

MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: August 1, 2022
ATTENTION: Members, Medical Board of California
SUBJECT: Notice to Consumers – Discussion and Possible Action on Proposed Responses to Public Comments received on the Modified Text and adoption of the Modified Text
FROM: Kerrie Webb, Attorney III

REQUESTED ACTION:

1. Consider and approve proposed responses to written and oral comments received on the Modified Text for the proposed rulemaking on Notice to Consumers (Title 16 or the California Code of Regulations (CCR) sections 1355.4, 1378.5, 1379.4, and 1379.58);
2. Consider and adopt the modified text as-is for the proposed rulemaking on Notice to Consumers;
3. Authorize staff to finalize the rulemaking file and submit it to the Office of Administrative Law, including the authority to make any technical or non-substantive changes and to adopt the modified text without returning to the Board.

BACKGROUND

Senate Bill (SB) 798 (Hill, Chapter 775, Statutes of 2017) enacted Business and Professions Code (BPC) section 2026, which directed the Board to initiate the process of adopting regulations to require its licensees and registrants to provide notice to their patients or clients that the provider is licensed or registered by the Board, that the license or registration can be checked, and that complaints against the provider can be made through the Board's website or by contacting the Board.

At the July 26, 2018 Board meeting, the Board approved proposed regulatory text to amend 16 CCR sections 1355.4 and 1379.58 and to add sections 1378.5 and 1379.4 relating to the requirement for the Board's licensees and registrants to provide notice to their patients and clients regarding the Board's regulatory role and how to contact the Board to verify a license or file a complaint.

Following the regulatory review process and the Administrative Procedure Act, Board staff noticed the proposed text on November 12, 2021, for the 45-day public comment period. The California Medical Association and the California Hospital Association provided substantive comments which were considered by the Board during the Quarterly Board Meeting on February 20, 2022. At that meeting, the Board instructed staff to modify the text consistent with the Board's direction and present modified text at a future Board meeting for consideration.

At the May 20, 2022 Board meeting, the Board approved proposed modified text to amend 16 CCR sections 1355.4 and 1379.58 and add sections 1378.5 and 1379.4.

Consistent with the Administrative Procedure Act, Board staff noticed the proposed modified text for the minimum 15-day public comment period on June 27, 2022. The public comment period ended on July 15, 2022.

During the comment period, the Board received 19 comments from individuals. 13 of the commenters specifically objected to the inclusion of a quick response (QR) code on the Notice to Consumers template. Six of the commenters do not specifically reference changes made by the modified text, which is a requirement for consideration at this rulemaking juncture. Those commenters objected in general to the requirement to provide the Notice to Consumers.

The Board is asked to review the summary of the comments below and the proposed responses for inclusion in the Board's final statement of reasons for this rulemaking.

Comments Directed Toward the Modified Text:

13 commenters objected to the Board requiring physicians to provide a QR code on the Notice to Consumers document that takes individuals directly to the Board's website, stating, in summary, that they believe providing such a QR code will encourage individuals to file complaints against physicians in a casual way, such as how individuals leave reviews on Yelp or Google for restaurants. Some of these commenters indicated that people who file complaints against physicians with the Board in this manner may not be aware of how damaging complaints to the Board can be to physicians. Further, some indicated that patients should be encouraged to contact the physician directly or be routed to an office manager, or someplace other than the Board, to address concerns rather than going directly to the Board. Some of these commenters expressed concern that the Board will be inundated with numerous and/or frivolous complaints that will overwhelm the Board, distract from legitimate complaints, and waste resources. Moreover, some of these commenters expressed concern that the expected flood of frivolous complaints would contribute to burnout, deter physicians from practicing in California, and otherwise exacerbate the existing shortage of physicians.

Proposed Response:

Under the Board's current regulation 16 CCR section 1355.4, physicians are already required to post or otherwise provide a notice to consumers that states:

NOTICE

Medical doctors are licensed and regulated
by the Medical Board of California
(800) 633-2322
www.mbc.ca.gov

Business and Professions Code (BPC) section 2026 requires the Board to adopt regulations to enhance this information to: *"require its licentiates and registrants to provide notice to their clients or patients that the practitioner is licensed or registered in the state by the board, that the practitioner's license can be checked, and that complaints against the practitioner can be made through the board's Internet Web site or by contacting the board."* Consequently, the Board's proposed regulations modify and enhance the notice requirements to comply with

BPC section 2026. Further, the proposed notice provides several ways to reach the Board, including the Board's phone number, email, website address, and, pursuant to the modified text, the QR code.

