.

Quackery was not yet dead in California, and during the 1920's at least one newspaper featured exposes of medical frauds. They invited readers to share their "own horror stories" in an effort to expose the quacks. A particular target of board enforcement were "beauty specialists" who performed illegal face lifts, paraffin injections and acid face peels, often with deadly outcomes. These activities led to passage of legislation to regulate cosmetologists.

Perhaps the most bizarre quacks of the 1920's, however, were the waxwork museums of anatomy. Offering free admission, these exhibits featured a pretentious display of life-sized wax figures depicting alarming disease conditions. In a typical case investigated by the board, a "specialist" agreed for a fee of $12.50 to perform a varecocele operation in his office. During the surgery, the specialist's collaborator searched the victim's clothing and found his bankbook. The quack then threatened to let the victim bleed to death if he did not sign over a check for most of the bank balance. The last such waxwork was closed down in the 1930's.

Following World War II, the board gained responsibility for licensing physical therapists, opticians and psychologists, while the chiropody licensure was renamed podiatry and placed under an examining committee within the board's jurisdiction. In 1965, five District Review Committees of five physicians each were created to assist the board in hearing disciplinary cases. The common grounds for discipline included improper use or prescription of narcotics, Intemperance, illegal abortions and unlicensed practice of medicine.

MICRA AND THE BOARD OF MEDICAL QUALITY ASSURANCE

Perhaps the most dramatic change in the board's history occurred with passage of the Medical Injury Compensation Reform Act (MICRA) in 1975. In addition to revolutionizing the process of malpractice litigation, MICRA restructured the board. Now known as the Board of Medical Quality Assurance, it was expanded from eleven members to nineteen, seven of whom were public members. The board was split into three semi-autonomous divisions, responsible for physician licensing, physician discipline, and oversight of seven allied health examining committees (including physician assistants, acupuncturists, hearing aid dispensers, speech pathologists and audiologists, podiatrists, psychologists and physical therapists).

The District Review Committees were replaced by 14 Medical Quality Review Committees around the state. Their membership ranges from ten to twenty, including public members and licensees in other health professions.

MICRA also imposed requirements that courts, attorneys, insurers and physicians notify the board whenever a malpractice suit results in a settlement or judgment of $3,000 or more (since increased to $30,000 or more). Also, the bill requires hospitals (and more recently other health facilities) to report disciplinary actions against staff physicians to the board.

In the fourteen years since passage of MICRA, the board has created a Diversion Program for physicians with substance abuse or health problems which affect their ability to practice safely. The Legislature has added a Respiratory Care Examining Committee to the Division of Allied Health Professions, and has renamed the Acupuncture Advisory Committee an examining committee, and the Podiatry and Psychology Committees to boards under the BMA umbrella. Finally, in 1990, the board itself will become the Medical Board of California.

Major concerns of the board since MICRA have included the scandal over medical education in the Caribbean, and the painful struggle over establishing the credentials of foreign-trained physicians who, for political reasons, are unable to document their education.

Written by Linda A. McCready, Editor, based on a much longer history of the Board compiled in 1976, and updated later by Mrs. Billie Harris.

Special Insert for Psychotherapists:
New Law Requires You to Inform Certain Patients who are Victims of Sex Abuse

Under a law which took effect January 1, 1990 any physician or other person who provides psychotherapy must provide certain patients with the enclosed brochure.

The patients affected are those who have been the victims of sexual abuse by a former psychotherapist. If you become aware of such prior abuse, regardless of when it happened, or where, you must give the patient a copy of the brochure.

We have printed this copy so that it can be removed and reproduced. To do so, first remove the two center sections of the Action Report, (pages 5 through 12). Cut along the main fold, but leave the pages in the same order. Refold along the short fold to form a booklet 6-1/4" x 9-3/4".

Preprinted copies of the brochure also are available in bundles of 25 at $5.00 per bundle. To order, please write to the following address, and enclose a check payable to Office of Procurement. The price includes postage.

Office of Procurement
Publications Section
P. O. Box 1015
North Highlands, CA 95660

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ERRATUM:
In our last issue we printed an error in the article The Danger of Drug Side Effects in Patients With Multiple Diseases. The correct sentence should read "Diabetics may develop hyperkalemia if they are prescribed potassium-sparing diuretics." Our earlier version read calcium-sparing.

Our apologies to Dr. Maronde and Mr. Thompson, the authors.

Do we have your current address?
PROFESSIONAL THERAPY NEVER INCLUDES SEX!

This brochure was developed pursuant to Senate Bill 1004 (Senator Diane Watson). Under this law, psychotherapists are required to provide a copy to any patient who has been the victim of sexual exploitation by another psychotherapist.

STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS

George Deukmejian, Governor
Shirley Chilton
Secretary, State and Consumer Services Agency
Michael A. Kelley
Director, Department of Consumer Affairs
John C. Langren, Jr.
Deputy Director, Division of Consumer Services
1990

PROFESSIONAL THERAPY NEVER INCLUDES SEX!

