



# Sunset Review Oversight Report 2022: Part II

The **Sunset Review Oversight Report 2022: Part II** contains the sections listed below:

**Section 3: Fiscal and Staff**

**Part II: Midwifery Program**

**Part III: Polysomnographic Program**

**Part IV: Research Psychoanalysts**

**Section 13: Attachments**

The **Sunset Review Oversight Report 2022: Part I** was published separately:

**Section 1: Background and Description of the Board and Regulated Profession**

**Section 2: Performance Measures and Customer Satisfaction Surveys**

**Section 4: Licensing Program**

**Section 5: Enforcement Program**

**Section 6: Public Information Policies**

**Section 7: Online Practice Issues**

**Section 8: Workforce Development and Job Creation**

**Section 9: Current Issues**

**Section 10: Board Actions and Responses to COVID-19**

**Section 11: Board Action and Response to Prior Sunset Issues**

**Section 12: New Issues**

# Sunset Review Oversight Report

## Section 3

### **Fiscal and Staff**

- *Fiscal Issues*
- *Staffing Issues*
- *Attachments*
  - *Attachment D – Year End Organizational Charts*
  - *Attachment F – Revenue and Fee Schedule*

**FISCAL AND STAFF****Fiscal Issues****8. Is the Board's fund continuously appropriated? If yes, please cite the statute outlining this continuous appropriation.**

The Board's fund is not continuously appropriated. The Board's appropriation is part of the Budget Act.

**9. Describe the Board's current reserve level, spending, and if a statutory reserve level exists.**

Pursuant to BPC section 2435 (g), the Board's statutory reserve should be between two to four months. However, since the last fee increase effective January 1, 2022, pursuant to SB 806, the Board has experienced minimal revenue growth and significant expenditure increases, therefore, the Board's expenditures continue to exceed revenues.

The Board began the current fiscal year with a \$6.606 million fund balance which includes a \$10 million Control Section (CS) 14.00 loan from the Bureau of Automotive Repair (BAR).

The Board's cost of doing business has increased with most costs being outside the Board's control. Several factors impacting the Board's fund include: the Attorney General's (AG) 30 percent hourly rate increase, salary and benefit increases for Peace Officer classifications (Health Quality and Investigative Unit (HQUI) Prorata), general salary and benefit increases to Board and Department staff, and the Board's share of \$2.79 million in 2021-22 for Executive Order 21/22 – 276 (Chapter 16, Statutes of 2019 (AB 84)), which is a revenue transfer to pay back the General Fund.

**10. Describe if/when a deficit is projected to occur and if/when a fee increase or reduction is anticipated. Describe the fee changes (increases or decreases) anticipated by the Board.**

The Board was at 1.0 months in reserves at the end of 2021-22 after attaining a \$10 million dollar CS 14.00 loan from BAR. This loan must be repaid with interest by 2023-24. The Board is projecting to need a second CS 14.00 loan of approximately \$25 million dollars in 2022-23 to remain solvent. Unless additional fee increases are in place by 2023-24, as proposed below, the Board's fund will be insolvent with a negative -4.8 fund balance by the end of 2023-24.

## SECTION 3

## FISCAL AND STAFF

**Table 2. Fund Condition**

(Dollars in Thousands)	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24
Beginning Balance*	\$33,739	\$26,297	\$17,803	\$9,142	\$6,605	\$-7,561
Total Revenue	\$59,892	\$59,761	\$59,941	\$63,943	\$66,902	\$67,207
Loans from DCA funds per Control Section 14.00	\$0	\$0	\$0	\$10,000	\$0	\$0
Loans repaid to DCA Funds per Control Section 14.00**	\$0	\$0	\$0	\$0	\$0	-\$10,149
Loans to General Fund	\$0	\$0	\$0	\$0	\$0	\$0
Loans Repaid to General Fund	\$0	\$0	\$0	\$0	\$0	\$0
Transfers to General Fund***	\$0	\$0	\$0	-\$2,790	\$0	\$0
Total Revenue and Transfers	\$59,892	\$59,761	\$59,941	\$71,153	\$66,902	\$57,058
Budget Authority	\$66,092	\$69,400	\$70,999	\$76,081	\$75,454	\$77,499
Program Expenditures	\$62,072	\$62,755	\$65,791	\$68,788	\$75,454	\$77,499
Supplemental Pension Payments	\$319	\$685	\$685	\$685	\$685	\$685
FI\$Cal Assessments	\$7	-\$8	\$0	\$0	\$0	\$0
Statewide General Administrative Expenditures	\$4,078	\$3,707	\$3,328	\$4,217	\$4,929	\$4,929
Fund Balance	\$27,155	\$18,919	\$7,940	\$6,605	-\$7,561	-\$33,616
Months in Reserve	4.7	3.1	1.3	1.0	-0.6	-4.8

\*After prior year adjustments

\*\*Operating Transfers from Vehicle Inspection & Repair Fund 0421 per EO E 21/22-313 (includes 0.696% interest repaid in 2023-24)

\*\*\*Operating Transfers to General Fund 0001 per EO E 21/22 - 276 Revised (AB 84)

The Board in consultation with the DCA Budget office has completed an analysis of the Board's fund condition to determine what fee levels would need to be established at to both address the Board's existing annual structural fund deficit, payback any loans taken to continue Board operations, and rebuild the fund balance to within statutory requirements. Below are the highlights of the analysis:

- Estimated Fee increases effective 1/1/2024 will restore the Board's funds to a positive and sustainable fiscal path:
  - Initial License Fee – Physician and Surgeon – increase from \$863 to \$1,350
  - Reduced Initial License Fee – Physician and Surgeon – increase from \$432 to \$675
  - Renewal Fee – Physician and Surgeon – increase from \$863 to \$1,350
  - Delinquent Fee – Physician and Surgeon – increase from \$86 to \$135
- General Assumptions on Fund Condition:
  - Includes two proposed Control Section 14.00 loans of \$25 million in 2022-23 and \$12 million in 2023-24 which are required to keep the fund solvent and maintain Board operations until proposed fees can take effect. The repayment of both loans is anticipated to total approximately \$38 million (including interest). The new fees proposed above will be used to repay these loans and sustain the Board's fund balance ongoing.
  - Includes a transfer of \$2.79 million in 2021-22 via Executive Order 21/22 - 276 (AB 84) to pay back the General Fund for a supplemental pension payment.
  - Includes estimated Employee Compensation and Retirement Adjustments for 2022-23.
  - Includes estimated collection of unscheduled cost recovery.
  - Includes estimated ongoing Departmental expenditures and a future proposal for additional Medical Expert Reviewer funding.
  - Includes a general ongoing three percent increase to the Board's State Operations Expenditures to account for future Employee Compensation and Retirement Rate increases.

Based on the proposed fees and budget assumptions, the following fund condition report shows the Board on a fiscal recovery path:

**Table 2.1 Fund Condition**

(Dollars in Thousands)	FY 22-23	FY 23-24	FY 24-25	FY 25-26	FY 26-27	FY 27-28
Beginning Balance*	\$6,605	\$15,612	\$17,191	\$4,200	\$2,621	\$10,773
Total Revenue**	\$66,968	\$84,466	\$101,719	\$101,499	\$101,437	\$101,521
Loans from DCA funds per Control Section 14.00	\$25,000	\$12,000	\$0	\$0	\$0	\$0
Loans repaid to DCA Funds per Control Section 14.00***	\$0	-\$10,149	-\$25,650	-\$12,312	\$0	\$0
Loans to General Fund	\$0	\$0	\$0	\$0	\$0	\$0
Loans Repaid to General Fund	\$0	\$0	\$0	\$0	\$0	\$0
Transfers to General Fund	\$0	\$0	\$0	\$0	\$0	\$0
Total Revenue and Transfers	\$91,968	\$86,317	\$76,069	\$89,187	\$101,437	\$101,565
Budget Authority****	\$77,347	\$79,621	\$83,943	\$86,334	\$88,583	\$91,448
Program Expenditures	\$77,347	\$79,621	\$83,943	\$86,334	\$88,853	\$91,448
Supplemental Pension Payments	\$685	\$685	\$685	\$0	\$0	\$0
Fi\$Cal Assessments	\$0	\$0	\$0	\$0	\$0	\$0
Statewide General Administrative Expenditures	\$4,929	\$4,432	\$4,432	\$4,432	\$4,432	\$4,432
Fund Balance	\$15,612	\$17,191	\$4,200	\$2,621	\$10,773	\$16,414
Months in Reserve	2.2	2.3	0.6	0.3	1.4	2.1

\*After prior year adjustments

\*\*Includes amended revenue projections for 2022-23 and proposed fee increase effective January 1, 2024

\*\*\*Operating Transfers from Vehicle Inspection & Repair Fund 0421 per EO E 21/22-313 (includes estimated interest repaid in 2023-24)

\*\*\*\*Includes estimated growth in expenditure authority for employee compensation, retirement, other budget adjustments, and unscheduled cost recovery

**11. Describe the history of general fund loans. When were the loans made? When have payments been made to the Board? Has interest been paid? What is the remaining balance?**

The Board has made two loans to the general fund. The first loan was in 2008-09 for \$6 million and repayment was made in 2016-17. The second loan was for \$9 million in 2011-12 and repayment was made in 2017-18.

**12. Describe the amounts and percentages of expenditures by program component. Use Table 3. Expenditures by Program Component to provide a breakdown of the expenditures by the board in each program area. Expenditures by each component (except for pro rata) should be broken out by personnel expenditures and other expenditures.**

Table 3 below indicates the amount of expenditures in each of the Board's programs. In addition, the Budget Distribution chart, which is in the Board's [Annual Report](#), published every year, reflects the budgeted (not actual) expenditures and percentage in each of the Board's Programs (including pro rata) for 2021-22. The Enforcement Program (including the AG, the Office of Administrative Hearings (OAH), the HQUI, and Probation Monitoring) makes up approximately 76 percent of the Board's overall expenditures. The Licensing Program accounts for approximately 12 percent of the Board's expenditures, while the ISB accounts for approximately five percent. The Executive and Administrative Programs make up the remaining four percent of the Board's overall expenditures

**Table 3. Expenditures by Program Component**

**(list dollars in thousands)**

	FY 18-19		FY 19-20		FY 20-21		FY 21-22	
	Personnel Services	OE&E	Personnel Services	OE&E	Personnel Services	OE&E	Personnel Services	OE&E
Enforcement	\$5,373	\$41,461	\$5,739	\$39,704	\$5,445	\$45,240	\$6,286	\$46,417
Examination	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Licensing	\$4,348	\$3,365	\$4,510	\$3,471	\$4,435	\$2,480	\$4,836	\$3,726
Admin *	\$1,632	\$508	\$1,508	\$628	\$1,520	\$445	\$1,640	\$597
DCA Pro Rata	N/A	\$5,028	N/A	\$5,251	N/A	\$4,728	N/A	\$5,630

Diversion (if applicable)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>TOTALS</b>	<b>\$11,353</b>	<b>\$50,362</b>	<b>\$11,757</b>	<b>\$49,054</b>	<b>\$11,400</b>	<b>\$52,893</b>	<b>\$12,762</b>	<b>\$56,370</b>

\*Administration includes costs for executive staff, board, administrative support, and fiscal services.

**13. Describe the amount the Board has contributed to the BreEZe program. What are the anticipated BreEZe costs the board has received from DCA?**

The BreEZe program was approved in 2009 and was intended to address legacy systems deficiencies. The Board was one of ten DCA boards and bureaus scheduled for Release 1 of BreEZe in October 2013. The actual costs incurred by the Board from 2016-17 through 2021-22 total over \$7 million and are inclusive of vendor costs, DCA staff, and other related costs. The Board is anticipating project costs of \$643,000 in 2022-23 and 2023-24. Funding will be requested for projected ongoing maintenance costs in 2024-25 and ongoing through a future budget change proposal. A summary of actual expenditures and projected future costs can be found in the table below. It is important to note that these costs do not capture the numerous Board staff hours spent on the project.

<b>BreEZe Program Costs</b>						
FY 16/17 Actual	FY 17/18 Actual	FY 18/19 Actual	FY 19/20 Actual	FY 20/21 Actual	FY 21/22 Actual	FY 22/23 Estimate
\$1,610,179	\$1,488,365	\$1,341,570	\$1,074,919	\$712,561	\$680,310	\$643,000

**14. Describe license renewal cycles and history of fee changes in the last 10 years. Give the fee authority (Business and Professions Code and California Code of Regulations citation) for each fee charged by the Board.**

The Board's main source of revenue is from the physician's renewal fees, as shown below in Table 4. All Board application, initial licensure, and renewal fees were increased effective January 1, 2022, pursuant to SB 806:



Name	Prior Fee Amount	Current Fee Amount
Penalty Fee - Physician & Surgeon	\$ 391.50	\$ 431.50
Penalty Fee - Special Faculty Permit	\$ 391.50	\$ 431.50
Registration - Research Psychoanalyst	\$ 100.00	\$ 150.00
Fictitious Name Permit	\$ 50.00	\$ 70.00
Application Processing Fee	\$ 442.00	\$ 625.00
Postgraduate Training License Application Fee	\$ 442.00	\$ 625.00
Initial License Fee - Physicians & Surgeons	\$ 783.00	\$ 863.00
Initial License Fee - Special Faculty Permit	\$ 783.00	\$ 863.00
1/2 Initial License Fee - Physicians & Surgeons	\$ 391.50	\$ 431.50
Special Faculty Permit - Application Fee	\$ 442.00	\$ 625.00
Duplicate Fictitious Name Permit	\$ 30.00	\$ 40.00
Biennial Renewal - Research Psychoanalyst	\$ 50.00	\$ 75.00
Fictitious Name Renewal	Variable	\$ 50.00
Biennial Renewal - Physicians & Surgeons	\$ 783.00	\$ 863.00
Biennial Renewal - Special Faculty Permit	\$ 783.00	\$ 863.00
Delinquent Fee - Physician & Surgeon	\$ 78.00	\$ 86.30
Delinquent Fee - Special Faculty Permit	\$ 78.00	\$ 86.30

Prior to that, the Board's physician's and surgeon's initial licensure and renewal fees were increased effective January 1, 2006, from \$600 to \$790, its first increase since 1994, to support the VE/Prosecution model.

Effective January 1, 2007, the physician's initial licensure and renewal fees were increased by \$15 to \$805 based upon the average amount of cost recovery that the Board had received in the prior three fiscal years that would no longer be received by the Board. Effective July 1, 2009, the physician's initial licensure and renewal fees were decreased by \$22 to \$783, a reduction mandated because of the elimination of the Board's Diversion Program on July 1, 2008.

Table 4. Fee Schedule and Revenue (list revenue dollars in thousands)							
Fee	Current Fee Amount	Statutory Limit	FY 18/19 Revenue	FY 19/20 Revenue	FY 20/21 Revenue	FY 21/22 Revenue	% of Total Revenue
Application Fee (BPC 2435) (PS & PTL)	\$625.00	\$625.00	\$3,342	\$3,902	\$3,258	\$4,010	6.2%
Initial License Fee (BPC 2435) (16 CCR 1351.5)	\$863.00	\$863.00	\$2,000	\$2,159	\$1,072	\$2,380	3.2%
Initial License Fee (Reduced) (BPC 2435)	\$431.50	\$431.50	\$1,680	\$1,255	\$785	\$2,148	2.5%
Biennial Renewal Fee (BPC 2435) (16CCR 1352)	\$863.00	\$863.00	\$50,602	\$50,612	\$52,759	\$53,208	88.1%

#### 15. Describe Budget Change Proposals (BCPs) submitted by the Board in the past four fiscal years.

The Board must have sufficient staff and related resources to meet its consumer protection mission. During the past two fiscal years, since the prior sunset review, the Board has sought legislative approval of three BCPs to provide additional necessary expenditure and position authority.

Table 6 provides information on the requested data and the specifics on each BCP submitted (links included) in the last two fiscal years.

**Table 5. Budget Change Proposals (BCPs)**

BCP ID #	Fiscal Year	Description of Purpose of BCP	Personnel Services				OE&E	
			# Staff Requested (include classification)	# Staff Approved (include classification)	\$ Requested	\$ Approved	\$ Requested	\$ Approved
<a href="#">1111-066</a>	2020-21	Increased workload related to Healthcare Practitioners and Unprofessional Conduct (SB 425)	.5 Mgmt. Svcs Techn  1.0 Assoc Govtl Program Analyst  11.0 Investigator	.5 Mgmt. Svcs Techn  1.0 Assoc Govtl Program Analyst  11.0 Investigator	20-21: \$1,226  Ongoing: \$1,628	20-21: \$1,226  Ongoing: \$1,628	20-21: \$831  Ongoing: \$315	20-21: \$831  Ongoing: \$315
<a href="#">1111-125</a>	2021-22	Augmentation and Continuation of Resources for the Mexico Pilot Program	0.5 Staff Svcs Analyst (Reduced to 0.3 in 22-23, 0.2 in 23-24 and 0.0 ongoing)	0.5 Staff Svcs Analyst (Reduced to 0.3 in 22-23, 0.2 in 23-24 and 0.0 ongoing)	21-22: \$9  22-23: \$38  23-24: \$29  Ongoing: \$0	21-22: \$9  22-23: \$38  23-24: \$29  Ongoing: \$0	21-22: \$233  22-23: \$303  23-24: \$246  Ongoing: \$0	21-22: \$233  22-23: \$303  23-24: \$246  Ongoing: \$0
<a href="#">1111-126</a>	2022-23	Chapter 649, Statute of 2021 (SB 806)	0.5 Office Tech (1.0 Ongoing)  0.5 Staff Svcs Analyst (1.0 Ongoing)	0.5 Office Tech (1.0 Ongoing)  0.5 Staff Svcs Analyst (1.0 Ongoing)	22-23: \$213  Ongoing: \$302	22-23: \$213  Ongoing: \$302	22-23: \$390  Ongoing: \$75	22-23: \$390  Ongoing: \$75

			1.0 Assoc Govtl Program Analyst	1.0 Assoc Govtl Program Analyst				
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### Staffing Issues

**16. Describe any board staffing issues/challenges, i.e., vacancy rates, efforts to reclassify positions, staff turnover, recruitment and retention efforts, succession planning.**

#### ***Vacancy Rates***

The Board continues its efforts both recruiting and retaining employees in each of its programs in 2019-20 the Board's vacancy rate was 12 percent. As of October 31, 2022, the Board's vacancy rate is 17.1 percent, which equates to 30.8 vacant positions. The Board continues to advertise its vacant positions, schedule interviews and process hiring packages as quickly as possible. The Board attended a job fair in early November 2022 and is developing new strategies to increase the retention of current employees.

#### ***Reclassification Efforts***

As the duties for each position evolves due to operational need, the Board works with the DCA Office of Human Resources to reclassify its positions to ensure the efficient utilization of resources to enhance Licensing and Enforcement operations and facilitate the Board's mission statement, objectives, and goals.

The Board regularly conducts a review of its staff and will reclassify positions as needed. Furthermore, over the past few years, the Board has reclassified some positions to address the increased complexity of assignments; levels of responsibility and consequences involved; and the need for staff oversight and professional development. Overall, the Board's reclassification efforts have addressed changes needed due to legislation, business processes, and operational efficiencies. As a result, the Board is better equipped to fulfill its mission of consumer protection.

#### ***Succession Planning***

The Board uses policy and procedure manuals to ensure succession planning. Additionally, when available, the Board has the individuals leaving a position provide training to new staff and ensure the knowledge base is being transferred. The Board does everything it can with its existing resources to ensure that new staff receive the training needed to be successful.

The Board recognizes that the key to succession planning is developing staff to fill key leadership positions by developing their knowledge, skills and abilities in preparation for advancement into ever more challenging roles and positions of leadership. Individual

Development Plans are utilized to set reasonable goals for employees, assess job-related strengths, and aid in the development of employees to reach career goals resulting in both improved employee and organizational performance.

**17. Describe the board's staff development efforts and total spent annually on staff development (cf., Section 12, Attachment D).**

***Staff Development***

The Board's staff must be trained adequately and effectively for the Board to be able to meet its mission and mandates. For all staff, Board managers are responsible for meeting with staff and discussing with them any needed or recommended training. Managers not only recommend training to the employee, but also discuss with the employee any training he/she may wish to pursue. The Board believes that providing staff with training opportunities will enhance the employee's performance and bring efficiencies to the work of the Board. The Board understands the importance of staff and is very supportive of every effort to keep staff knowledgeable and performing at their best.

The Board utilizes the DCA internal training department, Strategic Organizational Leadership and Individual Development (SOLID) Training and Planning Solutions. SOLID's Learning Management System is used to assign training to staff and pull insightful data on teams' training progress. SOLID's mission is to develop an effective workforce by creating a foundation to drive change, guide learning and achieve DCA's strategic vision. SOLID offers a range of training and services from individual development, workgroup development, leadership development and board development.

Board staff, managers, and executives have started attending training classes offered by the California Department of Human Resources. These trainings provide opportunities for continuous learning, and skill development that are key elements to improving job performance and career advancement.

Over the past two fiscal years, the Board has spent the following on training outside of SOLID:

FY 20-21: \$22,520

FY 21-22: \$2,275

# Sunset Review Oversight Report

## Part II

### **Midwifery Program**

- *Section 1 – Background and Description of Midwifery Program*
- *Section 2 – Performance Measures and Customer Satisfaction Surveys*
- *Section 3 – Fiscal and Staff Issues*
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- *Section 10 – Board Actions and Responses to COVID-19]*
- *Section 11 – Board Action and Responses to Prior Sunset Issues*
- *Section 12 – New Issues*

**MIDWIFERY PROGRAM****Section 1 – Background and Description of Midwifery Program*****History and Functions of the Midwifery Program***

A Licensed Midwife (LM) is an individual who has been issued a license to practice midwifery by the Board. The Midwifery Practice Act was chaptered in 1993 and implemented in 1994 with the first direct entry midwives licensed in September 1995. The practice of midwifery authorizes the licensee to attend cases of normal childbirth, in a home, birthing clinic, or hospital environment and to provide prenatal, intrapartum, and postpartum care, including family-planning care, for the mother, and immediate care for the newborn.

Pathways to licensure for midwives include completion of a three-year postsecondary education program in an accredited school approved by the Board, through a Challenge Mechanism, or through reciprocity with the states of Florida or Washington. The Challenge Mechanism pathway is pursuant to Business and Professions Code (BPC) section 2513, which allows a midwifery student and prospective applicant the opportunity to obtain credit by examination for previous midwifery education and clinical experience. Prior to licensure, all midwives must take and pass the North American Registry of Midwives (NARM) examination, adopted by the Board in 1996, which satisfies the written examination requirements set forth in law.

In order to provide the guidance necessary to the Board on midwifery issues, effective January 1, 2007, the Board was mandated to have a Midwifery Advisory Council (MAC). The MAC is made up of three LM's (pursuant to BPC section 2509, at least half of the Council shall be LMs), one licensed physician, and two members of the public who have an interest in midwifery practice, including, but not limited to, home births. The Board specifies issues for the MAC to discuss/resolve and the MAC also identifies issues and requests approval from the Board to develop solutions to the various matters. Some items that have been discussed include regulations impacting midwifery practice, difficulties providing collaborative care with physicians, and the Licensed Midwife Annual Report. The MAC chair attends the Board meetings and provides an update on the issues and outcomes of the MAC meetings, and requests Board approval for future agenda items.

***Major Legislation/Regulations Since the Last Sunset Review*****2021**

[Assembly Bill \(AB\) 107 \(Salas, Chapter 107\) – Licensure: Veterans and Military Spouses](#)

Effective July 1, 2023, the Board is authorized to issue temporary licenses to practice within 30 days of receiving documentation that applicant meets all the requirements of the bill. The license would be terminated immediately upon finding the applicant failed to meet any of the requirements or provided substantially inaccurate information.

The temporary license shall expire 12 months after issuance or upon issuance or denial of a standard/expedited license.

Requires the Department of Consumer Affairs (DCA) and boards to publish certain information pertaining to licensing options for military spouses on the homepage of their website. Requires DCA to publish annually specified information related to applications for licensure from military, veteran, and spouse licensure.

#### [AB 133 \(Committee on Budget, Chapter 143\) – Health](#)

This bill renames the Office of Statewide Health Planning and Development as the Department of Health Care Access and Information (HCAI). Requires the Board (among others) to request certain workforce data from licensees and registrants on at least a biennial basis. Each board (or DCA on behalf of the board) shall, starting July 1, 2022, report on a quarterly basis, this information to HCAI.

#### [SB 607 \(Min, Chapter 367\) – Business and Professions](#)

Effective July 1, 2022, all boards are required to expedite licensure and waive application and initial licensure fees for those who (1) Supplies evidence satisfactory to the board that the applicant is married to, or in a domestic partnership or other legal union with, an active duty member of the Armed Forces of the United States who is assigned to a duty station in this state under official active duty military orders; and (2) Holds a current license in another state, district, or territory of the United States in the profession or vocation for which the applicant seeks a license from the board

#### [Senate Bill \(SB\) 806 \(Roth, Chapter 649\) – Healing Arts](#)

This was the sunset bill for the Board and had the following effects:

- Administration
  - Increases various application, initial licensure, and renewal fees.
  - Requires all applicants and licensees to have an email address and provide it to the Board no later than July 1, 2022.
  - Extends the Board's sunset to January 1, 2024.
- Enforcement
  - Requires medical consultants reviewing complaints related to midwifery quality of care to have education, training, and expertise in midwifery.
  - Requires the DCA Director to appoint an enforcement monitor who will issue two reports to the Legislature in 2023.



- Licensing
  - Allows the elimination of paper-based licensure application forms.
  - Eliminates the requirement to send a certified mail notification to those whose licenses may expire.
  - Changes from 90 days to 30 days following license expiration when penalty and delinquency fees are owed to the Board.

**2022****[AB 1102 \(Low, Chapter 684\) - Telephone Medical Advice Services](#)**

Clarifies existing law that requires health care professionals providing telephone medical advice services from an out-of-state location to do so consistent with the laws governing their respective licenses. The bill also specifies that a telephone medical advice service is required to comply with all directions and requests for information made by the Department of Consumer Affairs and the respective healing arts licensing board.

**[SB 1440 \(Roth, Chapter 510\) – Licensed Midwifery Practice Act of 1993: Complaints](#)**

Makes clarifying changes to BPC section 2519.5, within the Licensed Midwifery Practice Act of 1993, to conform its requirements to the similar section for physicians, BPC section 2220.08.

***Regulations***

*Substantial Relationship and Rehabilitation – Implementation of AB 2138 (Chiu, Chapter 995, Statutes of 2018) (effective January 21, 2021)*

The Board approved a proposed rulemaking to update its regulations as required pursuant to AB 2138 relating to evaluating whether a crime or act was substantially related to the profession, and to evaluate the rehabilitation of an applicant or licensee when considering denying or disciplining a license based on a conviction or professional discipline.

*Medical and Midwife Assistant Certifying Organizations and Administration of Training for Medical Assistants (effective April 1, 2022)*

The Board approved a proposed rulemaking to update the requirements for medical and midwife assistant certifying organizations to strike the requirement that such organizations be non-profit, and instead, require them to be accredited by the National Commission for Certifying Agencies as a more reliable tool for quality control under 16 CCR sections 1366.31 and 1379.07. This proposed rulemaking will also make changes to 16 CCR section 1366.3, regarding the administration of training for medical assistants to reflect the current oversight agencies and the current name for the Bureau for Private Postsecondary Education (BPPE), to update the statutory references and for internal consistency.

*Notice to Consumers (pending)*

The Board approved a proposed rulemaking 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.

*Citable Offenses (pending)*

The Board approved a proposed rulemaking to amend 16 CCR section 1364 to permit a Board official to issue citations, including those containing orders of abatement and/or fines, to any licensee for a violation of any statute or regulation which would be grounds for discipline by the Board.

Further, the provisions relating to fine assessment under 16 CCR section 1364.10 will be amended to indicate that the amount shall not exceed the amount specified in BPC section 125.9(b)(3). This change will update the Board's authority to assess fines to the full extent authorized under this statute.

*Approved Continuing Education for Physicians and Licensed Midwives (pending)*

From time to time, the Board offers its own educational programs for which it wants to provide CE credits to physicians and LMs who attend, such as for expert reviewer training. Consequently, the Board approved a proposed rulemaking to amend 16 CCR sections 1337 and 1379.26 to clarify that programs offered by the Board for CE are approved for credit, and to make additional minor, conforming changes.

*Licensed Midwife Annual Report (pending)*

Pursuant to a request by the Midwifery Advisory Council, the Board approved a proposed rulemaking to add 16 CCR section 1379.35 to require each licensed midwife who assists, or supervises a student midwife in assisting, in childbirth that occurs in an out-of-hospital setting to report each client's race and ethnicity as identified by the client as part of the Licensed Midwife Annual Report.

**Section 2 – Performance Measures and Customer Satisfaction Surveys**

Refer to Full 2022 Medical Board Sunset Report.

**Section 3 – Fiscal and Staff Issues**

The fees collected for the Midwifery Program go into the Licensed Midwifery Fund. When this Program began in 1994, it received a \$70,000 loan from the General Fund, in order to ensure solvency. This loan was paid off over the course of ten years and paid in full in 2004.

Beginning in FY 14/15, an appropriation was established to fund the personnel needed to administer the Midwifery Program. Starting in FY 17/18, the Board began requesting payment from the Midwifery Program for the staff resources to perform the licensing and enforcement functions of the Program. There have been no General Fund loans from the Licensed Midwifery Fund.

LMS submit an application and initial license fee of \$450 and have a biennial renewal fee of \$300. The renewal fee comprises about 78 percent of the fees received in the Licensed Midwifery Fund.

**Table 2- Fund Condition Midwifery**

(Dollars in Thousands)	FY 18/19	FY 19/20	FY 20/21	FY 21/22
Beginning Balance	398	451	402	330
Total Revenue	60	60	61	63
Total Resources	458	511	463	393
Budget Authority	120	120	120	120
Expenditures	7	109	133	133
Loans to General Fund	0	0	0	0
Accrued Interest, Loans to General Fund	0	0	0	0
Loans Repaid From General Fund	0	0	0	0
Fund Balance	451	402	330	260

**Table 4 - Fee Schedule and Revenue**

Fee	Current Fee Amount	Statutory Limit	FY 18/19 Revenue	FY 19/20 Revenue	FY 20/21 Revenue	FY 21/22 Revenue	% of Total Revenue*
LICENSED MIDWIFERY FUND							
Licensed Midwife Duplicate Cert Fee	75.00	75.00	0	0	0	0	N/A
Licensed Midwife Application and	450.00	450.00	13,000	10,000	13,000	12,000	21%

Initial License Fee (BPC 2520) (16 CCR 1379.5)							
Licensed Midwife Biennial Renewal Fee (BPC 2520) (16 CCR 1379.5)	300.00	300.00	38,000	40,000	44,000	49,000	77%
Licensed Midwife Delinquency Fee (BPC 2520) (16 CCR 1379.5)	50.00	50.00	1,000	1,000	1,000	1,000	2%
*Not including revenue from Investment Income - Surplus Money Investments							

## Section 4 – Licensing Program

### Application Review

16 CCR section 1379.11 requires the Board to inform an applicant for licensure as a midwife in writing within 30 days of receipt of an application as to whether the application is complete and accepted for filing or is deficient and what specific information is required. The Board is currently in compliance with the mandated timeframes and is reaching the internal goals that have been set by the program.

Due to the small number of new applications received, processing times have remained consistent during the last three years. The number of applications received each year has mostly remained the same as well over the last three fiscal years.

The tables below show the Midwifery Program licensee population, licenses issued, and licenses renewed.

Table 6 - Licensee Population					
		FY 18/19	FY 19/20	FY 20/21	FY 21/22
Licensed Midwife	Active <sup>1</sup>	412	435	453	477
	Delinquent	70	68	75	101
	Out-of-State	Unknown	Unknown	Unknown	36

	Out-of-Country	Unknown	Unknown	Unknown	1
	Retired Status <i>if applicable</i>	8	11	11	13
	Inactive	9	15	20	25
<sup>1</sup> Active status is defined as able to practice. This includes licensees that are renewed, current, and active.					

**Table 7a. Licensing Data by Type - 8001 – Licensed Midwife**

	App Type	Received	Approved /Issued	Closed	Pending Applications			Cycle Times		
					Total (Close of FY)	Complete (within Board control)*	Incomplete (outside Board control)*	Complete Apps	Incomplete Apps	combined IF unable to separate out
FY 19/20	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	32	35	0	1	-	-	11	26	-
	(Renewal)	n/a	201	n/a	-	-	-	-	-	-
FY 20/21	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	44	36	0	5	-	-	16	47	-
	(Renewal)	n/a	225	n/a	-	-	-	-	-	-
FY 21/22	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	31	31	0	9	-	-	23	50	-
	(Renewal)	n/a	206	n/a	-	-	-	-	-	-

\* Optional. List if tracked by the board.

**Table 7b. License Denial**

	FY 20/21	FY 21/22
License Applications Denied (no hearing requested)	0	0
SOIs Filed	0	0

Average Days to File SOI (from request for hearing to SOI filed)	0	0
SOIs Declined	0	0
SOIs Withdrawn	0	0
SOIs Dismissed (license granted)	0	0
License Issued with Probation / Probationary License Issued	0	0
Average Days to Complete (from SOI filing to outcome)	0	0

### ***Exams***

The LM examination is a national examination offered by the NARM. This is a computer-based exam with a required passing score of 75.

### ***Verification of Application Information***

Applicants are required by law to disclose truthfully all questions asked on the application for licensure. Out-of-state and out-of-country applicants must meet the same requirements as California applicants.

The application forms and license verification (LV) are valid for one year. After one year, the applicant must submit updated forms to ensure that the Board's current information accurately reflects any change in an applicant's credentials. The Board requires primary source verification for certification of midwifery education, examination scores, LV, diplomas, certificates, and challenge documentation.

The application asks about discipline by any other licensing jurisdiction for the practice of midwifery or any other healing arts license type. If an affirmative response to either of these questions is provided, the applicant and the involved institution or agency must provide a detailed narrative of the events and circumstances leading to the action(s).

Currently, if the Board is provided criminal history information by the Department of Justice (DOJ), the Board will request information from the applicant on a voluntary basis. The Board will request documentation from the appropriate criminal justice agency as well regarding any prior arrests or convictions. The applicant may also voluntarily provide evidence of rehabilitation.

All reports of criminal history, prior disciplinary actions, or other unlawful acts of the applicant are reviewed on a case-by-case basis to determine if the applicant is eligible for licensure.

Individuals applying for a midwifery license must obtain fingerprint clearances through the DOJ and FBI in order to establish the identity of the applicant and in order to determine whether the applicant has a record of any criminal convictions in this state or in any other jurisdiction. Criminal record history reports are obtained from both the DOJ and the FBI prior to issuing a license.