Many consumers are not aware that they can verify a physician's license or file a complaint for professional misconduct with the Board. The proposed regulation seeks to improve the Board's consumer outreach and education regarding physicians and its other licensees and registrants.

Further, to provide effective notice, the modified text requires licensees and registrants to provide the notice, or if this option is selected, the notice and an acknowledgement of receipt of the notice, in a language understood by the patient or patient representative so long as a translated template for both the notice and the acknowledgement of receipt are available on the Board's website. As indicated in the modified text, and potentially overlooked by the commenters, the QR code will link to the Board's Notice to Consumers webpage. This webpage will be designed to provide information about the Notice to Consumers requirements and access to the notice and the acknowledgement of receipt translated into multiple languages to facilitate the likelihood that the consumer will have access to the notice and the acknowledgement of receipt in a language they understand. Individuals who wish to file a complaint may do so using any avenue of contact with the Board, an option which remains unchanged, regardless of the provision of a QR code linking to the Board's Notice to Consumer webpage in the Notice to Consumers.

Licensees and registrants are free to post their own notices about how patients may make complaints to individuals or departments within their practices, but they must also comply with the Board's notice requirements. Since notices are already required to be posted or provided to patients by some other means, the Board does not anticipate this regulatory proposal as modified to result in a large influx of complaints.

Comments Not Directed Toward the Modified Text

The Board received six comments from individuals who did not direct their comments toward the modified text, but rather to the Notice to Consumers requirements in general. These comments are outside the scope of the rulemaking at this stage. Nonetheless, staff reviewed and considered the comments, found the general comments echo the concerns raised by those objecting to the modified text, and recommend rejecting those comments as well for the reasons stated above.

STAFF RECOMMENDATION:

Make and approve the motion indicated above under Requested Action to adopt the proposed response to comments, to adopt the modified text as-is, and to authorize staff to move forward with the rulemaking process as requested.

Attachment 1: Notice to Consumers – Modified Text approved by Board on May 20, 2022

Attachment 2: Public comments directed toward the Notice to Consumers – Modified Text

Attachment 3: Public comments outside the scope of the Notice to Consumers – Modified Text

Attachment 1

DEPARTMENT OF CONSUMER AFFAIRS
TITLE 16. MEDICAL BOARD OF CALIFORNIA

**MODIFIED TEXT
 NOTICE TO CONSUMERS**

LEGEND

Proposed changes to the current regulation language are shown by underline for added language and ~~strikeout~~ for deleted language.

Modified changes to the proposed regulation language are shown by double underline for added language and ~~double-strikeout~~ for deleted language.

(1) Amend Section 1355.4 of Article 1, Chapter 2, Division 13, of Title 16 of the California Code of Regulations to read as follows:

§ 1355.4. Notice to Consumers.

(a) A ~~medical doctor licensee engaged in the practice of medicine~~ shall provide notice to each patient of the fact that the licensee is licensed and regulated by the board, the license can be checked and complaints against the licensee can be made through the board's website or by contacting the board. The notice shall include a quick response (QR) code that leads to the board's Notice to Consumer webpage, and shall contain the following statement and information:

NOTICE TO PATIENTS
 Medical doctors are licensed and regulated
 by the Medical Board of California,
To check up on a license or
to file a complaint go to
(800) 633-2322
www.mbc.ca.gov,
email: licensecheck@mbc.ca.gov,
or call (800) 633-2322.

(b) The notice required by this section shall be provided by one of the following methods:

(1) Prominently posting the notice in an area visible to patients on the premises where the licensee provides the licensed services, in which case the notice shall be in at least ~~48~~38-point type in Arial font.

(2) Including the notice and an acknowledgement of receipt and understanding in a

written statement in a language understood by the patient's or patient representative's primary language, signed and dated by the patient or the patient's representative and retained in that patient's medical records, stating the patient understands the physician is licensed and regulated by the board. The notice and acknowledgement of receipt and understanding may be provided and maintained in an electronic format.

(3) Including the notice in a language understood by the patient's or patient representative's primary language in a statement on letterhead, discharge instructions, or other document given to a patient or the patient's representative, where the notice is placed immediately above the signature line for the patient in at least 14-point type.