Acknowledgements

Special recognition must go to the efforts and work of the members of the Senate Task Force on Psychotherapist and Patient Sexual Relations, and to Senator Diane Watson whose work created the task force.

Many thanks to all of the people in the numerous agencies that helped make this booklet possible: Department of Justice, Office of Criminal Justice and Planning, Board of Behavioral Science Examiners, Board of Psychology, Medical Board of California, California State Psychological Association, California Medical Association, California Association of Marriage and Family Therapists, California Psychiatric Association, Gil & Associates, San Francisco Women Against Rape, Sacramento County District Attorney's Office, and University of California at Davis Medical Center's Child Protection Center.

Also, appreciation is extended to the Minnesota Public Education Work Group of the Task Force on Sexual Exploitation by Counselors and Therapists who published the booklet It's Never OK: A Handbook for Victims and Victim Advocates on Sexual Exploitation by Counselors and Therapists.

Printed and distributed by:
Medical Board of California
1426 Howe Avenue
Sacramento, CA 95825
(916) 924-2611
Introduction

Therapists who encourage, ask for, or permit sexual involvement with their clients are exploiting them. Professional therapy never includes sex. It also never includes any other kind of sexual contact or behavior. All therapists are trained and educated to know that this kind of behavior is unethical, against the law, and can be harmful to the client.

By the nature of their profession, therapists are trusted and respected, and it is common for clients to admire and feel attracted to them. However, a therapist who accepts or encourages these normal feelings in a sexual way -- or tells a client that sexual involvement is part of therapy -- is using the trusted therapy relationship to take advantage of the client. And once sexual involvement begins, therapy for the client ends. The original issues that brought the client to therapy are postponed, neglected, and sometimes lost.

He started to tell me his troubles and the burden was heavy. Then he made me feel like I had to comfort him, to have sex with him. I was the one who needed help. I have more problems now than when I started.

Many people who are victims of this kind of abusive behavior by therapists suffer harmful long-lasting emotional and psychological effects. Family life and friendships are often disrupted, sometimes ruined.

California's lawmakers, licensing boards, professional associations, and ethical therapists want this kind of behavior stopped. This booklet was developed to help victims of psychotherapist sexual exploitation. It outlines their rights and options for reporting what happened. It also defines psychotherapist sexual exploitation, gives some warning signs of unprofessional behavior, presents a client's Bill of Rights, and answers some frequently asked questions.

Definitions

According to California laws:
- "Any kind of sexual contact, asking for sexual contact, or sexual misconduct by a psychotherapist with a client is illegal, as well as unethical" (Business and Professions Code sections 726 and 4982(k)).
- "Sexual contact" means the touching of an intimate part (sexual organ, anus, buttocks, groin, or breast) of another person. "Touching" means physical contact with another person either through the person's clothes or directly with the person's skin (Business and Profession Code section 728).

Sexual contact can include sexual intercourse, fondling, and any other kind of sexual touching. Sexual misconduct covers an even broader range, such as nudity, kissing, spanking, and sexual suggestions or innuendos. This kind of sexual behavior by a therapist with a client is sexual exploitation. It is unethical, unprofessional, and illegal.

Throughout this booklet, the general terms therapist, therapy, and client will be used.
Therapist refers to anyone who is licensed to practice psychotherapy, or is training to become licensed, and includes:
- psychiatrists (physicians practicing psychotherapy)
- psychologists
- registered psychologists
- psychological interns
- psychological assistants
- licensed clinical social workers
- registered associate clinical social workers
- licensed marriage, family and child counselors
- marriage, family and child counselors registered interns and trainees
Client refers to anyone seeking therapy or counseling. Therapy includes any type of mental health counseling from the licensed therapists listed above.

Warning signs

In some sexual abuse or exploitation cases other inappropriate behavior comes first. While it may be subtle or confusing, it usually feels uncomfortable to the client. Some clues or warning signs are:
- telling sexual jokes or stories
- "making eyes at" or giving seductive looks to the client
- discussing the therapist's sex life or relationships
- sitting too close or lying next to the client.
Another warning sign is when therapists give clients "special" treatment, such as:
- inviting a client to lunch, dinner, or other social activities
- dating
- changing any of the office's normal business practices (for example, scheduling late appointments so no one is around, having sessions away from the office, etc.)
- confiding in a client (for example, about his or her love life, work problems, etc.)
- relying on a client for personal and emotional support
- giving or receiving significant gifts
- providing or using alcohol (or drugs) during sessions.

Signs of inappropriate behavior and misuse of power include:
- hiring a client to do work for the therapist, or bartering goods or services to pay for therapy
- any violation of the client's rights as a consumer (see Client Bill of Rights, page 13).

Therapy is meant to be a guided learning experience, where therapists help clients find their own answers and feel better about themselves and their lives. A client should never feel intimidated or threatened by a therapist's behavior.

If you are experiencing any of these warning signs, trust your own feelings. Talk to the therapist's supervisor, consult a different therapist, or call any of the agencies in Where to Start (below) to check on the therapist's behavior. You may want to find another therapist.