All LMs with a current license have been fingerprinted. As fingerprinting is a requirement for licensure, a midwife's license will not be issued prior to completion of this requirement. The Board receives supplemental reports from the DOJ and FBI following the initial submittal of fingerprints should future criminal convictions occur post licensure. Supplemental reports will be reviewed by the Enforcement Program to determine if any action should be taken against the licensee.

A midwifery applicant must disclose all current and/or previous licenses held and provide a LV from each state or province to be sent directly to the Board verifying the applicant's licensure information and whether any action has been taken against the license. If the LV indicates action has been taken, certified documents from the state or province must be provided detailing the circumstances related to the action and the outcome.

The comprehensive licensing examination developed by the NARM was adopted by the Board in May 1996 and satisfies the written examination requirements as outlined in law.

### ***School Approvals***

The Board approves midwifery schools by independently conducting a thorough and comprehensive assessment to evaluate the school's educational program curriculum and the program's academic and clinical preparation. Schools wishing to obtain approval by the Board must submit supporting documentation to verify that they meet the requirements of BPC section 2512.5(a). Currently, the BPPE does not provide any role in approval of midwifery schools.

Currently, there are nine approved midwifery schools. The three-year program at each approved school has been accepted as meeting the requirements listed in BPC section 2512.5(a) and 16 CCR section 1379.15. The re-assessment of approved schools is not currently mandated by law or regulation as it pertains to the midwifery program.

If an international midwifery school were to apply for approval by the Board, it would be required to submit the same documentation and requirements as a U.S. school. As of this date, the Board has yet to receive an application for approval of an international midwifery school.

### ***Continuing Education/Competency Requirements***

Under Article 10 of the Medical Practice Act commencing with BPC section 2518, the Board has adopted and administers standards for the continuing education (CE) of midwives. The Board requires each LM to document the completion of 36 hours of CE in areas that fall within the scope of the practice of midwifery, as specified by the Board.

Each LM is required to certify under penalty of perjury, upon renewal, that they have met the CE requirements. 16 CCR section 1379.28 requires the Board to audit a random sample of LMs who have reported compliance with the CE requirements. The Board requires that each LM retain records for a minimum of four years of all CE programs attended which may be needed in the event of an audit by the Board. The CE audit is performed on a monthly basis and is designed to randomly audit approximately 10 percent of the total number of renewing LMs per year. The CE audit selection process is completed automatically through the BreEZe system. Licensees must provide proof of attendance at CE courses or programs if selected for the audit. Upon receipt of documents, staff conduct a review to determine compliance with the law.

If an LM fails the audit by either not responding or failing to meet the requirements as set forth by 16 CCR section 1379.28, the LM will be allowed to renew their license one time following the audit to permit them to make up any deficient CE hours. However, the Board will not renew the license a second time until all of the required hours have been documented by the Board. It is considered unprofessional conduct for any LM to misrepresent their compliance with 16 CCR section 1379.28.

In addition to CE programs approved pursuant to 16 CCR section 1379.26, the Board approves CE programs based on the criteria defined under 16 CCR section 1379.27. The Board has not received any recent applications for CE providers or courses, but has approved several programs in the past.

16 CCR section 1379.27(b) authorizes the Board to randomly audit courses or programs submitted for credit in addition to any course or program for which a complaint is received. If an audit is made, course providers will be asked to submit to the Board documentation concerning each of the items described in 16 CCR section 1379.27(a).

### **Section 5 – Enforcement Program**

The overall number of complaints involving licensed midwives (LMs) is down in comparison to the years prior to FY2020/21. This decrease was in line with other newly reported complaints also being down during the same reporting period. Three public reprimands were issued, and one licensee was placed on probation. This was an increase in disciplinary actions when compared to the prior three-year period. The Board utilizes midwives for medical consultant and expert roles in cases involving midwives.



The Board utilizes its Disciplinary Guidelines as a model for disciplinary action imposed on midwives. Over the past two fiscal years, there were nine accusations filed against LMs.

The majority of the complaints received regarding LMs relate to the care provided during labor and delivery. These complaints are considered to be the highest priority. The Board also receives complaints regarding the unlicensed practice of midwifery which are also considered urgent complaints.

The Board processed four cases that resulted in disciplinary actions in the past two-year period.

<b>Table 9a. Enforcement Statistics</b>			
	FY 19/20	FY 20/21	FY 21/22
<b>COMPLAINTS</b>			
Intake			
Received		29	22
Closed without Referral for Investigation		0	0
Referred to INV		30	22
Pending (close of FY)		0	0
Conviction / Arrest			
CONV Received		0	0
CONV Closed Without Referral for Investigation		0	0
CONV Referred to INV		0	0
CONV Pending (close of FY)		0	0
Source of Complaint <sup>1</sup>			
Public		20	10
Licensee/Professional Groups		3	1
Governmental Agencies		0	0
Internal		0	1

<sup>1</sup> Source of complaint refers to complaints and convictions received. The summation of intake and convictions should match the total of source of complaint.

Other		1	0
Anonymous		5	10
Average Time to Refer for Investigation (from receipt of complaint / conviction to referral for investigation)		4 Days	6 Days
Average Time to Closure (from receipt of complaint / conviction to closure at intake)		0 Days	0 Days
Average Time at Intake (from receipt of complaint / conviction to closure or referral for investigation)		4 Days	6 Days
<b>INVESTIGATION</b>			
Desk Investigations			
Opened		29	22
Closed		35	22
Average days to close (from assignment to investigation closure)		61 Days	49 Days
Pending (close of FY)		12	2
Non-Sworn Investigation			
Opened		0	0
Closed		0	0
Average days to close (from assignment to investigation closure)		0 Days	0 Days
Pending (close of FY)		0	0
Sworn Investigation			
Opened		5	3
Closed		7	6
Average days to close (from assignment to investigation closure)		533 Days	746 Days
Pending (close of FY)		10	7

All investigations <sup>2</sup>			
Opened		34	25
Closed		42	28
Average days for all investigation outcomes (from start investigation to investigation closure or referral for prosecution)		131 Days	252 Days
Average days for investigation closures (from start investigation to investigation closure)		73 Days	55 Days
Average days for investigation when referring for prosecution (from start investigation to referral for prosecution)		766 Days	897 Days
Average days from receipt of complaint to investigation closure		137 Days	257 Days
Pending (close of FY)		22	9
<b>CITATION AND FINE</b>			
Citations Issued		2	0
Average Days to Complete (from complaint receipt / inspection conducted to citation issued)		518 Days	0 Days
Amount of Fines Assessed		\$350	\$0
Amount of Fines Reduced, Withdrawn, Dismissed		\$350	\$0
Amount Collected		\$0	\$0
<b>CRIMINAL ACTION</b>			
Referred for Criminal Prosecution		1	0

<sup>2</sup> The summation of desk, non-sworn, and sworn investigations should match the total of all investigations.

\*The Board previously reported this number as the time from complaint received to accusation filed. The metric was changed as of FY 20/21 due to the changes implemented by the Department of Consumer Affairs (DCA) on reporting metrics. Therefore, this cannot be compared to previous Sunset Reports provided.

<b>ACCUSATION</b>			
Accusations Filed		3	6
Accusations Declined		0	1
Accusations Withdrawn		0	0
Accusations Dismissed		0	0
Average Days from Referral to Accusations Filed* (from AG referral to Accusation filed)		115 Days	57 Days
<b>INTERIM ACTION</b>			
ISO & TRO Issued		0	0
PC 23 Orders Issued		0	0
Other Suspension/Restriction Orders Issued		0	0
Referred for Diversion		N/A	N/A
Petition to Compel Examination Ordered		0	2
<b>DISCIPLINE</b>			
AG Cases Initiated (cases referred to the AG in that year)		4	6
AG Cases Pending Pre-Accusation (close of FY)		2	0
AG Cases Pending Post-Accusation (close of FY)		2	9
<b>DISCIPLINARY OUTCOMES</b>			
Revocation		0	0
Surrender		0	0
Suspension only		0	0
Probation with Suspension		0	0
Probation only		0	1

Public Reprimand / Public Reprimand / Public Letter of Reprimand		3	0
Other		0	0
<b>DISCIPLINARY ACTIONS</b>			
Proposed Decision		0	0
Default Decision		0	0
Stipulations		3	1
Average Days to Complete After Accusation (from Accusation filed to imposing formal discipline)		717 Days	248 Days
Average Days from Closure of Investigation to Imposing Formal Discipline		804 Days	350 Days
Average Days to Impose Discipline (from complaint receipt to imposing formal discipline)		1,572 Days	868 Days
<b>PROBATION</b>			
Probations Completed		0	0
Probationers Pending (close of FY)		0	1
Probationers Tolled		0	0
Petitions to Revoke Probation / Accusation and Petition to Revoke Probation Filed		0	0
<b>SUBSEQUENT DISCIPLINE<sup>3</sup></b>			
Probations Revoked		0	0
Probationers License Surrendered		0	0
Additional Probation Only		0	0
Suspension Only Added		0	0

<sup>3</sup> Do not include these numbers in the Disciplinary Outcomes section above.

Other Conditions Added Only		0	0
Other Probation Outcome		0	0
<b>SUBSTANCE ABUSING LICENSEES</b>			
Probationers Subject to Drug Testing			
Drug Tests Ordered			
Positive Drug Tests			
<b>PETITIONS</b>			
Petition for Termination or Modification Granted		0	0
Petition for Termination or Modification Denied		0	0
Petition for Reinstatement Granted		0	0
Petition for Reinstatement Denied		0	0
<b>DIVERSION</b>			
New Participants		N/A	N/A
Successful Completions		N/A	N/A
Participants (close of FY)		N/A	N/A
Terminations		N/A	N/A
Terminations for Public Threat		N/A	N/A
Drug Tests Ordered		N/A	N/A
Positive Drug Tests		N/A	N/A

**Table 10. Enforcement Aging**

	FY 18/19	FY 19/20	FY 20/21	FY 21/22	Cases Closed	Average %
<b>Investigations (Average %)</b>						

Closed Within:						
90 Days			28	16	44	65%
91 - 180 Days			1	0	1	1%
181 - 1 Year			8	3	11	16%
1 - 2 Years			6	2	8	12%
2 - 3 Years			0	4	4	6%
Over 3 Years			0	0	0	0%
Total Investigation Cases Closed			43	25	68	100%
<b>Attorney General Cases (Average %)</b>						
Closed Within:						
0 - 1 Year			0	0	0	0
1 - 2 Years			0	0	0	0
2 - 3 Years			1	1	2	34
3 - 4 Years			2	0	2	33
Over 4 Years			2	0	2	33
Total Attorney General Cases Closed			5	1	6	100

### ***Mandatory Reporting***

BPC section 2510 requires hospitals to report to the Board each transfer to a hospital by an LM of a planned out-of-hospital birth. The chart below indicates the number of these reports sent to the Board between FY 19/20 and FY 21/22. These specific reports are not a complaint of inappropriate treatment, but a mandated report received by the Board. This mandated report is reviewed by the Board's Enforcement Program to determine if a complaint needs to be opened and action pursued.

In FY20/21 there were 259 and in FY21/22 there were 208.

In addition, under BPC 2216.3 the Board received Outpatient Adverse Event Reports, In FY2/21, 122 reports and in FY21/22, 46 reports.

The midwifery program does not have a statute of limitation requirement in statute but recognizes public protection as its highest authority and strives to investigate each complaint as quickly as possible.

### ***Cite and Fine***

As of January 1, 2018, the Board has citation and fine authority to issue citations with fines or orders of abatement to LMs. The Board uses cite and fine if appropriate according to its current authority. The Board uses cite and fine for minor violations such as recordkeeping. It may also be used for unlicensed practice.

In the past two years, informal conferences have been used twice and resulted in the fines being withdrawn.

The Board has not used the Franchise Tax Board (FTB) to intercept or collect fines against LMs.

### ***Cost Recovery and Restitution***

BPC section 125.3 provides the Board with authority to collect investigation and prosecution costs of midwifery cases.

There is no set cost recovery amount. Cost recovery is calculated based on the number of hours to complete an investigation multiplied by a set hourly rate determined by the DCA. Legal costs are tracked on an hourly basis as well.

For cases that do not rise to the level of being transmitted to the AGO for formal disciplinary action, the Board will not seek cost recovery.

Cost recovery may be assessed but is not paid in cases of revocation or surrender. In these situations, cost recovery is due and payable if a person petitions for reinstatement of a license. In probationary matters a payment plan is established if the LM is unable to pay costs in a lump sum.

The Board may reduce the cost recovery amount due but does not waive cost recovery when a disciplinary action is taken.

The Board has not used the FTB's intercept program to collect cost recovery from LMs.

The Board does not seek restitution for consumers. Restitution may be ordered by criminal courts.

<b>Table 11. Cost Recovery<sup>4</sup></b>		<b>(list dollars in thousands)</b>		
	FY 18/19	FY 19/20	FY 20/21	FY 21/22
Total Enforcement Expenditures				

<sup>4</sup> Cost recovery may include information from prior fiscal years.



Potential Cases for Recovery *			3	1
Cases Recovery Ordered			1	1
Amount of Cost Recovery Ordered			\$8,000	\$10,000
Amount Collected			\$0	\$9,000
* "Potential Cases for Recovery" are those cases in which disciplinary action has been taken based on violation of the license practice act.				

Table 12. Restitution (list dollars in thousands)				
	FY 18/19	FY 19/20	FY020/21	FY 21/22
Amount Ordered			0	0
Amount Collected			0	0

### Section 6 – Public Information Policies

Refer to Full 2022 Medical Board Sunset Report.

### Section 7 – Online Practice Issues

Refer to Full 2022 Medical Board Sunset Report.

### Section 8 – Workforce Development and Job Creation

Refer to Full 2022 Medical Board Sunset Report.

### Section 9 – Current Issues

Refer to Full 2022 Medical Board Sunset Report.

### Section 10 – Board Actions and Responses to COVID-19

Refer to Full 2022 Medical Board Sunset Report.

**Section 11 – Board Action and Response to Prior Sunset Issues**

Refer to issue #7, Section 11, in Part I - Physicians

**Section 12 – New Issues**

See Section 12 (Physicians)

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# Sunset Review Oversight Report

## Part III

### **Polysomnographic Program**

- *Section 1 – Background and Description of Polysomnographic Program*
- *Section 2 – Performance Measures and Customer Satisfaction Surveys*
- *Section 3 – Fiscal and Staff Issues*
- *Section 4 – Licensing Program*
- *Section 5 – Enforcement Program*
- *Section 6 – Public Information Policies*
- *Section 7 – Online Practice Issues*
- *Section 8 – Workforce Development and Job Creation*
- *Section 9 – Current Issues*
- *Section 10 – Board Actions and Responses to COVID-19*
- *Section 11 – Board Action and Responses to Prior Sunset Issues*
- *Section 12 – New Issues*

## POLYSOMNOGRAPHIC PROGRAM

### Section 1 – Background and Description of Polysomnographic Program

#### *History and Functions of the Polysomnographic Program*

Polysomnography is the treatment, management, diagnostic testing, control, education, and care of patients with sleep and wake disorders. Polysomnography includes, but is not limited to, the process of analysis, monitoring, and recording of physiologic data during sleep and wakefulness to assist in the treatment of disorders, syndromes, and dysfunctions that are sleep-related, manifest during sleep, or disrupt normal sleep activities.

The Legislature enacted the regulation of the Polysomnographic Program under the jurisdiction of the Board in 2009. This Program registers individuals that are involved in the treatment, management, diagnostic testing, control, education, and care of patients with sleep and wake disorders. The Polysomnographic Program registers individuals as polysomnographic trainees, technicians or technologists.

Polysomnographic trainee registration is required for individuals under the direct supervision of a supervising physician, polysomnographic technologist or other licensed health care professionals who provide basic supportive services as part of their education program, including, but not limited to, gathering and verifying of patient information, testing preparation and monitoring, documenting routine observations, data acquisition and scoring, and assisting with appropriate interventions for patient safety in California. In order to qualify as a polysomnographic trainee, one must have either a high school diploma or GED and have completed at least six months of supervised direct polysomnographic patient care experience, or be enrolled in a polysomnographic education program approved by the Board. Applicants must also possess at the time of application a current certificate in basic life support issued by the American Heart Association or the American Safety and Health Institute.

The polysomnographic technician registration is required for individuals who may perform the services equivalent to that of a polysomnographic trainee under general supervision *and* may implement appropriate interventions necessary for patient safety in California. In order to qualify for a polysomnographic technician registration, an individual must meet the initial requirements for a polysomnographic trainee *and* have at least six months experience at a level of polysomnographic trainee and must have completed an approved education program.

Polysomnographic technologist registration is required for individuals who, under the supervision of a physician, are responsible for the treatment, management, diagnostic testing, control, education, and care of patients with sleep and wake disorders in California. Registrants are required to have a valid, current credential as a

polysomnographic technologist issued by the Board of Registered Polysomnographic Technologists (BRPT); and must have graduated from a polysomnographic educational program that has been approved by the Board.

Since FY 2019/20, the number of polysomnographic technologist applications received has maintained a consistent volume; the number of polysomnographic technician applications has declined; and the number of polysomnographic trainee applications has increased.

### ***Major Legislation/Regulations Since the Last Sunset Review***

#### ***Legislation***

##### ***2021***

##### **[Assembly Bill \(AB\) 107 \(Salas, Chapter 107\) – Licensure: Veterans and Military Spouses](#)**

Starting July 1, 2023, requires boards to issue temporary licenses to practice within 30 days of receiving documentation that applicant meets all the requirements of the bill. The license would be terminated immediately upon finding the applicant failed to meet any of the requirements or provided substantially inaccurate information. The temporary license shall expire 12 months after issuance or upon issuance or denial of a standard/expedited license.

Requires DCA and boards to publish certain information pertaining to licensing options for military spouses on the homepage of their website. Requires DCA to publish annually specified information related to applications for licensure from military, veteran, and spouse licensure.

##### **[AB 133 \(Committee on Budget, Chapter 143\) – Health](#)**

This bill renames the Office of Statewide Health Planning and Development as the Department of Health Care Access and Information (HCAI). Requires the Board (among others) to request certain workforce data from licensees and registrants on at least a biennial basis. Each board (or DCA on behalf of the board) shall, starting July 1, 2022, report on a quarterly basis, this information to HCAI.

##### **[SB 607 \(Min, Chapter 367\) – Business and Professions](#)**

Effective July 1, 2022, all boards are required to expedite licensure and waive application and initial licensure fees for those who (1) Supplies evidence satisfactory to the board that the applicant is married to, or in a domestic partnership or other legal union with, an active duty member of the Armed Forces of the United States who is assigned to a duty station in this state under official active duty military orders; and (2)

Holds a current license in another state, district, or territory of the United States in the profession or vocation for which the applicant seeks a license from the board

[Senate Bill \(SB\) 806 \(Roth, Chapter 649\) – Healing Arts](#)

This was the sunset bill for the Board and had the following effects:

- Administration
  - Increases various application, initial licensure, and renewal fees.
  - Requires all applicants and licensees to have an email address and provide it to the Board no later than July 1, 2022.
  - Extends the Board's sunset to January 1, 2024.
- Enforcement
  - Requires the DCA Director to appoint an enforcement monitor who will issue two reports to the Legislature in 2023.
- Licensing
  - Allows the elimination of paper-based licensure application forms.
  - Eliminates the requirement to send a certified mail notification to those whose licenses may expire.
  - Changes from 90 days to 30 days following license expiration when penalty and delinquency fees are owed to the Board.

**2022**

[AB 1102 \(Low, Chapter 684\) - Telephone Medical Advice Services](#)

Clarifies existing law that requires health care professionals providing telephone medical advice services from an out-of-state location to do so consistent with the laws governing their respective licenses. The bill also specifies that a telephone medical advice service is required to comply with all directions and requests for information made by the Department of Consumer Affairs and the respective healing arts licensing board.

**Regulations**

*Substantial Relationship and Rehabilitation – Implementation of AB 2138 (Chiu, Chapter 995, Statutes of 2018) (effective January 21, 2021)*

The Board approved a proposed rulemaking to update its regulations as required pursuant to AB 2138 relating to evaluating whether a crime or act was substantially related to the profession, and to evaluate the rehabilitation of an applicant or licensee when considering denying or disciplining a license based on a conviction or professional discipline.

*Notice to Consumers (pending)*

The Board approved a proposed rulemaking 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.

*Citable Offenses (pending)*

The Board approved a proposed rulemaking to amend 16 CCR section 1364 to permit a Board official to issue citations, including those containing orders of abatement and/or fines, to any licensee for a violation of any statute or regulation which would be grounds for discipline by the Board.

Further, the provisions relating to fine assessment under 16 CCR section 1364.10 will be amended to indicate that the amount shall not exceed the amount specified in BPC section 125.9(b)(3). This change will update the Board's authority to assess fines to the full extent authorized under this statute.

**Section 2 – Performance Measures and Customer Satisfaction Surveys**

Refer to Full 2022 Medical Board Sunset Report.

**Section 3 – Fiscal and Staff**

Refer to Full 2022 Medical Board Sunset Report.

**Section 4 – Licensing Program*****Application Review***

Current law does not define the required time to review an initial application for the Polysomnography Program; however, the Board has set an internal expectation that all new applicants will be notified in writing within 30 days of receipt of an application as to whether the application is complete and accepted for filing or is deficient and what specific information is required. This applies to all registration types under the Polysomnography Program. The Board is currently meeting this expectation and is reviewing applications within 30 days.

The polysomnography application volume remained consistent with previous years. The average time to process a polysomnography application has remained constant, and occurs within 30 days. Pending applications for the program are very small and those in a pending status are outside of the Board's control.

The tables below show the Polysomnographic Program data.

Table 6. Licensee Population					
		FY 18/19	FY 19/20	FY 20/21	FY 21/22
8012 – Polysomnography	Active	829	869	811	812
	Out of State	Unknown	Unknown	Unknown	50
	Out of Country	Unknown	Unknown	Unknown	0
	Delinquent/Expired	280	243	304	302
	Retired Status <i>if applicable</i>	N/A	N/A	N/A	N/A
	Inactive	N/A	N/A	N/A	N/A
	Other	N/A	N/A	N/A	N/A
Note: 'Out of State' and 'Out of Country' are two mutually exclusive categories. A licensee should not be counted in both.					

Table 7a. Licensing Data by Type - 8012 – Polysomnography – Trainee										
	App Type	Received	Approved/ Issued	Closed	Pending Applications			Cycle Times		
					Total (Close of FY)	Complete (within Board control)*	Incomplete (outside Board control)*	Complete Apps	Incomplete Apps	combined IF unable to separate out
FY 19/20	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	14	14	0	10	-	-	11	207	-
	(Renewal)	n/a	14	n/a	-	-	-	-	-	-
FY 20/21	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	9	5	0	14	-	-	n/a	68	-
	(Renewal)	n/a	21	n/a	-	-	-	-	-	-
FY 21/22	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	24	23	1	15	-	-	21	149	-
	(Renewal)	n/a	14	n/a	-	-	-	-	-	-



\* Optional. List if tracked by the board.

**Table 7a. Licensing Data by Type - 8012 – Polysomnography – Technician**

	App Type	Received	Approved /Issued	Closed	Pending Applications			Cycle Times		
					Total (Close of FY)	Complete (within Board control)*	Incomplete (outside Board control)*	Complete Apps	Incomplete Apps	combined, IF unable to separate out
FY 19/20	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	35	30	10	9	-	-	14	36	-
	(Renewal)	n/a	37	n/a	-	-	-	-	-	-
FY 20/21	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	16	15	1	12	-	-	14	117	-
	(Renewal)	n/a	62	n/a	-	-	-	-	-	-
FY 21/22	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	18	23	0	13	-	-	15	99	-
	(Renewal)	n/a	51	n/a	-	-	-	-	-	-

\* Optional. List if tracked by the board.

**Table 7a. Licensing Data by Type - 8012 – Polysomnography - Technologist**

	App Type	Received	Approved /Issued	Closed	Pending Applications			Cycle Times		
					Total (Close of FY)	Complete (within Board control)*	Incomplete (outside Board control)*	Complete Apps	Incomplete Apps	combined, IF unable to separate out
FY 19/20	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	39	35	42	21	-	-	14	73	-
	(Renewal)	n/a	169	n/a	-	-	-	-	-	-
FY 20/21	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	20	20	1	23	-	-	30	95	-

	(Renewal)	n/a	417	n/a	-	-	-	-	-	-
FY 21/22	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	38	28	0	35	-	-	7	81	-
	(Renewal)	n/a	155	n/a	-	-	-	-	-	-
* Optional. List if tracked by the board.										

Table 7b. License Denial		
	FY 20/21	FY 21/22
License Applications Denied (no hearing requested)	0	0
SOIs Filed	0	0
Average Days to File SOI (from request for hearing to SOI filed)	0	0
SOIs Declined	0	0
SOIs Withdrawn	0	0
SOIs Dismissed (license granted)	0	0
License Issued with Probation / Probationary License Issued	0	0
Average Days to Complete (from SOI filing to outcome)	0	0

### ***Verification of Application Information***

Polysomnographic applicants are required by law to disclose truthfully all questions asked on the application for registration. Out-of-state and out-of-country applicants must meet the same requirements as California applicants. The application forms and LV are valid for one year. After one year, they must be updated to ensure that correct and current information accurately reflects any change in an applicant's qualifications. The Board requires primary source verification for proof of enrollment, diploma and transcripts from Board approved polysomnographic education programs, examination scores, LV, certification of Basic Life Support, and the Verification of Experience form.

The applicant must disclose all current and/or previous licenses/registrations held and provide an LV from each state or province to be sent directly to the Board verifying the applicant's licensure information and whether any action has been taken against the license.

The application asks about discipline by any other licensing/registering jurisdiction for the practice of polysomnography or any other healing arts license type. If an affirmative response to either of these questions is provided, the applicant and the involved institution must provide a detailed narrative of the events and circumstances leading to the action(s).

Registration applications previously requested information about convictions, including those that may have been deferred, set aside, dismissed, expunged or issued a stay of execution, however, these questions were removed from the application pursuant to AB 2138 (Chiu, Chapter 995, Statutes of 2018). Currently, if the Board is provided criminal history information by the DOJ, the Board will request information from the applicant on a voluntary basis. The Board will request documentation from the appropriate criminal justice agency as well regarding any prior arrests or convictions. The applicant may also voluntarily provide evidence of rehabilitation.

All reports of criminal history, prior disciplinary actions, or other unlawful acts of the applicant are reviewed on a case-by-case basis to determine if a registration should be issued or whether the applicant is eligible for registration.

All applicants must obtain fingerprint criminal record checks from both the DOJ and the FBI prior to the issuance of a registration. If the applicant is residing outside of California, then they must submit fingerprint cards. If the applicant is residing in California, then they must visit a Live Scan Service provider. The DOJ processes fingerprint submissions, which establishes the identity of the applicant and provides the Board the applicant's criminal conviction and arrest record in California or in any other jurisdiction within the U.S.

The Board receives subsequent arrest reports from the DOJ following the initial submittal of fingerprints. These supplemental reports are reviewed by the Board's Enforcement Program to determine if any action should be taken against the registrant.

An examination is not required for the trainee or technician registration types; however, the polysomnographic technologist registration requires an applicant to have taken and passed a national examination (Registered Polysomnographic Technologist Exam) administered by the BRPT. This is the only examination accepted by the Board for purposes of qualifying for registration pursuant to Chapter 7.8 of Division 2 of the BPC. This is a computer-based test that requires a minimum passing score of 350.

**Section 5 – Enforcement Program**

The Board received fewer complaints against polysomnographic trainees, technicians, and technologists during FYs 20/21 and 21/22, over previous years. The performance targets and expectations for resolving complaints against polysomnographic trainees, technicians, or technologists are aligned with the Board's overall mission of ensuring consumer protection. The Board must work with its vendors, HQUI and the AGO, to ensure investigations are completed timely and the administrative actions are moved through the disciplinary process as expeditiously as possible. The Board's goal is to complete quality investigations in a timely manner. Overall, the trend for the included fiscal years is that complaints and subsequent arrest notifications have decreased, and the board encountered no barriers to the performance of its mission.

Since the Board's last Sunset Report of 2020, the Board has received 3 complaints against a polysomnographic trainee, technician, or technologist during FYs 20/21 and 21/22. The Board also received 8 subsequent arrest notifications concerning a polysomnographic trainee, technician, or technologist for FYs 20/21 and 21/22.

Overall, the Board saw a significant decrease in complaints received and subsequent arrest notifications, but slight increase in the number of accusations filed.

The complaint prioritization policy for handling complaints filed against polysomnographic trainees, technicians, or technologists is consistent with DCA's guidelines.

Currently, there are no mandatory reporting requirements for registered polysomnographic trainees, technicians, or technologists.

The Polysomnographic Program does not have a statute of limitations established in law. The board recognizes public protection as its highest priority, and therefore strives to investigate each complaint as quickly as possible.

***Cite and Fine***

The Polysomnographic Program issued one cite and fine, which represents an increase over the previous report. The Board issues a cite and fine for minor violations. The average fine pre- and post- appeal is \$350.

The Board has not used the Franchise Tax Board intercept to collect outstanding fines against a polysomnographic registrant.

<b>Table 9a. Enforcement Statistics</b>			
	FY 19/20	FY 20/21	FY 21/22
<b>COMPLAINTS</b>			
Intake			
Received		1	2
Closed without Referral for Investigation		0	0
Referred to INV		1	2
Pending (close of FY)		0	0
Conviction / Arrest			
CONV Received		2	6
CONV Closed Without Referral for Investigation		0	0
CONV Referred to INV		2	6
CONV Pending (close of FY)		0	0
Source of Complaint <sup>5</sup>			
Public		0	1
Licensee/Professional Groups		0	0
Governmental Agencies		2	6
Internal		1	1
Other		0	0
Anonymous		0	0
Average Time to Refer for Investigation (from receipt of complaint / conviction to referral for investigation)		3 Days	3 Days
Average Time to Closure (from receipt of complaint / conviction to closure at intake)		0 Days	0 Days

<sup>5</sup> Source of complaint refers to complaints and convictions received. The summation of intake and convictions should match the total of source of complaint.

Average Time at Intake (from receipt of complaint / conviction to closure or referral for investigation)		3 Days	3 Days
<b>INVESTIGATION</b>			
Desk Investigations			
Opened		3	8
Closed		7	7
Average days to close (from assignment to investigation closure)		161 Days	3 Days
Pending (close of FY)		0	1
Non-Sworn Investigation			
Opened		2	3
Closed		12	1
Average days to close (from assignment to investigation closure)		345 Days	530 Days
Pending (close of FY)		1	5
Sworn Investigation			
Opened		0	1
Closed		0	0
Average days to close (from assignment to investigation closure)		0 Days	0 Days
Pending (close of FY)		0	1
All investigations <sup>6</sup>			
Opened		5	12
Closed		19	8
Average days for all investigation outcomes (from start investigation to		296 Days	183 Days

<sup>6</sup> The summation of desk, non-sworn, and sworn investigations should match the total of all investigations.

investigation closure or referral for prosecution)			
Average days for investigation closures (from start investigation to investigation closure)		330 Days	1 Day
Average days for investigation when referring for prosecution (from start investigation to referral for prosecution)		307 Days	547 Days
Average days from receipt of complaint to investigation closure		299 Days	189 Days
Pending (close of FY)		1	7
<b>CITATION AND FINE</b>			
Citations Issued		0	1
Average Days to Complete (from complaint receipt / inspection conducted to citation issued)		0 Days	22 Days
Amount of Fines Assessed		\$0	\$350
Amount of Fines Reduced, Withdrawn, Dismissed		\$0	\$0
Amount Collected		\$0	\$350
<b>CRIMINAL ACTION</b>			
Referred for Criminal Prosecution		0	0
<b>ACCUSATION</b>			
Accusations Filed		3	4
Accusations Declined		0	0
Accusations Withdrawn		0	0
Accusations Dismissed		0	0
Average Days from Referral to Accusations Filed* (from AG referral to Accusation filed)		115 Days	71 Days
<b>INTERIM ACTION</b>			

ISO & TRO Issued		0	0
PC 23 Orders Issued		0	0
Other Suspension/Restriction Orders Issued		0	1
Referred for Diversion		N/A	N/A
Petition to Compel Examination Ordered		0	0
<b>DISCIPLINE</b>			
AG Cases Initiated (cases referred to the AG in that year)		6	1
AG Cases Pending Pre-Accusation (close of FY)		3	0
AG Cases Pending Post-Accusation (close of FY)		3	2
<b>DISCIPLINARY OUTCOMES</b>			
Revocation		1	3
Surrender		1	0
Suspension only		0	0
Probation with Suspension		0	0
Probation only		1	2
Public Reprimand / Public Reproval / Public Letter of Reprimand		0	0
Other		0	0
<b>DISCIPLINARY ACTIONS</b>			
Proposed Decision		0	0
Default Decision		1	3
Stipulations		2	4



Average Days to Complete After Accusation (from Accusation filed to imposing formal discipline)		268 Days	359 Days
Average Days from Closure of Investigation to Imposing Formal Discipline		324 Days	427 Days
Average Days to Impose Discipline (from complaint receipt to imposing formal discipline)		799 Days	968 Days
<b>PROBATION</b>			
Probations Completed		0	0
Probationers Pending (close of FY)		1	1
Probationers Tolerated		0	0
Petitions to Revoke Probation / Accusation and Petition to Revoke Probation Filed		0	0
<b>SUBSEQUENT DISCIPLINE<sup>7</sup></b>			
Probations Revoked		0	0
Probationers License Surrendered		0	2
Additional Probation Only		0	0
Suspension Only Added		0	0
Other Conditions Added Only		0	0
Other Probation Outcome		0	0
<b>SUBSTANCE ABUSING LICENSEES</b>			
Probationers Subject to Drug Testing			
Drug Tests Ordered			
Positive Drug Tests			
<b>PETITIONS</b>			
Petition for Termination or Modification Granted		0	0

<sup>7</sup> Do not include these numbers in the Disciplinary Outcomes section above.

Petition for Termination or Modification Denied		0	0
Petition for Reinstatement Granted		0	0
Petition for Reinstatement Denied		0	0
<b>DIVERSION</b>			
New Participants		N/A	N/A
Successful Completions		N/A	N/A
Participants (close of FY)		N/A	N/A
Terminations		N/A	N/A
Terminations for Public Threat		N/A	N/A
Drug Tests Ordered		N/A	N/A
Positive Drug Tests		N/A	N/A
* The Board reports Probationers Tolled as probationers out of state as of June 30 of the respective fiscal year.			

**Table 10. Enforcement Aging**

	FY 18/19	FY 19/20	FY 20/21	FY 21/22	Cases Closed	Average %
<b>Investigations (Average %)</b>						
Closed Within:						
90 Days			2	2	4	19%
91 - 180 Days			1	0	1	4%
181 - 1 Year			6	0	6	29%
1 - 2 Years			9	1	10	48%
2 - 3 Years			0	0	0	0%
Over 3 Years			0	0	0	0%
Total Investigation Cases Closed			18	3	21	100%
<b>Attorney General Cases (Average %)</b>						
Closed Within:						
0 - 1 Year			0	0	0	0%
1 - 2 Years			1	1	2	29%
2 - 3 Years			1	3	4	57%
3 - 4 Years			0	0	0	0%
Over 4 Years			0	1	1	14%
Total Attorney General Cases Closed			2	5	7	100%

**Cost Recovery and Restitution**

Additionally, there was an increase of cost recovery ordered over the previous report.