(c) If the licensee chooses to post a sign to comply with this section, and the sign is not posted in a language understood by the patient or patient representative, the licensee shall also provide the notice as described in subdivisions (b)(2) or (b)(3) of this section, if the notice and templates for acknowledgement of receipt and understanding are provided by the board pursuant to subdivision (d) of this section in a language understood by the patient or patient representative, if the sign is not posted in the patient's or patient representative's primary language.

(d) Templates for the notice and acknowledgement of receipt and understanding shall be provided on the Medical Board of California website in the 12 most common non-English languages that are spoken in California per the California Census 2020 Language and Communication Access plan prepared by California Complete Count.

(e) Notwithstanding subdivision (c), a licensee shall be deemed to be in compliance with this section if the hospital, clinic, or other practice location where the licensee is practicing posts the notice on its premises in an area visible to patients consistent with the requirements of this section.

Note: Authority cited: Sections 2018 and 2026, Business and Professions Code.
Reference: Sections 138 and 2026, Business and Professions Code.

(2) Add Section 1378.5 to Article 3, Chapter 3, Division 13, of Title 16 of the California Code of Regulations to read as follows:

§ 1378.5. Notice to Consumers.

(a) A research psychoanalyst registrant shall provide notice to each patient of the fact that the registrant is registered and regulated by the board, the registration can be checked and complaints against the registrant can be made through the board's website or by contacting the board. The notice shall include a quick response (QR) code that leads to the board's Notice to Consumer webpage, and shall contain the following statement and information:

NOTICE TO PATIENTS

Research psychoanalysts are registered and regulated by the Medical Board of California.

To check up on a registration or to file a complaint go to www.mbc.ca.gov, email: licensecheck@mbc.ca.gov, or call (800) 633-2322.

(b) The notice required by this section shall be provided by one of the following methods:

(1) Prominently posting the notice in an area visible to patients on the premises where the registrant provides services as a research psychoanalyst, in which case the notice shall be in at least 38-point type in Arial font.

(2) Including the notice and an acknowledgement of receipt and understanding in a written statement in a language understood by the patient's or patient representative's primary language, signed and dated by the patient or the patient representative and retained in that patient's medical records. The notice and acknowledgement of receipt and understanding may be provided and maintained in an electronic format.

(3) Including the notice in a language understood by the patient's or patient representative's primary language in a statement on letterhead, patient instructions, or other document given to a patient or the patient representative, where the notice is placed immediately above the signature line for the patient in at least 14-point type.

(c) If the registrant chooses to post a sign to comply with this section, and the sign is not posted in a language understood by the patient or patient representative, the registrant shall also provide the notice as described in subdivisions (b)(2) or (b)(3) of this section, if the notice and templates for acknowledgement of receipt and understanding are provided by the board pursuant to subdivision (d) of this section in a language understood by the patient or patient representative, if the sign is not posted in the patient's or patient representative's primary language.

(d) Templates for the notice and acknowledgement of receipt and understanding shall be provided on the Medical Board of California website in the 12 most common non-English languages that are spoken in California per the California Census 2020 Language and Communication Access plan prepared by California Complete Count.

(e) Notwithstanding subdivision (c), a registrant shall be deemed to be in compliance with this section if the hospital, clinic, or other practice location where the registrant is practicing posts the notice on its premises in an area visible to patients consistent with the requirements of this section.

Note: Authority cited: Sections 2018 and 2026, Business and Professions Code.
 Reference: Sections 138, and 2026, Business and Professions Code.

(3) Add Section 1379.4 to Article 1, Chapter 4, Division 13, of Title 16 of the California Code of Regulations to read as follows:

§ 1379.4. Notice to Consumers.

(a) A licensed midwife shall provide notice to each client of the fact that the licensee is licensed and regulated by the board, the license can be checked and complaints against the licensee can be made through the board’s website or by contacting the board. The notice shall include a quick response (QR) code that leads to the board’s Notice to Consumer webpage, and shall contain the following statement and information:

NOTICE TO CLIENTS
Licensed midwives are licensed and regulated by the Medical Board of California. To check up on a license or to file a complaint go to www.mbc.ca.gov, email: licensecheck@mbc.ca.gov, or call (800) 633-2322.

(b) The notice required by this section shall be provided by one of the following methods:

(1) Prominently posting the notice in an area visible to clients on the premises where the licensee provides the licensed services, in which case the notice shall be in at least 38-point type in Arial font.