What if it's me?

If you have been or are a victim of sexual abuse or exploitation by your therapist, you may feel very confused. Many victims feel:
- Guilty and responsible -- even though it's the therapist's responsibility to keep sexual behavior out of therapy
- Mixed feelings about the therapist: protective, angry, love, betrayed
- Isolated and empty
- Distraughtful of others or their own feelings
- Fear that no one will believe them, understand what happened, or that someone will find out
- Numbness or nothing, have nightmares, obsessive thoughts, depression, or suicidal thoughts
- Confused about dependency, control, and power
You may feel overwhelmed in trying to decide what to do or whom to tell. Facing what happened may be painful, but it is the first major step in healing and recovering from the experience. You may have both positive and negative feelings at the same time, such as starting to feel personal control, being afraid of what may happen in the future, remembering the experience, and feeling relieved the sexual relations are over.

The second step in the healing process is to decide what YOU want to do next. Try to be open-minded about your options. Please remember: It does not matter if you, the client, started or wanted the sexual involvement with the therapist. Therapists should never use the therapy relationship for their own sexual gain. This is sexual exploitation and it is illegal.

WHERE TO START

You may need to talk to someone who will understand what you're going through. You may want to get information on whether the therapist's behavior was unethical and/or illegal. You may want to find out what you can do about it. There are several places to get help:

- Licensing Boards. In the Department of Consumer Affairs, three boards license therapists. They can give general information on appropriate behavior for therapists and your rights for reporting what happened, as well as how to file a complaint with them. See page 8 for addresses and phone numbers.
- Sexual Assault/Crisis Centers. These centers have staff trained in all kinds of sexual abuse and exploitation. They can give general information on appropriate behavior for therapists, crisis services, your rights for reporting what happened, and names of therapists and support groups that may be helpful.

Numerous centers are located throughout California. Look in your telephone book under sexual assault center, or call 1-800-952-5558 for the center nearest you.
- Professional Associations. Each licensed therapy profession has at least one
 professional association. Associations can give general information on appropriate behavior for therapists, your rights for reporting what happened, how to file a complaint with them, and names of therapists that may be helpful. See page 11 for addresses and phone numbers.

WHAT YOU CAN DO -- OPTIONS FOR ACTION

Reporting options and options for help

You have several ways of reporting what happened and dealing with your situation. The process of deciding what you would like to do may be confusing. Take the time to carefully explore all of your rights and options. You always have the options of waiting for a while or taking no action.

Something that may help you is to think about your situation and decide what your goals are. Perhaps you want to prevent the therapist from hurting other clients. You may want to receive monetary compensation for the damage you have suffered and to help pay for future therapy sessions. You may want to make it known that sexual exploitation is always wrong. You may want to do all of these.

Remember: You have the right to decide what is best for you.

I trusted and believed in him. I had always felt safe with him, which was something I've never felt before. He told me we had to keep our relationship secret because of what it might do. I've lied to everyone about us. I'm barely talking to my family and I have no friends. I hate living like this.

Reporting options

There are four different ways you can report a therapist's unethical and illegal behavior:
- Administrative action -- filing a complaint with the therapist's licensing board.
- Criminal action -- filing a complaint with local law enforcement.
- Civil action -- filing a civil lawsuit.
- Professional association action -- filing a complaint with the professional association's ethics committee.

Each reporting option has its strong points and weak points. You may choose any or all of these options.

Administrative action

The three licensing boards that license and regulate therapists are:

Medical Board of California
1430 Howe Avenue, Sacramento, CA 95825, (916) 920-6013

This board licenses and regulates physicians, including psychiatrists.

Board of Psychology
1430 Howe Avenue, Sacramento, CA 95825, (916) 920-6341

This board licenses and regulates psychologists, psychology assistants, and registered psychologists.

Board of Behavioral Science Examiners
1021 O Street, Sacramento, CA 95814, (916) 327-2224

This board licenses and regulates licensed marriage, family and child counselors; licensed clinical social workers; marriage, family and child counselor registered interns; and registered associate clinical social workers.

The purpose of these licensing boards is to protect the health, safety, and welfare of consumers. Licensing boards have the power to discipline therapists by using the administrative law process. Depending on the violation, the board can suspend or revoke a license. When a license is revoked, the therapist cannot legally practice, and therefore cannot harm other clients.

There is no time limit for reporting a sexual exploitation case to a licensing board. For example, if you were sexually exploited by a therapist years ago, you can still report the therapist to the licensing board. Of course, the earlier you report unethical and illegal behavior, the better.

How the complaint process works

The licensing boards can give you information about the complaint filing process in detail, as well as discuss your situation with you. To file a complaint, you can either request a complaint form or write a letter. Be sure to include the following information: your name, address and phone number; the name, address and phone number of the therapist; a description of your complaint; and copies of any documentation if available (for example, letters, bill receipts, and pictures).

