

Department of Consumer Affairs

Position Duty Statement

HR-041 (new 5/04)

Classification Title Associate Governmental Program Analyst	Board/Bureau/Division Medical Board of California
Working Title	Office/Unit/Section / Geographic Location Enforcement/CCU – Sacramento
Position Number 629-170-5393-018	Name and Effective Date

Under the direction of the Staff Services Manager I, Case Management Section, the Associate Governmental Program Analyst (AGPA) is independently responsible for the recruitment and ongoing maintenance of the pool of medical experts employed to perform the initial review of consumer complaints and prepare reports related to whether the physician’s care was within the standard in the medical community. The incumbent coordinates and facilitates the review of complaints filed against physicians related to their care and treatment by independently identifying and contacting medical experts to obtain a medical review to determine whether further investigation is indicated.

Business and Professions Code Section 2220.08 requires any complaint determined to involve quality of care shall be reviewed by one or more medical experts with the pertinent education, training, and expertise to evaluate the specific standard of care issues raised by the complaint to determine if further field investigation is required.

Specific duties include, but are not limited to, the following:

A. Specific Assignments [Essential (E) / Marginal (M) Functions]

45% Medical Expert Coordinator (E)

Reviews complaints, referred by CCU staff, requiring a medical expert review to ensure all appropriate materials/documents have been obtained. Returns incomplete files to CCU staff. Performs the most complex analysis of complaints to determine if referral to a medical expert is required or whether the issues raised in the complaint should be closed in CCU without being reviewed by a medical expert. Frequently applies policies, procedures, and regulatory requirements to prepare a comprehensive recommendation to the Staff Services Manager on complaints that should be closed without medical expert review. **(20%)**

Independently identifies the most appropriate medical expert with the pertinent education, training and expertise to evaluate a complaint to determine if further field investigation is required. Consults with the medical expert to present the facts by providing a summary of the complaint and request assistance in reviewing the complaint and provides directions as to the specific area to be reviewed. Assembles and prepares the complaint file for shipping to the medical expert. Consults with the medical expert to provide them with any additional information or answer their questions during the review. **(15%)**

Collects data and statistical information on the number of complaints received in each medical practice specialty and the number of experts available to review those cases,

as well as considers data on the volume and frequency of cases referred to each expert for review, to avoid overutilization of an expert. **(10%)**

25% Medical Expert Recruiting and Training (E)

Routinely performs a comprehensive analysis of the current and ongoing need for medical experts and the composition of the Medical Expert Pool to determine if there is adequate representation in all medical practice specialties to enable MBC to obtain an expert review in a timely manner. Consults with CCU Managers, Deputy Attorneys General and other Enforcement Program Managers to determine trends in complaints that may require medical experts in new and emerging practice specialties. Develops a recruitment strategy and recruitment presentations to be given to outside audiences (i.e., university medical staff and faculty, medical association and society meetings, etc.). **(15%)**

Receives and reviews applications and curriculum vitae from physicians interested in working as a medical expert for MBC; independently assesses applicant's education, training and experience to determine if it meets the minimum requirements to be a medical expert. Performs a thorough curriculum verification of each applicant's credentials, including specialty training and/or certification, etc., and conducts a complex analysis of their medical practice history, including complaint or disciplinary history and malpractice history, to ensure there is no adverse information that would jeopardize a MBC case. Determines whether the applicant should be added to the Medical Expert Pool or rejected, and notifies the applicant of the disposition. Upon recruitment, the AGPA provides training to ensure the expert understands their role in the complaint review process, the Board's role in consumer protection and it's needs and expectations of the expert. The AGPA provides training on the proper formatting of the experts reports and memos in which they will document their case review findings, and also how to complete the statement of services to ensure proper payment for their work. **(10%)**

25% Quality Control (E)

Frequently evaluates and interprets medical expert opinions and provides feedback and training those which do not comport with MBC requirements or submit inappropriate recommendations or conclusions to ensure the information provided is appropriate and sufficient in detail to enable the Board to may make a determination as to how it will proceed with a case. **(15%)**

Works directly with the MBC Lead Medical Consultant to develop and implement an ongoing quality control system to ensure the integrity of the medical experts and the quality of their reports. Makes recommendations to the Manager indicating whether mentoring or training is required for experts, or removal of an expert from the Medical Expert Pool is necessary. **(10%)**

5% Public Information (M)

Acts as the Enforcement Program's "Analyst of the Day", providing consumers and licensees information regarding the Board's complaint process, including time frames for complaint processing, conducting investigations, and finalizing dispositions of complaints through the administrative process, and determining whether issues are with the Board's jurisdiction. **(5%)**

B. Supervision Received

The AGPA reports directly to, and receives the majority of assignments from, the Staff Services Manager I, Central Complaint Unit – Case Management Section.

C. Supervision Exercised

None

D. Administrative Responsibility

None

E. Personal Contacts

The AGPA has daily, direct contact with MBC management and staff. The AGPA has regular, direct contact with the Chief of Enforcement and the Staff Services Manager II. The AGPA has frequent, direct contact with medical experts either in-person, via phone or via email, regarding case management and standard of medical care concerns. As necessary, speaks directly to the public, Supervising Investigators and Deputy Attorneys General within the Attorney General's Office. Occasionally has direct contact with universities, training hospitals and medical societies. The AGPA is required to maintain a positive, professional working relationship with members of the profession and staff from MBC and the Department of Consumer Affairs (DCA).

F. Actions and Consequences

Failure for the AGPA to perform duties adequately may result in the delay or improper processing of consumer complaints and investigations which puts California Healthcare Consumers at risk for potential harm. If the AGPA does not perform thorough curriculum verification or does not perform an adequate annual reassessment or reevaluation of a medical expert, there is a risk of a medical expert preparing a poor review or a complaint may not be referred for investigation when it should be investigated. Additionally, the delay in processing would impact MBC's goals set in law and by DCA to reduce complaint processing time and MBC's mission to protect the public.

G. Functional Requirements

No specific physical requirements are required: the AGPA works 40 hours per week in an office setting, with artificial light and temperature control. Daily access to and use of a personal computer and telephone is essential. Sitting and standing requirements are consistent with office work.

H. Other Information

The AGPA is expected to exercise a high level of independence and discretion and must possess good communication skills, use good judgment in decision-making, manage time and resources effectively, be able to work efficiently and cooperatively with others, and be able to work under changing priorities and deadlines.

The AGPA routinely works with sensitive and confidential issues and/or materials and is expected to maintain the privacy and confidentiality of documents and topics pertaining to individuals or to sensitive program matters at all times.

Title 11, section 703D California Code of Regulations requires criminal record checks of all personnel who have access to Criminal Offender Record Information (CORI). Pursuant to this requirement, applicants for this position will be required to submit fingerprints to the Department of Justice and be cleared before hiring.

I have read and understand the duties listed above and I can perform these duties with or without reasonable accommodation. (If you believe reasonable accommodation is necessary, discuss your concerns with the hiring supervisor. If unsure of a need for reasonable accommodation, inform the hiring supervisor, who will discuss your concerns with the Health & Safety analyst.)

Employee Signature

Date

Printed Name

I have discussed the duties of this position with and have provided a copy of this duty statement to the employee named above.

Supervisor Signature

Date

Printed Name

Revised: TK 4/17/2015
Approved: JM 4/17/2015