

**MEDICAL BOARD
2012 - 2013
SUNSET REVIEW
NEW ISSUES**

**Review
For
Guidance**

ISSUE (GENERAL)

Mandatory email address for physicians

- Going Green Initiative
- Assist in providing urgent information quickly
- Cost savings on mailing information/renewal to physical address

ISSUE (GENERAL)

Postgraduate training – posting on the Board's Web site

- Statute requires Board to post physician's approved postgraduate training on Web site
- Current postgraduates (new licensees) have not completed postgraduate training at the time the information is gathered (multiple programs – sometimes up to four)
- Information cannot be easily obtained
- Consumer protection value of this information
- Currently, Board posts number of years completed (from self-reporting)

ISSUE (GENERAL)

Clarify Exemption from the Corporate Bar for Postgraduate (PG) training in hospitals

- Clarify statutes to conform to practice
- Some training hospitals work with postgraduates in various ways (employees/contractors as part of their training)

ISSUE (GENERAL)

SB 100 required the Board to promulgate regulations regarding physician availability in facilities and settings using lasers or intense pulse light devices for elective cosmetic procedures

- Should the Board have the authority to define physician availability, knowledge, and training for other procedures in these settings?

ISSUE (LICENSING)

Fast Track Program – medical education and postgraduate training

- To lessen time and fiscal burdens on students, there is a movement toward an accelerated three year curriculum
- It remains unknown how many weeks of clinical training in each of the core subjects and the total number clinical training weeks are required for graduation.
- May require legislative changes to benefit from these accelerated programs

ISSUE (LICENSING)

USMLE Step 3: two parts

- Changing structure of USMLE starting with Step 3 to “occur no earlier than 2014”
- Step 3 dividing into two separate exams, each one day in length, and will focus on different sets of competencies
- Laws and regulations may need to be updated to conform to these changes

ISSUE (LICENSING)

Physician Re-Entry

- Current law cancelation of license after five years
- Disciplinary guidelines require clinical competency examination after 18 months of no practice
- Should these be consistent

ISSUE (LICENSING)

Clarify Medical Assistant (MA) scope

- Currently MAs are not registered or licensed
- The Board approves certifying agencies
- Board continues to receive a high number of inquiries regarding what technical supportive services a medical assistant may or may not legally perform

ISSUE (LICENSING)

Board Certification: continue approval process?

- The law allows the Board to determine if a specialty board has equivalent requirements to those required by ABMS
- The Board does not have expertise on staff to perform this function
- Is there another option to provide equivalent consumer protection?

ISSUE (LICENSING)

Hospital Based Outpatient Surgery Center

- Re-examine reporting requirements for hospital based outpatient surgery centers

ISSUE (LICENSING)

Midwives: supervision

- Law requires physicians to supervise midwives
- Midwives cannot obtain physician supervision because the physician's medical malpractice insurance carrier will not insure physician's who supervise midwives
- Examine legislative options for dealing with this problem

ISSUE (LICENSING)

Midwives: annual report

- Several of the categories listed in statute for the midwife annual report need clarifying
- Examine other options for collecting statistics

ISSUE (LICENSING)

Midwives: Lab tests and limited medication dispensing

- **Examine and seek authority for ordering lab tests and limited dispensing of medication within midwives scope of practice**

ISSUE (LICENSING)

**Registered Dispensing Optician(RDO)
Program: continue to regulate?**

- Does this profession still need regulating?
- Is the Medical Board the correct agency to regulate this profession?
- State Board of Optometry (SBO) is considering regulation of the RDO Program

ISSUE (ENFORCEMENT)

805 Reporting

- To ensure the Board receives all mandated 805 reports –require CDPH to send reportable peer review to the Board after its inspection of the facility

ISSUE (ENFORCEMENT)

Establish consistency in medical record procurement requirements

- Statute requires physicians to submit medical records to the Board within 15 days after receipt of request
- Statute requires hospitals to submit medical records to the Board within 30 days after receipt of request (hospitals are more likely to have electronic health records)

ISSUE (ENFORCEMENT)

Notification to patients of physician's discipline (disciplinary guidelines)

- Should physicians be required to notify their patients that they have been disciplined by the Board
- Some boards require posting a notice stating the licensee is on probation

ISSUE (ENFORCEMENT)

CURES

- CURES computer system needs improvement and enhancements to reduce controlled substance abuse
- Is the Department of Justice the appropriate entity to administer the CURES computer system (DCA, Board of Pharmacy, etc.)?
- Increase license fees (by approximately \$10) for all prescribers/dispensers to fund the CURES computer system

ISSUE (ENFORCEMENT)

Ten year posting requirement for physician public record actions

- Beginning January 1, 2013, with the exception of felony convictions and hospital actions that result in a termination or revocation of privileges, all other actions taken against a physician must be removed from the Board's Web site ten years from the date of the action
- Is this in line with the consumer protection mandate?

ISSUE (ENFORCEMENT)

Medical Malpractice Reports (801s) – exemption from upfront review

- Before a quality of care complaint is referred for investigation it must be reviewed by a medical expert with the expertise necessary to evaluate the specific standard of care issue raised in the complaint.
- Records for 801 cases sometimes need to be subpoenaed in order to obtain medical records. Due to this legal upfront review, the case gets sent to the field, but then has to come back to the Central Complaint Unit for the upfront review.

ISSUE (ENFORCEMENT)

Expert Testimony: requiring written expert report from the Respondent and/or the Attorney

- **Precedential decision requires limited information**
- **Clarify law for expanding discovery**

OTHER ISSUES?

Any other issues you would like staff to include

THANK YOU !!!