Each complaint is evaluated, and you will be notified of the board's decision to start a disciplinary action. Most likely both you and the therapist will be interviewed separately by an investigator.

Some cases are settled by a "stipulated agreement," where the therapist admits to the violation(s) and accepts the disciplinary action. Other cases go on to a hearing with an administrative law judge. The judge makes a decision about the case. The board then decides whether to accept this decision or issue its own.

The board makes every attempt to protect your name from any public documents. However, because hearings are open to the public, there is a possibility that confidentiality will be lost if a case goes to a hearing. Generally, press coverage only occurs if the client or therapist is well known. If you are concerned about this, discuss your concern with the licensing board investigator.

The disciplinary process may take about two years from the time a complaint is received to the time a final decision is made. Please keep in mind that you cannot receive monetary compensation from the therapist by using this option, but you may affect the therapist's ability to practice.
Criminal Action

California lawmakers want everyone to know that sexual exploitation of clients by therapists is wrong. A new law makes it a crime for a therapist to have sexual contact with a client (SB 1004, Chapter 795, Statutes of 1989, Business and Professions Code section 729). For a first offense, an offender would be charged with a misdemeanor. Second and following offenses may be a misdemeanor or a felony, and an offender may be fined up to $1,000 and/or sentenced to a county jail for up to one year, or fined up to $5,000 and/or sentenced to state prison for up to one year.

This law applies to two kinds of situations:
- the therapist has sexual contact with a client during therapy, or
- the therapist ends therapy to start having sexual contact with a client.

The law does not apply if a therapist referred the client to a different therapist who was recommended by an objective, third-party therapist. In other words, a therapist can't refer the client to a colleague or friend.

To file a criminal complaint against a therapist:
- Contact your local police. Most larger cities have special sexual assault units in their police force to handle these kinds of complaints.
- Contact your local Victim/Witness Assistance Program. They may be able to help you through the legal process. Look in your local phone book under "district attorney," or call 1-800-VICTIMS (842-8467) for your local program.

Once a complaint is filed, the police will investigate it and give the results to the district attorney's office. The district attorney's office will decide whether there is enough evidence to file criminal charges.

Civil Action

Generally, civil lawsuits are filed to seek money for damages or injuries to a client. For a sexual exploitation case, a client may want to sue the therapist for injuries suffered and for the cost of future therapy sessions. Under California law, you may file a lawsuit against either the therapist or the therapist's employer, if you believe the employer knew or should have known about the therapist's behavior. You may also sue a local or state public mental health agency where the therapist works, but you must first file a complaint with the agency within one year of the sexual exploitation.

If you think you may want to file a lawsuit, it is important to consult an attorney as soon as possible, since there are different time limits for filing civil lawsuits. Most civil lawsuits must be filed within two years after the sexual exploitation.

Once a legal suit is filed, there is the possibility of press coverage, especially if the client or therapist is well known. While many cases are settled out of court, some do go to trial, and it can take years before your case is actually tried.

Finding An Attorney

Take some time to choose an attorney to represent you. You may need to interview several attorneys. Here are some points to consider:
- You may wish to obtain a list of attorneys from the State Bar or your local County Bar Associations' referral services. Also, check with your local legal-aid society for legal assistance. Look in the yellow pages under "attorney." While some attorneys are willing to wait to be paid based on the outcome of the suit (contingency basis), some will not.
- Make sure the attorney has done civil litigation work in the area of medical and/or psychological malpractice.

Professional Association Action

Many therapists join professional associations, organizations that provide education and guidance to people in a certain profession. Each association has its own ethics guidelines, and all clearly state that sexual involvement with clients is unacceptable conduct and unethical behavior.

If your therapist is a member of a professional association, you may file a formal complaint with the association. After investigating the complaint, the association may recommend certain disciplinary actions or may remove the therapist from its membership. Removing a therapist from the association will let other members know about the person's unethical behavior, but it will not keep the therapist from practicing. Only a licensing board or court action can do that.

Each association has different ways of filing complaints. Call or write to the appropriate association for this information. To find out which, if any, association the therapist belongs to, call the therapist's office and request this information, have a friend call the office or therapist for you, or check with the different associations.

<table>
<thead>
<tr>
<th>Profession</th>
<th>Association Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychiatrist, physician</td>
<td>California Medical Association</td>
</tr>
<tr>
<td></td>
<td>221 Main Street, San Francisco, CA 94105, (415) 541-0900</td>
</tr>
<tr>
<td></td>
<td>California Psychiatric Association</td>
</tr>
<tr>
<td></td>
<td>1100 N Street, Suite 2-E, Sacramento, CA 95814, (916) 442-5196</td>
</tr>
<tr>
<td>Licensed Psychologist</td>
<td>California State Psychological Association</td>
</tr>
<tr>
<td></td>
<td>1010 11th Street, Ste 202, Sacramento, CA 95814, (916) 442-0652</td>
</tr>
<tr>
<td>Licensed Clinical Social Workers</td>
<td>National Association of Social Workers</td>
</tr>
<tr>
<td></td>
<td>1016 23rd Street, Sacramento, CA 95816, (916) 442-4555</td>
</tr>
<tr>
<td>Licensed Marriage, Family and Child Counselors</td>
<td>Society of Clinical Social Work</td>
</tr>
<tr>
<td></td>
<td>701 Howe Ave., Ste H-59, Sacramento, CA 95825, (916) 923-0255</td>
</tr>
<tr>
<td></td>
<td>California Association of Marriage &amp; Family Therapists</td>
</tr>
<tr>
<td></td>
<td>3465 Camino Del Rio South, Suite 550, San Diego, CA 92108, (619) 280-0505</td>
</tr>
</tbody>
</table>
Options for help