<b>Table 11. Cost Recovery<sup>8</sup> (list dollars in thousands)</b>				
	FY 18/19	FY 19/20	FY 20/21	FY 21/22
Total Enforcement Expenditures				
Potential Cases for Recovery *				
Cases Recovery Ordered			0	1
Amount of Cost Recovery Ordered			\$0	\$11,267.50
Amount Collected			\$0	\$0
* "Potential Cases for Recovery" are those cases in which disciplinary action has been taken based on violation of the license practice act.				

<b>Table 12. Restitution (list dollars in thousands)</b>				
	FY 18/19	FY 19/20	FY 20/21	FY 21/22
Amount Ordered			0	0
Amount Collected			0	0

**Section 6 – Public Information Policies**

Refer to Full 2022 Medical Board Sunset Report.

**Section 7 – Online Practice Issues**

Refer to Full 2022 Medical Board Sunset Report.

**Section 8 – Workforce Development and Job Creation**

Refer to Full 2022 Medical Board Sunset Report.

**Section 9 – Current Issues**

Refer to Full 2022 Medical Board Sunset Report.

<sup>8</sup> Cost recovery may include information from prior fiscal years.

**Section 10 – Board Actions and Responses to COVID-19**

Refer to Full 2022 Medical Board Sunset Report.

**Section 11 – Board Action and Response to Prior Sunset Issues**

None.

**Section 12 – New Issues**

None.

# Sunset Review Oversight Report

## Part IV

### **Research Psychoanalysts**

- *Section 1 – Background and Description of Research Psychoanalysts*
- *Section 2 – Performance Measures and Customer Satisfaction Surveys*
- *Section 3 – Fiscal and Staff Issues*
- *Section 4 – Licensing Program*
- *Section 5 – Enforcement Program*
- *Section 6 – Public Information Policies*
- *Section 7 – Online Practice Issues*
- *Section 8 – Workforce Development and Job Creation*
- *Section 9 – Current Issues*
- *Section 10 – Board Actions and Responses to COVID-19*
- *Section 11 – Board Action and Responses to Prior Sunset Issues*
- *Section 12 – New Issues*

## RESEARCH PSYCHOANALYSTS

### Section 1 – Background and Description of Research Psychoanalysts

#### ***History and Functions of the Research Psychoanalyst Program***

The Legislature enacted the regulation of research psychoanalysts (RP) under the jurisdiction of the Board in 1977. A registered RP is an individual who has graduated from an approved psychoanalytic institution and is registered with the Board. Additionally, students, who are currently enrolled in an approved psychoanalytic institution and are registered with the Board as student research psychoanalysts (SRP), may engage in psychoanalysis under supervision.

Sections 2529 and 2529.5 of the BPC requires RPs to register with the Board, and authorizes individuals who have graduated from an approved psychoanalytic institute to engage in psychoanalysis as an adjunct to teaching, training, or research and hold themselves out to the public as psychoanalysts. "Adjunct" means that the RP may not render psychoanalytic services on a fee-for-service basis for more than an average of one-third of their total professional time, including time spent in practice, teaching, training or research. Such teaching, training or research shall be the primary activity of the RP.

Pursuant to BPC section 2529, students who are enrolled in an approved institute may engage in psychoanalysis under supervision and must also register with the Board.

#### ***Major Legislation/Regulations Since the Last Sunset Review***

##### **2021**

##### **[Assembly Bill \(AB\) 107 \(Salas, Chapter 107\) – Licensure: Veterans and Military Spouses](#)**

Starting July 1, 2023, requires boards to issue temporary licenses to practice within 30 days of receiving documentation that applicant meets all the requirements of the bill. The license would be terminated immediately upon finding the applicant failed to meet any of the requirements or provided substantially inaccurate information. The temporary license shall expire 12 months after issuance or upon issuance or denial of a standard/expedited license.

Requires DCA and boards to publish certain information pertaining to licensing options for military spouses on the homepage of their website. Requires DCA to publish annually specified information related to applications for licensure from military, veteran, and spouse licensure.

##### **[AB 133 \(Committee on Budget, Chapter 143\) – Health](#)**

This bill renames the Office of Statewide Health Planning and Development as the Department of Health Care Access and Information (HCAI). Requires the Board (among

others) to request certain workforce data from licensees and registrants on at least a biennial basis. Each board (or DCA on behalf of the board) shall, starting July 1, 2022, report on a quarterly basis, this information to HCAI.

#### [SB 607 \(Min, Chapter 367\) – Business and Professions](#)

Effective July 1, 2022, all boards are required to expedite licensure and waive application and initial licensure fees for those who (1) Supplies evidence satisfactory to the board that the applicant is married to, or in a domestic partnership or other legal union with, an active duty member of the Armed Forces of the United States who is assigned to a duty station in this state under official active duty military orders; and (2) Holds a current license in another state, district, or territory of the United States in the profession or vocation for which the applicant seeks a license from the board

#### [Senate Bill \(SB\) 806 \(Roth, Chapter 649\) – Healing Arts](#)

This was the sunset bill for the Board and had the following effects:

- Administration
  - Increases various application, initial licensure, and renewal fees.
  - Requires all applicants and licensees to have an email address and provide it to the Board no later than July 1, 2022.
  - Extends the Board's sunset to January 1, 2024.
- Enforcement
  - Requires the DCA Director to appoint an enforcement monitor who will issue two reports to the Legislature in 2023.
- Licensing
  - Allows the elimination of paper-based licensure application forms.
  - Eliminates the requirement to send a certified mail notification to those whose licenses may expire.
  - Changes from 90 days to 30 days following license expiration when penalty and delinquency fees are owed to the Board.

### **2022**

#### [AB 1102 \(Low, Chapter 684\) - Telephone Medical Advice Services](#)

Clarifies existing law that requires health care professionals providing telephone medical advice services from an out-of-state location to do so consistent with the laws governing their respective licenses. The bill also specifies that a telephone medical advice service is required to comply with all directions and requests for information made by the Department of Consumer Affairs and the respective healing arts licensing board.

### ***Regulations***



*Substantial Relationship and Rehabilitation – Implementation of AB 2138 (Chiu, Chapter 995, Statutes of 2018) (effective January 21, 2021)*

The Board approved a proposed rulemaking to update its regulations as required pursuant to AB 2138 relating to evaluating whether a crime or act was substantially related to the profession, and to evaluate the rehabilitation of an applicant or licensee when considering denying or disciplining a license based on a conviction or professional discipline.

*Notice to Consumers (pending)*

The Board approved a proposed rulemaking 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.

*Citable Offenses (pending)*

The Board approved a proposed rulemaking to amend 16 CCR section 1364 to permit a Board official to issue citations, including those containing orders of abatement and/or fines, to any licensee for a violation of any statute or regulation which would be grounds for discipline by the Board.

Further, the provisions relating to fine assessment under 16 CCR section 1364.10 will be amended to indicate that the amount shall not exceed the amount specified in BPC section 125.9(b)(3). This change will update the Board's authority to assess fines to the full extent authorized under this statute.

## **Section 2 – Performance Measures and Customer Satisfaction Surveys**

Refer to Full 2022 Medical Board Sunset Report.

## **Section 3 – Fiscal and Staff**

Refer to Full 2022 Medical Board Sunset Report.

## **Section 4 – Licensing Program**

### ***Application Review***

16 CCR section 1367.4 requires the Board to inform an applicant for registration as an RP in writing within 11 days of receipt of the initial application form whether the application is complete and accepted for filing or is deficient and what specific information is required. The Board is in compliance with this mandated timeframe.

Due to the small number of new applications received, processing times have neither decreased nor increased significantly during the last four years. The number of pending applications for the program are also very low and are outside of the Board's control because they are incomplete.

The tables below show the RP registration population, registration applications received, registrations issued, and registrations renewed.

**Table 6. Licensee Population**

		FY 18/19	FY 19/20	FY 20/21	FY 21/22
8003 – Research Psychoanalyst	Active	90	82	88	86
	Out of State	Unknown	Unknown	Unknown	10
	Out of Country	Unknown	Unknown	Unknown	0
	Delinquent/Expired	15	25	17	27
	Retired Status <i>if applicable</i>	N/A	N/A	N/A	N/A
	Inactive	N/A	N/A	N/A	N/A
	Other	N/A	N/A	N/A	N/A
Note: 'Out of State' and 'Out of Country' are two mutually exclusive categories. A licensee should not be counted in both.					

**Table 7a. Licensing Data by Type - 8003 – Research Psychoanalyst**

	App Type	Received	Approved /Issued	Closed	Pending Applications			Cycle Times		
					Total (Close of FY)	Complete (within Board control)*	Incomplete (outside Board control)*	Complete Apps	Incomplete Apps	combined, IF unable to separate out
FY 19/20	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	5	4	1	1	-	-	19	74	-
	(Renewal)	n/a	69	n/a	-	-	-	-	-	-
FY 20/21	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	9	4	0	2	-	-	n/a	31	-

	(Renewal)	n/a	15	n/a	-	-	-	-	-	-
FY 21/22	(Exam)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
	(License)	8	11	0	4	-	-	12	86	-
	(Renewal)	n/a	63	n/a	-	-	-	-	-	-
* Optional. List if tracked by the board.										

Table 7b. License Denial		
	FY 20/21	FY 21/22
License Applications Denied (no hearing requested)	0	0
SOIs Filed	0	0
Average Days to File SOI (from request for hearing to SOI filed)	0	0
SOIs Declined	0	0
SOIs Withdrawn	0	0
SOIs Dismissed (license granted)	0	0
License Issued with Probation / Probationary License Issued	0	0
Average Days to Complete (from SOI filing to outcome)	0	0

### ***Verification of Application Information***

RP applicants are required by law to truthfully disclose all questions asked on the application for licensure. The application is valid for one year. After one year, an application must be updated to ensure that correct and current information accurately reflects any change in an applicant's qualifications. Out-of-state and out-of-country applicants must meet the same requirements as California applicants.

An examination is not required prior to registration as an RP. Qualification for registration is based on educational requirements and training. An RP applicant must disclose on the application 1) the names and locations of all schools where professional instruction was received; and 2) the name and location of the school where psychoanalytic training was received. To verify this information, the applicant must

request 1) an official transcript verifying that a doctorate degree, or its equivalent, has been granted; and 2) an official certification from the dean verifying the student's current status. The Board requires primary source verification and requires the schools to send these documents directly to the Board for review.

The RP application previously requested information about convictions, including those that may have been deferred, set aside, dismissed, expunged or issued a stay of execution, however, these questions were removed from the application pursuant to AB 2138 (Chiu, Chapter 995, Statutes of 2018). Currently, if the Board is provided criminal history information by the DOJ, the Board will request information from the applicant on a voluntary basis. The Board will request documentation from the appropriate criminal justice agency as well regarding any prior arrests or convictions. The applicant may also voluntarily provide evidence of rehabilitation.

The application asks about discipline by any other licensing jurisdiction or governmental agency for any professional license/registration. If an affirmative response to any of these questions is provided, the applicant and the involved institution must provide a detailed summary of the events and circumstances leading to the action(s).

All reports of criminal history, prior disciplinary actions, or other unlawful acts of the applicant are reviewed on a case-by-case basis to determine whether a registration should be issued.

All applicants must obtain fingerprint criminal record checks from both the DOJ and the FBI prior to the issuance of a registration. If the applicant is residing outside of California, then they must submit fingerprint cards. If the applicant is residing in California, then they must visit a Live Scan Service provider. The DOJ processes fingerprint submissions, which establishes the identity of the applicant and provides the Board the applicant's criminal conviction and arrest record in California or in any other jurisdiction within the U.S.

All RPs with a current registration have been fingerprinted. As fingerprinting is a requirement for registration, an RP registration will not be issued prior to completion of this requirement. The Board receives subsequent arrest reports from the DOJ following the initial submittal of fingerprints. These supplemental reports are reviewed by the Board's Enforcement Program to determine if any action should be taken against the registrant.

### ***School Approvals***

16 CCR section 1374 defines the requirements for a psychoanalytic institute to be deemed acceptable. The Board is tasked with determining, based on documentation submitted by the institute, whether or not it meets the mandated requirements. The BPPE does not play a role in determining the qualifications of a psychoanalytic institute for approval.

The Board has approved 19 research psychoanalytic institutions. These institutions have met the requirements for psychoanalytical training as defined in BPC section 2529. BPC section 2529 also states that education received at an institute deemed equivalent to one of the approved institutions would be acceptable. In order to be deemed an equivalent psychoanalytic institute, such an institute, department or program would have to meet the requirements outlined in 16 CCR section 1374. Current law does not define the timeframe required for reviewing psychoanalytical institutes. International psychoanalytical institutes are required to submit the same documentation and meet the same requirements as a U.S. institute.

### **Section 5 – Enforcement Program**

The Board received no complaints and had no investigations or disciplinary activity against any RP for FY 20/21 or 21/22 therefore no charts have been included. Given the low volume of RPs, staff do not expect a significantly higher volume of complaints in the future.

When received, the performance targets and expectations for resolving complaints against RPs are aligned with the Board's overall mission of ensuring consumer protection. The Board must work with its vendors, HQUI and the AGO, to ensure investigations are completed timely and the administrative actions are moved through the disciplinary process as expeditiously as possible. The Board's goal is to complete quality investigations in a timely manner.

The complaint prioritization policy for handling complaints filed against RPs is consistent with DCA's guidelines. Currently, there are no mandatory reporting requirements for registered RPs.

The RP program does not have a statute of limitations established in law.

This registration category is extremely limited, and only applies to registrants engaging psychoanalysis services under specific circumstances. There were no known cases of unlicensed practice for this review period. However, should such a complaint be received, the Board would use its investigative resources to pursue and prosecute, if appropriate, any individuals providing psychoanalysis services without proper registration.

### ***Cite and Fine***

The RP Program has not utilized its citation and fine authority primarily because there are no technical violations that would be appropriate to resolve through this administrative remedy.

### ***Cost Recovery and Restitution***

Although the RP program can order cost recovery and restitution, no cases resulted in discipline, therefore the board pursued no cost recovery and restitution.

**Section 6 – Public Information Policies**

Refer to Full 2022 Medical Board Sunset Report.

**Section 7 – Online Practice Issues**

Refer to Full 2022 Medical Board Sunset Report.

**Section 8 – Workforce Development and Job Creation**

Refer to Full 2022 Medical Board Sunset Report.

**Section 9 – Current Issues**

Refer to Full 2022 Medical Board Sunset Report.

**Section 10 – Board Actions and Responses to COVID-19**

Refer to Full 2022 Medical Board Sunset Report.

**Section 11 – Board Action and Response to Prior Sunset Issues**

See Issue #4, Section 11 in Part I - Physicians

**Section 12 – New Issues**

See Section 12 (Physicians)

# Sunset Review Oversight Report

## Section 13

### **Attachments**

- *Attachment A – Board Member Administrative Procedure Manual*
- *Attachment B – Current Organizational Chart Showing Relationship of Committees to the Board and Membership of Each Committee*
- *Attachment C – Major Studies and Publications*
- *Attachment D – Year-End Organizational Charts*
- *Attachment E – Board Member Attendance*
- *Attachment F – Performance Measures*
- *Attachment G – Revenue and Fee Schedule*

ATTACHMENTS

Attachment A – Board Member Administrative Procedure Manual

**State of California**

**State and Consumer Services Agency**

**MEDICAL BOARD OF CALIFORNIA**

**Board Member Administrative  
Procedure Manual**





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## Board Member Administrative Procedure Manual

*Updates to Manual – August 2020*

### Table of Contents

	Page
<b>Chapter 1. Introduction</b>	
Overview	1
Definitions	1
General Rules of Conduct	2
<b>Chapter 2. Board Meeting Procedures</b>	
Frequency of Meetings	3
Board Member Attendance at Board Meetings	3
Public Attendance at Board Meetings/Open Meetings Act	3
Quorum	3
Agenda Items	4
Notice of Meetings	4
Notice of Meetings to be Posted on Internet	4
Record of Meetings	4
Tape Recording	4
Meeting Rules	4
Public Comment	4
Written Comment	5

**Chapter 3. Travel & Salary Policies & Procedures**

Travel Approval	7
Travel Arrangements	7
Out-of-State Travel	7
Travel Claims	7
Salary Per Diem	7

**Chapter 4. Selection of Officers & Committees**

Officers of the Board	9
Election of Officers	9
Panel Members	9
Election of Panel Members	9
Officer Vacancies	9
Committee Appointments	9
Attendance at Committee Meetings	9
Duties of the Officers	9

**Chapter 5. Board Administration & Staff**

Board Administration	11
Strategic Planning	11
Executive Director Evaluation	11
Board Staff	11
Business Cards	11

**Chapter 6. Other Policies & Procedures**

Board Member Disciplinary Actions	12
Removal of Board Members	12
Resignation of Board Members	12
Conflict of Interest	12
Gifts from Candidates	12
Request for Records Access	12
Meeting with the Public and Interested Parties	13
Communications with Interested Parties	13
Media Inquiries	13
Service of Lawsuits	13
<i>Ex Parte</i> Communications	14
Board Member Training Requirements	15

**Appendix 1**

Board Member Responsibilities – DCA Orientation	16
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Chapter 1. Introduction

**Overview** The Medical Board of California (MBC) was created by the California Legislature in 1876. Today the MBC is one of the boards, bureaus, commissions, and committees within the Department of Consumer Affairs (DCA), part of the State and Consumer Services Agency under the aegis of the Governor. The Department is responsible for consumer protection and representation through the regulation of certain licensed professions and the provision of consumer services. While the DCA provides oversight in various areas including, but not limited to, budget change proposals, regulations, and contracts, and also provides support services, MBC has policy autonomy and sets its own policies procedures, and initiates its own regulations. (See Business and Professions Code sections 108, 109(a), and 2018.)

The MBC is presently comprised of 15 Members. By law, seven are public Members, and eight are physicians. The Senate Rules Committee and the Speaker of the Assembly each appoint one public member. Board Members may serve two full four-year terms. Board Members fill non-salaried positions, and are paid \$100 per day for each day worked and are reimbursed travel expenses.

This procedure manual is provided to Board Members as a ready reference of important laws, regulations, and Board policies, to guide the actions of Board Members and ensure Board effectiveness and efficiency.

Due notice of each meeting and the time and place thereof shall be given each member in the manner provided by law.

<b>Definitions</b>	B&P	Business and Professions Code
	SAM	State Administrative Manual
	President	Where the term “President” is used in this manual, it includes “his or her designee”

**General Rules  
of Conduct**

Board Members shall not speak to interested parties (such as vendors, lobbyists, legislators, or other governmental entities) on behalf of the Board or act for the Board without proper authorization.

Board Members shall maintain the confidentiality of confidential documents and information.

Board Members shall commit time, actively participate in Board activities, and prepare for Board meetings, which includes reading Board packets and all required legal documents.

Board Members shall respect and recognize the equal role and responsibilities of all Board Members, whether public or licensee.

Board Members shall act fairly and in a nonpartisan, impartial, and unbiased manner.

Board Members shall treat all applicants and licensees in a fair and impartial manner.

Board Members' actions shall uphold the Board's primary mission – protection of the public.

Board Members shall not use their positions on the Board for political, personal, familial, or financial gain.

## Chapter 2. Board Meeting Procedures

### Frequency of Meetings

*(B&P Code sections 2013, 2014)*

The Board shall meet at least once each calendar quarter in various parts of the state for the purpose of transacting such business as may properly come before it.

Special meetings of the Board may be held at such times the Board deems necessary.

Four Members of a panel of the Board shall constitute a quorum for the transaction of business at any meeting of the panel.

Eight Members shall constitute a quorum for the transaction of business at any Board meeting.

Due notice of each meeting and the time and place thereof shall be given each member in the manner provided by the law.

### Board Member Attendance at Board Meetings

*(B&P Code sections 106, 2011)*

Board Members shall attend each meeting of the Board. If a member is unable to attend, he or she must contact the Board President and ask to be excused from the meeting for a specific reason. The Governor has the power to remove from office any member appointed by him for continued neglect of duties, which may include unexcused absences from meetings.

Board Members shall attend the entire meeting and allow sufficient time to conduct all Board business at each meeting.

### Public Attendance at Board Meetings

*(Government Code section 11120 et. seq.)*

Meetings are subject to all provisions of the Bagley-Keene Open Meetings Act. This act governs meetings of state regulatory boards and meetings of committees of those boards where the committee consists of more than two Members. It specifies meeting notice and agenda requirements and prohibits discussing or taking action on matters not included on the agenda.

If the agenda contains matters that are appropriate for closed session, the agenda must cite the particular statutory section and subdivision authorizing the closed session.

### Agenda Items

*(Board Policy)*

Any Board Member may submit items for a meeting agenda to the Executive Director not fewer than 30 days prior to the

meeting with the approval of the Board President or Chair of the Committee.

**Notice of Meetings**

*(Government Code section 11120 et seq.)*

In accordance with the Open Meetings Act, meeting notices (including agendas for Board, Committee, or Panel meetings) shall be sent to persons on the Board's mailing list at least 10 calendar days in advance. The notice shall include the name, work address, and work telephone number of a staff person who can provide further information prior to the meeting.

**Notice of Meetings to be Posted on the Internet**

*(Government Code section 11125 et seq.)*

Notice shall be given and made available on the Internet at least 10 days in advance of the meeting and shall include the name, address, and telephone number of any person who can provide further information prior to the meeting, but need not include a list of witnesses expected to appear at the meeting. The written notice shall additionally include the address of the Internet site where notices required by this article are made available.

**Record of Meetings**

*(B&P Code section 2017)*

The Board and each Committee or Panel shall keep an official record of all his or her proceedings. The minutes are a summary, not a transcript, of each Board or Committee meeting. They shall be prepared by staff and submitted to Members for review before the next meeting. Minutes shall be approved at the next scheduled meeting of the Board, Committee, or Panel. When approved, the minutes shall serve as the official record of the meeting.

**Tape Recording/Web Casting**

*(Board Policy)*

The meeting may be tape-recorded if determined necessary for staff purposes. Tape recordings will be disposed of upon approval of the minutes in accordance with record retention schedules. The meeting will be Web cast, as DCA staff is available, including the Committees of the Board. The Web cast will be posted on the Board's Web site within two weeks and kept for 10 years or more.

**Meeting Rules**

*(Board Policy)*

The Board will use Robert's Rules of Order, to the extent that it does not conflict with state law (e.g. Bagley-Keene Open Meeting Act), as a guide when conducting its meetings.



**Public Comment***(Board Policy)*

Due to the need for the Board to maintain fairness and neutrality when performing their adjudicative function, the Board shall not receive any substantive information from a member of the public regarding any matter that is currently under or subject to investigation or involves a pending criminal or administrative action.

1. If, during a Board meeting, a person attempts to provide the Board with substantive information regarding matters that are currently under or subject to investigation or involve a pending administrative or criminal action, the person shall be advised that the Board cannot properly consider or hear such substantive information, and the person shall be instructed to refrain from making such comments.

2. If, during a Board meeting, a person wishes to address the Board concerning alleged errors of procedure or protocol or staff misconduct, involving matters that are currently under or subject to investigation or involve a pending administrative or criminal action, the Board will address the matter as follows:

- a. Where the allegation involves errors of procedure or protocol, the Board may designate either its Executive Director or a Board employee to review whether the proper procedure or protocol was followed and to report back to the Board.
- b. Where the allegation involves significant staff misconduct, the Board may designate one of its Members to review the allegation and to report back to the Board.

3. The Board may deny a person the right to address the Board and have the person removed if such person becomes disruptive at the Board meeting.

*(Government Code section 11120 et seq.)*

4. Persons wishing to address the Board or a Committee of the Board shall be requested to complete a speaker request slip in order to have an appropriate record of the speaker for the minutes. At the discretion of the Board President or Chair of the Committee, speakers may be limited in the amount of time to present to give adequate time to everyone who wants to speak. In the event the number of people wishing to address the Board exceeds the allotted time, the Board President or Chair of the Committee may limit each speaker to a statement of his/her

name, organization, and whether they support or do not support the proposed action

**Written Comment**

*(Board Policy)*

Prior to a Board meeting, an individual or group may submit materials related to a meeting agenda item to the Executive Director and request that the material be provided to the Board or Committee Members. Upon receipt of such a request, the Executive Director will verify that the materials are related to an open session agenda item (no materials will be distributed regarding complaints, investigations, contested cases, litigation, or other matters that may be properly discussed in closed session) and then forward the materials to the Board or Committee Members. When forwarding the applicable materials to the Board members, the Executive Director may include information regarding existing law, regulation, or past Board action relevant to the issue presented. The written communication must be provided at least four business days prior to the meeting in order to ensure delivery to the Board Members.

NOTE: This section is not applicable to a formal regulatory hearing.

## Chapter 3. Travel & Salary Policies & Procedures

### Travel Approval

*(DCA Memorandum 96-01)*

The Board President's approval is required for all Board Members for travel, except for travel to regularly scheduled Board and Committee meetings to which the Board Member is assigned.

### Travel Arrangements

*(Board Policy)*

Board Members may make their own travel arrangements but are encouraged to coordinate with the Executive Director's Administrative Assistant on lodging accommodations.

### Out-of-State Travel

*(SAM section 700 et seq.)*

For out-of-state travel, Board Members will be reimbursed for actual lodging expenses, supported by vouchers, and will be reimbursed for meal and supplemental expenses. Out-of-state travel for all persons representing the State of California is controlled by and approved by the Governor's Office.

### Travel Claims

*(SAM section 700 et seq. and  
DCA Memorandum 96-01)*

Rules governing reimbursement of travel expenses for Board Members are the same as for management-level state staff. All expenses shall be claimed on the appropriate travel expense claim forms. The Executive Director's Administrative Assistant maintains these forms and completes them as needed. Board Members should submit their travel expense forms immediately after returning from a trip and no later than two weeks following the trip.

For the expenses to be reimbursed, Board Members shall follow the procedures contained in DCA Departmental Memoranda, which are periodically disseminated by the Executive Director and are provided to Board Members.

### Salary Per Diem

*(B&P Code section 103)*

Compensation in the form of salary per diem and reimbursement of travel and other related expenses for Board Members is regulated by B&P Code Section 103.

In relevant part, this section provides for the payment of salary per diem for Board Members "for each day actually spent in the discharge of official duties," and provides that the Board Member "shall be reimbursed for traveling and other expenses necessarily incurred in the performance of official duties."

*(Board Policy)*

Accordingly, the following general guidelines shall be adhered to in the payment of salary per diem or reimbursement for travel:

1. No salary per diem or reimbursement for travel-related expenses shall be paid to Board Members, except for attendance at an official Board, Committee, or Panel meeting, unless a substantial official service is performed by the Board Member. Attendance at gatherings, events, hearings, conferences, or meetings other than official Board, Committee, or Panel meetings, in which a substantial official service is performed, shall be approved in advance by the Board President. The Executive Director shall be notified of the event and approval shall be obtained from the Board President prior to Board Member's attendance.
2. The term "day actually spent in the discharge of official duties" shall mean such time as is expended from the commencement of a Board, Committee, or Panel meeting to the conclusion of that meeting.

For Board-specified work, Board Members will be compensated for actual time spent performing work authorized by the Board President. That work includes, but is not limited to, authorized attendance at other gatherings, events, meetings, hearings, or conferences. It includes preparation time for Board, Committee, or Panel meetings.

## Chapter 4. Selection of Officers & Committees

### Officers of the Board

*(B&P Code Section 2012)*

The Board shall select a President, Vice President, and Secretary from its Members.

### Election of Officers

*(Board Policy)*

The Board shall elect the officers at the first meeting of the fiscal year. Officers shall serve a term of one year beginning the next meeting day. All officers may be elected on one motion or ballot as a slate of officers unless more than one Board Member is running per office. An officer may be re-elected and serve for more than one term.

### Panel Members

*(B&P Code section 2008)*

A Panel of the Board shall at no time be composed of less than four Members and the number of public Members assigned shall not exceed the number of licensed physician and surgeon Members assigned to the Panel. The Board usually is comprised of two panels, however, if there is an insufficient number of Members, there may only be one Panel.

### Election of Panel Members

*(B&P Code section 2008)*

Each Panel shall annually, at the last meeting of the calendar year, elect a Chair and a Vice Chair.

### Officer Vacancies

*(Board Policy)*

If an office becomes vacant during the year, an election shall be held at the next meeting. If the office of the President becomes vacant, the Vice President shall assume the office of the President. Elected officers then shall serve the remainder of the term.

### Committee Appointments

*(Board Policy)*

The Board President shall establish Committees, whether standing or special, as he or she deems necessary. The composition of the Committees and the appointment of the Members shall be determined by the Board President in consultation with the Vice President, Secretary, and the Executive Director. Committees may include the appointment of non-Board Members.

### Attendance at Committee Meetings

*(Government Code section 11120 et seq.)*

Board Members are encouraged to attend a meeting of a Committee of which he or she is not a member. Board Members who are not Members of the Committee that is meeting cannot vote during the Committee meeting and may participate only as observers if a majority of the Board is present at a Committee meeting.

**Duties of the Officers**

The following matrix delineates the duties of the Board officers, Committee Chairs, and Panel officers.

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## Roles of Board Officers/Committee Chairs/Panel Officers

<b>President</b>	<ul style="list-style-type: none"> <li>• Spokesperson for the Medical Board (including but not limited to) – may attend legislative hearings and testify on behalf of the Board, may attend meetings with stakeholders and Legislators on behalf of Board, may talk to the media on behalf of the Board, and signs letters on behalf of the Board</li> <li>• Meets and communicates with the Executive Director on a regular basis</li> <li>• Communicates with other Board Members for Board business</li> <li>• Authors a president's message in every quarterly newsletter</li> <li>• Approves Board Meeting agendas</li> <li>• Chairs and facilitates Board Meetings</li> <li>• Chairs the Executive Committee</li> <li>• Signs specified full board enforcement approval orders</li> <li>• Signs the minutes for each of the Board's quarterly Board Meetings</li> <li>• Represents the Board at Federation of State Medical Boards' meetings and other such meetings</li> </ul>
<b>Vice President</b>	<ul style="list-style-type: none"> <li>• Is the back-up for the duties above in the President's absence.</li> <li>• Is a member of Executive Committee</li> </ul>
<b>Secretary</b>	<ul style="list-style-type: none"> <li>• Signs the minutes for each of the Board's quarterly Board Meetings</li> <li>• Is a member of Executive Committee</li> </ul>
<b>Past President</b>	<ul style="list-style-type: none"> <li>• Is responsible for mentoring and imparting knowledge to the new Board President</li> <li>• May attend meetings and legislative hearings to provide historical background information, as needed</li> <li>• Is a member of Executive Committee</li> </ul>
<b>Committee Chair</b>	<ul style="list-style-type: none"> <li>• Approves the Committee Agendas</li> <li>• Chairs and facilitates Committee Meetings</li> </ul>
<b>Panel Officers</b>	<ul style="list-style-type: none"> <li>• Chair – Chairs and facilitates Panel Meetings</li> <li>• Chair – Signs orders for Panel decisions</li> <li>• Vice Chair – Acts as Chair when Chair is absent</li> </ul>

**Chapter 5. Board Administration & Staff****Board Administration***(DCA Reference Manual)*

Board Members should be concerned primarily with formulating decisions on Board policies rather than decisions concerning the means for carrying out a specific course of action. It is inappropriate for Board Members to become involved in the details of program delivery. Strategies for the day-to-day management of programs and staff shall be the responsibility of the Executive Director. Board Members should not interfere with day-to-day operations, which are under the authority of the Executive Director.

**Strategic Planning**

The Board will conduct periodic strategic planning sessions.

**Executive Director Evaluation***(Board Policy)*

Board Members shall evaluate the performance of the Executive Director on an annual basis.

**Board Staff***(DCA Reference Manual)*

Employees of the Board, with the exception of the Executive Director, are civil service employees. Their employment, pay, benefits, discipline, termination, and conditions of employment are governed by a myriad of civil service laws and regulations and often by collective bargaining labor agreements. Because of this complexity, it is most appropriate that the Board delegate all authority and responsibility for management of the civil service staff to the Executive Director. Board Members shall not intervene or become involved in specific day-to-day personnel transactions.

**Business Cards**

Business cards will be provided to each Board Member with the Board's name, address, telephone and fax number, and Web site address.



## Chapter 6. Other Policies & Procedures

### **Board Member Disciplinary Actions**

*(Board Policy)*

A member may be censured by the Board if, after a hearing before the Board, the Board determines that the member has acted in an inappropriate manner.

The President of the Board shall sit as chair of the hearing unless the censure involves the President's own actions, in which case the Vice President of the Board shall sit as President. In accordance with the Open Meeting Act, the censure hearing shall be conducted in open session.

### **Removal of Board Members**

*(B&P Code sections 106 & 2011)*

The Governor has the power to remove from office, at any time, any member of any Board appointed by him or her for continued neglect of duties required by law or for incompetence or unprofessional or dishonorable conduct.

### **Resignation of Board Members**

*(Government Code section 1750)*

In the event that it becomes necessary for a Board Member to resign, a letter shall be sent to the appropriate appointing authority (Governor, Senate Rules Committee, or Speaker of the Assembly) with the effective date of the resignation. Written notification is required by state law. A copy of this letter also shall be sent to the director of the Department, the Board President, and the Executive Director.

### **Conflict of Interest**

*(Government Code section 87100)*

No Board Member may make, participate in making, or in any way attempt to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any Board Member who has a financial interest shall disqualify himself or herself from making or attempting to use his or her official position to influence the decision. Any Board Member who feels he or she is entering into a situation where there is a potential for a conflict of interest should immediately consult the Executive Director or the Board's legal counsel.

Board Members should refrain from attempting to influence staff regarding applications for licensure or potential disciplinary matters.

### **Gifts from Candidates**

*(Board Policy)*

Gifts of any kind to Board Members from candidates for licensure with the Board shall not be permitted.

**Request for Records Access***(Board Policy)*

No Board Member may access the file of a licensee or candidate without the Executive Director's knowledge and approval of the conditions of access. Records or copies of records shall not be removed from the MBC's office.

**Meetings with the Public and Interested Parties***(Board Policy)*

Interested parties may request to meet with a Board Member on a matter or matters under the Board's jurisdiction. Members must remember that the power of the Board is vested in the Board itself and not with any individual Board Member. For that reason, Board Members are cautioned to not express their personal opinions as a Board policy or position or represent that the Board has taken a position on a particular issue when it has not. It is strongly suggested that Board Members disclose their attendance at any meeting of this type at the next scheduled Board meeting as identified in the next section, "Communication with Interested Parties".

