

**MEDICAL BOARD STAFF REPORT**

DATE REPORT ISSUED: January 11, 2010  
 ATTENTION: Medical Board of California  
 DEPARTMENT: Licensing Program  
 SUBJECT: Regulatory Amendments Proposed for 2010  
 STAFF CONTACT: Deborah Pellegrini

REQUESTED ACTION:

Approve staff developing the following regulatory amendments during 2010.

STAFF RECOMMENDATION:

Staff recommends authorization to develop the regulatory proposals suggested below.

EXECUTIVE SUMMARY: Staff has identified the following five areas where the Legislative Committee may want to recommend staff development of amendments to Title 16 of the California Code of Regulations during 2010. New legislation mandates two of the regulatory proposals. Staff recommends the remaining three regulatory proposals to strengthen and clarify the routine application review and licensure process.

1. Abandonment of Licensing Application. Section 1306 of Title 16, California Code of Regulations, provides that staff may close a licensing application after one year if the applicant fails to apply due diligence in completing the licensing process. The existing language is inadequate to address the many challenges that staff encounters in balancing the burden on the Board's limited resources of storing hundreds of abandoned applications against the applicants' desire to maintain their applications in active status for years. Recently an applicant requested not closing the file after 18 years of trying to obtain a postgraduate training slot in California. Staff proposes to better define the applicant's responsibility to proceed to licensure within a reasonable timeframe and clarify the circumstances under which staff may close an abandoned application after due notice to the applicant.
2. \*Limited license. Effective January 1, 2010, the Board has the authority to issue a limited license to disabled physicians who are able to practice medicine safely within certain parameters agreed upon by the Board and the reviewing physician. The Board will need to adopt regulations to define the application process for this new license type and also define the process by which licensees may qualify for an unrestricted license if their disability resolves. The Board will need to adopt an initial licensing fee and a biennial renewal fee, not to exceed the \$790 maximum fee authorized by the bill. Attached is a copy of Assembly Bill 501 (Emmerson).
3. Postgraduate Training Authorization Letter (PTAL). Statute requires graduates of international medical schools (IMGs) to satisfy certain minimum requirements before they begin postgraduate training in California. After IMGs submit a licensing application and supporting documents, staff issues them a PTAL as evidence that they satisfied these statutory prerequisites. When applicants apply to postgraduate training programs in California, they provide their PTAL to the Program Directors as evidence that they are eligible to begin training in California, if offered a training position. Staff proposes that the Board adopt regulations to clarify the process for obtaining the initial and subsequent PTALs. Staff also recommends that the Board better define the registration process in existing statute in Business and Professions Code Section 2066.

4. \*Written Examinations. Section 1328 of Title 16, California Code of Regulations, lists the written examinations, and combinations of examinations, that the Board will accept for licensure purposes. Recently, staff encountered an applicant who passed the combination of Steps 1 and 2 of the United States Medical Licensing Examination (USMLE) and Part III of the National Board of Medical Examiners (NBME) during the transition period when the USMLE was replacing the NBME and Federation Licensing Examination (FLEX). When Section 1328 was amended in 1996 to address the transition to the USMLE, staff was unaware that the testing agencies would make this combination available during the transition period. Therefore, this exam combination was not added to Section 1328 in 1996. Staff proposes that the Board amend Section 1328 to add this exam combination (i.e., USMLE Steps 1 and 2 and NBME Part III) to permit the licensure of otherwise qualified physicians.

Staff also proposes that Section 1328 be amended to specify that applicants' written examination scores shall be valid before they commence postgraduate training in California. Staff has encountered several cases where training programs accepted applicants with expired scores. This delayed the applicants from qualifying for licensure until after they revalidated their written exam scores. A reminder added to Section 1328 would serve to alert applicants and training program directors to check the validity of applicants' written exam scores before the applicant begins postgraduate training in California.

5. \*Polysomnographic technologists registration program. Senate Bill 132 (Denham), which took effect on October 23, 2009, requires the Board to regulate polysomnographic technologists. The bill mandates the Board to adopt regulations within one year to design a registration process and define the conditions of the registrants' employment by physicians and surgeons. The Board will need to adopt the initial registration fee and biennial renewal fee for this classification, not to exceed \$100. The Board will hire an associate analyst to implement the new registration program. Attached is a copy of SB 132.

#### FISCAL CONSIDERATIONS:

The new registration program for polysomnographic technologists and the new limited license classification for disabled physicians both have fiscal impact.

\*In terms of prioritizing workload, staff recommends that the Board include in the first group of regulatory amendments the regulations needed to implement the polysomnographic technologist registration program and the limited license category, since new legislation mandates the Board to adopt these regulations. The amendment to Section 1328 is also urgent because a qualified applicant's licensure depends on this minor regulatory amendment. The Board will pursue the proposed regulatory amendments pertaining to PTALs and abandoned applications at a later date.