MEDICAL BOARD OF CALIFORNIA

INITIAL STATEMENT OF REASONS

Hearing Date: March 11, 2019

Subject Matter of Proposed Regulations: Approved Postgraduate Training

Section(s) Affected: Division 13, Title 16, Chapter 1, Article 6, California Code of Regulations (CCR) section 1321

Specific Purpose of each adoption, amendment, or repeal:

1. Problem being addressed:

The Medical Board of California (Board) proposes amendments to Title 16 of the California Code of Regulations (CCR) section 1321 (section 1321) regarding approved postgraduate training. This proposed modification shall make this regulation consistent with current accreditation practices meeting California requirements for approved postgraduate training in the United States and Canada.

Pursuant to Business and Professions Code (Bus. & Prof. Code) section 2096(c), California accepts postgraduate training approved by the Accreditation Council for Graduate Medical Education (ACGME) or the Royal College of Physicians and Surgeons of Canada (RCPSC).

Since the enactment of Bus. & Prof. Code section 2096, the ACGME and the RCPSC have established new programs – ACGME-International and RCPSC-International – to begin accrediting international postgraduate training programs outside of the United States and Canada. However, neither ACGME-International nor RCPSC-International have been vetted or approved under California law, and only postgraduate training programs located in the United States and/or its territories or in Canada are approved in California for licensure as a physician and surgeon. Accordingly, the Board is seeking to update section 1321 to ensure it is clear that only postgraduate training programs located in the United States and/or its territories or in Canada are approved in California.

Another change to the accreditation process for postgraduate training is that RCPSC has partnered with the College of Family Physicians of Canada (CFPC) to accredit family medicine postgraduate training programs located in Canada. Consequently, the Board is seeking to include the name of this accreditation arm, which meets the standards of RCPSC, for approved postgraduate training in family medicine occurring in Canada.
A further change to accreditation practices is that the American Osteopathic Association (AOA) accredited postgraduate training programs are now starting the accreditation process through ACGME. As a result, this proposed rulemaking will clarify that AOA programs that have received initial/pre-accreditation status by ACGME will be accepted for approved postgraduate training by the Board.

Accordingly, the purpose of this proposed rulemaking is to further define Bus. & Prof. Code sections 2037, 2065, 2066, 2096, 2102, and 2103, by updating the language in section 1321 for consistency with current accreditation practices meeting California law and eliminate confusion regarding postgraduate training requirements to be eligible for a California physician’s and surgeon’s certificate.

2. Anticipated benefits from this regulatory action:

This proposed rulemaking will update the language in section 1321 for consistency with current accreditation practices meeting California law and eliminate confusion regarding postgraduate training requirements to be eligible for a California physician’s and surgeon’s license. Additionally, this regulatory action furthers the goal of consumer protection through the proper licensing and regulation of health care professionals as well as enforcing the Medical Practice Act.

3. Specific Purpose of Each Amendment:

Proposed Amendments to 16 CCR section 1321(a)

Existing law under section 1321(a) states the following:

Postgraduate training programs meeting the standards of the Accreditation Council on Graduate Medical Education or the Royal College of Physicians and Surgeons of Canada shall be approved for the postgraduate training specified in Sections 2065, 2066, 2096, 2102, and 2103 of the code.

This rulemaking proposes to amend section 1321(a) to clarify that only accredited postgraduate training programs located in the United States and/or its territories or in Canada are approved by the Board to meet the postgraduate training requirement to be eligible for a California physician’s and surgeon’s certificate. This amendment is consistent with current law, but changes to accreditation practices have made it necessary to clarify the regulation.

Further, this rulemaking proposes to amend section 1321(a) to specify that family medicine postgraduate training programs in Canada accredited by the CFPC are approved by the Board to meet the postgraduate training requirement to be eligible for a California physician’s and surgeon’s license. CFPC is now the accreditation arm approved by the RCPSC to approve postgraduate training in family medicine programs.
located in Canada. This change will provide clarity to applicants obtaining postgraduate training in Canada that family medicine programs accredited by the CFPC are accepted by the Board.

Additionally, this rulemaking makes a non-substantive correction, changing the word “on” to “for” so that the language correctly reads: “Accreditation Council for Graduate Medical Education.”

**Proposed Amendments to 16 CCR section 1321(b)**

Existing law under section 1321(b) states the following:

> A current list of such programs shall be maintained on file in the Sacramento office of the division.

This rulemaking proposes to amend section 1321(b) by striking this language entirely, because it is antiquated, unnecessary, and inefficient for the Board to keep such a list. Instead, interested parties can turn to the ACGME, RCPSC, or CFPC for the most current list of approved postgraduate training programs.

New language will be added to section 1321(b) to indicate that postgraduate training programs located in the United States and/or its territories accredited by the AOA that have received initial/pre-accreditation status by the ACGME shall be approved for the postgraduate training specified in Sections 2065, 2066, 2096, 2102, and 2103 of the code. This change will update this section to reflect the current accreditation environment for postgraduate training programs.

**Factual Basis/Rationale**

The proposed change to section 1321(a) will clarify that only accredited postgraduate training programs located in the United States and/or its territories or in Canada are approved by the Board. While both ACGME and RCPSC have established international programs for accrediting postgraduate training occurring in other countries, these international programs have not been vetted or approved under California law – only their domestic programs have been approved under Bus. & Prof. Code section 2096.