**Communication with Interested Parties**

Board Members are required to disclose at Board Meetings all discussions and communications with interested parties regarding any item pending or likely to be pending before the Board. The Board minutes shall reflect the items disclosed by the Board Members. All agendas will include, as a regular item, a disclosure agenda item where each Member relays any relevant conversations with interested parties.

**Media Inquiries***(Board Policy)*

If a Board Member receives a media call, the Member should promptly refer the caller to the Board's Public Information Officer who is employed to interface with all types of media on any type of inquiry. Members are recommended to make this referral as the power of the Board is vested in the Board itself and not with any individual Board Member. Expressing a personal opinion can be seen as a Board policy or position and may be represented as the Board has taken a position on a particular issue when it has not.

A Board Member who receives a call should politely thank the caller for the call, but state that it is the Board's policy to refer all callers to the Public Information Officer. The Board Member should then send an email to the Executive Director indicating they received a media call and relay any information supplied by the caller.

**Service of Lawsuits**

The Board Members may receive service of a lawsuit against themselves and the Board pertaining to a certain issue (e.g. a disciplinary matter, a complaint, a legislative matter, etc.). To prevent a confrontation, the Board Member should accept service. Upon receipt, the Board Member should notify the Executive Director of the service and indicate the name of the matter that was served and any other pertinent information. The Board Member should then mail the entire package that was served to the Executive Director as soon as possible. The Board's legal counsel will provide instructions to the Board

Members on what is required of them once service has been made. The Board Members may be required to submit a request for representation to the Board to provide to the Attorney General's Office.

**Ex Parte Communications**

(Government Code section  
11430.10 et seq.)

The Government Code contains provisions prohibiting *ex parte* communications. An "*ex parte*" communication is a communication to the decision-maker made by one party to an enforcement action without participation by the other party. While there are specified exceptions to the general prohibition, the key provision is found in subdivision (a) of section 11430.10, which states:

*"While the proceeding is pending, there shall be no communication, direct or indirect, regarding any issue in the proceeding to the presiding officer from an employee or representative or if an agency that is a party or from an interested person outside the agency, without notice and an opportunity for all parties to participate in the communication."*

An applicant who is being formally denied licensure, or a licensee against whom a disciplinary action is being taken, may attempt to directly contact Board Members.

If the communication is written, the member should read only enough to determine the nature of the communication. Once he or she realizes it is from a person against whom an action is pending, he or she should reseal the documents and send them to the Executive Director, or forward the email.

If a Board Member receives a telephone call from an applicant or licensee against whom an action is pending, he or she should immediately tell the person he or she cannot speak to him or her about the matter. If the person insists on discussing the case, he or she should be told that the Board Member will be required to recuse himself or herself from any participation in the matter. Therefore, continued discussion is of no benefit to the applicant or licensee.

If a Board Member believes that he or she has received an unlawful *ex parte* communication, he or she should contact the Board's assigned attorney or Executive Director.

### **Board Member Training Requirements**

Upon initial appointment, Board Members will be given an overview of Board operations, policies, and procedures by Board Executive Staff.

*(B&P Code section 453)*

Every appointed Board Member shall, within one year of assuming office, complete a training and orientation program offered by the Department of Consumer Affairs. This is in addition to the Board orientation given by Board staff.

*(Government Code section 11146)*

All Board Members are required to file an annual Form 700 statement of economic interest. Members must also complete an orientation course on the relevant ethics statutes and regulations that govern the official conduct of state officials. The Government Code requires completion of this ethics orientation within the first six months of appointment and completion of a refresher every two years thereafter.

*(Government Code section 12950.1)*

SB 530 (Chapter 722, Statutes of 2019, Galgiani) requires supervisors, including Board Members, to complete two hours of sexual harassment prevention training by January 1, 2021, and every two years thereafter.

## Appendix 1

### Board Member Responsibilities

Board members represent the State of California and although he/she is an individual member, Members have an obligation to represent the Board as a body. Each member should carefully consider each responsibility and time commitment prior to agreeing to become a Board Member.

#### Attending meetings (12-20 days per year)

- Attend all meetings; be prepared for all meetings by reviewing and analyzing all Board materials; actively participate in meeting discussions; serve on committees of the Board to provide expertise in matters related to the Board

#### Disciplinary Matters (12-40 days per year)

- Review and analyze all materials pertaining to disciplinary matters and provide a fair, unbiased decision; timely respond to every request for a decision on any disciplinary matter; review and understand the Board's disciplinary guidelines; review and amend the Board's disciplinary guidelines on a regular basis to align with the policies set by the Board

#### Policy Decision Making (included above)

- Make educated policy decisions based upon both qualitative and quantitative data; obtain sufficient background information on issues upon which decisions are being made; seek information from Board staff regarding the functions/duties/requirements for the licensees being overseen; allow public participation and comment regarding matters prior to making decisions; ensure public protection is the highest priority in all decision making

#### Governance (2-4 days per year)

- Monitor key and summary data from the Board's programs to evaluate whether business processes are efficient and effective; obtain training on issues pertaining to the Board (e.g. budget process, legislative process, enforcement/licensing process, etc.); make recommendations regarding improvements to the Board's mandated functions
- Participate in the drafting and approval of a Strategic Plan; oversee the Strategic Plan on a quarterly basis to ensure activities are being implemented and performed; monitor any new tasks/projects to ensure they are in-line with the Strategic Plan
- Provide guidance and direction to the Executive Officer on the policies of the Board; annually evaluate the Executive Officer; assist the Executive Officer in reaching the goals for the Board

#### Outreach (1-4 days per year)

- When approved by the Board, represent the Board in its interaction with interested parties, the legislature, and the Department of Consumer Affairs

**Training (2 day per year)**

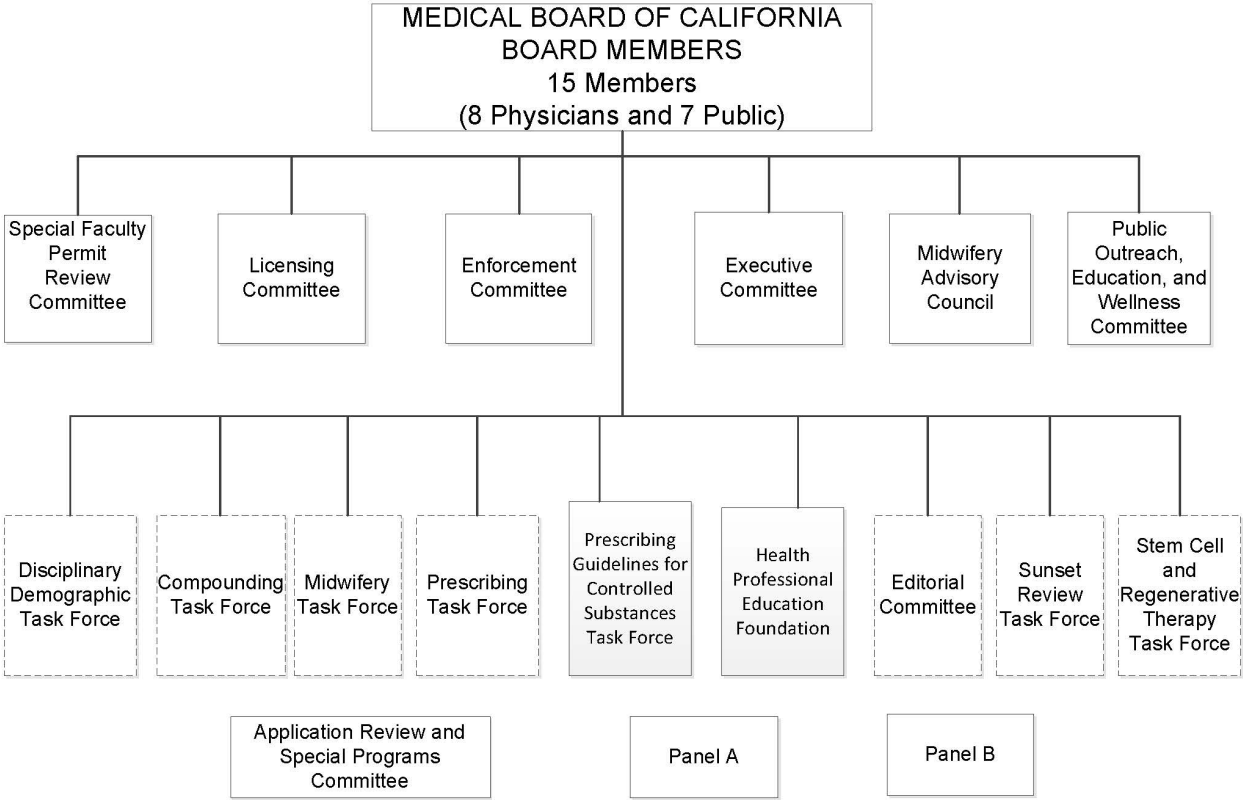
- Obtain the required Board Member training, i.e. Board Member Orientation Training, Sexual Harassment Prevention Training, and Ethics Training

**Total Time: 29 – 70 days per year**

DCA Orientation: October 21, 2020 and October 28, 2020

DRAFT

Attachment B – Current Organizational Chart Showing Relationship of Committees to the Board and Membership of Each Committee



### Standing Committees, Task Forces and Councils of the Medical Board of California

Committee	Members
<b>Executive Committee</b>	Kristina D. Lawson, J.D., President Randy W. Hawkins, M.D., Vice President Laurie Rose Lubiano, J.D., Secretary
<b>Licensing Committee</b>	Randy W. Hawkins, M.D.
<b>Enforcement Committee</b>	Laurie Rose Lubiano, J.D. Richard Thorpe, M.D.
<b>Application Review and Special Programs Committee</b>	Kristina D. Lawson, J.D., Chair Randy W. Hawkins, M.D.
<b>Special Faculty Permit Review Committee</b>	Laurie Rose Lubiano, J.D., Vice Chair Neal Cohen, M.D. (UCSF) Daniel Giang, M.D. (LLU) Mohammad Helmy, M.D. (UCI) Jonathan Hiatt, M.D. (UCLA) Laurence Katznelson, M.D. (Stanford) For-Shing Lui, M.D. (CNUCOM) Ramdas Pai, M.D. (UCR) Andrew Ries, M.D. (UCSD) Javed Siddiqi, M.D. (CUSM) Frank Sinatra, M.D. (USC)
<b>Public Outreach, Education, and Wellness Committee</b>	Randy W. Hawkins, M.D., Chair Laurie Rose Lubiano, J.D.



<b>Prescribing Guidelines for Controlled Substances Task Force</b>	Ryan Brooks Richard E. Thorp, M.D.
<b>Midwifery Advisory Council</b>	Claudia Breglia, L.M., Vice Chair Tesa Kurin, L.M Monique Webser Barbara Woodley
<b>Panel A</b>	Laurie Rose Lubiano, J.D., Chair Randy W. Hawkins, M.D., Vice Chair Michelle A. Bholat, M.D. David Ryu Eserick "TJ" Watkins Veling Tsai, M.D

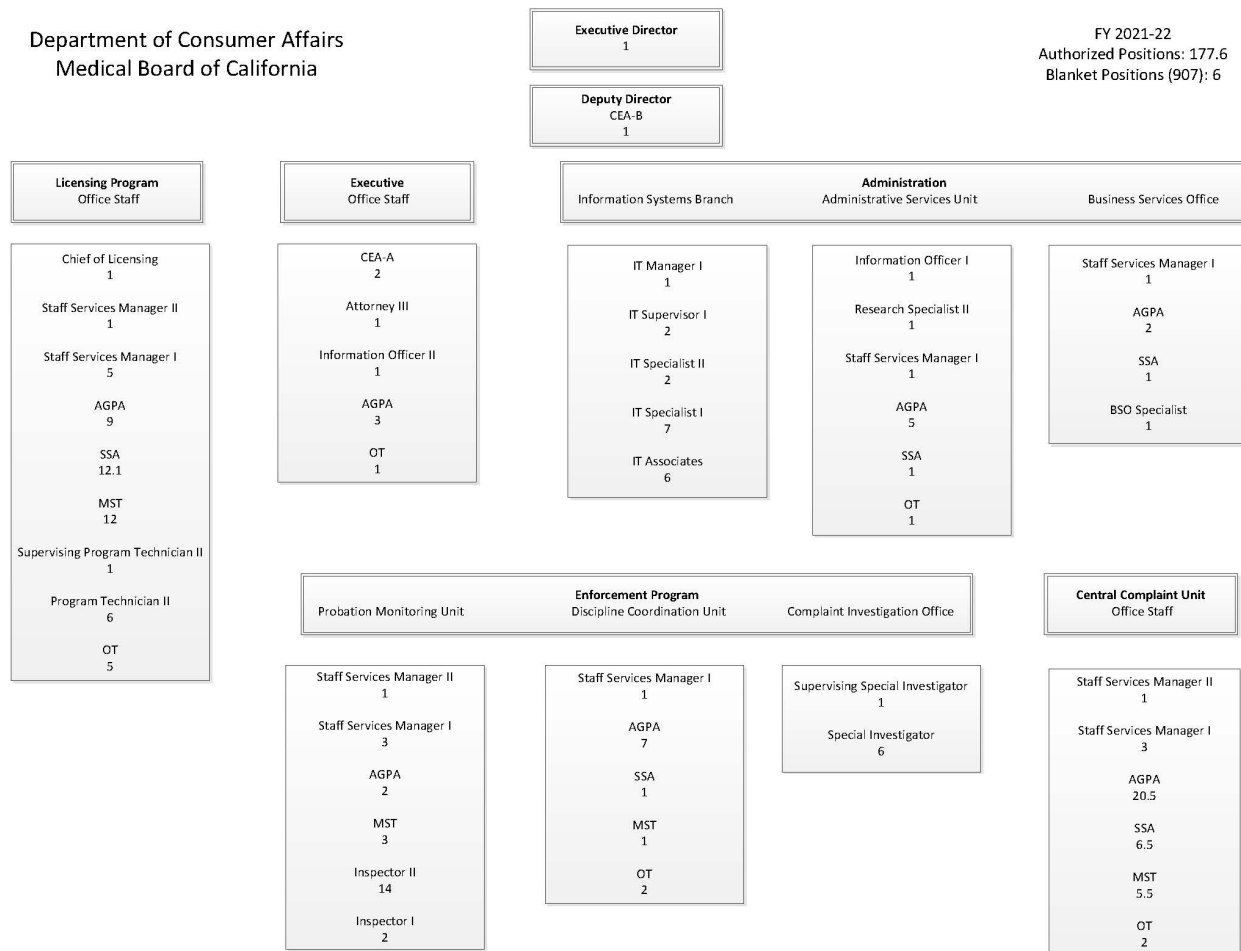
<b>Panel B</b>	<b>Richard E. Thorp, M.D., Chair</b> <b>Ryan Brooks</b> <b>James M. Healzer, M.D</b> <b>Nicole Jeong, J.D.</b> <b>Kristina D. Lawson, J.D.</b> <b>Asif Mahmood, M.D.</b>
<b>Prescribing Task Force</b>	Kristina D. Lawson, J.D.
<b>Editorial Committee</b>	
<b>Sunset Review Task Force</b>	Kristina D. Lawson, J.D. Randy W. Hawkins, M.D.
<b>Midwifery Task Force</b>	

<b>Disciplinary Demographic Task Force</b>	
<b>Compounding Task Force</b>	
<b>Stem Cell and Regenerative Therapy Task Force</b>	Randy W. Hawkins, M.D.
<b>Health Professions Education Foundation</b>	Randy W. Hawkins, M.D.

**Attachment C – Major Studies and Publications*****Major Studies Conducted by the Board and Major Publications Prepared by the Board***

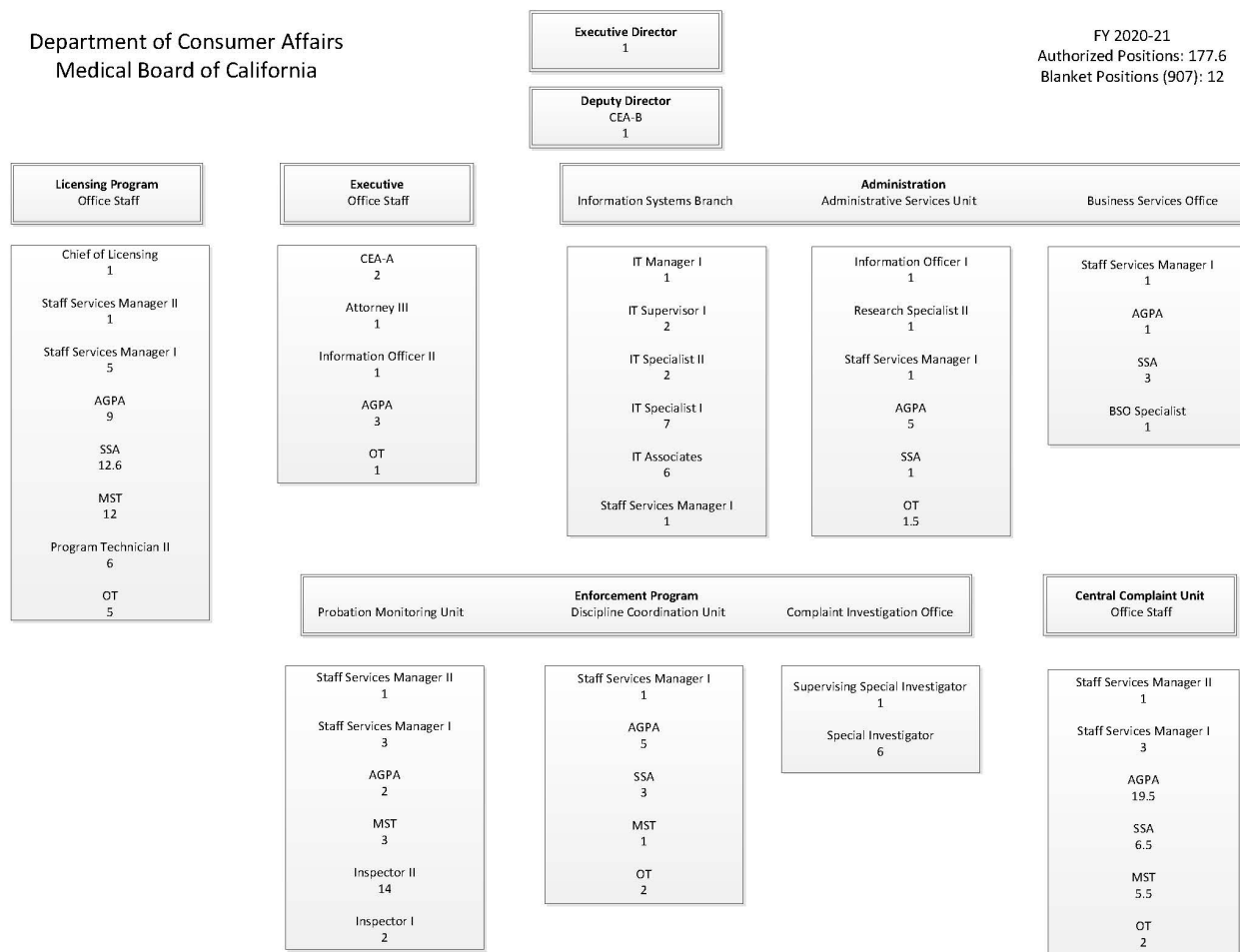
- [Leadership Accountability Report](#)
- [Board Newsletter](#)
- [Annual Report](#)
- [University of California, Davis, First Annual Report on the Mexico Pilot Program \(MPP\)](#)

## Attachment D – Year-End Organizational Charts

Department of Consumer Affairs  
Medical Board of CaliforniaFY 2021-22  
Authorized Positions: 177.6  
Blanket Positions (907): 6

Department of Consumer Affairs  
Medical Board of California

FY 2020-21  
Authorized Positions: 177.6  
Blanket Positions (907): 12



## Attachment E – Board Member Attendance

Table 1a. Attendance			
<b>Michelle Anne Bholat, M.D.</b>			
Date Appointed: June 8, 2022			
Meeting Type	Meeting Date	Meeting Location	Attended?
Panel A Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes
<b>Ryan Brooks</b>			
Date Appointed: February 2, 2021			
Meeting Type	Meeting Date	Meeting Location	Attended?
Panel B Meeting	May 13, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	No
Panel B Interim Meeting	July 8, 2021	WebEx	Yes
Panel B Meeting	August 19, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	No/Yes
Panel B Meeting	November 18, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Panel B Interim Meeting	December 21, 2021	WebEx	Yes
Panel B Meeting	February 10, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/No

## SECTION 13

## ATTACHMENTS

Panel B Interim Meeting	March 4, 2022	WebEx	Yes
Panel B Meeting	May 18-19, 2022	Sacramento	Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes
Panel B Interim Meeting	July 22, 2022	WebEx	Yes
Panel B Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes
<b>Alejandra Campoverdi</b>			
Date Appointed: December 12, 2020			
Meeting Type	Meeting Date	Meeting Location	Attended?
Panel B Meeting	February 4, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel B Meeting	May 13, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	No
Panel B Interim Meeting	July 8, 2021	WebEx	Yes
Panel B Meeting	August 19, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Panel B Meeting	November 18, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Panel B Interim Meeting	December 21, 2021	WebEx	Yes
Panel B Meeting	February 10, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	No/No

## SECTION 13

## ATTACHMENTS

Panel B Interim Meeting	March 4, 2022	WebEx	Yes
Strategic Planning Meeting	October 28, 2022	WebEx	No
<b>Dev GnanaDev, M.D.</b>			
Date Appointed: December 21, 2011			
Meeting Type	Meeting Date	Meeting Location	Attended?
Special Faculty Permit Review Committee	December 9, 2020	Teleconference	Yes
Panel B Meeting	February 4, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel B Meeting	May 13, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	Yes
Panel A Meeting	August 18, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Panel A Meeting	November 17, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Panel A Meeting	February 9, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/No
Special Faculty Permit Review Committee	March 16, 2022	Teleconference	Yes
Panel A Meeting	May 18-19, 2022	Sacramento	Yes/Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes
<b>Randy Hawkins, M.D.</b>			
Date Appointed:			



**SECTION 13****ATTACHMENTS**

March 4, 2015			
<b>Meeting Type</b>	<b>Meeting Date</b>	<b>Meeting Location</b>	<b>Attended?</b>
Application Review and Special Programs Committee	January 20, 2021	WebEx	Yes
Panel A Meeting	February 3, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel A Meeting	May 13, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Application Review and Special Programs Committee	June 3, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	Yes
Panel A Meeting	August 18, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Panel A Meeting	November 17, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes /Yes
Application Review and Special Programs Committee Meeting	December 15, 2021	WebEx	Yes
Panel A Meeting	February 9, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/Yes
Panel A Meeting	May 18-19, 2022	Sacramento	Yes/Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes
Panel A Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes

## SECTION 13

## ATTACHMENTS

<b>James Healzer, M.D.</b>			
Date Appointed: June 25, 2021			
Meeting Type	Meeting Date	Meeting Location	Attended?
Panel B Meeting	August 19, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Panel B Meeting	November 18, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Panel B Interim Meeting	December 21, 2021	WebEx	Yes
Panel B Meeting	February 10, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/Yes
Panel B Interim Meeting	March 4, 2022	Sacramento	Yes
Panel B Meeting	May 18-19, 2022	Sacramento	Yes/Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes
Panel B Interim Meeting	July 22, 2022	WebEx	Yes
Panel B Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes
<b>Nicole Jeong, J.D</b>			
Date Appointed: April 14, 2022			
Meeting Type	Meeting Date	Meeting Location	Attended?
Panel B Meeting	May 18-19, 2022	Sacramento	No/No
Quarterly Board Meeting	May 19-20, 2022	Sacramento	No/No
Panel B Interim Meeting	July 22, 2022	WebEx	No
Panel B Meeting	August 24, 2022	WebEx	Yes

**SECTION 13**
**ATTACHMENTS**

Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes
<b>Howard Krauss, M.D.</b>			
Date Appointed: May 24, 2014			
Meeting Type	Meeting Date	Meeting Location	Attended?
Panel B Meeting	February 4, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel B Meeting	May 13, 2021	Sacramento	Yes
Quarterly Board Meeting	May 13-14, 2021	Sacramento	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	Yes
Panel B Interim Meeting	July 8, 2021	WebEx	Yes
Panel B Meeting	August 19, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Panel B Meeting	November 18, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
<b>Kristina Lawson, J.D.</b>			
Date Appointed: October 28, 2015			
Meeting Type	Meeting Date	Meeting Location	Attended?
Application Review and Special Program	January 20, 2021	WebEx	Yes
Panel B Meeting	February 4, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel B Meeting	May 13, 2021	WebEx	Yes

## SECTION 13

## ATTACHMENTS

Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Application Review and Special Programs Committee Meeting	June 3, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	Yes
Panel B Interim Meeting	July 8, 2021	WebEx	No
Panel B Meeting	August 19, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Quarterly Board Meeting	November 18, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Application Review and Special Programs Committee Meeting	December 15, 2021	WebEx	Yes
Panel B Interim Meeting	December 21, 2021	WebEx	Yes
Panel B Meeting	February 10, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/Yes
Panel B Interim Meeting	March 4, 2022	WebEx	Yes
Panel B Meeting	May 18-19, 2022	Sacramento	Yes/Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes
Panel B Interim Meeting	July 22, 2022	WebEx	Yes
Panel B Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes
<b>Ronald H. Lewis, M.D.</b>			
Date Appointed: August 20, 2013			
Panel A Meeting	February 3, 2021	WebEx	Yes

**SECTION 13****ATTACHMENTS**

Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel A Meeting	May 13, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	No

**Laurie Rose Lubiano, J.D**

Date Appointed:

December 17, 2018

<b>Meeting Type</b>	<b>Meeting Date</b>	<b>Meeting Location</b>	<b>Attended?</b>
Special Faculty Permit Review Committee	December 9, 2020	Teleconference	Yes
Panel A Meeting	February 3, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel A Meeting	May 13, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	No
Panel A Meeting	August 18, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Panel A Meeting	November 17, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Panel A Meeting	February 9, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/Yes
Special Faculty Permit Review Committee	March 16, 2022	WebEx	Yes

## SECTION 13

## ATTACHMENTS

Panel A Meeting	May 18-19, 2022	Sacramento	Yes/Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes
Panel A Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes
<b>Asif Mahmood, M.D</b>			
Date Appointed: June 3, 2019			
<b>Meeting Type</b>	<b>Meeting Date</b>	<b>Meeting Location</b>	<b>Attended?</b>
Panel B Meeting	February 4, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel B Meeting	May 13, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	No
Quarterly Board Meeting Interim	June 24, 2021	WebEx	Yes
Panel B Interim Meeting	July 8, 2021	WebEx	Yes
Panel B Meeting	August 19, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Panel B Meeting	November 18, 2021	WebEx	No
Quarterly Board Meeting	November 18-19, 2021	WebEx	No/No
Panel B Interim Meeting	December 21, 2021	WebEx	Yes
Panel B Meeting	February 10, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/No
Panel B Interim Meeting	March 4, 2022	WebEx	No
Panel B Meeting	May 18-19, 2022	Sacramento	No/No
Quarterly Board Meeting	May 19-20, 2022	Sacramento	No/No

**SECTION 13****ATTACHMENTS**

Panel B Interim Meeting	July 22, 2022	WebEx	No
Panel B Meeting	August 24, 2022	WebEx	No
Quarterly Board Meeting	August 25-26, 2022	WebEx	No/No
Strategic Planning Meeting	October 28, 2022	WebEx	No

**David Ryu**

Date Appointed: April 19, 2021

Meeting Type	Meeting Date	Meeting Location	Attended?
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	Yes
Panel A Meeting	August 18, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Panel A Meeting	November 17, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Panel A Meeting	February 9, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/Yes
Panel A Meeting	May 18-19, 2022	Sacramento	Yes/Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes
Panel A Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes

**Richard E. Thorp, M.D.**

Date Appointed: July 26, 2019

Meeting Type	Meeting Date	Meeting Location	Attended?
Panel B Meeting	February 4, 2021	WebEx	Yes

**SECTION 13**
**ATTACHMENTS**

Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel B Meeting	May 13, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	Yes
Panel B Interim Meeting	July 8, 2021	WebEx	Yes
Panel B Meeting	August 19, 2021	WebEx	No
Quarterly Board Meeting	August 19-20, 2021	WebEx	No/No
Panel B Meeting	November 18, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Panel B Interim Meeting	December 21, 2021	WebEx	Yes
Panel B Meeting	February 10, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/Yes
Panel B Interim Meeting	March 4, 2022	WebEx	Yes
Panel B Meeting	May 18-19, 2022	Sacramento	Yes/Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes
Panel B Interim Meeting	July 22, 2022	WebEx	Yes
Panel B Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes
<b>Cinthia Tirado, M.D.</b>			
Date Appointed: July 15, 2020			
<b>Meeting Type</b>	<b>Meeting Date</b>	<b>Meeting Location</b>	<b>Attended?</b>
Panel A Meeting	February 3, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes



## SECTION 13

## ATTACHMENTS

<b>Veleng Tsai, M.D.</b>			
Date Appointed: April 14, 2022			
Meeting Type	Meeting Date	Meeting Location	Attended?
Panel A Meeting	May 18-19, 2022	Sacramento	Yes/Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes
Panel A Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	No
<b>Eserick "TJ" Watkins</b>			
Date Appointed: June 1, 2019			
Meeting Type	Meeting Date	Meeting Location	Attended?
Panel A Meeting	February 3, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel A Meeting	May 12, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	Yes
Panel A Meeting	August 18, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	Yes/Yes
Panel A Meeting	November 17, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Panel A Meeting	February 9, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/Yes
Panel A Meeting	May 18-19, 2022	Sacramento	Yes/Yes
Quarterly Board Meeting	May 19-20, 2022	Sacramento	Yes/Yes

## SECTION 13

## ATTACHMENTS

Panel A Meeting	August 24, 2022	WebEx	Yes
Quarterly Board Meeting	August 25-26, 2022	WebEx	Yes/Yes
Strategic Planning Meeting	October 28, 2022	WebEx	Yes
<b>Felix Yip, M.D.</b>			
Date Appointed: January 1, 2013			
Meeting Type	Meeting Date	Meeting Location	Attended?
Application Review and Special Programs Committee	January 20, 2021	WebEx	Yes
Panel A Meeting	February 3, 2021	WebEx	Yes
Quarterly Board Meeting	February 4-5, 2021	WebEx	Yes/Yes
Panel A Meeting	May 12, 2021	WebEx	Yes
Quarterly Board Meeting	May 13-14, 2021	WebEx	Yes/Yes
Quarterly Board Meeting Special	June 1, 2021	WebEx	Yes
Application Review and Special Programs Committee	June 3, 2021	WebEx	Yes
Quarterly Board Meeting Interim	June 24, 2021	WebEx	Yes
Panel A Meeting	August 18, 2021	WebEx	Yes
Quarterly Board Meeting	August 19-20, 2021	WebEx	No/Yes
Panel A Meeting	November 17, 2021	WebEx	Yes
Quarterly Board Meeting	November 18-19, 2021	WebEx	Yes/Yes
Application Review and Special Programs Committee	December 15, 2021	WebEx	Yes
Panel A Meeting	February 9, 2022	WebEx	Yes
Quarterly Board Meeting	February 10-11, 2022	WebEx	Yes/Yes
Panel A Meeting	May 18-19, 2022	Sacramento	No/No

**SECTION 13****ATTACHMENTS**

Quarterly Board Meeting	May 19-20, 2022	Sacramento	No/No
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## Attachment F – Revenue and Fee Schedule

<b>Table 4. Fee Schedule and Revenue</b> (revenue listed at true values)							
Fee	Current Fee Amount	Statutory Limit	FY 2018/19 Revenue	FY 2019/20 Revenue	FY 2020/21 Revenue	FY 2021/22 Revenue	% of Total Rev.
Application Fee (B&P 2435)	\$625	\$625	\$3,342,404	\$2,481,388	\$1,912,976	\$2,493,046	4.24%
Initial License Fee (B&P 2435) (16 CCR 1351.5)	\$863	\$863	\$2,017,660	\$2,178,820	\$2,143,270	\$2,379,494	3.61%
Initial License Fee (Reduced) (B&P 2435)	\$431.50	\$431.50	\$1,692,575	\$1,265,185	\$784,865	\$2,148,074	2.44%
Biennial Renewal Fee (B&P 2435) (16 CCR 1352)	\$863	\$863	\$51,054,540	\$51,064,020	\$52,759,360	\$53,207,591	86.27%
PTL Application Fee	\$625	\$625	\$0	\$1,421,472	\$1,345,448	\$1,516,741	1.78%
Physician Penalty Fee (B&P 2424, 16 CCR 1352.2)	\$431.50	\$431.50	\$260,348	\$257,216	\$293,234	\$306,156	0.46%
Physician Delinquency Fee (B&P 2435)	\$86.30	\$86.30	\$111,153	\$100,804	\$114,708	\$118,685	0.18%
Physician Duplicate Certificate Fee (B&P 2435)	\$50	\$50	\$27,900	\$33,300	\$45,650	\$18,450	0.05%
Physician Letter of Good Standing (B&P 2435)	\$10	\$10	\$9,160	\$112,910	\$114,550	\$7,820	0.10%
Citations and Fines (B&P 125.9)	variable	\$5,000	\$74,000	\$63,000	\$79,000	\$35,000	0.10%
Citation/Fine FTB Collection (B&P 125.9)	variable	variable	\$0	\$3,000	\$1,000	\$3,000	0.00%
Special Faculty Permit Application Fee (B&P 2168.4 & 2435)	\$625	\$625	\$1,250	\$2,500	\$625	\$3,750	0.00%

## SECTION 13

## ATTACHMENTS

Special Faculty Permit Initial License Fee (B&P 2435, 16 CCR 1351.5)	\$863	\$863	\$3,160	\$3,160	\$1,580	\$4,959	0.01%
Special Faculty Permit Biennial Renewal Fee (B&P 2168.4 & 2435, 16 CCR 1352.1)	\$863	\$863	\$7,110	\$7,110	\$8,690	\$9,092	0.01%
Special Faculty Permit Delinquency Fee (B&P 2168.4 & 2435)	variable	variable	\$0	\$0	\$0	\$0	0.00%
Fictitious Name Permit Application and Initial Permit Fee (B&P 2443)	\$70	\$70	\$72,500	\$67,200	\$77,750	\$122,280	0.14%
Fictitious Name Permit Biennial Renewal Fee (B&P 2443)	\$50	\$50	\$217,240	\$286,100	\$298,750	\$242,370	0.43%
Fictitious Name Permit Delinquency Fee (B&P 2443)	\$20	\$20	\$12,440	\$13,840	\$14,720	\$15,400	0.02%
Fictitious Name Permit Duplicate Cert (B&P 2443)	\$40	\$40	\$1,980	\$1,560	\$1,680	\$2,380	0.00%
Research Psychoanalyst Registration Fee (B&P 2529.5, 16 CCR 1377)	\$150	\$150	\$225	\$300	\$600	\$675	0.00%
Research Psychoanalyst Biennial Renewal Fee (B&P 2529.5, 16 CCR 1377)	\$75	\$75	\$250	\$3,450	\$750	\$4,000	0.00%
Research Psychoanalyst Delinquency Fee (B&P 2529.5)	\$7.50	\$7.50	\$25	\$75	\$125	\$98	0.00%
Dishonored Check Fee (B&P 206)	\$25	\$25	\$775	\$875	\$725	\$700	0.00%
Special Programs Initial Application Fee (B&P	\$86	\$86	\$1,548	\$1,634	\$1,204	\$1,548	0.00%