(2) Including the notice and an acknowledgement of receipt and understanding in a written statement in a language understood by the client’s or client representative’s primary language, signed and dated by the client or the client representative and retained in that client’s medical records. The notice and acknowledgement of receipt and understanding may be provided and maintained in an electronic format.

(3) Including the notice in a language understood by the client’s or client representative’s primary language in a statement on letterhead, client instructions, or other document given to a client or the client representative, where the notice is placed immediately above the signature line for the client in at least 14-point type.

(c) If the licensee chooses to post a sign to comply with this section, and the sign is not

posted in a language understood by the client or client representative, the licensee shall also provide the notice as described in subdivisions (b)(2) or (b)(3) of this section, if the notice and templates for acknowledgement of receipt and understanding are provided by the board pursuant to subdivision (d) of this section in a language understood by the client or client representative, if the sign is not posted in the client's or client representative's primary language.

(d) Templates for the notice and acknowledgement of receipt and understanding shall be provided on the Medical Board of California website in the 12 most common non-English languages that are spoken in California per the California Census 2020 Language and Communication Access plan prepared by California Complete Count.

(e) Notwithstanding subdivision (c), a licensee shall be deemed to be in compliance with this section if the hospital, clinic, or other practice location where the licensee is practicing posts the notice on its premises in an area visible to clients consistent with the requirements of this section.

Note: Authority cited: Sections 2018 and 2026, Business and Professions Code.
Reference: Sections 138, 2026, and 2508, Business and Professions Code.

(4) Amend Section 1379.58 of Article 4, Chapter 4.3, Division 13, of Title 16 of the California Code of Regulations to read as follows:

§ 1379.58. Notice to Consumers.

(a) A polysomnography registrant shall provide notice to each patient of the fact that the registrant ~~person~~ is registered and regulated by the board, the registration can be checked and complaints against the registrant can be made through the board's website or by contacting the board. The notice shall include a quick response (QR) code that leads to the board's Notice to Consumer webpage, and shall contain the following statement and information:

~~NOTICE TO PATIENTS-CONSUMERS~~
 Medical doctors and polysomnographic
 technologists, technicians, and trainees
 are licensed, registered, and regulated by
 the Medical Board of California.
To check up on a license or registration or
 to file a complaint go to
(800) 633-2322
www.mbc.ca.gov,
email: licensecheck@mbc.ca.gov,
or call (800) 633-2322.

(b) The notice required by this section shall be provided by one of the following methods:

(1) Prominently posting the notice in an area visible to patients on the premises where the registrant provides the services for which registration is required, in which case the notice shall be in at least ~~48~~38-point type in Arial font.

(2) Including the notice and an acknowledgement of receipt and understanding in a written statement in a language understood by the patient's or patient representative's primary language, signed and dated by the patient or the patient's representative and retained in that patient's medical records, ~~stating the patient understands the polysomnographic registrant is registered and regulated by the board. The notice and acknowledgement of receipt and understanding may be provided and maintained in an electronic format.~~

(3) Including the notice in a language understood by the patient's or patient representative's primary language, in a statement on letterhead, discharge instructions, or other document given to a patient or the patient's representative, where the notice is placed immediately above the signature line for the patient in at least 14-point type.

(c) If the registrant chooses to post a sign to comply with this section, and the sign is not posted in a language understood by the patient or patient representative, the registrant shall also provide the notice as described in subdivisions (b)(2) or (b)(3) of this section, if the notice and templates for acknowledgement of receipt and understanding are provided by the board pursuant to subdivision (d) of this section in a language understood by the patient or patient representative, if the sign is not posted in the patient's or patient representative's primary language.

(d) Templates for the notice and acknowledgement of receipt and understanding shall be provided on the Medical Board of California website in the 12 most common non-English languages that are spoken in California per the California Census 2020 Language and Communication Access plan prepared by California Complete Count.

(e) Notwithstanding subdivision (c), a registrant shall be deemed to be in compliance with this section if the hospital, clinic, or other practice location where the registrant is practicing posts the notice on its premises in an area visible to patients consistent with the requirements of this section.

Note: Authority cited: Sections ~~138~~ and 2018 and 2026, Business and Professions Code; Reference: Sections 138 and 2026, Business and Professions Code.

Attachment 2

From: [Joyce M. Koh](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: Comments on proposed modifications made to proposed regulation 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Monday, June 27, 2022 11:07:59 PM

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Contact the Help Desk if you have any questions or concerns.