Individual and/or Group Therapy

For many who have been sexually exploited by therapists, it's hard to see another therapist for help and support. However, for most, the issues that brought them to therapy were never worked on or resolved, and the sexual exploitation created even more issues to handle. Therapy may be an important tool in your healing process. Many therapists also offer group therapy sessions where you can meet people who have had similar experiences.

Plan on interviewing several therapists. Be sure you feel comfortable with the therapist, and make sure he or she answers all your questions. Use the Client Bill of Rights as a guide. If you are unsure after one session, either consider a different therapist or set up a follow-up session to clarify your concerns. Do not feel pressured to stay with one therapist.

Finding a Therapist

Some ways of finding a therapist are:
- Ask someone you know who has been in therapy, feels good about the experience, and has changed in ways you consider positive.
- Call your local Sexual Assault Center (see page 7 for a telephone number) and ask if they can recommend some therapists. Many of these centers have developed referral lists of therapists who help victims of sexual exploitation or abuse.
- Call the professional associations and ask for some referrals to therapists who specialize in helping sexual abuse or exploitation victims.
- After getting several names, call the appropriate licensing board (see page 8) and ask if the therapists are licensed and if any disciplinary actions have been filed against them.

Self-help support groups

There is an informal network of self-help support groups throughout California. While there might not be a group specifically about sexual exploitation by therapists in your area, there may be more general ones on other kinds of sexual abuse. To find out if there are any in your area, call your local Sexual Assault Center (see page 7) or call the California Self-Help Center at 1-800-222-LINK.

Therapy mediation sessions

Some therapists helping victims of sexual exploitation may recommend you try a therapy mediation session. This type of mediation means that you and your present therapist meet face-to-face with your past therapist (who sexually exploited you) and a trained mediator(s). No attorneys are allowed. The purpose is to allow you and the past therapist to talk about what happened and how you're feeling about it. If you are interested, ask your present therapist for more information.

Frequently asked questions

Is it normal to feel attracted to your therapist?

Yes. It is normal to feel attracted to someone who is attentive, kind and caring. This is a common reaction towards someone who is helping you. However, all therapists are trained to be aware of this and to maintain a therapy relationship that is beneficial to the client.

What if I was the one who brought up having sex?

That doesn't matter. The therapist is the one who is responsible for keeping sexual exploitation out of therapy.

Am I a victim if I had sex with my therapist?

Yes. California law states that sexual contact and sexual misconduct by a therapist is illegal. Therefore, you are a victim of illegal behavior and you have ways of reporting it.

Does this happen a lot?

A recent study revealed that probably less than 10% of all therapists have had sexual contact with their clients. However, 80% of the sexually exploiting therapists have exploited more than one client. In other words, if a therapist is sexually exploiting a client, chances are he or she has done so before.

Why do some therapists sexually exploit their clients?

One therapist might say he thought the sex was harmless or another therapist might say she was lonely at the time, but no reason is acceptable for using the trusted, therapeutic relationship for their own sexual gain. All therapists know this is against the law.

Why do I feel scared or confused about reporting the therapist?

Feelings of confusion, protectiveness, shame or guilt are especially common in this type of situation. However, it is important for you to get as much information as possible about your options. Keep in mind that you are in control and can choose what to do.

How can I prevent this from happening again?

1. Acknowledge your right to be free from sexual exploitation.
2. When choosing a therapist, check with the licensing board (see page 8) to see if the therapist is licensed, and if the license is under suspension or probation.
3. Question any action that may seem sexual in nature.
4. Remember that while feelings of attraction are natural, therapy is supposed to be a place to explore and resolve feelings without having to act them out.
5. Feel free to end a relationship that no longer seems safe.
You have the right to:
- receive respectful treatment that will be helpful to you.
- refuse a particular type of treatment or end treatment without obligation or harassment.
- a safe environment, free from sexual, physical, and emotional abuse.
- report unethical and illegal behavior by a therapist (see Reporting Options, page 8).
- ask questions about your therapy.
- request and receive full information about the therapist’s professional capabilities, including licensure, education, training, experience, professional association membership, specialization, and limitations.
- have written information about fees, method of payment, insurance reimbursement, number of sessions, substitutions (in cases of vacation and emergencies), and cancellation policies before beginning therapy.
- refuse electronic recording, but you may request it if you wish.
- refuse to answer any question or disclose any information you choose not to reveal.
- know the limits of confidentiality and the circumstances when a therapist is legally required to disclose information to others.
- know if there are supervisors, consultants, students or others with whom your therapist will discuss your case.
- request and, in most cases, receive a summary of your file including the diagnosis, your progress, and type of treatment.
- request the transfer of a copy of your file to any therapist or agency you choose.
- receive a second opinion at any time about your therapy or therapist’s methods.
- request that the therapist inform you of your progress.