## SECTION 13

## ATTACHMENTS

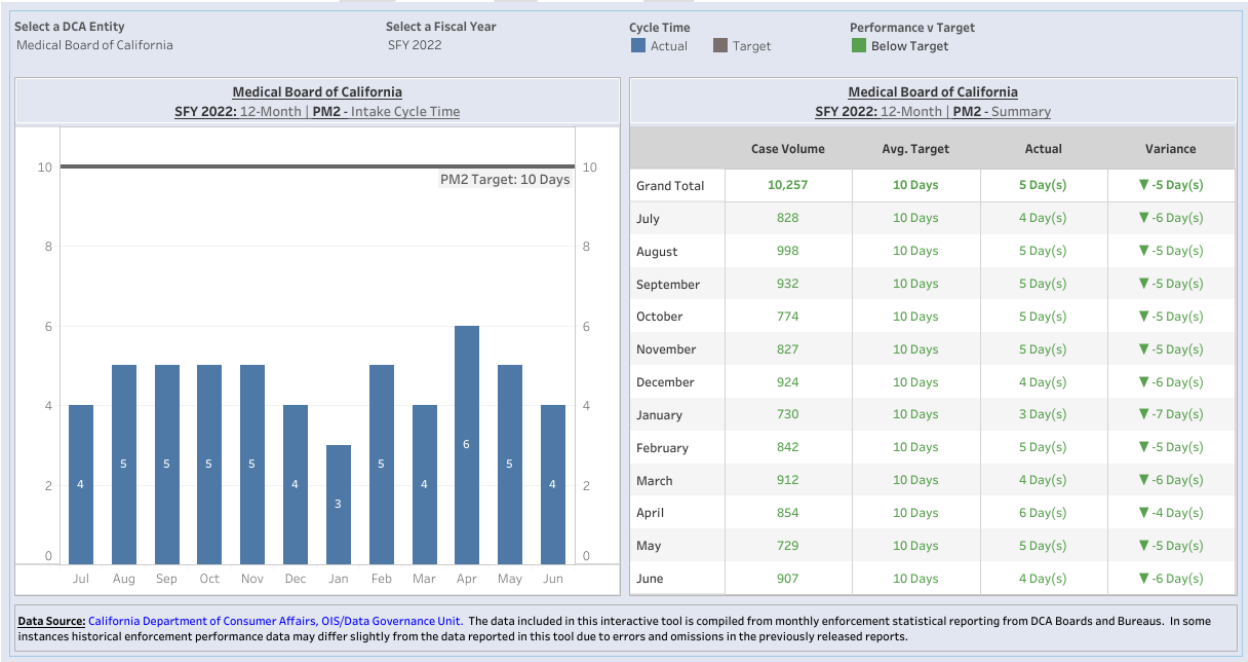
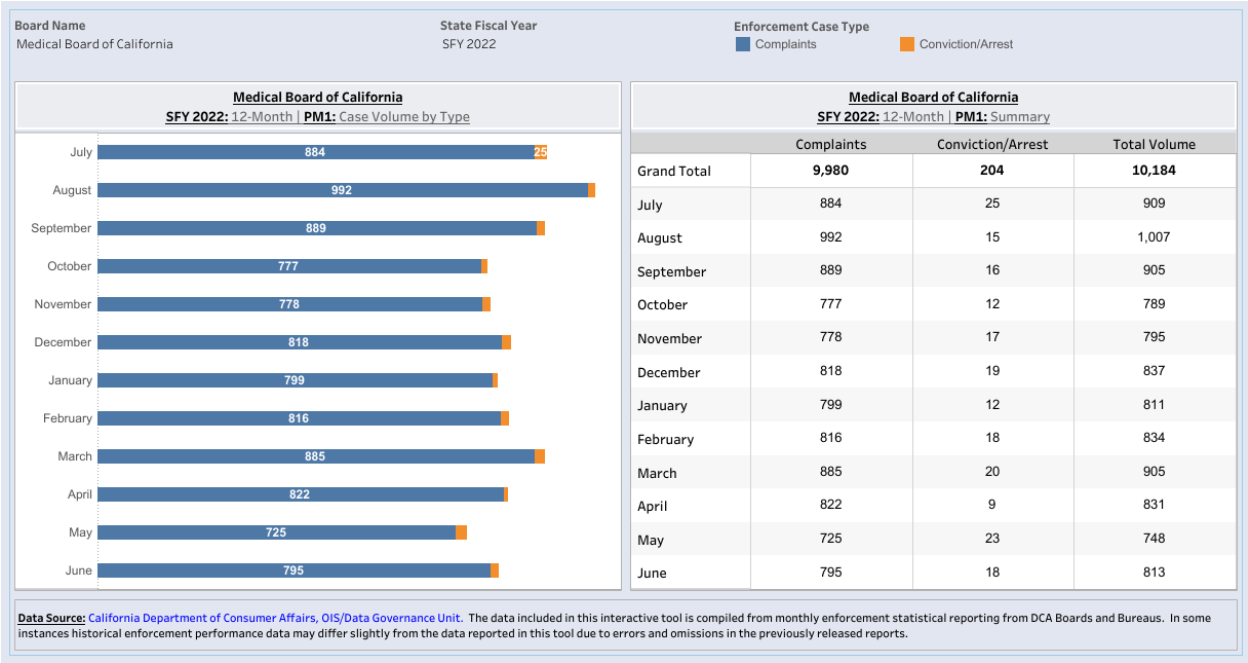
2111 & 2113, 16 CCR 1351.5)							
Special Programs Annual Renewal Fee (B&P 2111 & 2113, 16 CCR 1351.1)	\$43	\$43	\$903	\$2,021	\$2,150	\$1,806	0.00%
Special Programs Delinquency Fee (B&P 163.5)	\$25	\$25	\$0	\$0	\$0	\$0	0.00%
Polysomnography Trainee Application Fee (B&P 3577, 16 CCR 1379.78)	\$120	\$120	\$2,200	\$1,300	\$1,000	\$3,190	0.00%
Polysomnography Trainee Registration Fee (B&P 3577, 16 CCR 1379.78)	\$120	\$120	\$2,100	\$1,300	\$900	\$3,410	0.00%
Polysomnography Trainee Biennial Renewal Fee (B&P 3577, 16 CCR 1379.78)	\$220	\$220	\$2,700	\$1,950	\$2,550	\$2,590	0.00%
Polysomnography Trainee Delinquency Fee (B&P 163.5, 16 CCR 1379.78)	\$75	\$75	\$75	\$75	\$75	\$300	0.00%
Polysomnography Technician Application Fee (B&P 3577, 16 CCR 1379.78)	\$120	\$120	\$2,600	\$2,900	\$2,000	\$2,200	0.00%
Polysomnography Technician Registration Fee (B&P 3577, 16 CCR 1379.78)	\$120	\$120	\$2,800	\$2,900	\$2,000	\$1,980	0.00%
Polysomnography Technician Biennial Renewal Fee (B&P 3577, 16 CCR 1379.78)	\$220	\$220	\$6,900	\$5,550	\$8,100	\$9,435	0.01%

**SECTION 13****ATTACHMENTS**

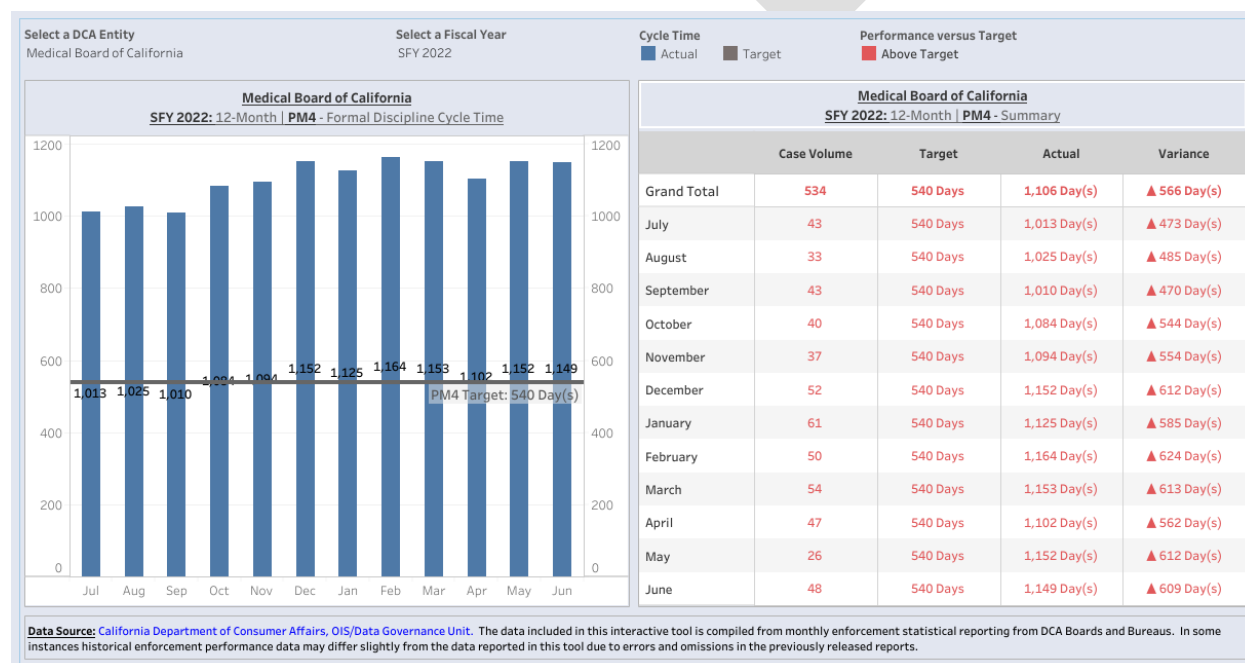
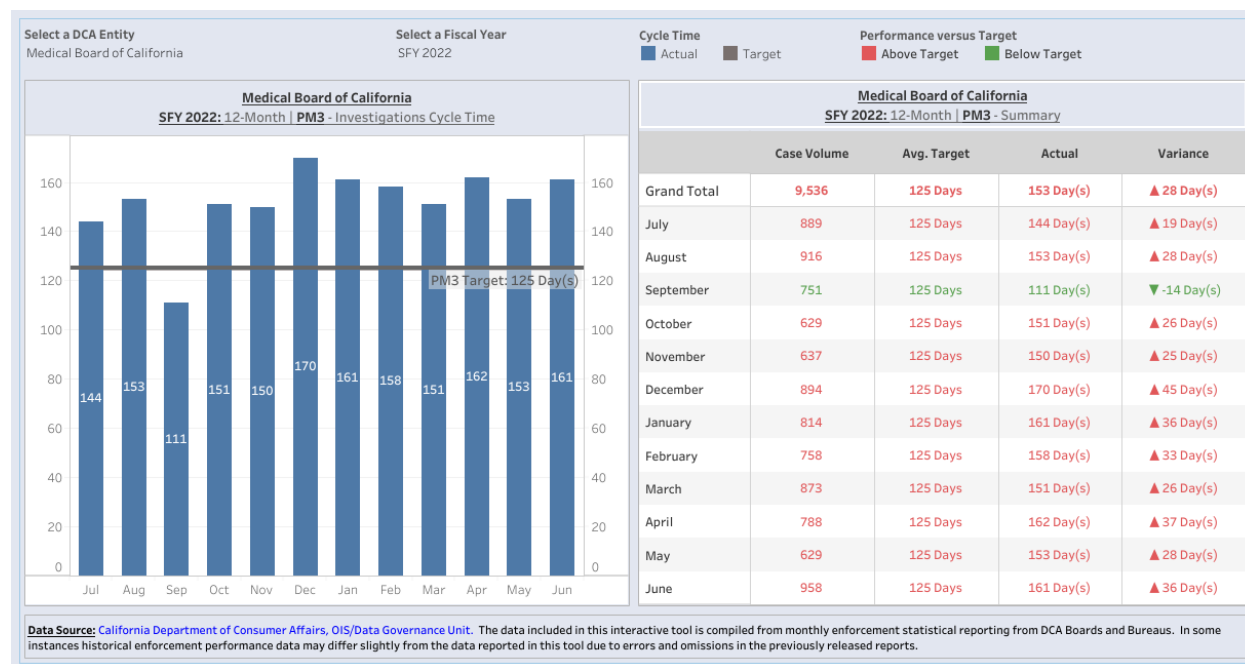
Polysomnography Technician Delinquency Fee (B&P 163.5, 16 CCR 1379.78)	\$75	\$75	\$450	\$375	\$825	\$450	0.00%
Polysomnography Technologist Application Fee (B&P 3577, 16 CCR 1379.78)	\$120	\$120	\$3,600	\$3,100	\$2,400	\$4,620	0.01%
Polysomnography Technologist Registration Fee (B&P 3577, 16 CCR 1379.78)	\$120	\$120	\$3,800	\$3,300	\$2,400	\$4,840	0.01%
Polysomnography Technologist Biennial Renewal Fee (B&P 3577, 16 CCR 1379.78)	\$220	\$220	\$60,150	\$28,950	\$56,250	\$28,120	0.07%
Polysomnography Technologist Delinquency Fee (B&P 163.5, 16 CCR 1379.78)	\$75	\$75	\$2,100	\$1,725	\$1,350	\$1,350	0.00%

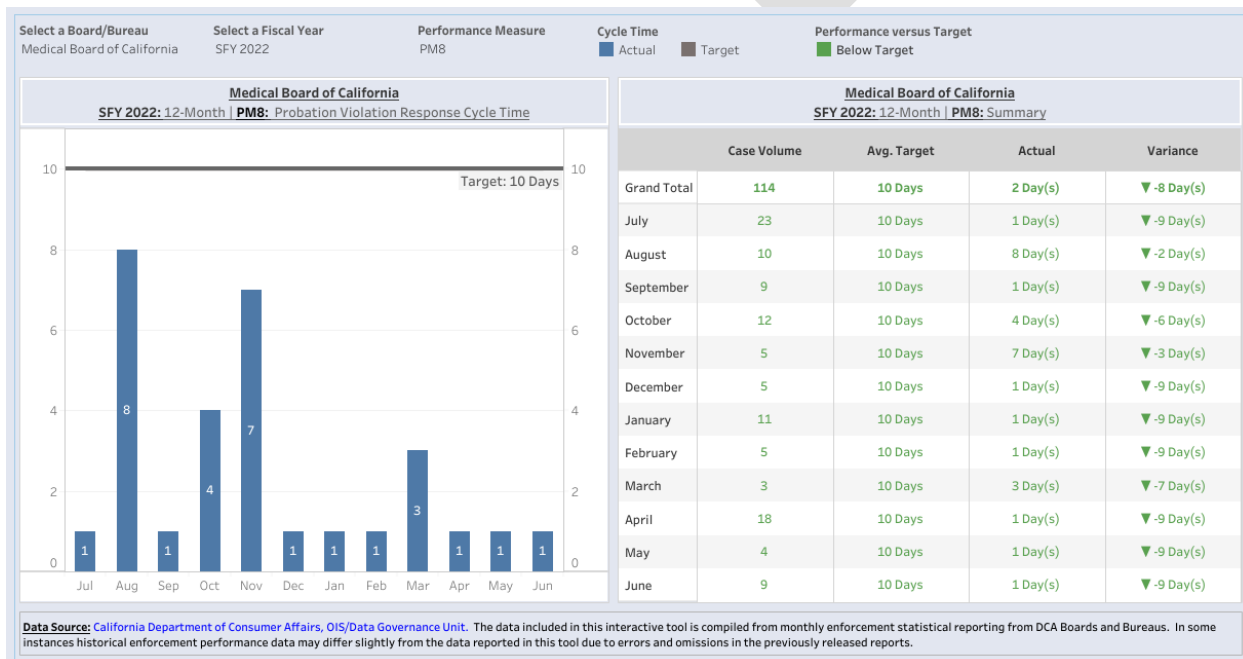
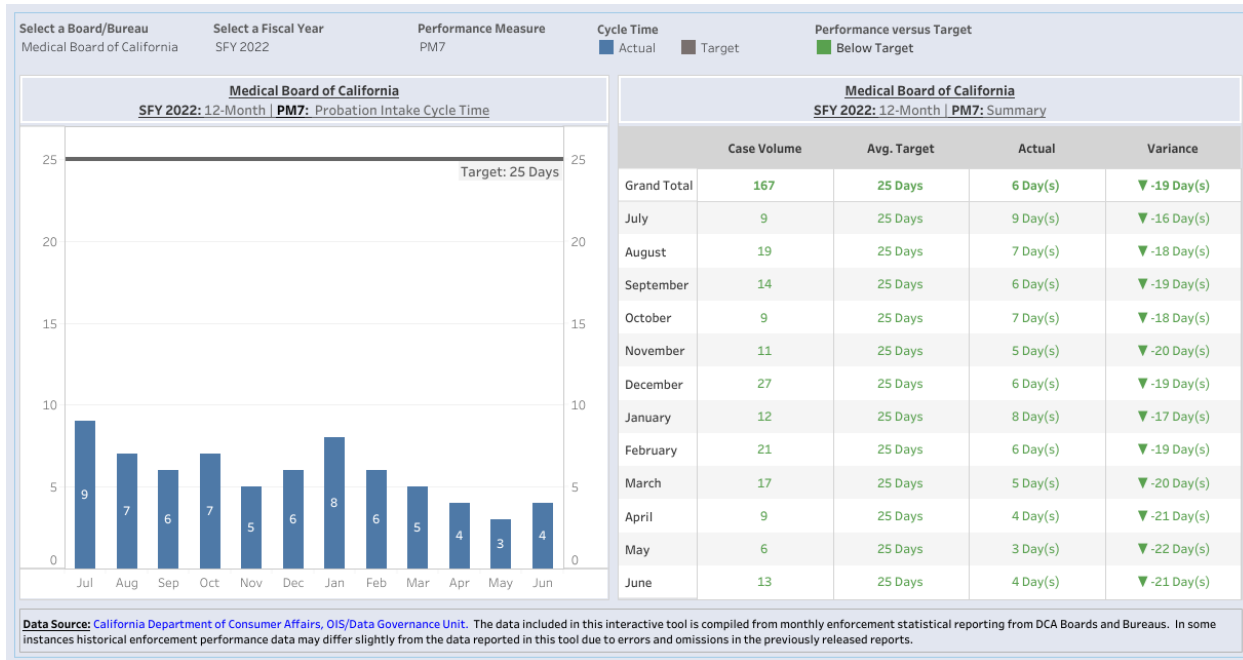
Attachment G – Performance Measures

Enforcement Performance Measures  
Annual Report (July 2021 – June 2022)

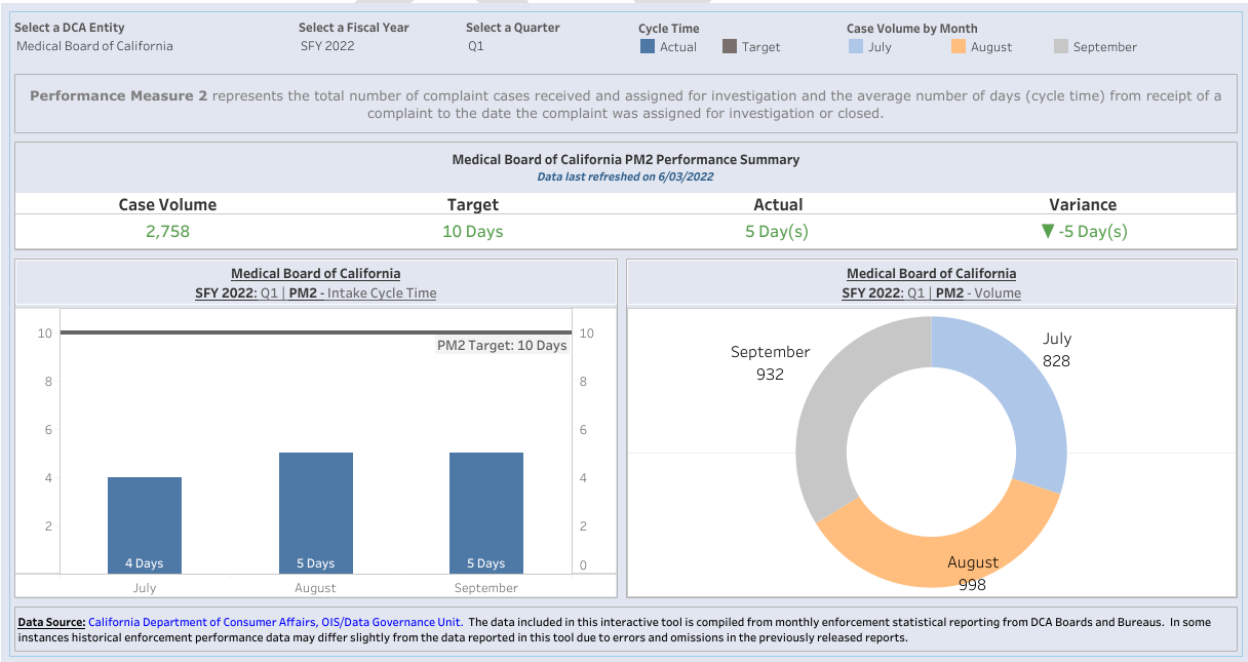
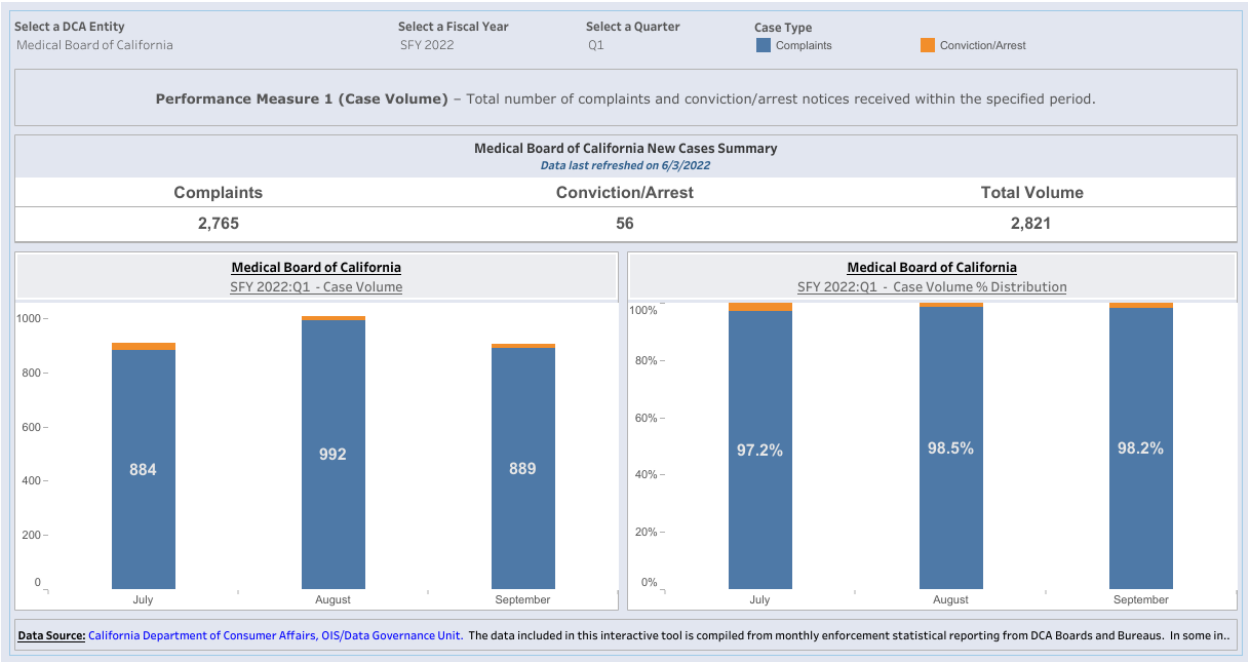


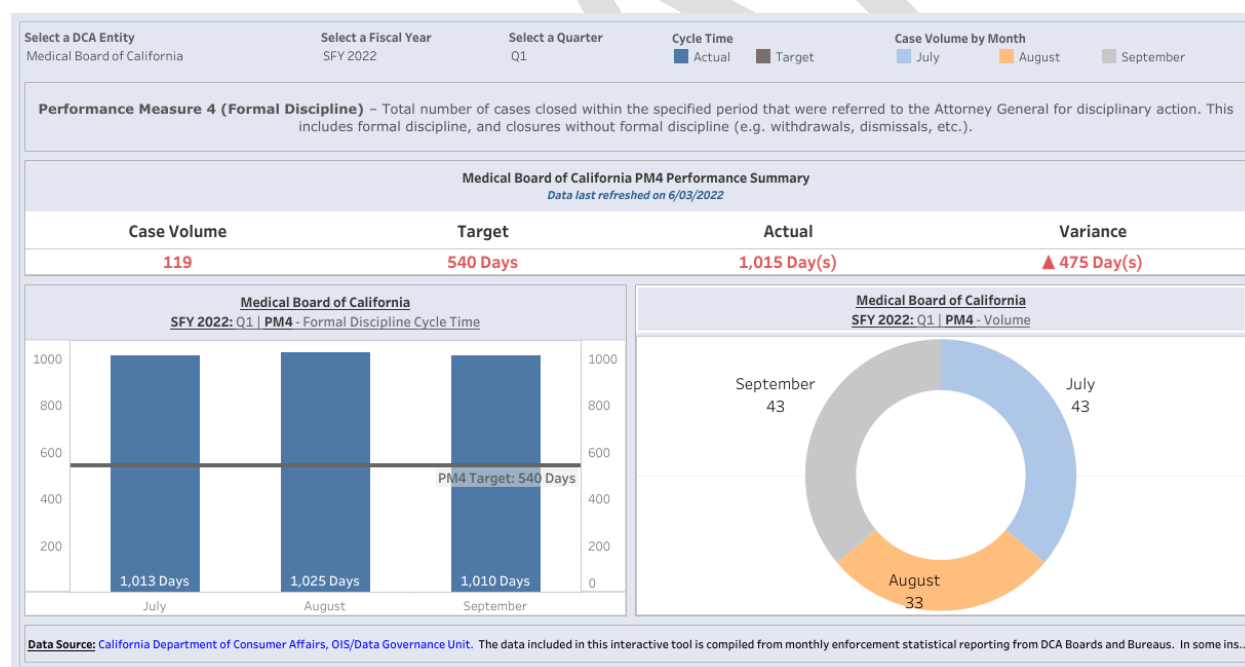
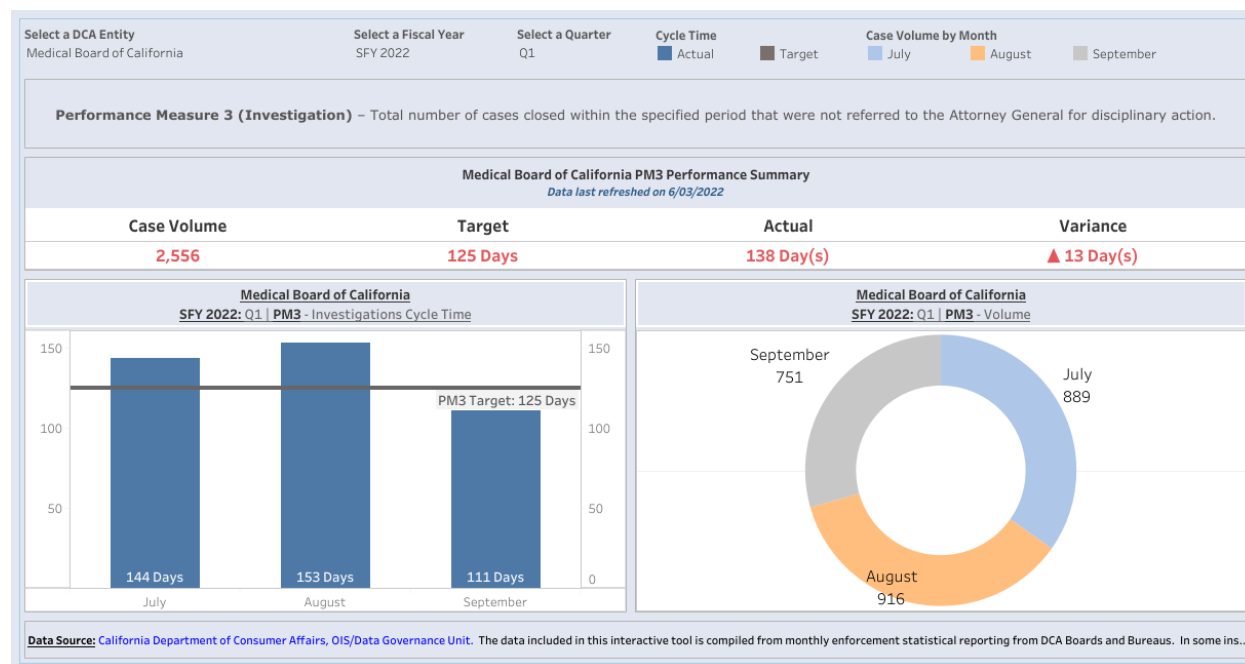


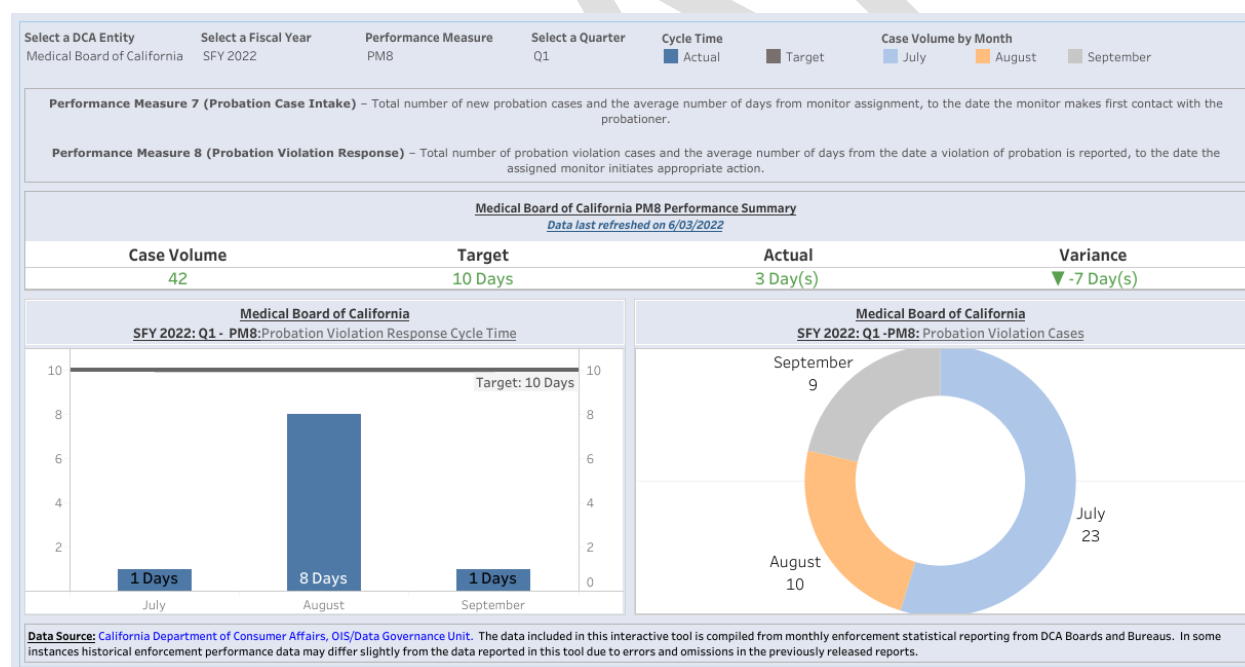
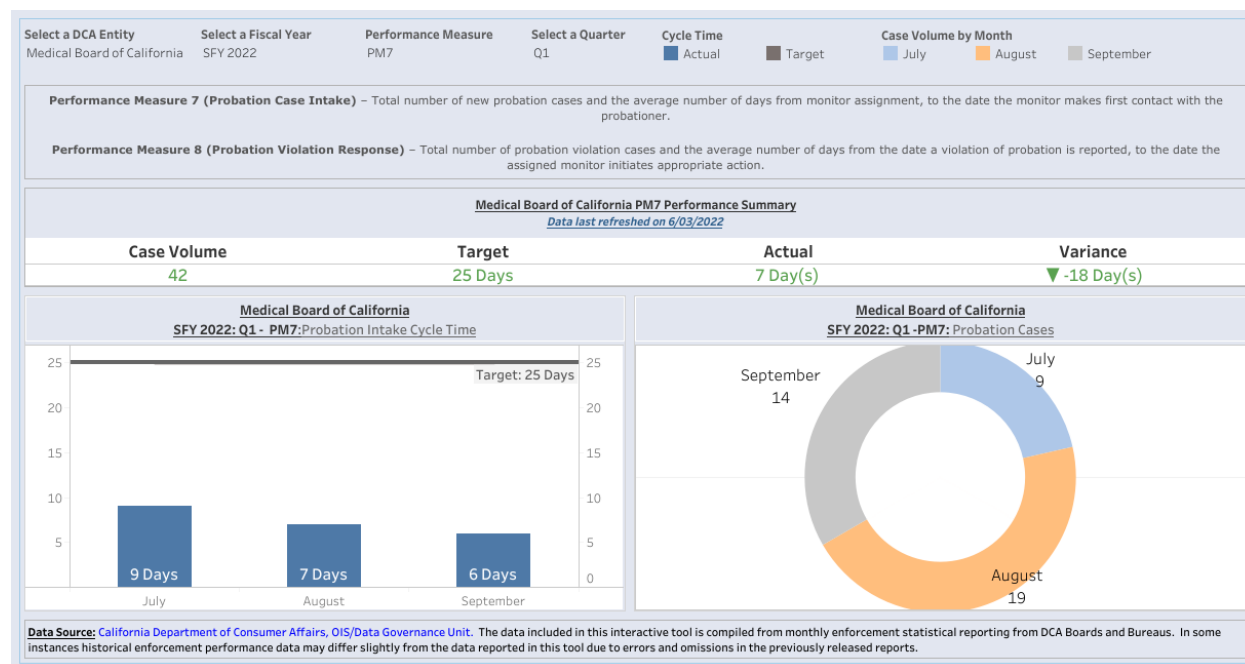