Consequently, these proposed amendments do not impose any additional burdens on applicants, as postgraduate training occurring outside of the United States and/or its territories or in Canada has never been accepted in California. The Board, however, wants to ensure that applicants are aware that postgraduate training occurring outside of the United States and/or its territories or in Canada will not be accepted, even if they are accredited by ACGME-International or RCPSC-International. This will eliminate ambiguity for applicants and further consumer protection by clarifying what postgraduate training programs the Board accepts.
The proposed change to CCR section 1321(a) will also clarify that the Board accepts family medicine postgraduate training in Canada accredited by the CFPC, since family medicine postgraduate training programs in Canada are now accredited by CFPC, the RCPSC’s approved accrediting arm. This proposed change will bring this regulation up to date with the current process in Canada for accrediting family medicine postgraduate training, and will provide clarity to applicants. Failure to update this regulation may pose a barrier to applicants who have attended postgraduate training accredited by CFPC, even though this accreditation arm meets the standards of RCPSC.

Additionally, the proposed change to this section makes a non-substantive correction, changing the word “on” to “for” so that the language correctly reads: “Accreditation Council for Graduate Medical Education,” as this is the correct name for the ACGME.

The proposed change to CCR section 1321(b) will remove obsolete language referencing the list of approved postgraduate training programs approved by the Board. The most current list of approved programs is available directly through the accrediting agencies, and it is not necessary or efficient for the Board to keep a separate list of approved postgraduate training programs.

Section 1321(b) will also be amended to indicate that postgraduate training programs located in the United States and/or its territories accredited by the AOA that have been approved by the ACGME by receiving pre-accreditation or initial accreditation status shall be approved for postgraduate training. This change is necessary to reflect the move to a single graduate medical education (GME) accreditation system in the United States beginning in 2014. The single GME accreditation system allows graduates of allopathic and osteopathic medical schools to complete their residency and/or fellowship education in ACGME-accredited programs and demonstrate achievement of common milestones and competencies. This change broadens access to training by permitting all eligible residency applicants to enter any accredited program in the United States, and to transfer from one accredited program to another without having to repeat training.

A status of pre-accreditation signifies that a program already approved by the AOA for postgraduate training has initiated the process of attaining ACGME accreditation while still under AOA approval.

A status of initial accreditation means that the program’s ACGME Review Committee has determined that it is in substantial compliance with the applicable program requirements.

Once an AOA-accredited program is fully accredited by the ACGME, it will fall under CCR section 1321(a), but until then, to clarify that the Board will accept those programs that have received pre-accreditation or initial accreditation status, this regulatory change is necessary.
Underlying Data

1. Staff report for the January 27, 2017 Board meeting (agenda item 23) regarding the need to amend CCR section 1321.

2. Minutes from the January 27, 2017 Board meeting regarding agenda item 23.

Business Impact

The Board has made the initial determination that the amendments to section 1321 will not have a significant adverse economic impact on businesses. This initial determination is based on the fact that the proposed amendments to section 1321 will only update the language in this section for consistency with current accreditation practices and eliminate confusion regarding postgraduate training requirements to be eligible for a California physician’s and surgeon’s license.

Economic Impact Assessment

This regulatory proposal will have the following effects:

- It will not create or eliminate jobs within the State of California because the amendment of section 1321 simply updates the language in this section for consistency with current accreditation practices to further clarify the types of approved postgraduate training necessary to be eligible to obtain a California physician’s and surgeon’s license.

- It will not create new business or eliminate existing businesses within the State of California because the amendment of section 1321 simply updates the language in this section for consistency with current accreditation practices to further clarify the types of approved postgraduate training necessary to be eligible to obtain a California physician’s and surgeon’s license.

- It will not affect the expansion of businesses currently doing business within the State of California because the amendment of section 1321 simply updates the language in this section for consistency with current accreditation practices to further clarify the types of approved postgraduate training necessary to be eligible to obtain a California physician’s and surgeon’s license.

- This regulatory proposal does benefit the health and welfare of California residents because the amendment of section 1321 updates the language in this section for consistency with current accreditation practices to further clarify the types of approved postgraduate training necessary to be eligible to obtain a California physician’s and surgeon’s license.
• This regulatory proposal does not affect worker safety because the amendment of section 1321 simply updates the language in this section for consistency with current accreditation practices to further clarify the types of approved postgraduate training necessary to be eligible to obtain a California physician’s and surgeon’s license.

• This regulatory proposal does not affect the state’s environment because the amendment of section 1321 simply updates the language in this section for consistency with current accreditation practices to further clarify the types of approved postgraduate training necessary to be eligible to obtain a California physician’s and surgeon’s license.

Specific Technologies or Equipment

This regulation does not mandate the use of specific technologies or equipment.

Consideration of Alternatives

No reasonable alternative to the regulatory proposal would be either more effective in carrying out the purpose for which the action is proposed or would be as effective or less burdensome to affected private persons and equally effective in achieving the purposes of the regulation in a manner that ensures full compliance with the law being implemented or made specific.

Set forth below are the alternatives which were considered and the reason(s) for rejection or acceptance:

1. Do not seek a regulatory change. This alternative was rejected because section 1321 would remain unclear due to recent changes to the accreditation of postgraduate training programs.

2. Adopt the proposed amendments to section 1321. This alternative was accepted because the amendments will update the language to reflect current accreditation practices, and would clarify what is accepted by the Board as approved postgraduate training programs to be eligible for a California physician’s and surgeon’s license.