



MEDICAL BOARD OF CALIFORNIA

LICENSING COMMITTEE MEETING

Sheraton San Diego Hotel and Marina Room
Fairbanks A & B
1380 Harbor Island Drive
San Diego, CA 92101



Thursday, October 25, 2012

MINUTES

Agenda Item 1. Call to Order / Roll Call

Dr. Salomonson called the Licensing Committee meeting to order on October 25, 2012, at 2:03 p.m.
Mr. Worden called the roll. A quorum was present and notice had been sent to interested parties.

Members Present:

Janet Salomonson, M.D., Chair
Michael Bishop, M.D.
Silvia Diego, M.D.
Gerrie Schipske, R.N.P., J.D.

Other Members Present:

Dev GnaneDev, M.D.
Sharon Levine, M.D.
Denise Pines
Barbara Yaroslavsky

Staff Present:

Angela Chang, Investigator
Dianne Dobbs, Department of Consumer Affairs, Legal Counsel
Tim Einer, Administrative Assistant
Kurt Heppler, Staff Counsel
Kimberly Kirchmeyer, Deputy Director
Armando Melendez, Business Services Analyst
Regina Rao, Business Services Analyst
Letitia Robinson, Research Specialist
Kevin Schunke, Outreach Manager
Barbara Shakowski, Investigator
Jennifer Simoes, Chief of Legislation
Laura Sweet, Deputy Chief of Enforcement
Renee Threadgill, Chief of Enforcement
See Vang, Business Services Analyst
Linda Whitney, Executive Director
Curtis Worden, Chief of Licensing

Members of the Audience:

Teresa Anderson, California Academy of Physician Assistants
Hilma Balaian, Kaiser Permanente
Yvonne Choong, California Medical Association (CMA)
Zennie Coughlin, Kaiser Permanente
Julie D'Angelo Fellmeth, Center for Public Interest Law (CPIL)
Long Do, CMA
Jack French, Consumers Union CA Safe Patient Network
Doreatha Johnson, Department of Consumer Affairs, Legal Affairs
Lisa McGiffert, Consumers Union CA Safe Patient Network
Carole Moss, Consumers Union CA Safe Patient Network/Nile's Project
Ty Moss, Consumers Union CA Safe Patient Network/Nile's Project
Maryann O'Sullivan, Consumers Union CA Safe Patient Network
Carlos Ramirez, Senior Assistant Attorney General, Office of the Attorney General
Loren Reed, Department of Consumer Affairs, Public Affairs Office
Harrison Robbins, M.D.
Kathryn Scott, Lenscrafters
Carrie Sparrevohn, Midwifery Advisory Council
Charlene Zettel, Donate Life California

Agenda Item 2 Public Comments on Items Not on the Agenda

No public comment was offered.

Agenda Item 3 Approval of Minutes from the July 19, 2012 Meeting

Dr. Bishop made a motion to approve the minutes from the July 19, 2012 meeting; s/Diego; motion carried.

Agenda Item 4 Update on Licensing Staffing

Mr. Worden thanked staff for doing an excellent job in the past and current fiscal year, and provided an update on the Licensing Program staffing. There are three vacancies in the Licensing Program: one Office Technician (OT) position and two Managements Service Technician (MST) positions. Interviews have been held for the OT position and management is in the process of setting interviews for the two MST positions. Interviews have also been completed for Seasonal Clerk positions that will replace the Student Assistant positions. In addition, Licensing was able to retain some of the Retired Annuitant positions temporarily while management is in the process of hiring Permanent Intermittent employees to take their place.

Agenda Item 5 Updates on the Business Process Reengineering (BPR) Primary Recommendations

Mr. Worden provided an update on the BPR primary recommendations. Staff have completed the revision of the Physician's and Surgeon's application and the development of a new Fee Schedule. The application was posted to the Board's Web site the previous day. The new application is designed to be easier to read and follow. Staff plan to improve the Web site, including adding some pop-up fields for specific questions to help facilitate the application process. The application was also modified to accommodate the applicants who qualify under Senate Bill (SB) 122 that is going

into effect January 2013.

Dr. Salomonson asked Mr. Worden to remind the audience about the candidate pool that will be affected by SB 122.

Mr. Worden replied that SB 122 will allow candidates that have attended an unrecognized medical school or a disapproved medical school and have met certain other requirements to be eligible to apply for a California Physician's and Surgeon's license. Staff is going to start working on the Web site to accommodate the changes for the new Physician's and Surgeon's application and to include the SB 122 changes. Staff will then work on updating the Licensing Program's Policy and Procedures manual thereafter.

