

MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: October 7, 2014
ATTENTION: Members, Medical Board of California
SUBJECT: Continuing Medical Education Requirements
STAFF CONTACT: Curtis J. Worden, Chief of Licensing

RECOMMENDED ACTION:

After review and consideration of the attached proposed amendments to the continuing medical education (CME) regulatory language, make a motion to direct staff to notice the amended regulatory language and hold a hearing to amend Title 16, Division 13, California Code of Regulations (CCR), sections 1337 and 1338. The amendments would allow CME that is approved for specialty board maintenance of certification (MOC) as meeting the Medical Board of California's (Board) CME requirements for licensed physicians and surgeons.

BACKGROUND AND ANALYSIS:

California Business and Professions Code (B&P) Section 2190 requires licensed physicians and surgeons to complete CME in order to ensure continuing competence. In addition B&P Section 2190 requires the board to adopt standards for CME.

CCR section 1336(d) requires licensed physicians and surgeons to complete a minimum of 50 hours of approved CME during the two-year period immediately preceding the expiration date of the license to be eligible for renewal of their license.

CCR section 1337 identifies the requirements for approved CME programs. Currently physicians who pass a certifying or recertifying examination administered by an approved specialty board shall be granted 100 hours of CME credit. However, most approved specialty boards are requiring physicians to participate in a required MOC process to maintain specialty board certification. Some of the required CME in a MOC may not meet the current definition of the Board's approved CME. Therefore, CCR section 1337 needs to be amended to include approved specialty board CME used for MOC to meet the Board's CME requirements.

CCR section 1338 states the Board may obtain CME records directly from the approved CME sponsor for physicians who have been selected for a CME compliance audit. Therefore, CCR section 1338 needs to be amended to include the new CCR section 1337, subsection (a)(g).

The Board will need to authorize staff to proceed with preparing the necessary regulatory documents to amend CCR sections 1337 and 1338, and hold a hearing. The proposed language to amend CCR sections 1337 and 1338 has been included for the Board's review. The suggested amended language is identified with underline or ~~strike through~~ text.

**California Code of Regulations
Title 16, Division 13, Chapter 1, Article 11**

Section 1337. Approved Continuing Education Programs.

(a) The following programs are approved by the division for continuing education credit:

(1) Programs which qualify for Category I credit from the California Medical Association or the American Medical Association;

(2) Programs which qualify for prescribed credit from the American Academy of Family Physicians;

(3) Programs offered by other organizations and institutions acceptable to the division.

(b) Only those courses and other educational activities that meet the requirements of Section 2190.1 of the code which are offered by these organizations shall be acceptable for credit under this section.

(c) A maximum of one-third of the required hours of continuing education may be satisfied by teaching or otherwise presenting a course or program approved under this section.

(d) Any physician who takes and passes a certifying or recertifying examination administered by a recognized specialty board shall be granted credit for four (4) consecutive years (100 hours) of continuing education credit for relicensure purposes. Such credit may be applied retroactively or prospectively.

(e) A maximum of sixty (60) hours of continuing education shall be granted to a physician for receiving the Physician's Recognition Award.

(f) A maximum of six (6) hours of continuing education shall be granted for each month that a physician is engaged in an approved postgraduate residency training program or approved clinical fellowship program accredited by the Accreditation Council for Graduate Medical Education (ACGME) for relicensure purposes.

(g) Continuing education that is required for maintenance of certification by American Board of Medical Specialties affiliate boards or other specialty boards approved by the Medical Board of California.

Note: Authority cited: Section 218, Business and Professions Code. Reference: Section 2190, Business and Professions Code.

HISTORY

1. Amendment filed 8-23-77; effective thirtieth day thereafter (Register 77, No. 35).

2. Amendment filed 5-29-81; effective thirtieth day thereafter (Register 81, No. 22).

3. New subsection (b) and subsection relettering filed 8-26-93; operative 9-27-93 (Register 93, No. 35).

4. Change without regulatory effect amending subsection (a)(2) filed 6-18-97 pursuant to section 100, title 1, California Code of Regulations (Register 97, No. 25).

5. New subsections (e)-(f) filed 9-14-98; operative 9-14-98 pursuant to Government Code section 11343.4(d) (Register 98, No. 38).

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16 CCR § 1337, 16 CA ADC § 1337

California Code of Regulations
Title 16, Division 13, Chapter 1, Article 11

Section 1338. Audit and Sanctions for Noncompliance.

(a) The Board shall audit during each year a random sample of physicians who have reported compliance with the continuing education requirement. No physician shall be subject to audit more than once every four (4) years. Those physicians selected for audit shall be required to document their compliance with the continuing education requirements of this article on a form provided by the Board.

(b) Any physician who is found not to have completed the required number of hours of approved continuing education will be required to make up any deficiency during the next biennial renewal period. Such physician shall document to the Board the completion of any deficient hours identified by audit. Any physician who fails to make up the deficient hours during the following renewal period shall be ineligible for renewal of his or her license to practice medicine until such time as the deficient hours of continuing education are documented to the Board.

(c) It shall constitute unprofessional conduct for any physician to misrepresent his or her compliance with the provisions of this article.

(d) Any physician selected for audit who has been certified as complying with the continuing education requirements of this article by those organizations listed in Section 1337, subsections (a)(1), ~~and~~ (a)(2), and (a)(g), will not be required to submit documentation or records of continuing education coursework received, but the Board may obtain such records directly from the certifying organizations.

(e) The Board requires that each physician retain records for a minimum of four years of all continuing education programs attended which indicate the title of the course or program attended, dates of attendance, the length of the course or program, the sponsoring organization and the accrediting organization, if any, which may be needed in the event of an audit by the Board.

Note: Authority cited: Section 2018, Business and Professions Code. Reference: Section 2190, Business and Professions Code.

HISTORY

1. Amendment filed 9-1-77; effective thirtieth day thereafter (Register 77, No. 36).
2. Repealer and new section filed 11-17-78; effective thirtieth day thereafter (Register 78, No. 46).
3. Amendment of NOTE filed 8-5-81; effective thirtieth day thereafter (Register 81, No. 32).
4. Amendment of subsections (b) and (e) filed 9-21-83; effective thirtieth day thereafter (Register 83, No. 39).
5. Amendment filed 12-3-2009; operative 1-2-2010 (Register 2009, No. 49).

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16 CCR § 1338, 16 CA ADC § 1338