Hello, I hold an MD license (C172455) and would like to respectfully submit my comments on the proposed modifications made to proposed regulation 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS

With regards to part "a":

§ 1355.4. Notice to Consumers.

(a) A medical doctor engaged in the practice of medicine shall provide notice to each patient of the fact that the licensee is licensed and regulated by the board, the license can be checked and complaints against the licensee can be made through the board's website or by contacting the board. The notice shall include a quick response (QR) code that leads to the board's Notice to Consumer webpage, and shall contain the following statement and information:

NOTICE TO PATIENTS

Medical doctors are licensed and regulated by the Medical Board of California.

To check up on a license or
to file a complaint go to
(800) 633-2322 www.mbc.ca.gov,
email: licensecheck@mbc.ca.gov,
or call (800) 633-2322.

The inclusion of wording to solicit complaints to the board troubles me. I much would prefer for patients to contact myself or my office manager or staff about their complaint. This would result in more timely resolution of their concerns and therefore hopefully improve there healthcare outcomes. It may be confusing to patients to see this notice and believe that this method of feedback is superior, given the stamp of the MBC on the notice.

I also note that there is no way for the MBC to determine if the invited complaints are from actual patients. I would be concerned that linking via a QR code likens giving complaints in this matter to the casual way in which a Yelp or Google review is left about a restaurant. Many of these reviews are left in a hasty manner and with more emotion than thought. The internet / electronic submission tends to give a layer of anonymity and detachment which I feel is not conducive to eliciting thoughtful feedback and of course can shield the few who may wish to cause harm through their feedback.

I do believe that patients should have a voice, but I believe that as medical doctors, the relationship we forge with patients includes receiving direct feedback, and in doing so, allows us to respond thoughtfully and in real time.

Again, I respectfully ask that you do NOT include these proposed modifications to part a.

Sincerely,
Joyce M. Koh, MD

https://www.mbc.ca.gov/Download/Proposed-Regulations/regs-noticetoconsumers-modifiedtext.pdf?fbclid=IwAR0mLxIGtTNApBXtGXzX8g2bLN1VjZ8vS4FR7115VPAryp5a1tag_J4fUk

Sent from my iPhone

From: [Krishna, Priya](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: QR code proposal
Date: Tuesday, June 28, 2022 9:39:12 PM

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Dear Ms Schembra,

I am writing to express my sincere concern about the proposal of a QR code for patients to file complaints directly to the medical board of California. I think this is a dangerous proposal because it opens the door wide open for patients with unjustifiable grievances to leave pernicious comments about a physician. This is not only damaging to a physician's career but to their psyche. As it is, physicians have no recourse with online reviews when posted - it is nearly impossible to get unwarranted negative reviews off the web. As someone who has personally experienced this, it creates unnecessary stress. You will lose a lot of talented physicians this way and the state of California needs more physicians. If you are trying to drive physicians out of California, you are doing a good job. I understand the need to have an "easier way" for patients to be able to report to the medical board, but if a patient has a serious enough complaint worth investigating, they ALWAYS know how to contact the medical board.

Sincerely,
Priya Krishna MD, MS, FACS

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From: dana.marrero
To: Regulations_MBC@MBC
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Wednesday, June 29, 2022 12:11:55 PM

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Complaints to the medical board can be devastating to a physician's future ability to obtain state licensing and hospital credentialing. Even one complaint can be career ending. If patients are provided a qr code they will think this is the same as leaving a Google review and will comment on many insignificant things. Medical Board complaints should be limited to serious grievances. If a patient has such a grievance it is not difficult to figure out how to contact the medical board. This new proposal will lead to 1000s of patient reviews that clog up the system and prevent true concerns from being given the attention they deserve. I strongly recommend against this proposal

Sincerely,

Dr Marrero

Sent from my Verizon, Samsung Galaxy smartphone

From: [k.westcoast](#)
To: Regulations_MBC@MBC
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Wednesday, June 29, 2022 1:07:47 PM

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CA Medical Board:

Patients are likely to treat QR codes like online reviews not realizing how harmful it can potentially be to a physician. Patients should have a way of submitting complaints on a local level first for minor issues, and if applicable, a way to file a formal complaint to the medical board via the website.

This policy will increase physician burnout. This is not a good way to support physicians.