Agenda Item 6 Update on Strategic Plan Components

Mr. Worden stated there are several components that will not be implemented until the years 2013 and 2014. He provided an update on the following components that are currently being worked on within the Licensing Program:

Objective 1.1 requires the Licensing Program to examine the current Continuing Medical Education (CME) structure and its effectiveness. The current California requirements and opportunities for improvement were presented to the Board at the meeting in May 2012. Staff is continuing to work on this component, including preparing an article for the Board's newsletter that will inform physicians of the requirements, as well as provide information on available resources.

Objective 1.3 requires the Licensing Program to define what is necessary to promote safer entry into medical practice after extended absences, as well as conducting a review of current data that includes ongoing work with the Federation of State Medical Board (FSMB) to determine what is required prior to resuming clinical practice for physician re-entry. The FSMB is still looking at many of the issues. This task is ongoing and now part of the Board's Sunset Review.

Objective 1.4 requires the Licensing Committee, or a subcommittee, to examine FSMB maintenance of licensure and the American Board of Medical Specialties (ABMS) maintenance of certification initiatives, study what should be adopted in California, and determine how to collaborate with FSMB and ABMS. A meeting was held between the Board staff and FSMB at the beginning of October 2012. During the meeting, FSMB provided an overview of its pilot program. The dates of the objectives will need to be re-considered as it is dependent upon when FSMB has concluded and published the data from its maintenance of licensure pilot programs.

Objective 1.5 requires the Licensing Program to conduct a comprehensive review of the international medical schools. The Licensing Program has hired an additional analyst. The new analyst is working on going through the existing list and contacting medical schools to make sure that they are current and still meet the requirements. This review was just started and will continue.

Objective 2.1 requires the Licensing Program to develop a plan to conduct a complete review of all laws and regulations relating to licensing to identify if they are still relevant, if they need to be amended or eliminated, and to identify any requirements that are not necessary for the safety of practice, but may be

serving as barriers for qualified applicants. The review will also include updating requirements to coincide with current educational requirements. This task is part of the Board's Sunset Review.

Objective 2.8 requires the Licensing Program to clarify the Board's responsibility to regulate outpatient surgery centers and obtain resources to be effective. In 2012, staff was able to launch the outpatient surgery center database on the Board's Web site, which complied with the requirements outlined in the Business and Professions Code section 1248. Staff is currently reviewing laws outlining requirements, as well as other requirements for outpatient accreditation agencies.

Objective 2.9 requires the Licensing Program to examine the affiliated healing arts programs within the Board to determine if there is a need to move the programs to a more appropriate board or bureau. This task was completed and is a part of the Sunset Review report.

Objective 5.5 requires licensing applications to be reviewed within 45 days. The Board has been in compliance with this component for this quarter of the fiscal year. Staff have been reviewing applications within the 45 day goal; staff is currently reviewing applications within 30 days from receipt for both United States and International Medical School graduates.

Objective 5.6 requires the Licensing Program to establish means of better educating staff about the Board's activities, including encouraging them to attend meetings. Staff have been encouraged to attend Board meetings; however, staff can generally attend Board meetings only in Sacramento due to travel restrictions. Management provides updates to the staff when the meetings have been completed and informs them of new laws and regulation changes that will be adopted.

Agenda Item 7 Presentation on Physician Supervision Requirements for the Allied Health Care Professions

Mr. Worden provided a presentation on requirements for the Allied Health Care Professions for the Medical Board, as well as other boards that are health related.

Mr. Heppler confirmed with Mr. Worden that he reviewed the applicable statutes and regulations in preparation of the presentation.

Mr. Worden, upon request by Ms. Schipske, stated that for registered nurses written standardized procedures or protocols may be required for some functions, particularly when performing overlapping medical functions. Physical presence of a supervisor may or may not be required, dependent upon standardized procedure specifications.

Dr. Diego confirmed with Mr. Worden that medical assistants can be supervised by physician assistants if they work in certain locations (i.e. community or free clinic), otherwise physician assistants cannot supervise medical assistants.

Dr. Diego confirmed with Mr. Worden that an optometrist can dispense lenses based on their license. She then asked what the responsibilities are of an optometrist assistant. Mr. Worden stated they are similar to a medical assistant, and their scope is limited to specific requirements within the statute.