For additional copies, please write to:
Office of Procurement
Publications Section
P.O. Box 1015
North Highlands, CA 95660

Price: $5.00 for a bundle of 25 copies.

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Once I told my therapist I didn’t want to see him anymore, I felt free. I’m beginning to feel better, stronger.
SELECTED MEDICAL BOARD STATISTICAL INFORMATION

SUMMARY OF PHYSICIAN AND ALLIED HEALTH DISCIPLINARY ACTIONS
Fiscal Years 1986 Through 1989

<table>
<thead>
<tr>
<th></th>
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</tr>
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<tbody>
<tr>
<td>Medical Educational Conferences</td>
<td>212</td>
<td>280</td>
<td>392</td>
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<tr>
<td>Referrals to Diversion Program</td>
<td>29</td>
<td>28</td>
<td>37</td>
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<tr>
<td>Petitions for Psychiatric Examination</td>
<td>9</td>
<td>9</td>
<td>8</td>
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<tr>
<td>Voluntary Psychiatric Examination</td>
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<td>-</td>
<td>12</td>
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<td>Petitions for Competency Examination</td>
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<tr>
<td>Voluntary Competency Examination</td>
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<td>-</td>
<td>33</td>
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<td>Accusations (statement of charges)</td>
<td>137</td>
<td>174</td>
<td>201</td>
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<tr>
<td>Statements of Issues (action to deny license)</td>
<td>23</td>
<td>12</td>
<td>19</td>
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<tr>
<td>Temporary Restraining Order</td>
<td>3</td>
<td>0</td>
<td>2</td>
</tr>
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**FINAL DISCIPLINARY ACTIONS:**

| License Revoked                          | 51      | 38      | 18      |
| License Surrendered Voluntarily           | 20      | 14      | 25      |
| Stayed Revocation with Suspension        | 18      | 25      | 19      |
| Stayed Revocation with Probation         | 55      | 49      | 22      |
| Other Discipline                         | 6       | 3       | 8       |
| License Application Denied               | 10      | 13      | 13      |
| Probationary License issued              | -       | -       | 5       |
| Decision on Petition for Penalty Relief  | -       | -       | 34      |

PHYSICIAN AND ALLIED HEALTH LICENSING ACTIVITY

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Physicians:</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Federation Licensing Exam</td>
<td>962</td>
<td>1,220</td>
<td>1,463</td>
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<tr>
<td>National Board Exam</td>
<td>2,978</td>
<td>2,694</td>
<td>2,984</td>
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<tr>
<td>Reciprocity with other State</td>
<td>124</td>
<td>171</td>
<td>138</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>4,064</td>
<td>4,085</td>
<td>4,595</td>
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<tr>
<td>Allied Health Professions</td>
<td>5,675</td>
<td>7,425</td>
<td>6,548</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>9,739</td>
<td>11,510</td>
<td>11,133</td>
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<table>
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<th>LICENSES IN EFFECT</th>
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<tr>
<td>Physician - Calif. Address</td>
<td>66,775</td>
<td>69,303</td>
<td>N/A</td>
</tr>
<tr>
<td>Physician - Out of State</td>
<td>24,471</td>
<td>26,160</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>91,246</td>
<td>95,463</td>
<td>95,766</td>
</tr>
<tr>
<td>Allied Health Professions</td>
<td>50,799</td>
<td>53,499</td>
<td>*56,500</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>142,045</td>
<td>148,962</td>
<td>*152,266</td>
</tr>
</tbody>
</table>

*Estimated - actual data not yet available for allied health professions

BOARD ELECTS 1990 OFFICERS

J. Alfred Rider, M.D., of Mill Valley was elected President of the medical Board of California on December 2, 1989. Dr. Rider succeeds Galal Gough, M.D., of Whittier, and commenced a one-year term on January 1, 1990.

Other 1990 officers are Vice President John Tsao, M.D., an endocrinologist, who practices in Torrance, and Secretary Jerome Unatin, M.D., an orthopedic surgeon, also of Torrance.

SENIOR MEMBER OF BOARD

Dr. Rider, who practices in San Francisco, served on the Board of Medical Examiners under then-Governor Ronald Reagan. He was reappointed to the board in October 1984 by Governor Deukmejian. Last year he was confirmed by the state Senate for a second term.

DIVISION OFFICERS

Each of the Board's three divisions also elected new officers in December.

The Division of Licensing elected C. Fredrick Milkie, M.D. as president. Dr. Milkie is an ophthalmologist practicing in Lynwood. John C. Lungren, M.D., vice president is a retired cardiologist who lives in Sacramento. Public member Audrey Melikian was elected division secretary. She lives in Fresno where she is in management of a trucking company.