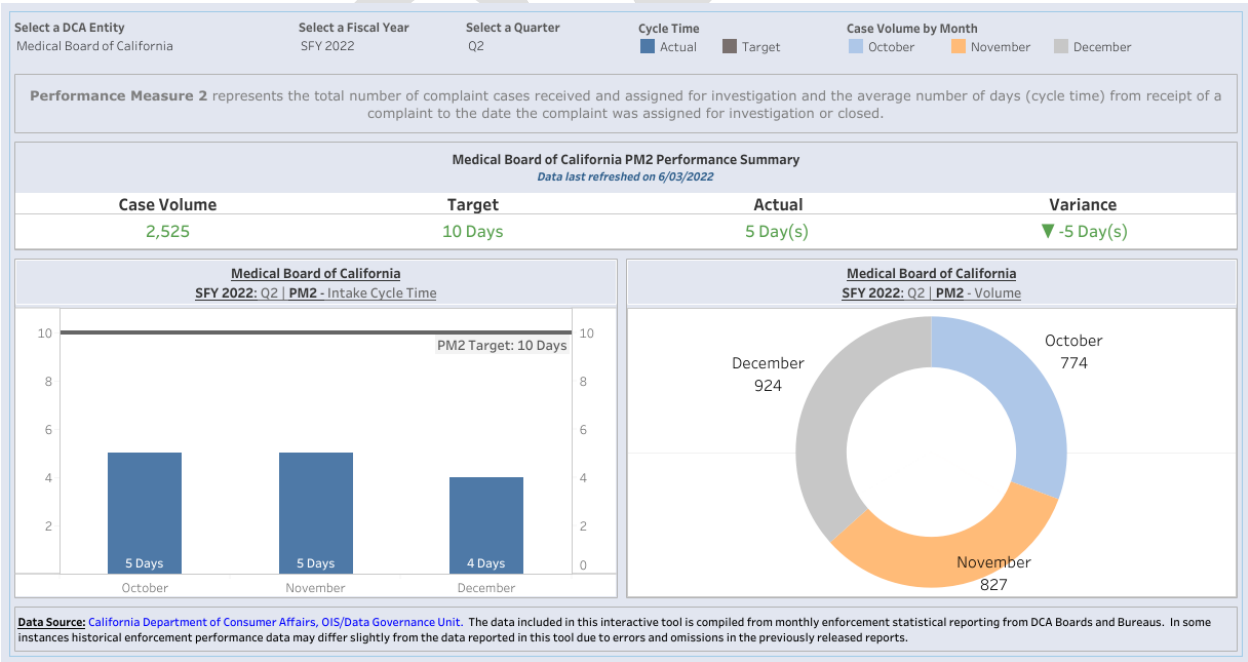
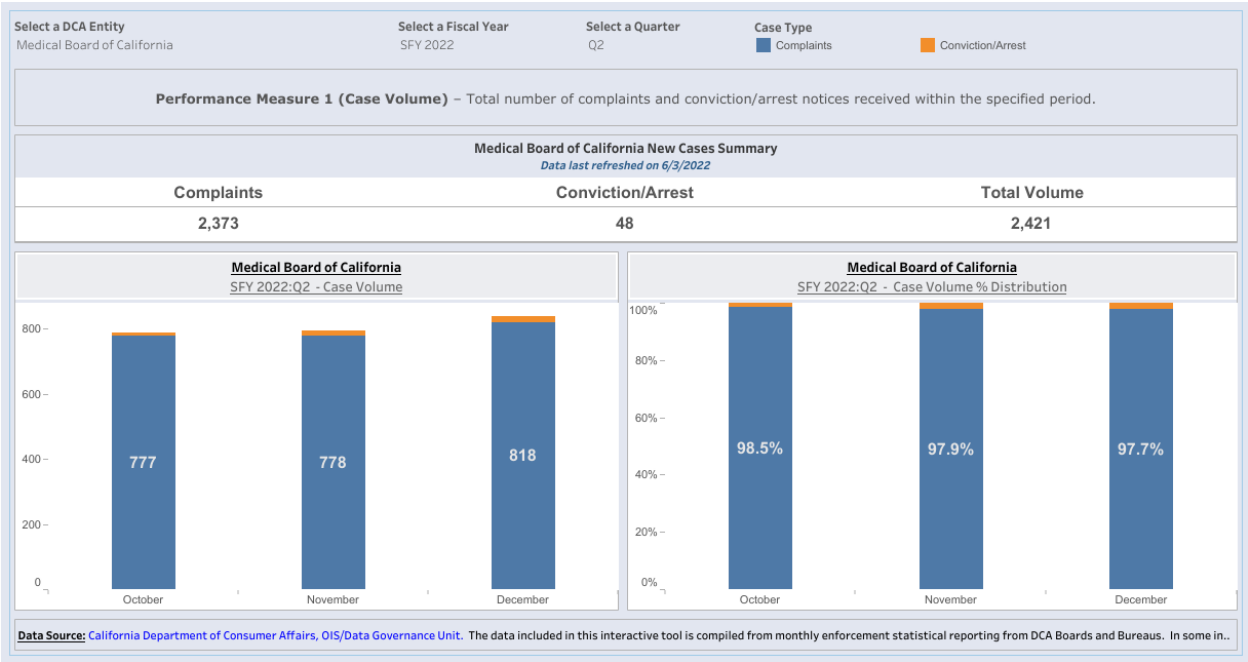
Enforcement Performance Measures  
Q1 Report (July – September 2021)

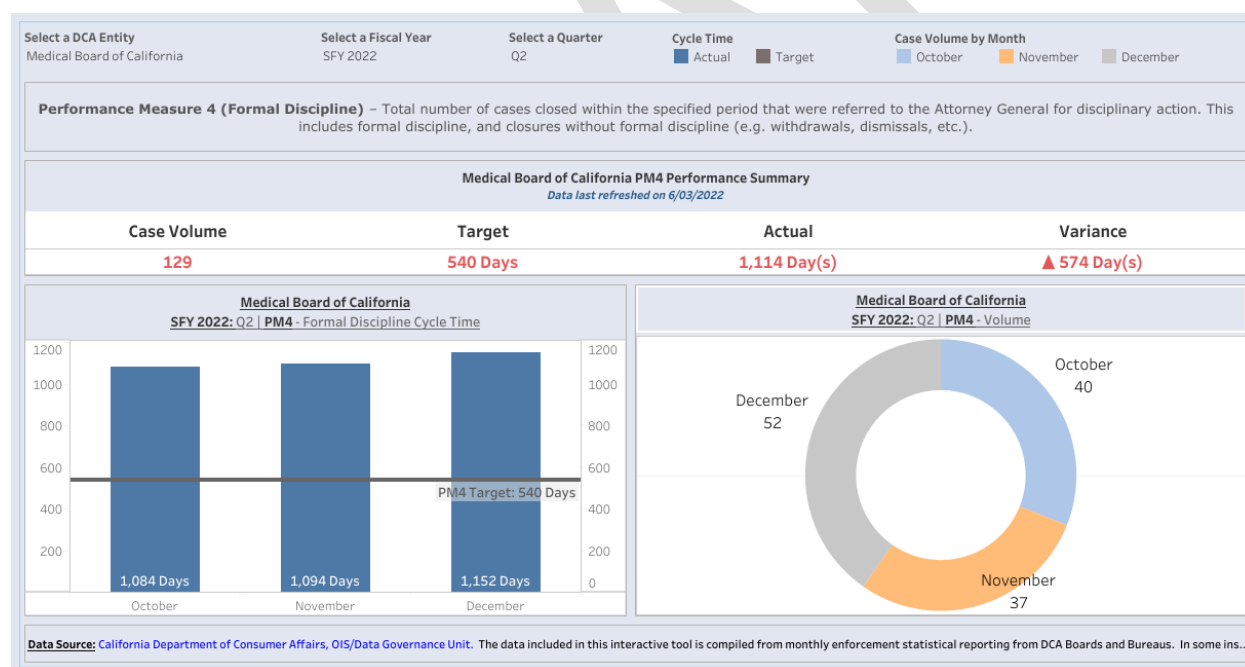
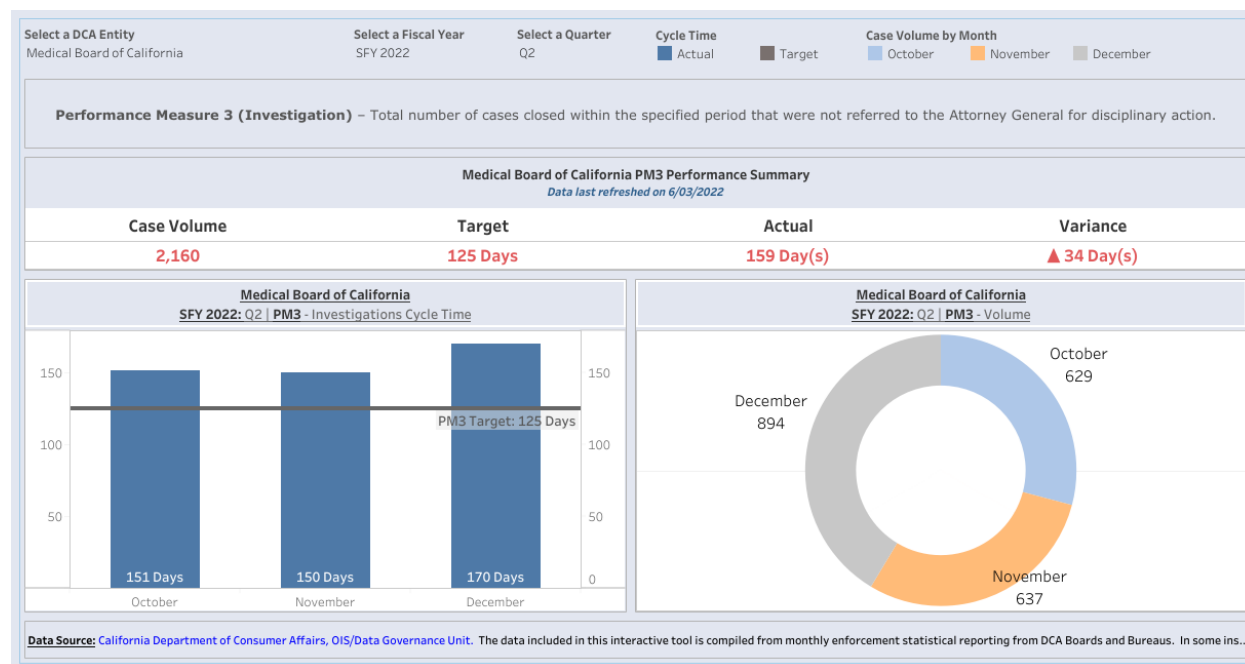


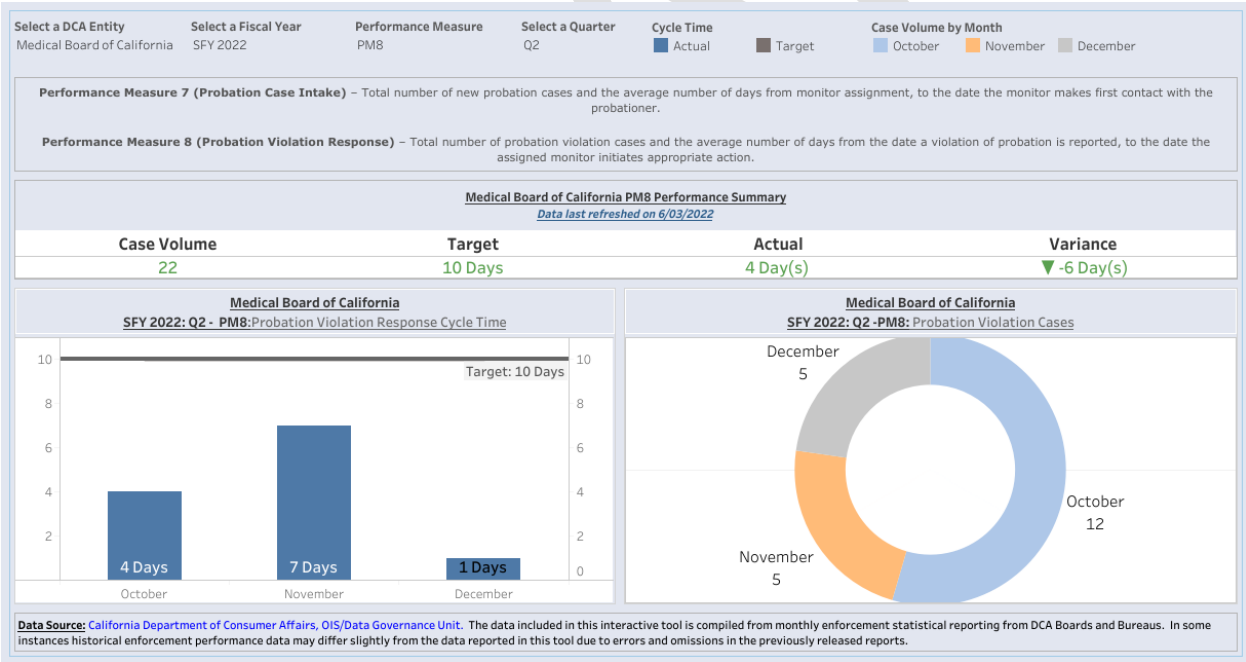
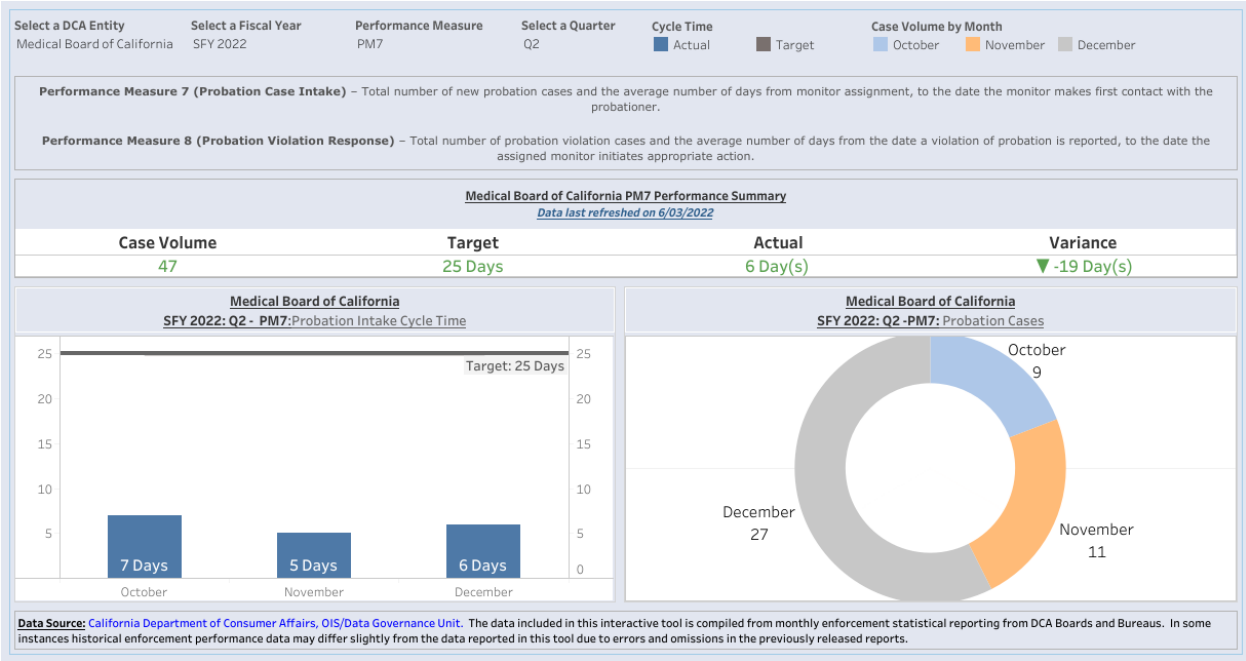




Enforcement Performance Measures  
Q2 Report (October – December 2021)

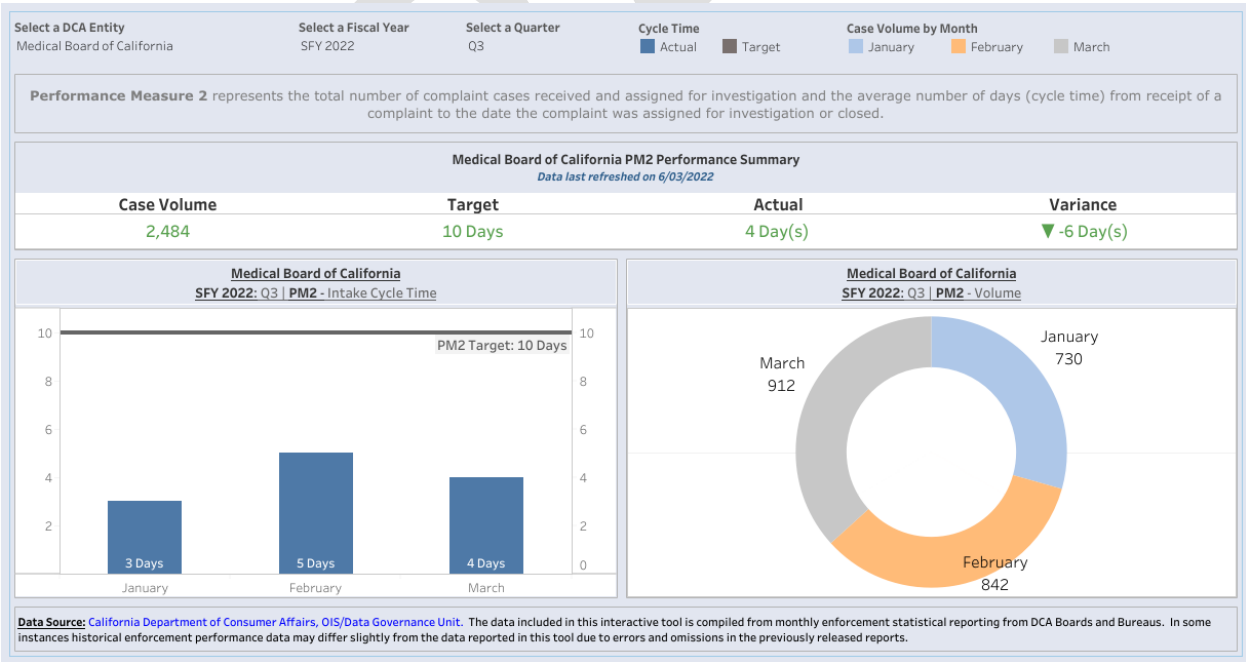
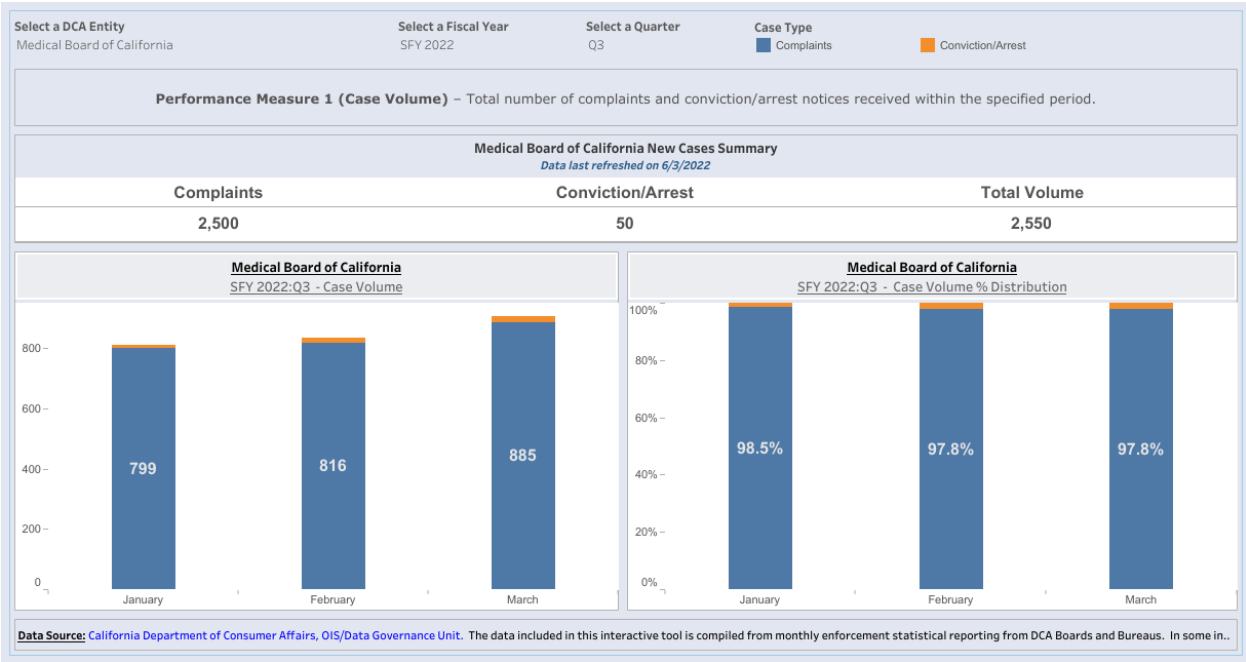


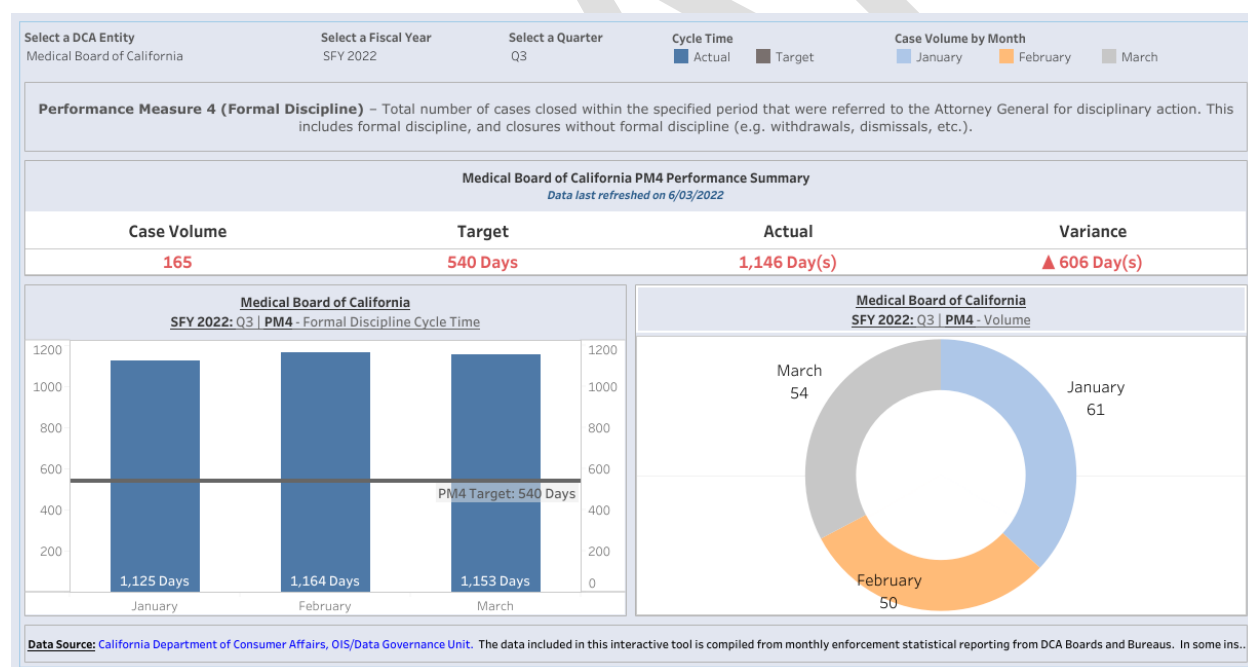
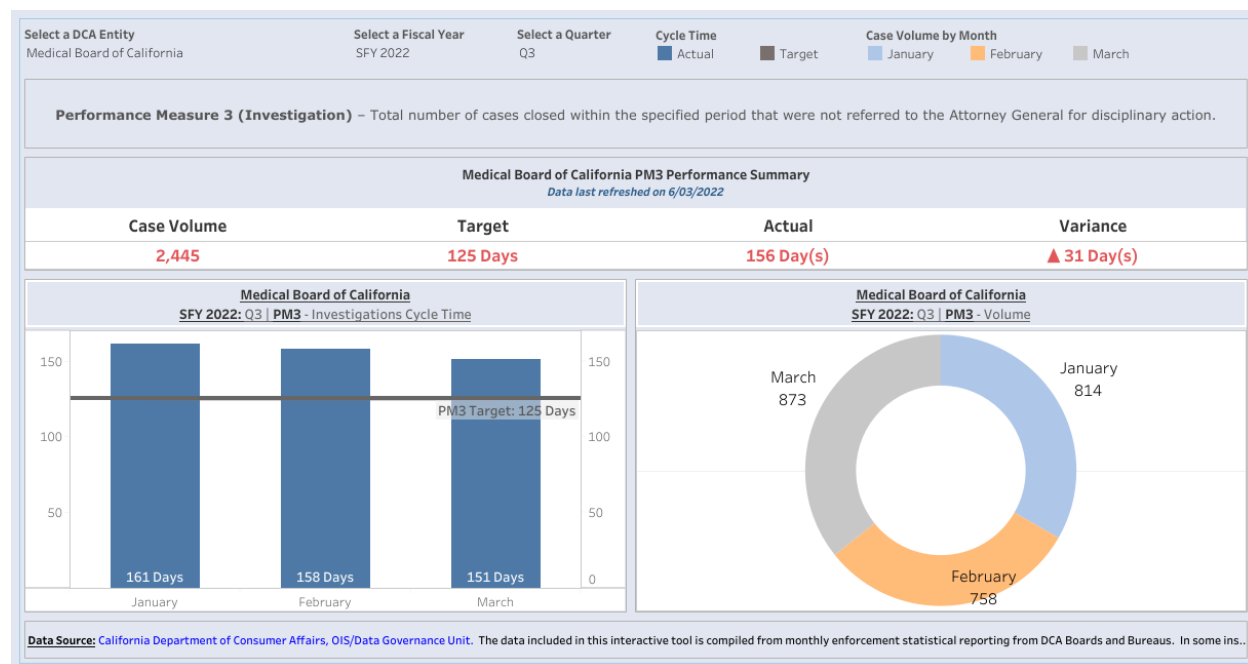


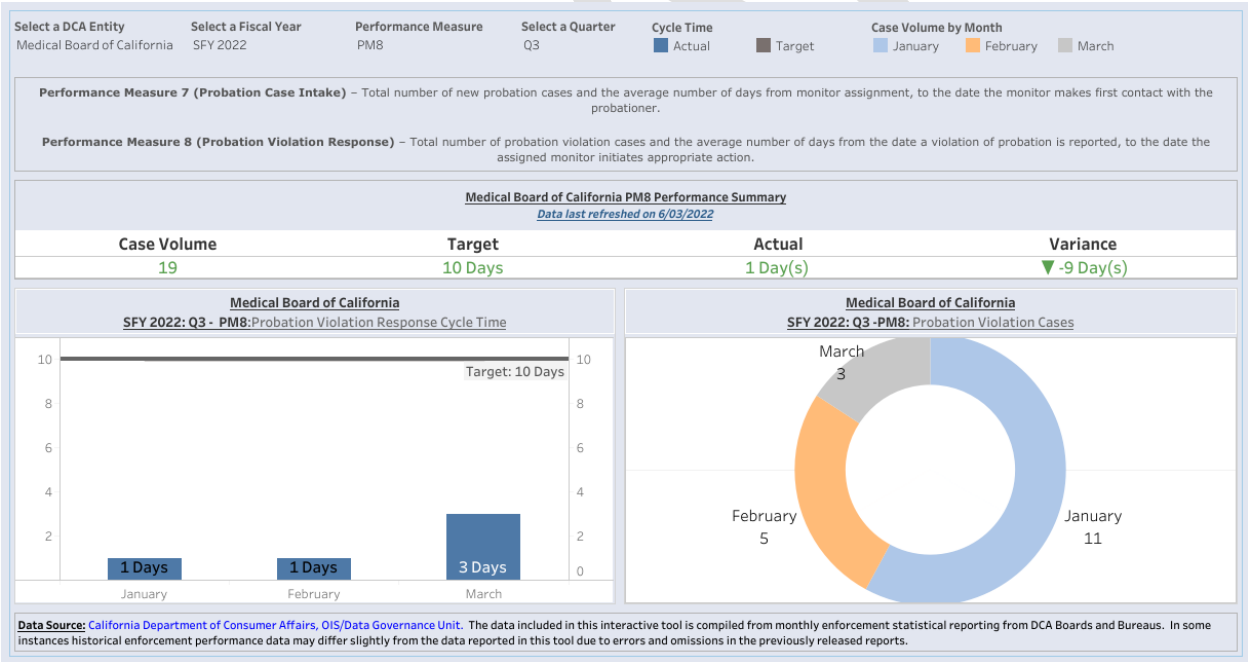
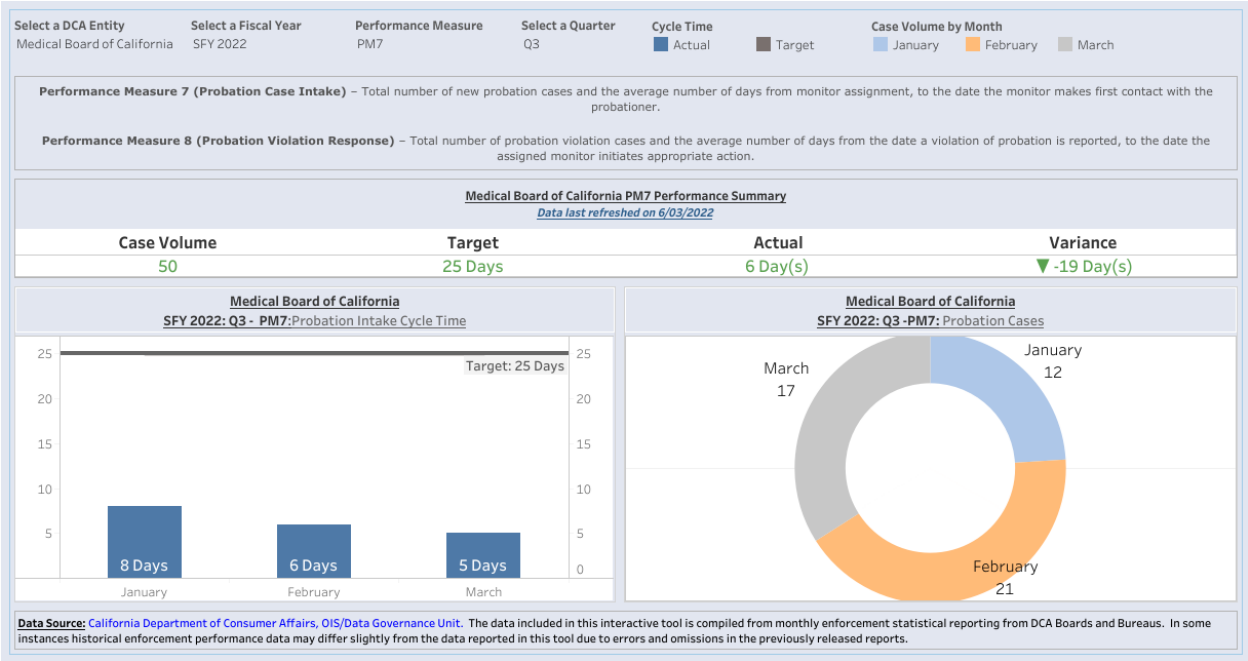




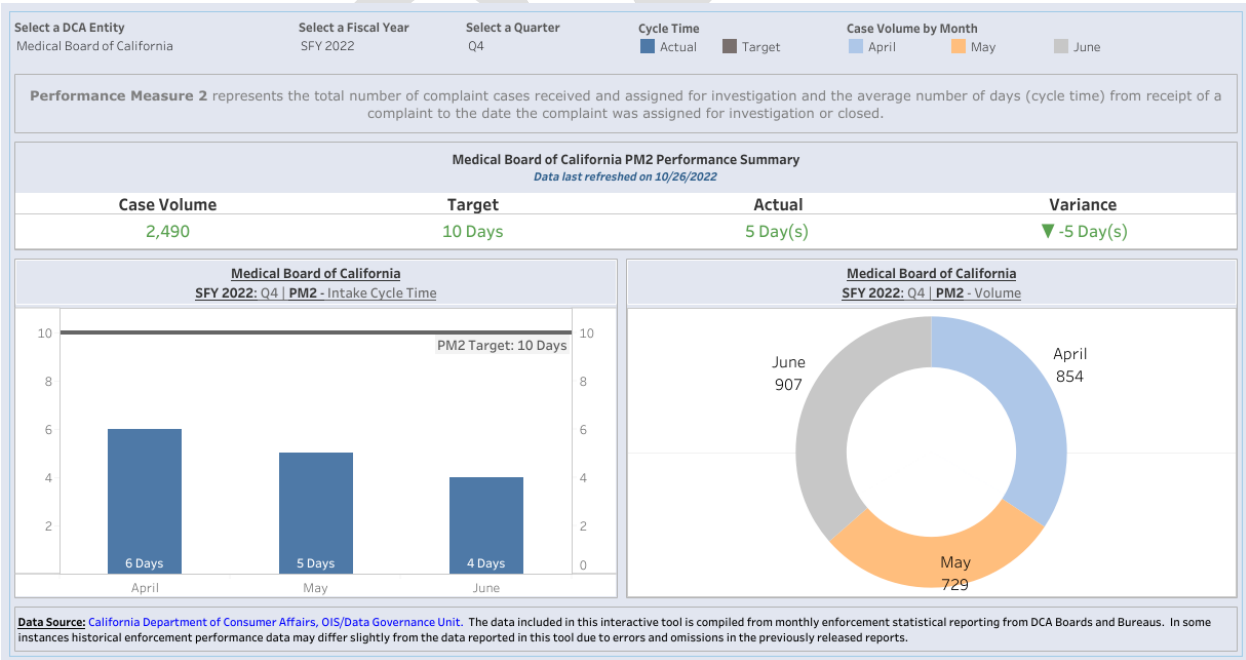
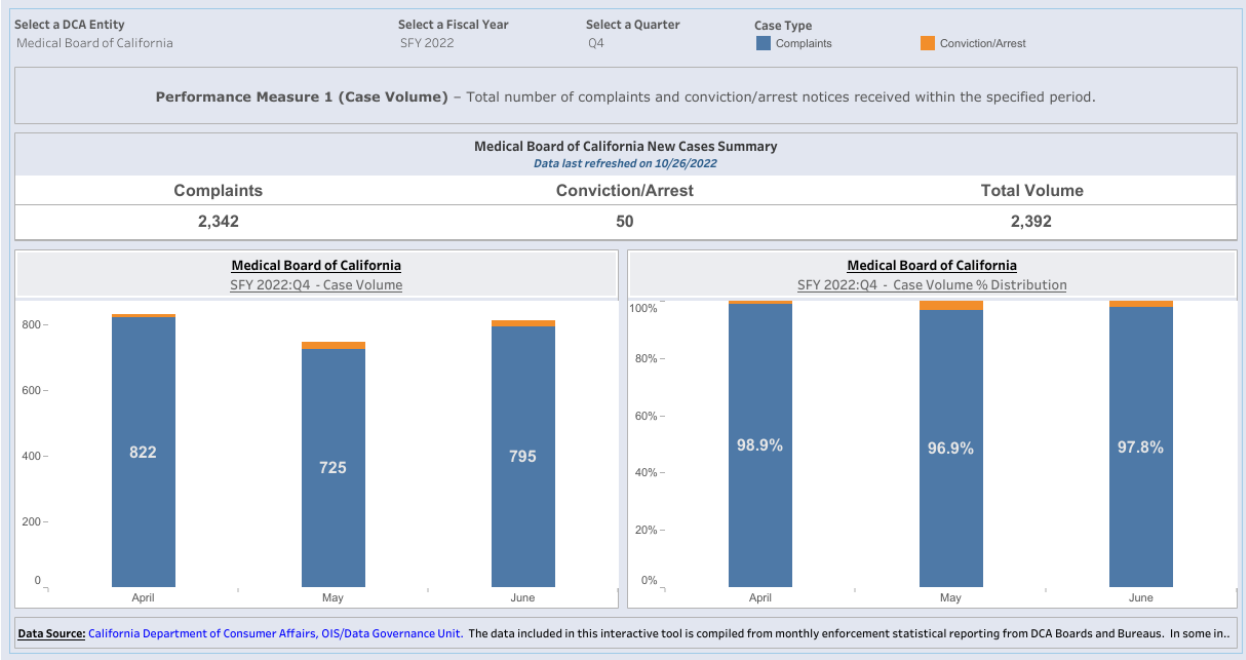
Enforcement Performance Measures  
Q3 Report (January – March 2022)