Thank-you for your time.
Kendall Egan MD

From: [Kacie McFarland](#)
To: Regulations_MBC@MBC
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Wednesday, June 29, 2022 3:30:20 PM

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To Whom It May Concern,

I was just made aware that the California Medical Board is proposing regulations that doctors provide patients with QR codes so that they can send complaints directly to the medical board about doctors. This is a horrible idea. See Google reviews for small glimpse into what the board will be bombarded with. I fully support patients being able to send valid complaints but giving all patients easy access to complain will not be beneficial to anyone. As a practicing physician in CA I strongly oppose this regulation.

Sincerely,
Kimberly McFarland, MD

From: [Silvia Caswell](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Wednesday, June 29, 2022 3:42:07 PM

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To whom it may concern in the CA medical board,

I recently became aware of the section 1355 changes that are being proposed to include a QR code for “consumers” to send complaints to the medical board.

Doctors don’t take care of customers. We take care of patients. Therefore, it is not in the best interest of any physician in CA (let alone across the country) to be including these in notices to patients. We do not function like normal businesses, therefore these QRs will be misused by patients. If patients have legitimate complaints, those are to be submitted on a local level like to a practice manager or hospital patient advocate to be dealt with accordingly.

I would propose that those means should be advertised in a practice rather than direct messaging to the Medical Board.

Silvia Caswell, DO

Sent from my iPhone

From: [Sarah Rubin](#)
To: Regulations_MBC@MBC
Subject: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Wednesday, June 29, 2022 8:18:22 PM

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To whom it may concern,

The California Medical Board is proposing regulations that doctors provide patients with QR codes so that they can send complaints directly to the medical board about doctors.

I don't think the Medical Board realizes that patients are likely to treat this like a review for a restaurant or small business. This will ultimately lead to an inundation of feedback concerning every little thing from ER wait times, to snack options, to comments on appearance and their perceived assessment of the physicians knowledge when the patient has no idea what the standard of care is or have any medical background. Patients should have a way of submitting complaints to administration at a hospital or at a local level like to a practice manager or hospital patient advocate. I would propose that those means should be advertised in a practice rather than direct messaging to the Medical Board. This will inundate the medical board with issues that do not pertain to their medical care. It will also most likely have a more negative effect on physicians or other providers during a time where burn out or moral injury is already incredibly high and there is a large exodus from our field.

I strongly oppose this regulation.

Sarah Rubin, DO
Emergency Medicine

From: [Teresa Fu](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Wednesday, June 29, 2022 10:02:44 PM

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To the California Medical Board:

I recently learned about the proposal to have physicians post QR Codes for sending complaints directly to the medical board.

I strongly disagree with this proposal. Medical board complaints are for serious matters, related to quality of care or inappropriate behavior. Posting a QR code like a restaurant or salon might do is wholly inappropriate. Physicians are not in the customer service business where the customer is always right. Our job is to provide quality care and sometimes that involves giving advice that may not be what the patient wants to hear. Moreover, the general public is going to treat this as a venting mechanism for things completely out of physicians' control - their deductible, insurance, traffic, wait times for appointments, etc. it will be seen as akin to a google or Yelp review.

I do agree the complaint process should be straightforward for warranted complaints, but it should start first at a local level such as a practice manager or patient advocate, instead of going straight to the MBC.

I urge the Board to reject this proposal.

Teresa Fu, MD

From: [Dorotheea Warmerdam](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: QR code for physician complaints - RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Thursday, June 30, 2022 11:26:13 PM

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I disagree with the proposed changes to the Notice to Consumers.

I don't think the Medical Board realizes that patients are likely to treat this like a Google review, not realizing how harmful it can potentially be to a physician.

Patients are better served by submitting complaints directly to a practice manager or hospital patient advocate. I would propose that those means should be advertised in a practice rather than direct messaging to the Medical Board. In this way, patients' concerns can be addressed and responded to in a real-time manner, improving the quality of their care.

There is already a shortage of doctors in California and long waits to find a PCP or to see a specialist. This will only exacerbate the situation; doctors will leave California and new doctors will avoid practicing here, given the possibility of numerous and/or unfounded complaints facilitated by this proposed posting. After such difficult 3 years with Covid, many of us worked long hours while others were able to work from home. We worked tirelessly, despite being in harm's way, because it's the right thing to do to help our fellow man. How can the state of California treat us with such disrespect?

Thank you for your attention,
Dorotheea Warmerdam MD

From: [S B](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: QR code.
Date: Saturday, July 2, 2022 12:25:56 PM

CAUTION: This email originated from outside the Medical Board of California.
DO NOT click links or open attachments unless you recognize the sender and know the content is safe.
Contact the Help Desk if you have any questions or concerns.

RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS

To Whom It May Concern:

I disagree with the proposed changes to the Notice to Consumers.

Are you out of your minds?! Everyone has a stupid complaint with absolutely no medical training to back up there opinion. It is an OPINION only.
You will be inundated with paperwork and staffing issues if you implement this plan to allow a QR code for contacting the medical board

I don't think the Medical Board realizes that patients are likely to treat this like a Google review, not realizing how harmful it can potentially be to a physician. Patients are better served by submitting complaints directly to a practice manager or hospital patient advocate. I would propose that those means should be advertised in a practice rather than direct messaging to the Medical Board. In this way, patients' concerns can be addressed and responded to in a real-time manner, improving the quality of their care.

There is already a shortage of doctors in California and long waits to find a PCP or to see a specialist. This will only exacerbate the situation; doctors will leave California and new doctors will avoid practicing here, given the possibility of numerous and/or unfounded complaints facilitated by this proposed posting. This does not seem to give the physician protection from non-patients submitting feedback and likens feedback to that given to casual dining restaurants.

~CONCERNED DOCTOR.

From: [Lee, Matthew \(Heme/Onc Fellow\)](#)
To: Regulations_MBC@MBC
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Monday, July 4, 2022 6:30:45 PM

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To Whom It May Concern,

The California Medical Board is proposing regulations that doctors provide patients with QR codes so that they can send complaints directly to the medical board about doctors.

I do not think that this is a good idea for the following reasons:

1. Allowing patients to report complaints to the California Medical Board would increase the work of the CMB thus unnecessarily increase work for the employees of the board as well as the physicians. This would be a waste of resources and potentially having real issues be delayed or be missed. It would be best for patients to complain at the establishment where it can be handled without going to the medical board.
2. While it is a physician's duty to care for patients, we also have a duty to "do no harm." Patients may not understand that notion and could file a complaint to the medical board without fully understanding the decision making of his/her physician

I hope that this idea be reconsidered with the understanding that the medical field is a unique field and cannot be compared to other industries which are based off of consumer satisfaction alone. Thank you for your time.

Sincerely,

Matthew Lee, DO
UCSF Fresno
Hematology Oncology Fellow

From: [Princeton Ly](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: 16 CCR sections 1355.4, 1378.5, 1379.4, 1379.58
Date: Thursday, July 7, 2022 10:44:30 AM

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To Whom It May Concern,

I am a licensed physician (pediatrician) in the state of California and was recently notified regarding QR codes for medical board complaints. I think that such a move is ultimately ineffective, short-sighted, and will lead to even more red tape that prevents hard-working physicians from caring for patients.

Some more thoughts:

- Literature supports that quality of care is inversely related to metrics of patient "satisfaction" - this would essentially be another one.
- There are other ways of "leaving reviews" for physicians that are much more functional / easy to respond to. Be ready if implemented to deal with hundreds (or thousands) of reviews / investigations, for things patients typically leave reviews on (like waiting room quality or doctors running late).
- I find it hard to believe that any current, practicing physician who is talking to patients or families on a regular basis would propose such an imposition. If rules are drafted without majority physician input - they are completely useless. Who is making money here? Who in their right mind would think this is a good idea? The fact that I / we have to even consider emailing on something like this is a huge waste of everyone's time.

Sincerely,
Princeton Ly, MD

From: [Balentine, Ashley](#)
To: [Regulations_MBC@MBC](#)
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Sunday, July 10, 2022 6:58:10 PM

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Hello,

I was made aware that the California Medical Board is proposing regulations that doctors provide patients with QR codes so that they can send complaints directly to the medical board about doctors. However, I feel the Medical Board may not realize that patients are likely to treat this as a Google review. Patients will not realize instead how harmful this may potentially be to a physician. I do believe patients should have a way of submitting complaints on a local level, like to a practice manager or hospital patient advocate, which is something that is currently in place at my location of work. So I propose that those means be advertised in a practice rather than direct messaging to the Medical Board.