Officers for the Division of Medical Quality are Rendel Levonian M.D., president, Frank Albino, a public member as vice president, and public member Theresa L. Claassen, secretary. Dr. Levonian is a general surgeon from Los Angeles, and a former Board president. Mr. Albino is an attorney from Los Angeles. Ms. Claassen, a social worker from San Francisco, has been involved in Red Cross and other organizations for a number of years.

Jacquelin Trestrail, M.D. is the president of the Division of Allied Health Professions for the second year. She is a radiologist from San Diego. Her vice president, Bruce Hasenkamp is a public member, and its Executive Director of the St. Francis Hospital Foundation in San Francisco. Division Secretary Madison Richardson, M.D. is a head and neck surgeon from Inglewood.
Continued from Page 2

Revoked, stayed, 5 years probation on terms and conditions, including close supervision by rehabilitation program. September 25, 1989

RATANASEN, Surabhan, M.D. (A-034765) - Fresno, CA
2234(e), 2236, 2261 B&P Code
Stipulated Decision. Conviction for "making false entries related to the practice of medicine." Revoked, stayed, 5 years probation on terms and conditions. September 25, 1989

RATANASEN, Surabhan, M.D. (A-034765) - Fresno, CA
2234(e), 2236, 2261 B&P Code
Stipulated Decision. Conviction for "making false entries related to the practice of medicine." Revoked, stayed, 5 years probation on terms and conditions. September 25, 1989

VIGURI, Juan, M.D. (A-034564) - San Ysidro, CA
726, 2234(e), 2236 B&P Code
Conviction for sexual molestation of a 16-year-old patient, resulting in a sentence of 3 years state prison. Revoked. September 27, 1989

WEISWASSER, Lawrence M., M.D. (C-023143) - Los Angeles, CA
490, 2234, 2236, 3527(b) B&P Code
Conviction for murder; sentenced to 25 years to life in state prison. Revoked. August 11, 1989

WONG, William Irving, M.D. (G-017814) - Carson City, NV
2234, 2305 B&P Code
Disciplined by Nevada Board for Substance Abuse and Mental Illness. Revoked. September 27, 1989

PHYSICAL THERAPIST DISCIPLINE

RICAFLRENT, Redentor, R.P.T. (TU-8605) - Los Angeles, CA
490, 2660(i), (j), (d) B&P Code
Stipulated Decision. Conviction for criminal conspiracy. The sentence included jail time. Revoked, stayed, 5 years probation on terms and conditions. October 23, 1989

ACUPUNCTURISTS DISCIPLINE

DOMINGO, Michael, M.D. (G-034771) - Poway, CA
2234(e), 2236 B&P Code
Stipulated Decision. Conviction for false Medi-Cal claim. Revoked, stayed, 5 years probation on terms and conditions. October 23, 1989

PODIATRISTS DISCIPLINE

GAROFALO, Frank J., D.P.M. (E-1174) - Canoga Park, CA
2234(a), (b), (c), (d) B&P Code
Assisted another podiatrist in violating podiatry laws by serving as his assistant surgeon in unnecessary surgeries, providing second opinion consultations, and supplying blank second opinion consultation forms bearing respondent's signature. August 28, 1989

Continued next page
Continued From Page 14 stamp which were misused by the other
DPM in his scheme to defraud insurance
 carriers. Revoked, stayed, 3 years probation on
terms and conditions. November 24, 1989

REHM, Kenneth, D.P.M. (E-2808) -
Fallbrook, CA
2305 B&P Code
Disciplined by Ohio Board for false renewal
application concealing discipline by Florida
Board. Revoked. November 17, 1989

PSYCHOLOGIST DISCIPLINE

FREELAND, Darryl, Ph.D. (PN-4857) -
Laguna Niguel, CA
230 B&P Code
Sex with patient and drinking alcohol during
therapy sessions both constitute acts of
gross negligence in psychology practice.
Revoked, stayed, 5 years probation on
terms and conditions, including 2 weeks
suspension. November 11, 1989

PHYSICIAN ASSISTANT 
DISCIPLINE

BULRICE, John, P.A. (PA-11791) -
Crestline, CA
2052 B&P Code; 1399.541(h), 1399.545(e) Title 16 Adminis-
trative Code
.... lI.JU'C,"U
decision. While practicing with­
out supervision of a physician, Physician
Assistant improperly a
patient. Revoked, stayed, 3 years probation on
terms and conditions. October 11, 1989

RESPIRATORY CARE 
PRACTITIONERS DISCIPLINE

CARTWRIGHT, David L., R.C.P. (RD-
3611) - San Diego, CA
3750(b) & P Code
Gained license through false application
concealing a conviction.
Revoked. Default. September 28, 1989

FOLEY, Donald M., R.C.P. (RC-3611) -
San Diego, CA
490, 3750 B&P Code
Conviction for sexually molesting 9 year old
step-daughter. Revoked.
September 28, 1989