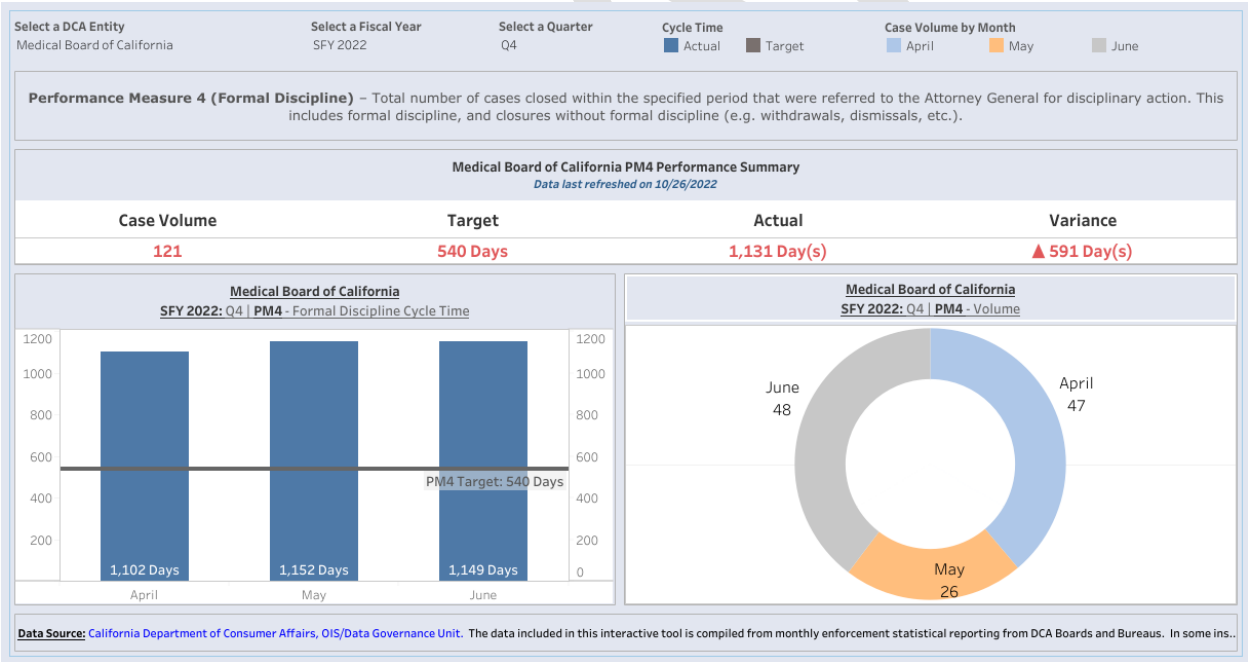
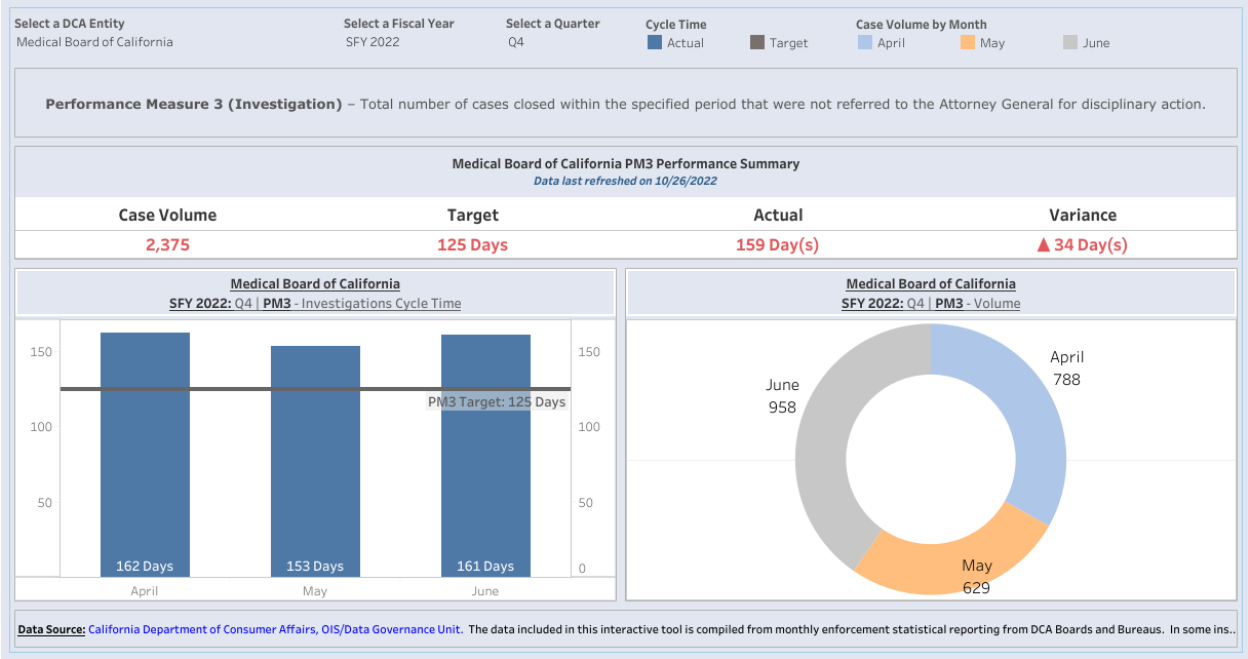


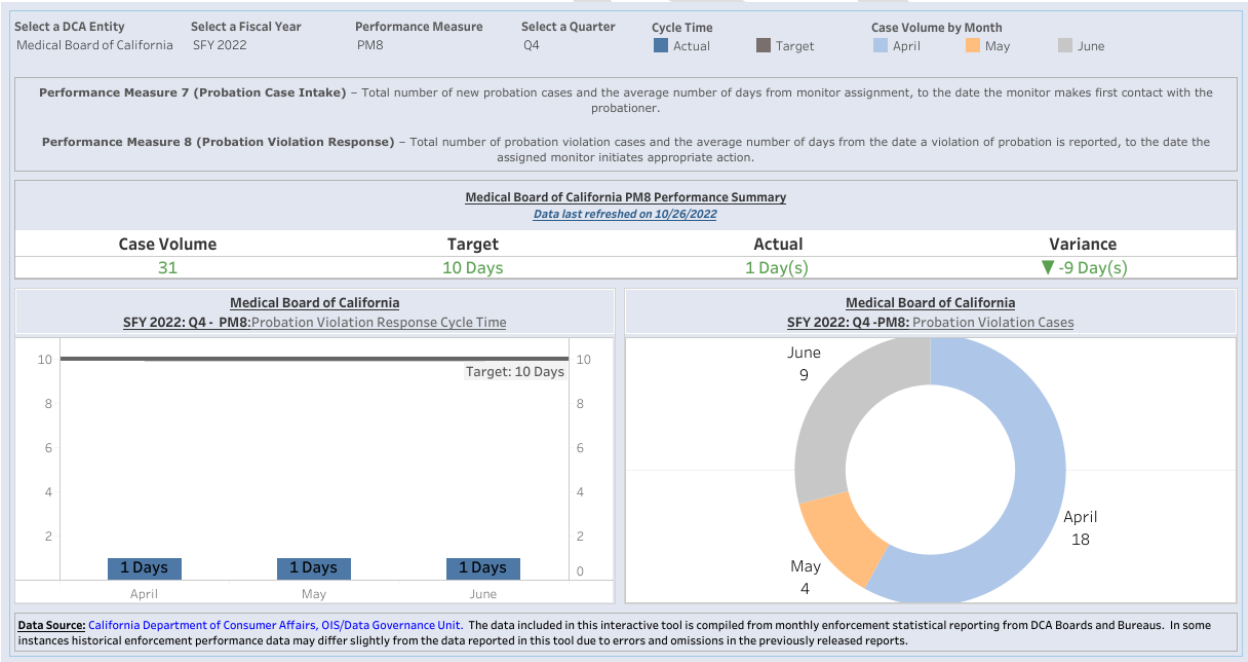
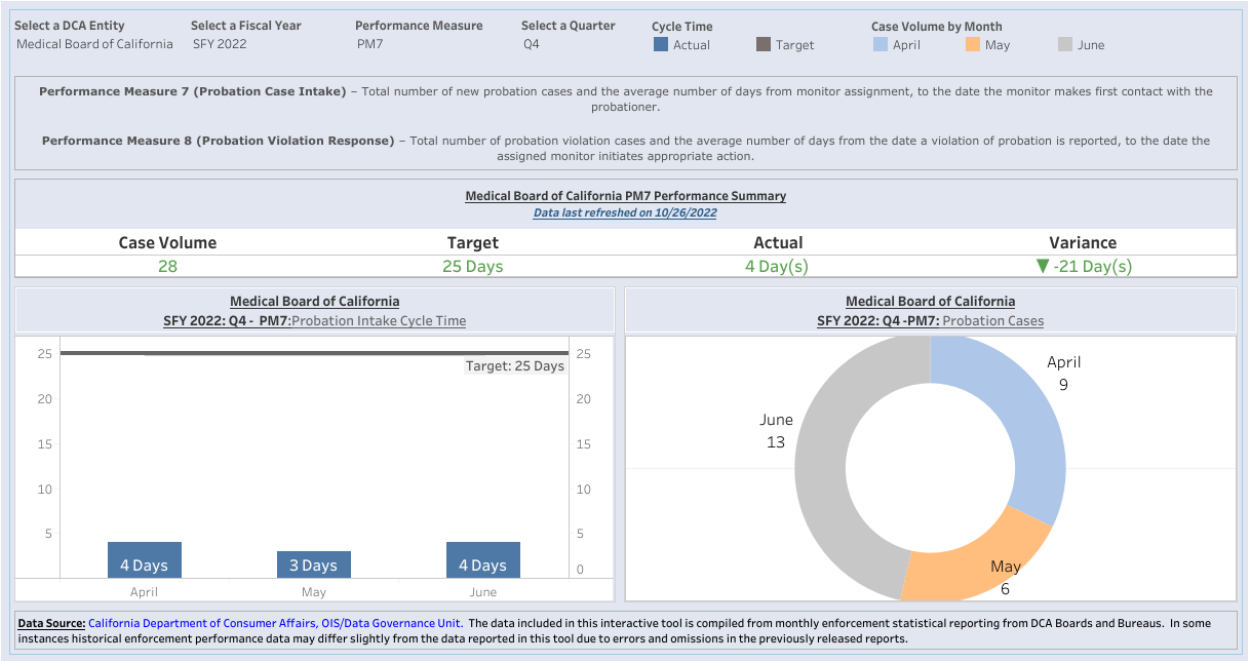




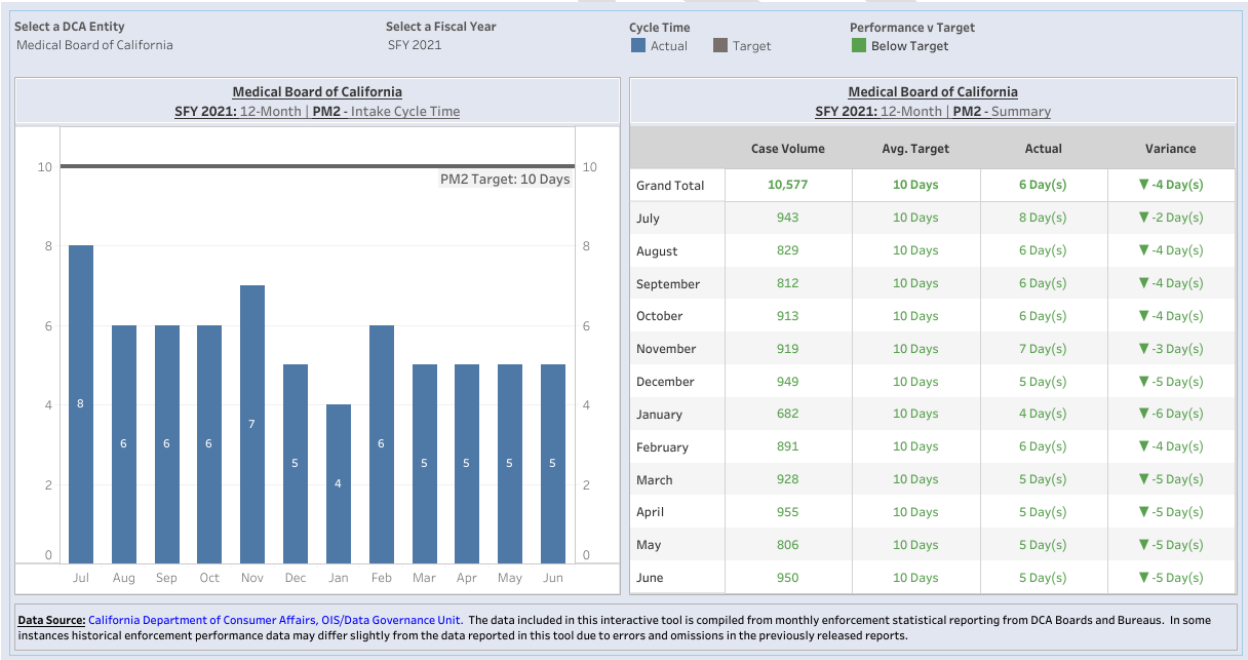
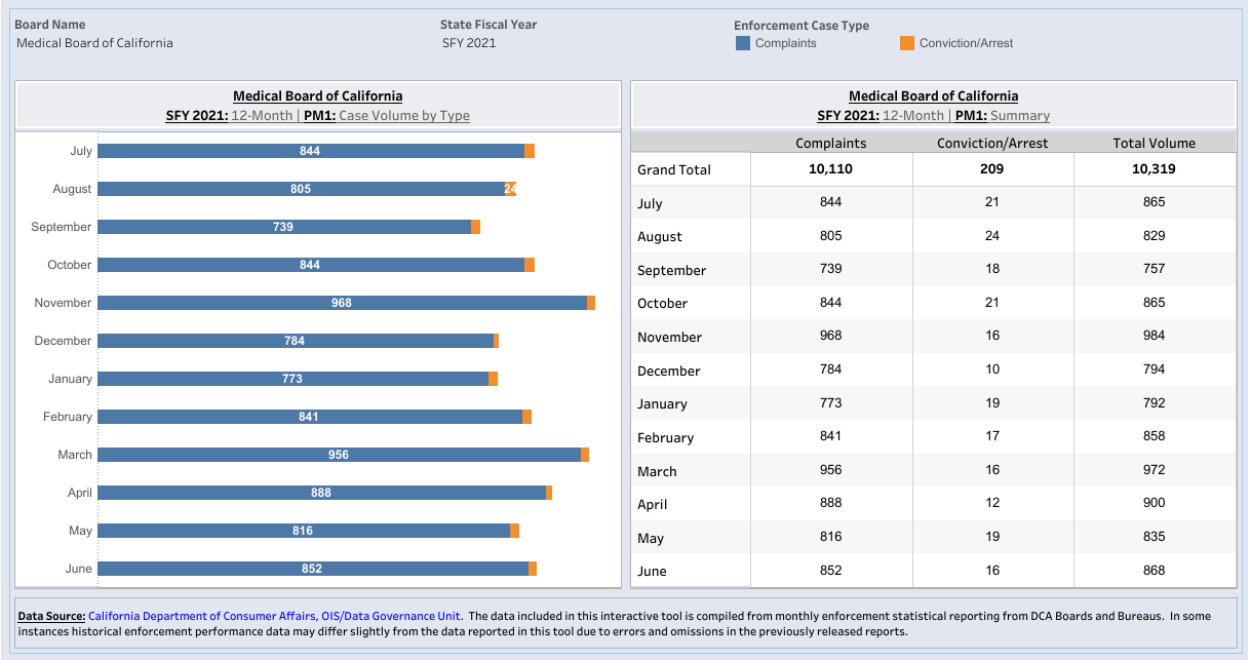
Enforcement Performance Measures  
Q4 Report (April – June 2022)

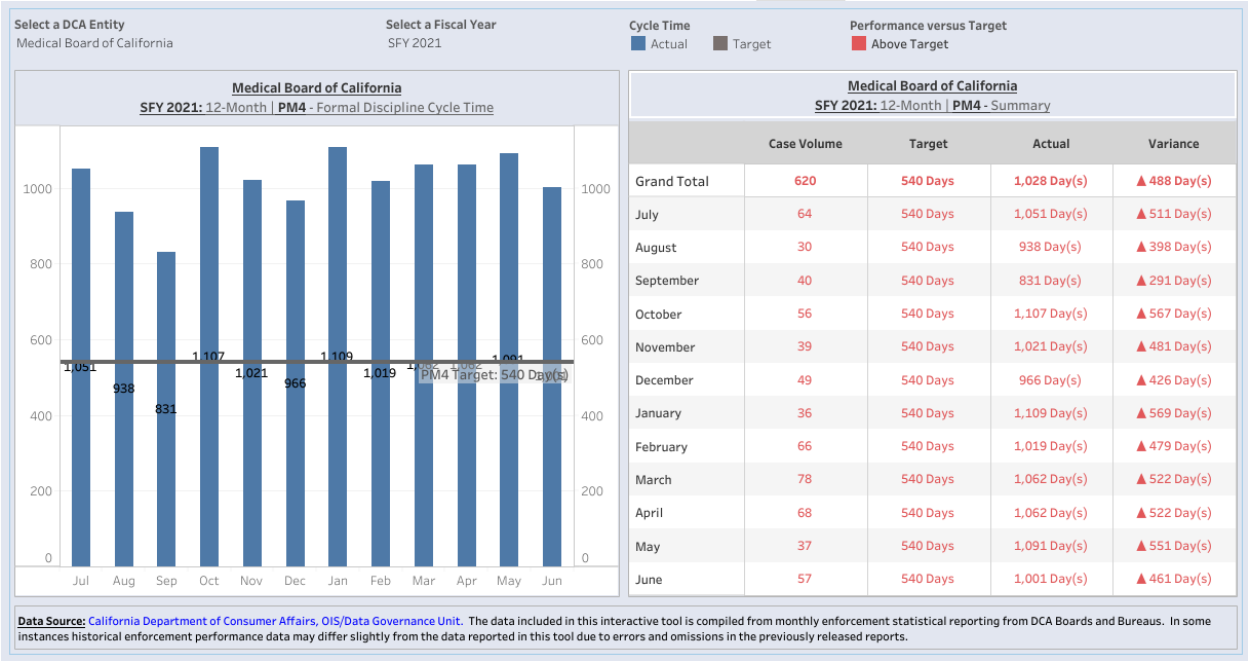
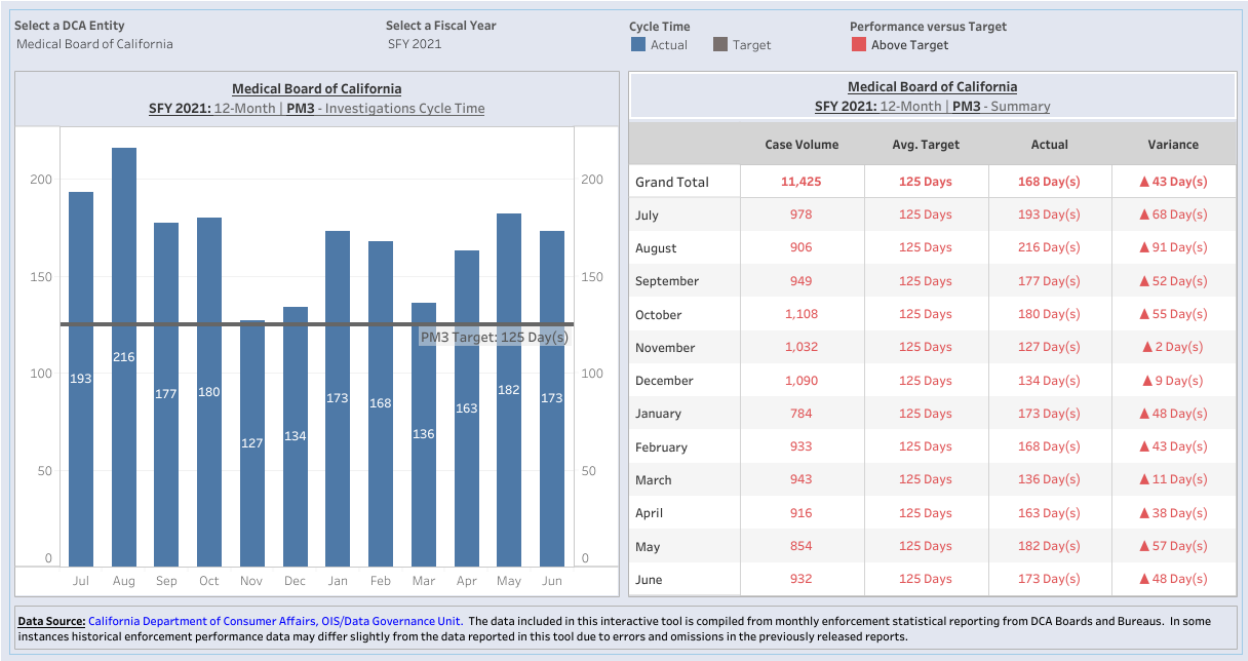




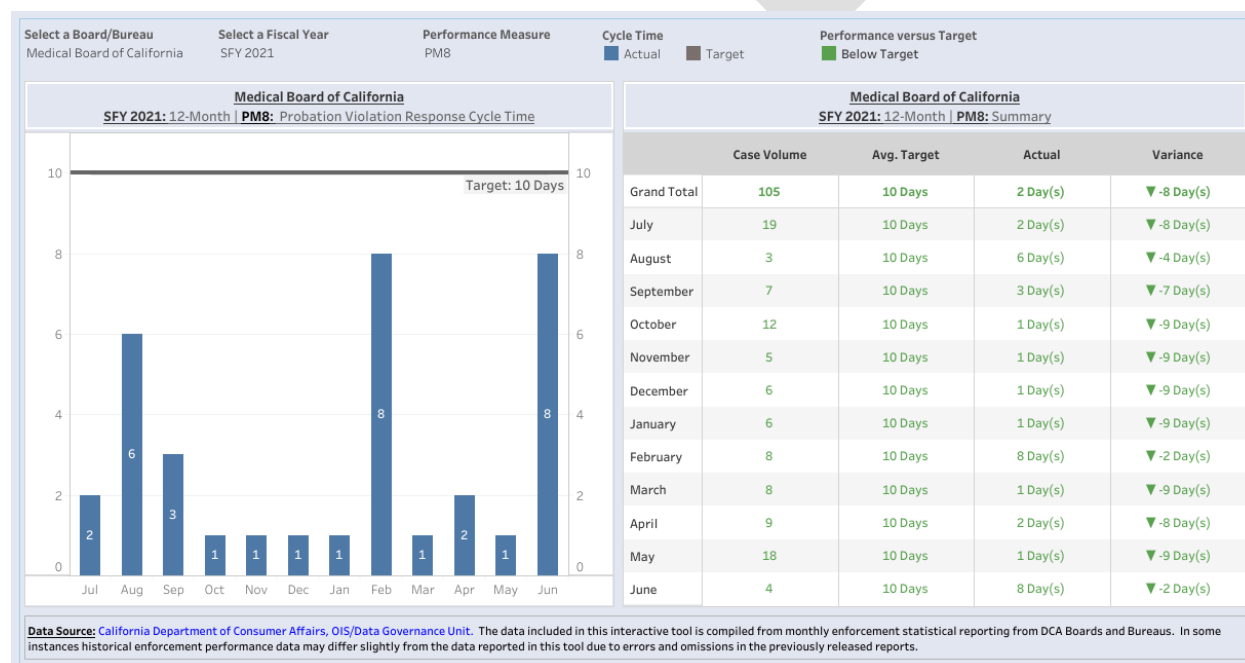
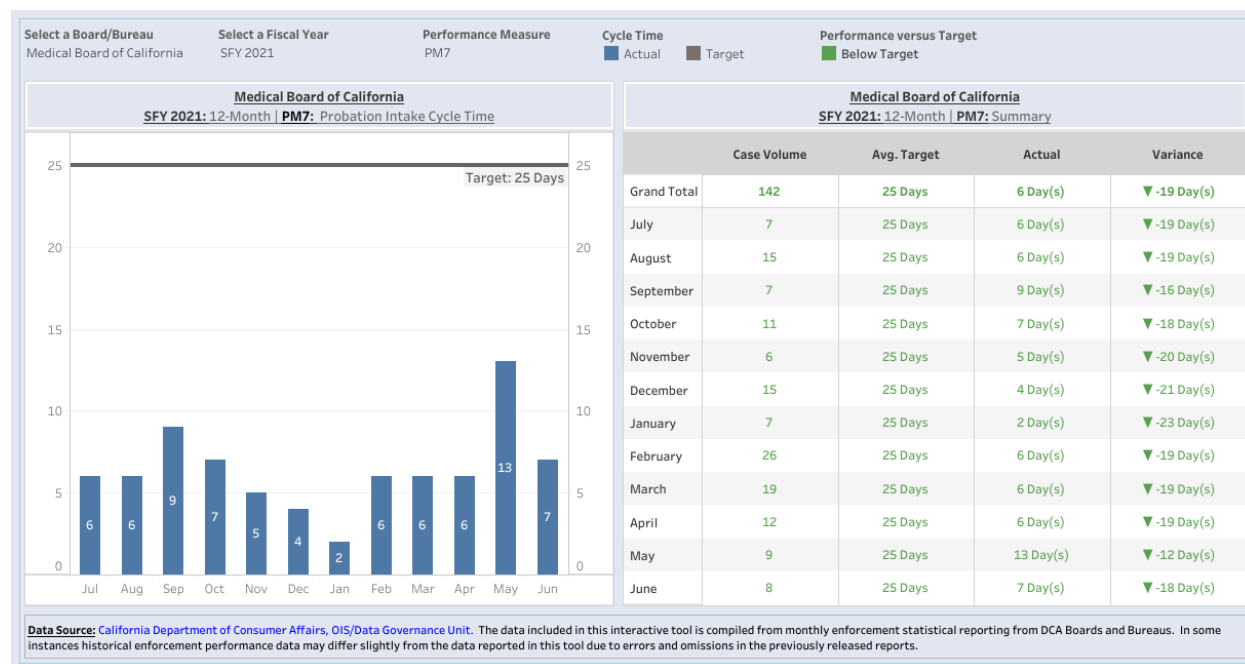


Enforcement Performance Measures  
Annual Report (July 2020 – June 2021)

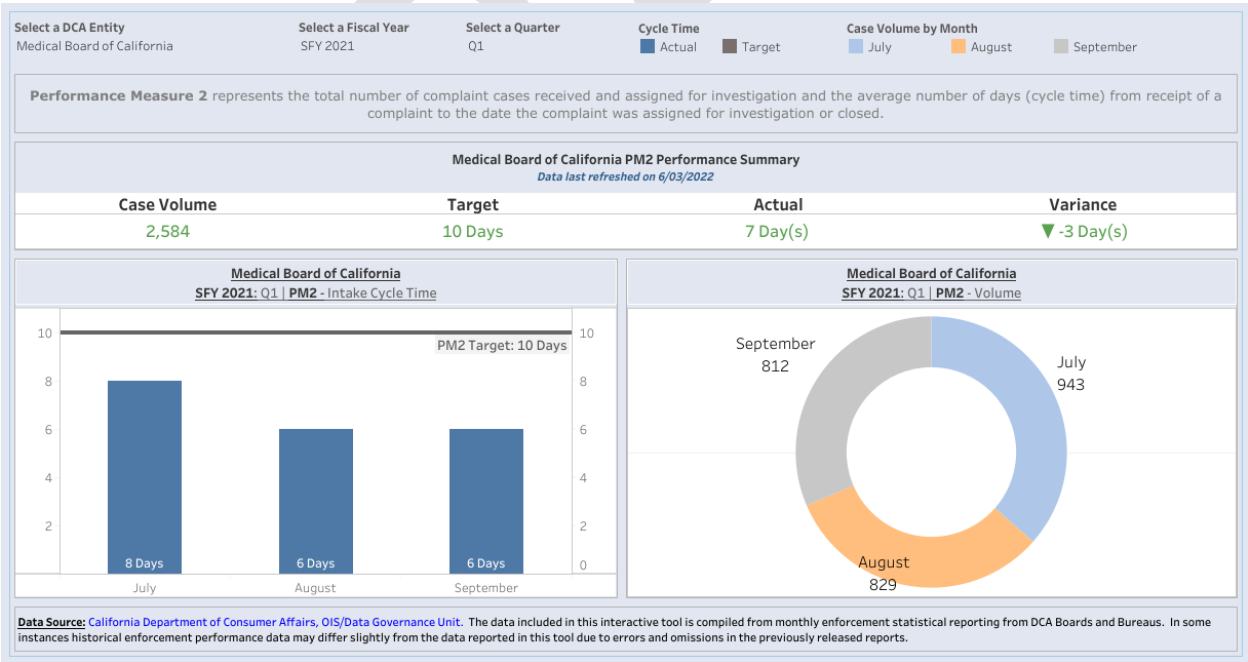
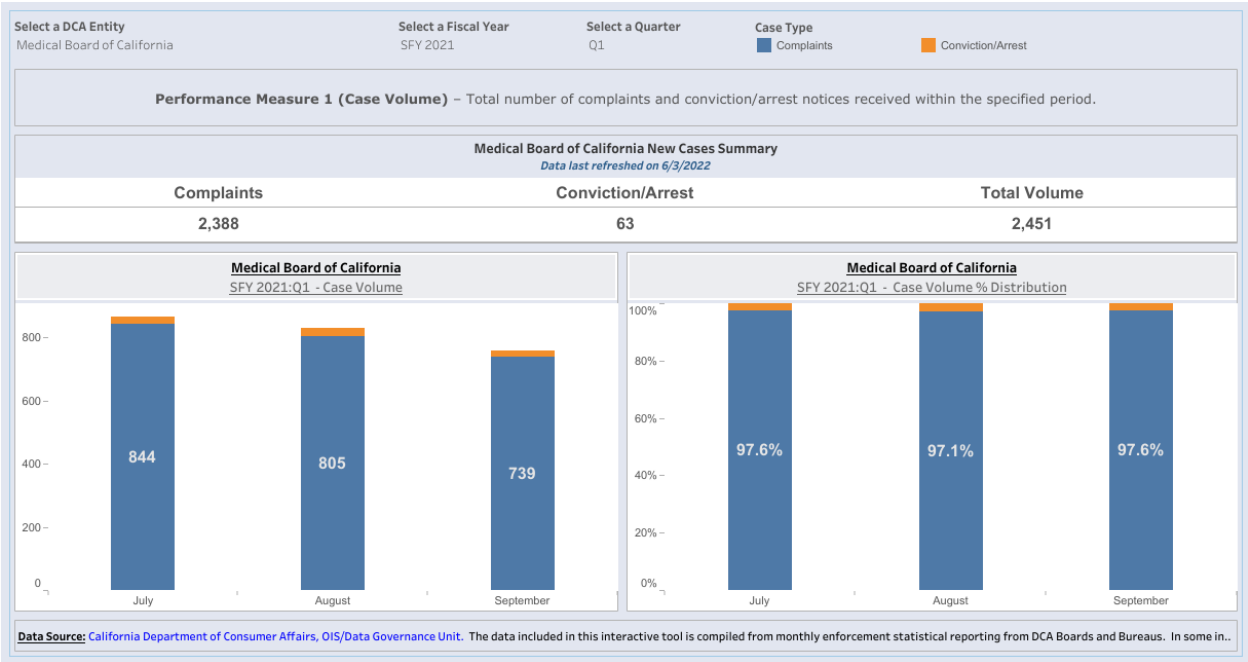