Thank you,
Dr. Balentine

Ashley Balentine, MD
Assistant Professor of Clinical Anesthesiology
USC Department of Anesthesiology and Pain Management
1450 San Pablo St., Suite 3600
Los Angeles, CA 90033
Ph: 323-442-7400

Attachment 3

From: [Catherine Dalton](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: Comments re notifications to consumers re physician licensing
Date: Tuesday, June 28, 2022 11:28:23 AM

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This change appears to solicit complaints against physicians. Please so not allow such inflammatory changes
C. Dalton, MD

Sent from my iPhone

From: [Sanad Alshareef](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Tuesday, June 28, 2022 1:25:57 PM

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To whom it may concern,

Please do not let physicians suffer by making complaints from patients go directly to the medical board. Please do not let physicians lose faith in their communities by making bad reviews go directly to the medical board. I meet frustrated patients all the time whether it is due to Covid or getting med refill or chronic pain management. Does the board need to know about the patients frustration or these issues should be handled by practice or hospital Manager? As an a board certified internal medicine physician, I would highly recommend against making such daily frustrations stain the great work all physicians do for their patients on daily basis.

Sincerely,

Sanad Alshareef, D.O.

From: [Whitney Sherman](#)
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Wednesday, June 29, 2022 2:57:18 PM

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Contact the Help Desk if you have any questions or concerns.

RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS

I don't think the Medical Board realizes that patients are likely to treat this like a Google review not realizing how harmful it can potentially be to a physician. Pts should have a way of submitting complaints on a local level like to a practice manager or hospital patient advocate. I would propose that those means should be advertised in a practice rather than direct messaging to the Medical Board.

Sent from my iPhone

From: [Dr Perminder Bhatia](#)
To: Regulations_MBC@MBC
Subject: regulations concerning notice to consumers
Date: Friday, July 1, 2022 8:32:08 AM

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Alexandria Schembria

I am strictly against this proposal.

1. These are patients and not consumers.
2. We are doctors and not traders or sellers.
3. There are already enough rules to let Patients Know about Medical Board and License. So there is no need for another crappy rule.
4. So far any of your efforts could not stop, illegal medical practice of Healers in different communities.
5. There are people who under the name of healing use unapproved products, and committ fraud.

Perminder Bhatia, MD
Neuro-Pain Medical Center
736 E Bullard Ave, Suite 101
Fresno CA
Ph no-(559) 4379700
Fax- (559) 4384634

From: laura.rueff@gmail.com
To: [Regulations, MBC@MBC](mailto:Regulations_MBC@MBC)
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Friday, July 1, 2022 11:23:03 PM

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This is a disappointing proposal for the Medical Board because it is the Medical Board, not yelp.

This will be treated like yelp or other online review. The medical board is supposed to be for reporting of true professional misconduct. This proposal is problematic for many reasons, including:

- increases bureaucracy for the medical board
- increases cost to the taxpayers
- onslaught of petty complaints will mute and obscure true and appropriate reports from timely evaluation and action, increasing danger to the public
- will lead to further movement of physicians out of the state due to undue burden of time, money, and mental anguish expended on responding to and/or defending against frivolous complaints (at a time of increasing state physician shortage)
- diverts resources of the board away from other avenues they should be pursuing such as gaining authority to license and oversee ALL practitioners who practice medicine, specifically those currently practicing without a license to do so (nurse practitioners). This represents a much greater danger / deception to the public than the innumerable petty review type complaints the proposed process will undoubtedly generate.

Thank you,
Laura Traube

From: [Samantha Thomson](#)
To: [Regulations, MBC@MBC](#)
Subject: RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS
Date: Sunday, July 3, 2022 12:38:01 AM

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Contact the Help Desk if you have any questions or concerns.

RE: 16 CCR sections 1355.4, 1378.5, 1379.4, and 1379.58, related to NOTICE TO CONSUMERS

To Whom It May Concern:

I disagree with the proposed changes to the Notice to Consumers. I am a practicing physician in California.

I don't think the Medical Board realizes that patients are likely to treat this like a Google review, not realizing how harmful it can potentially be to a physician. Patients are better served by submitting complaints directly to a practice manager or hospital patient advocate. I would propose that those means should be advertised in a practice rather than direct messaging to the Medical Board. In this way, patients' concerns can be addressed and responded to in a real-time manner, improving the quality of their care.

There is already a shortage of doctors in California and long waits to find a PCP or to see a specialist. This will only exacerbate the situation; doctors will leave California and new doctors will avoid practicing here, given the possibility of numerous and/or unfounded complaints facilitated by this proposed posting and undue burden of addressing these minor complaints. This does not seem to give the physician protection from non-patients submitting feedback and likens feedback to that given to casual dining restaurants. Furthermore, this will drown out legitimate complaints by sheer volume.

Regards,

Samantha L Thomson, MD