Dr. Diego asked if the associate social worker is supervised by a licensed clinical social worker, and what is the supervision and scope. Mr. Worden stated he was not sure, but could research the subject.

Ms. Schipske stated one of the reasons the Board Members asked for the information regarding supervision requirements for the allied health care professions is they grapple with the issue of required supervision for those who do procedures, such as Botox and other beauty related procedures. Questions often come up as to whether or not nurses or other midlevel professionals can do that type of work without the direct supervision of physicians. Ms. Schipske stated it comes down to standardized procedures and protocols as to whether or not a nurse can act independently or have a required physician on site. So it is important to look at all areas since beauty related procedures are a common practice.

Dr. Salomonson stated there were certain areas where those who could supervise had to be board certified. For example, in Behavioral Science it could not be any physician; it had to be a psychiatrist.

Dr. Salomonson asked Mr. Worden to explain the requirements for anesthesia providers.

Mr. Worden explained that anesthesiologists can practice in a dental office if they are approved to do so and pointed out that there are dentists who are approved for administering anesthesia. It cannot be just any dentist and would have to be one that is trained in administering anesthesia.

Ms. Schipske asked if something was mentioned regarding an anesthesiologist technician and profusionist since they are other professionals that do invasive work.

Mr. Worden replied that he did not provide any information on those professions, but would do so in the future.

Agenda Item 8 Update on Implementation of SB 122

Ms. Simoes and Mr. Worden provided an update on the implementation of SB 122. SB 122 (Chapter 789, Statutes of 2012) was signed into law by the Governor. Originally, this bill included language that would have only required five years of practice in another state or country in order to be eligible for licensure. It also would only have required one year of post graduate training and ABMS certification or two years of post graduate training. This language was taken to the Licensing Committee and to the Board at the July Board meeting. The Licensing Committee and the Board voted to support alternative language that uses the concepts in existing law, but added consumer protection elements. The language contained in SB 122 that was signed into law is the language supported by the Board.

This bill allows individuals who have attended and/or graduated from an unrecognized or disapproved school to be eligible to apply for licensure in California if they have continuously practiced in another state for ten years, if they went to an unrecognized school, or twenty years of continuous practice if they went to a disapproved school. This bill also requires individuals to be certified by a specialty board of the ABMS, to have successfully completed a licensing exam required in existing law, to have successfully completed three years of post graduate training, and to not have any discipline on their license in another state or any adverse judgments or settlements relating to the practice of medicine. This bill allows the Board to adopt regulations to establish procedures for accepting transcripts, diplomas, and any other supporting information or records when the originals are not available due to circumstances outside the applicant's control. This

bill also allows the Board to adopt regulations authorizing the substitution of additional specialty board certification for years of practice of licensure for considering the certification for a physician and surgeon.

The Board supported this language because requiring ten or twenty years of continuing practice in another state, among other requirements, are substantial enough to ensure consumer protection. The Board's implementation plan for this bill is to include a summary in the Board's upcoming newsletter, to train Board staff on the new law and the new internal processes and procedures, and to update the Licensing application and instructions. The application is now on the Board's Web site and information regarding the new law will be posted to the Web site shortly. Once application issues are determined, staff will work on the need for regulations. The discussion regarding a need for regulations will most likely be brought to the Board at the April 2013 Board meeting. Staff will also send notifications to those applicants that the Licensing Program is aware of so that they may apply under this new law.

Mr. Worden stated that when the Board receives a new licensing application from an applicant, the front end staff will prepare the application file and assign the file to the analyst who is assigned to work the files based on the first letter of the last name. Once the analyst receives the file and determines the applicant has attended and/or graduated from an unrecognized or disapproved school, the application file will be transferred to an analyst who is assigned to analyze this type of application file. This analyst will prepare the file for the Application Review Committee (ARC). Only one staff member will work these particular applications so the need for additional regulations can be easily identified. It is going to be a controlled process that the international licensing managers will oversee. Licensing staff will be trained on the new process shortly.

Agenda Item 9 Agenda Items for the January 31 – February 1, 2013 Meeting in the San Francisco Bay Area

- Ms. Schipske requested information regarding supervision of perfusionists and anesthesiologist technicians.
- Mr. Worden requested a discussion regarding International Post Graduate Training.

Agenda Item 10 Adjournment

The meeting adjourned at 2:42 p.m.

The full meeting can be viewed at www.mbc.ca.gov/board/meetings/index.html.