JOHNSON, William B., R.C.P. (RCP-
8976) - Los Angeles, CA
490, 3750(d), 3752.2 B&P Code
Conviction for sexual battery causing inju-
ries. Revoked. October 9, 1989

MILLER, Jacqui H., R.C.P. (RP-9406) -
Berkeley, CA
3750(b) B&P Code
Procured license through false application
concealing a conviction. Revoked. Default.
September 1, 1989

PENNIX, William J., R.C.P. (RCP-1579) -
Los Angeles, CA
490, 3750(d) B&P Code
Procured license through false application
concealing a conviction. Revoked. Default.
August 25, 1989

POLZIEN, Joseph A., R.C.P. (RR-9235) -
Santa Ana, CA
3750(b) B&P Code
Procured license through false application
concealing a conviction. Revoked.
September 28, 1989

SAVEDRA, Chris, R.C.P. (RX-9997) -
Alhambra, CA
475, 3750, 3750.5 B&P Code
Stipulated Decision. Procured license
through false application concealing a
conviction. Revoked, stayed, 4 years probation on
terms and conditions. October 21, 1989

SINGLETON, Patrick A., R.C.P. (RCP-1605) -
La Puente, CA
475, 3750, 3752.5 B&P Code
Procured license through false application
concealing convictions. Revoked, stayed, 1 year probation on terms
and conditions. November 3, 1989

YOUNG, Guy Anthony, R.C.P. (RCP-9882) -
Benicia, CA
490, 3750(d) B&P Code
Procured license through false application
October 11, 1989

VOLUNTARY SURRENDER 
PHYSICIANS & SURGEONS

ANCIER, Stephen, M.D. (G-043304) -
Upper Montclair, NJ, November 3, 1989

CLAYTOR, Robert K., M.D. (A-027941) -
Ione, CA, August 7, 1989

HAUSER, Robert W., M.D. (G-03279) -
Angwin, CA, September 22, 1989

KAY, Starling E., M.D. (C-029189) -
Vallejo CA, November 6, 1989

ROTH, George J., M.D. (C-020780) - Mill
Valley, CA, September 22, 1989

STATEMENT OF ISSUES 
DECISIONS PHYSICIANS & SURGEONS

APPLICANT CASES
(Decisions affecting applicants following their re-
quests for hearing before an Administrative Law
Judge to challenge a license denial for cause.)

GONZALES, Manuel T. - Los Angeles, CA
490(a)(2), (c), 2221, 2261, 2234(a) B&P Code
Knowingly made false statements of mate-
rial facts required to be revealed in an appli-
cation for license. Also, was dishonest in misrepresen
ting the true nature of a document submitted to the Board.
August 16, 1989 - Application for license Denied

PETERSON, Charles K. - Los Angeles, CA
460(a), 2234(a), 2052, 2054 B&P Code
Submitted fraudulent and inconsistent represen-
tations regarding his medical education at CIFAS and UCE. Provided false infor-
mation in his application. Practiced or at-
tempted to practice without a license. Un-
lawfully held himself out as a physician. Failed to appear at his requested hearing.
November 27, 1989 - Application for license Denied
MAKING MEDI-CAL EASIER -
Legislature Proposes Better Billing Services, Incentives to Doctors

The California Legislature has directed the Department of Health Services and the Medical Board to find ways to assist physicians with Medi-Cal reimbursement problems, and to encourage more physicians to participate in the Medi-Cal Program. In a special appropriation message in the budget act, the Legislature ordered the Department to focus particularly on service in medically underserved areas.

EARLY IMPROVEMENTS

The Department, and the fiscal intermediary Electronic Data Systems (EDS), already have made some positive changes. Toll-free provider phone lines have been increased from 12 to 27 to speed response. An automated Provider Telecommunications Network (PCN) has been installed, with current information on checkwrites, status of pended claims and the number of claims in process.

Enrolled physicians have received a comprehensive, simplified provider manual to assist in claims preparation. EDS has implemented a system for identifying certain claims for expedited processing. Unique claims should be handled much more promptly under this system.

Also, EDS has automated its system for verifying patient eligibility. The automated system also provides current information on recipient share of cost, Medicare status, other insurance coverage and similar information.

MEDI-CAL PROVIDER SERVICE QUESTIONNAIRE
Please return to: Department of Health Services, Fiscal Intermediary Management Division, Attention CC/PMP, P.O. Box 942732, Sacramento, CA 94234-7320

I would like information about Medi-Cal Program Participation.

I would like to receive this information by mail phone

Midi-Cal patients each week.
Physician/Group Name ____________________________
Street Address ____________________________
City ___________ State ______ ZIP Code ____________
Contact Person __________________ Telephone: Area Code ______
Mailing Address if Different ____________________________

HELP US SERVE YOU BETTER

The questionnaire accompanying this article will help us to continue the progress, and to identify other areas where you would like to see improvements. Please take a minute to complete it and return it to the Department of Health Services.