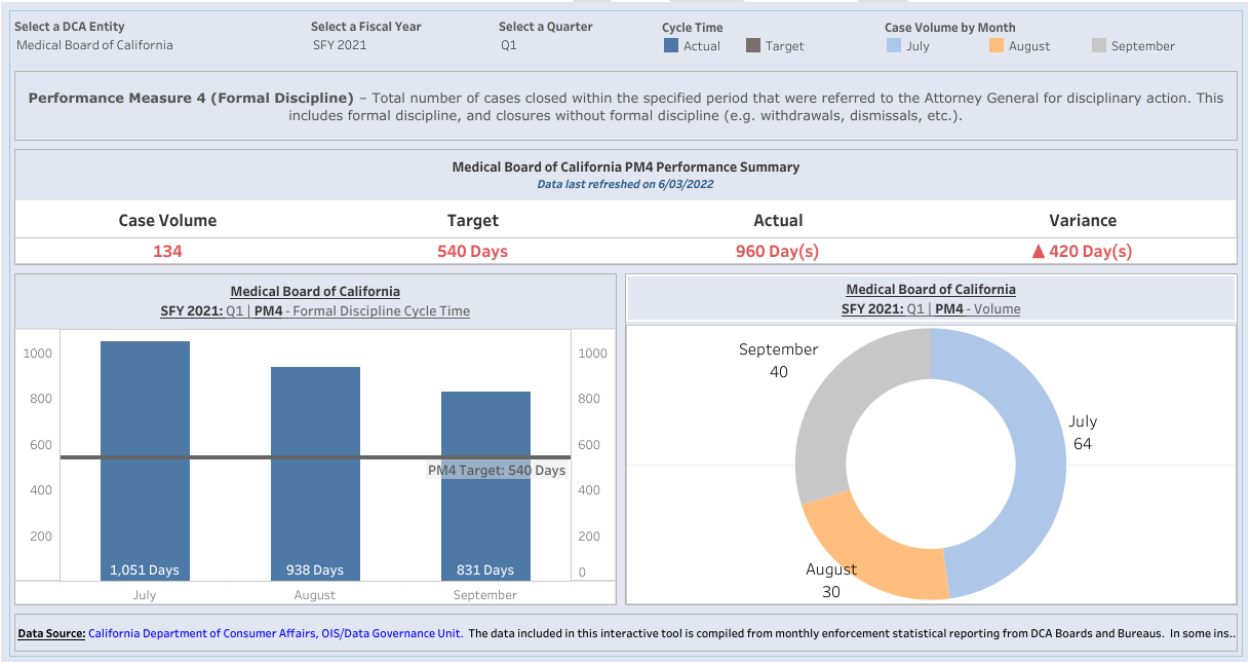
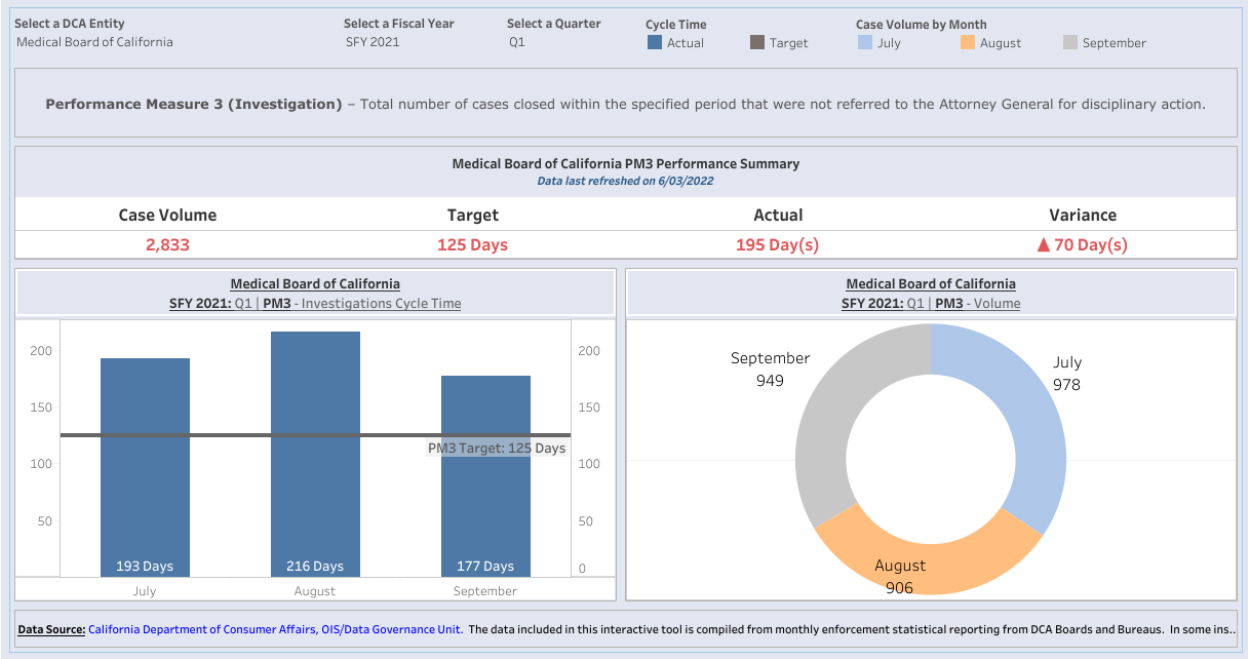


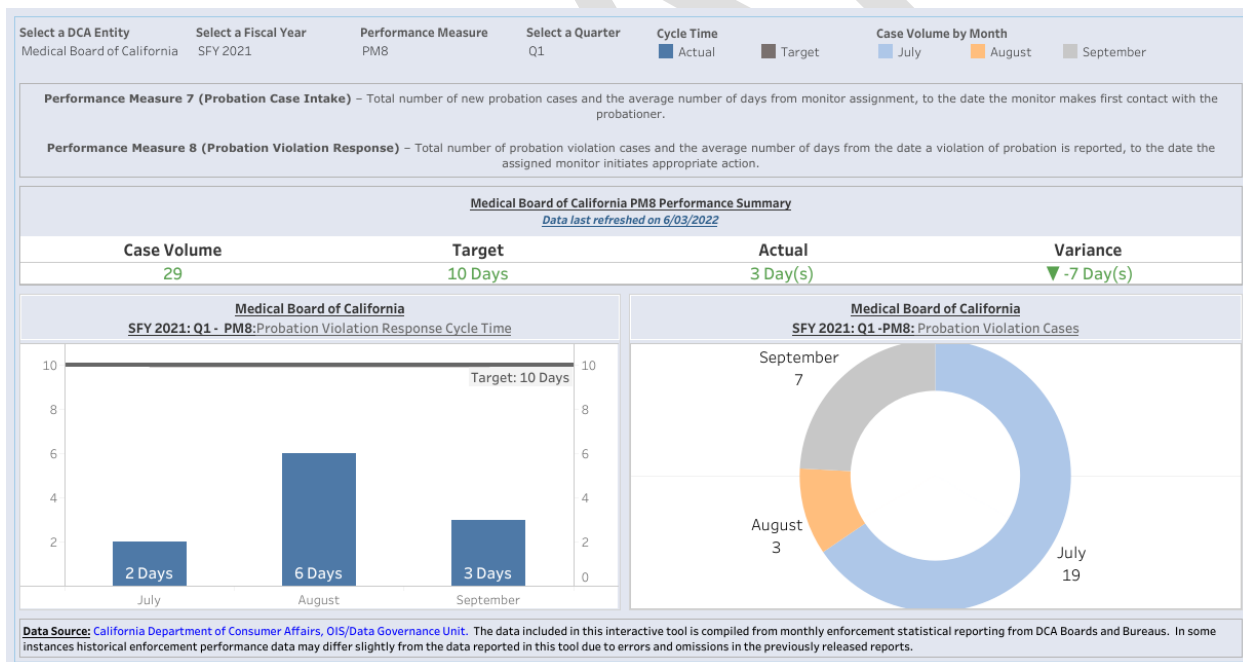
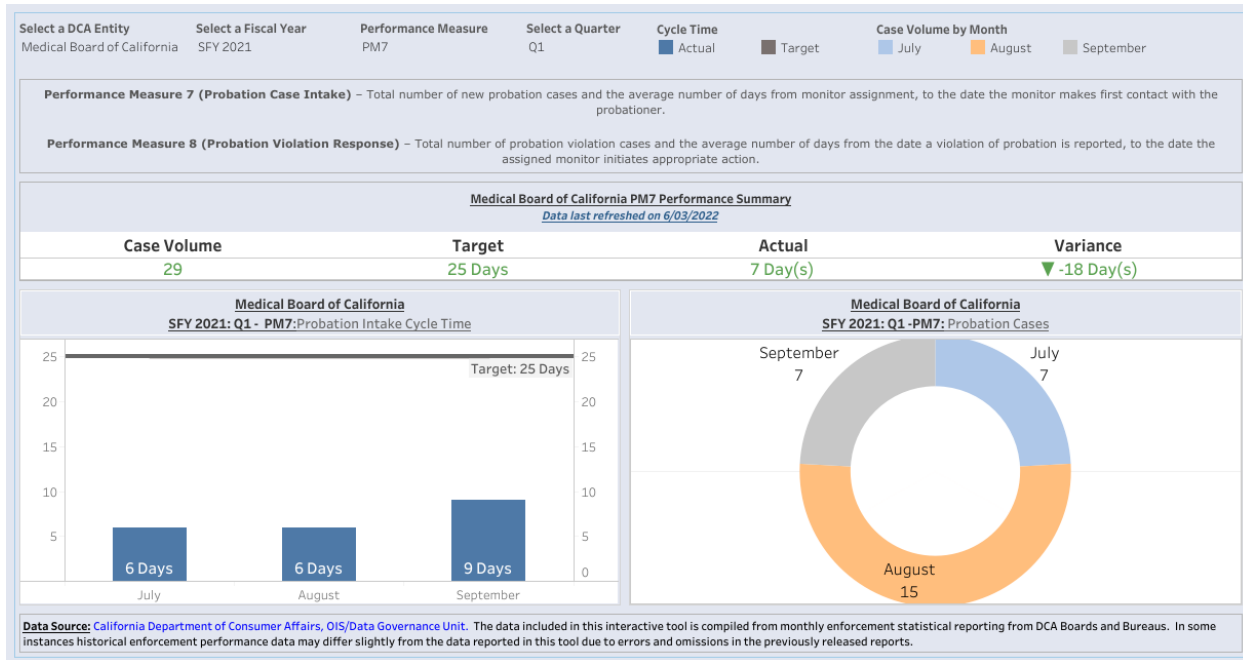




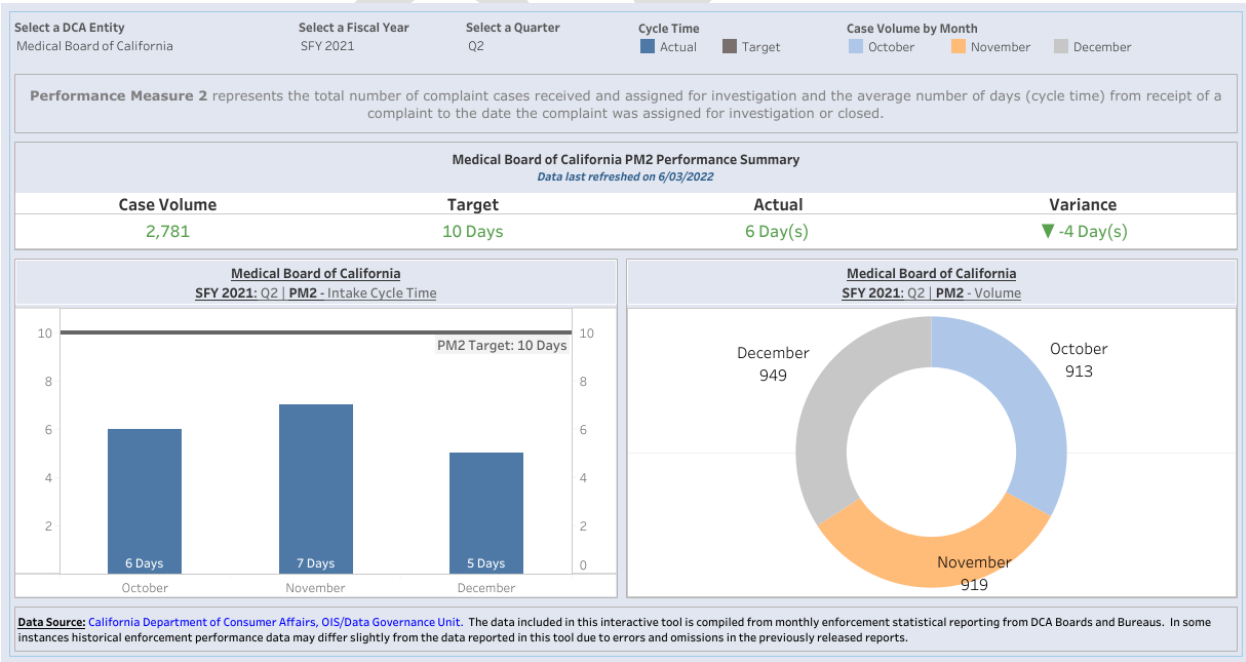
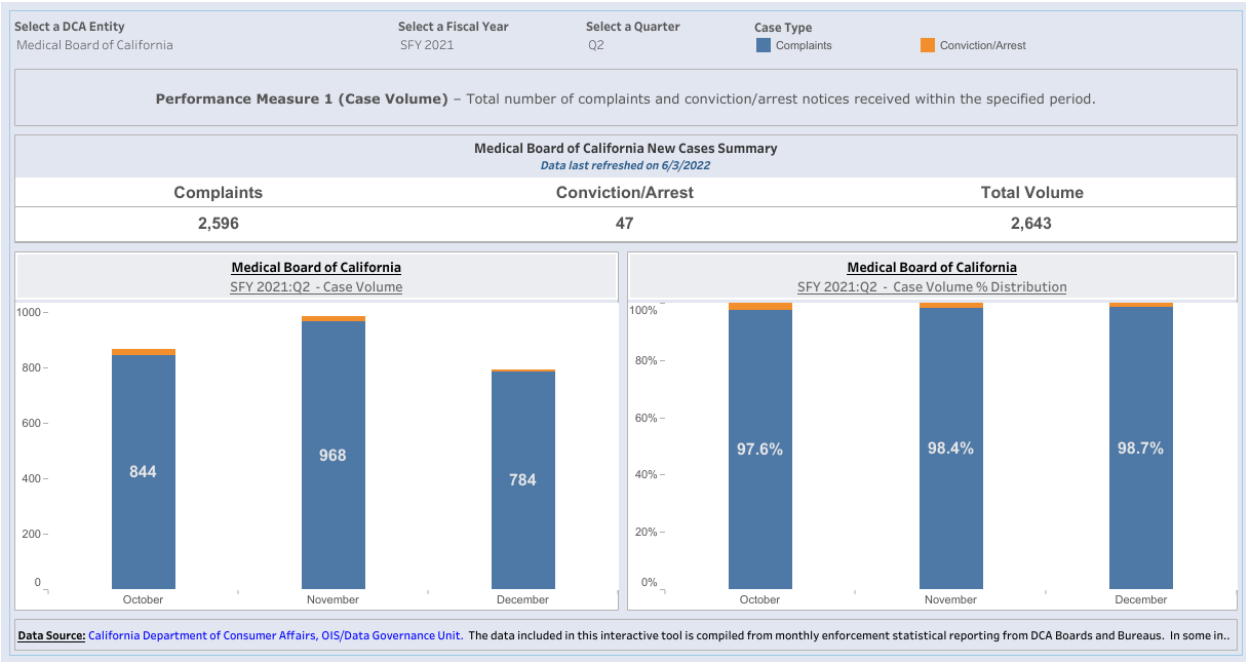
Enforcement Performance Measures  
Q1 Report (July – September 2020)

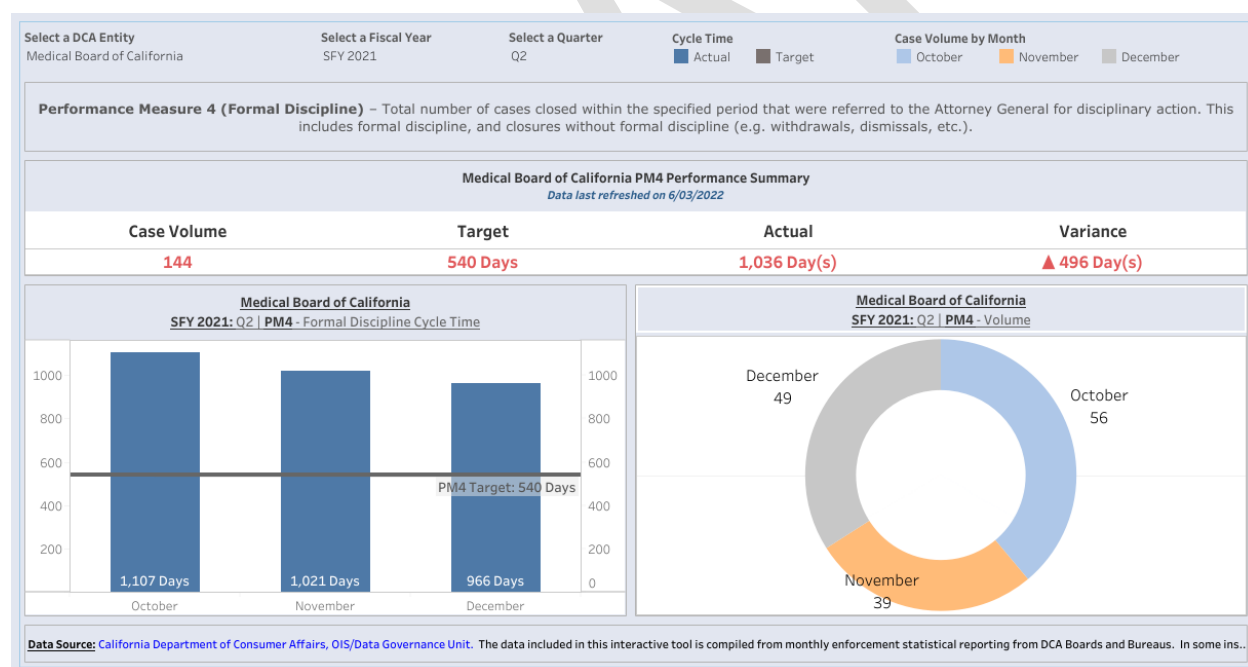
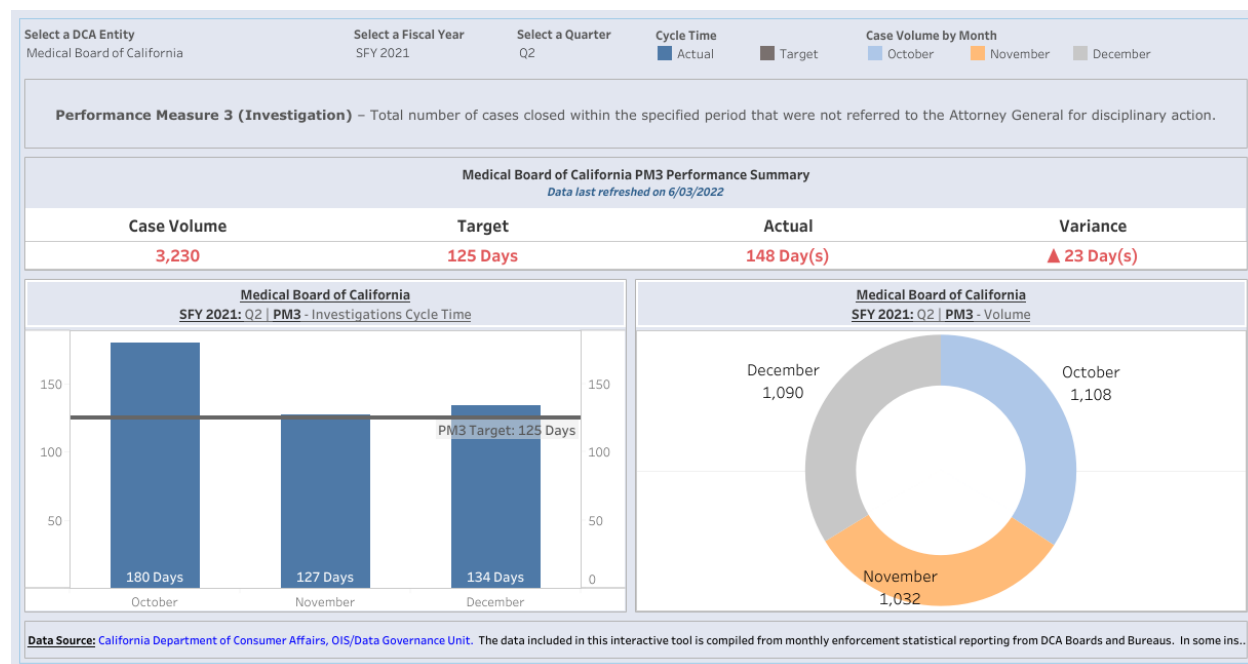


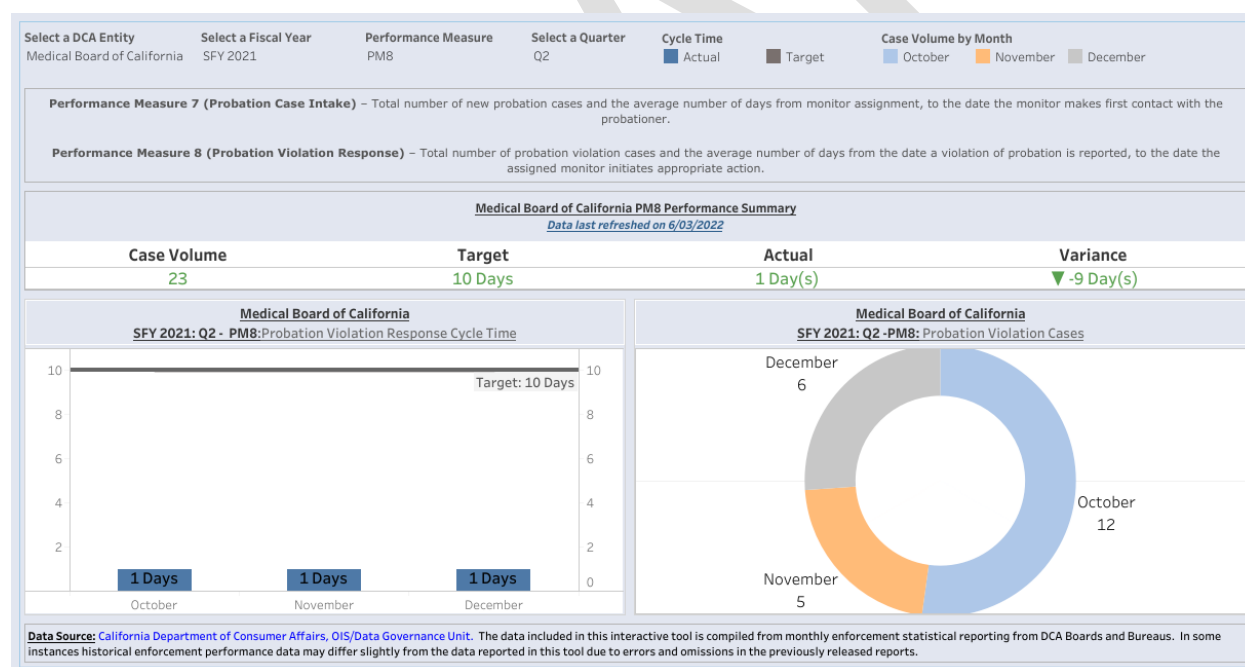
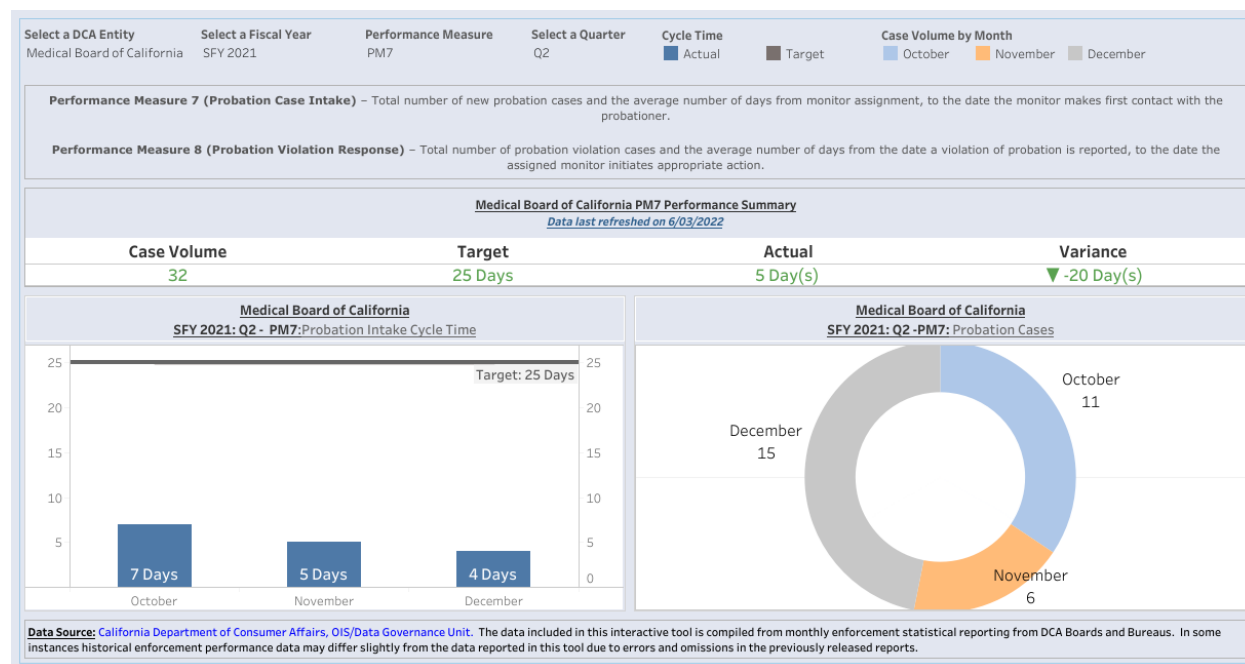




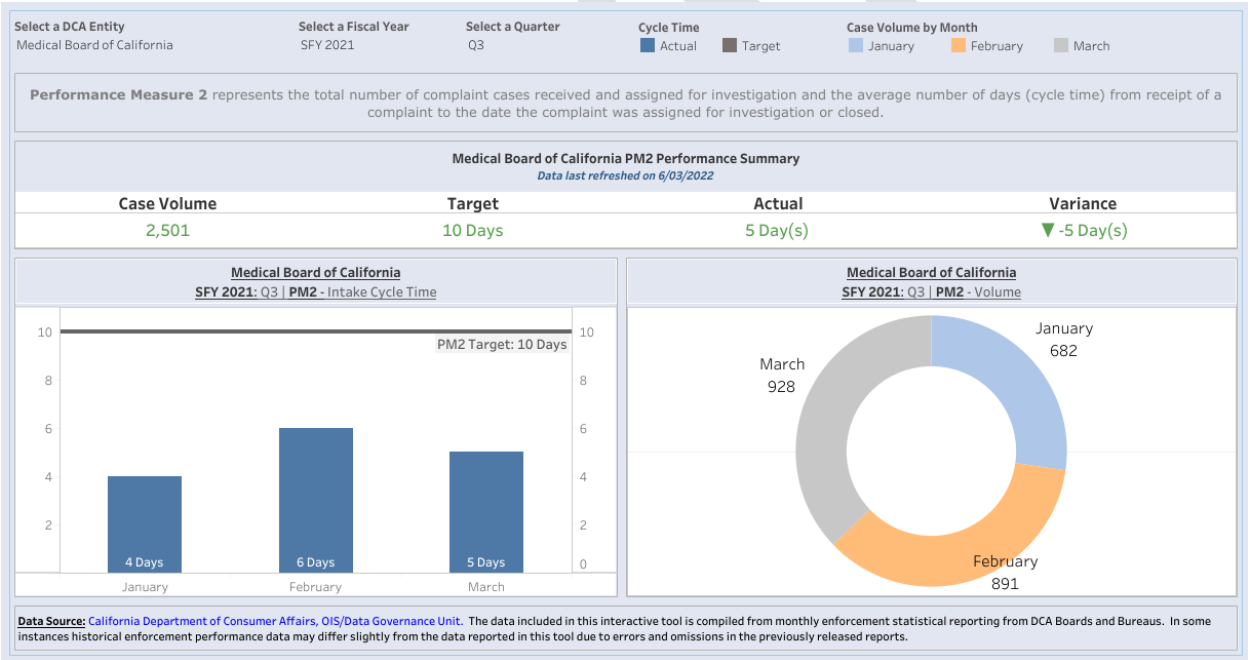
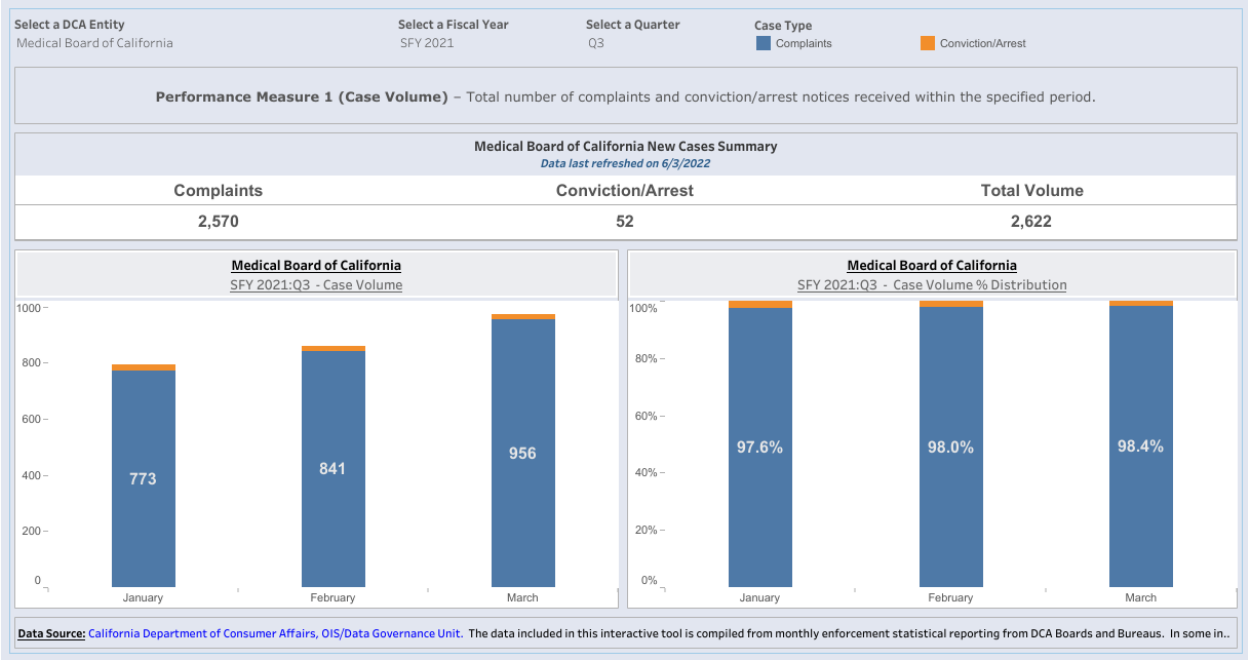
Enforcement Performance Measures  
Q2 Report (October – December 2020)



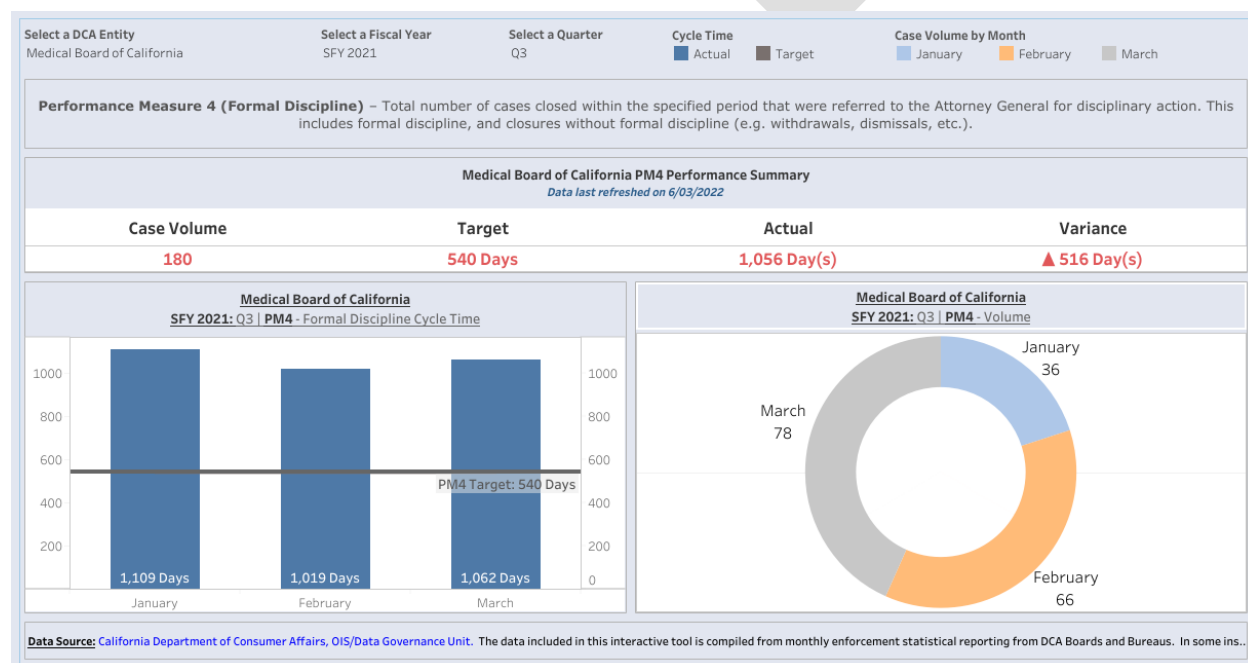
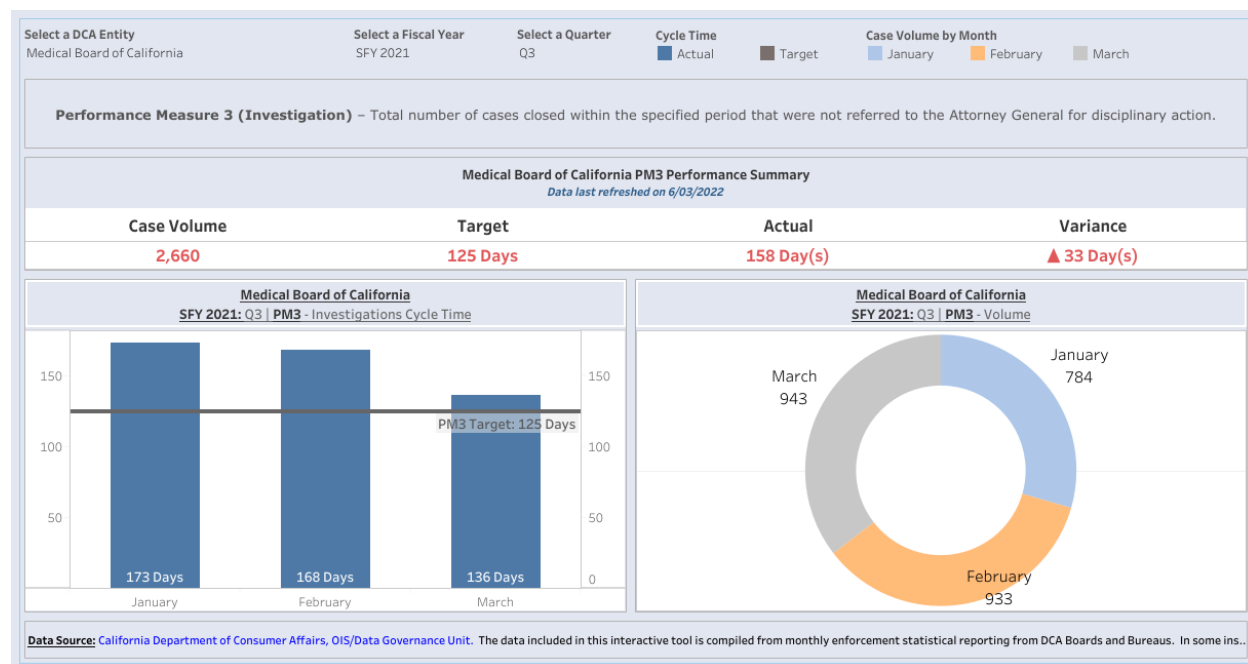


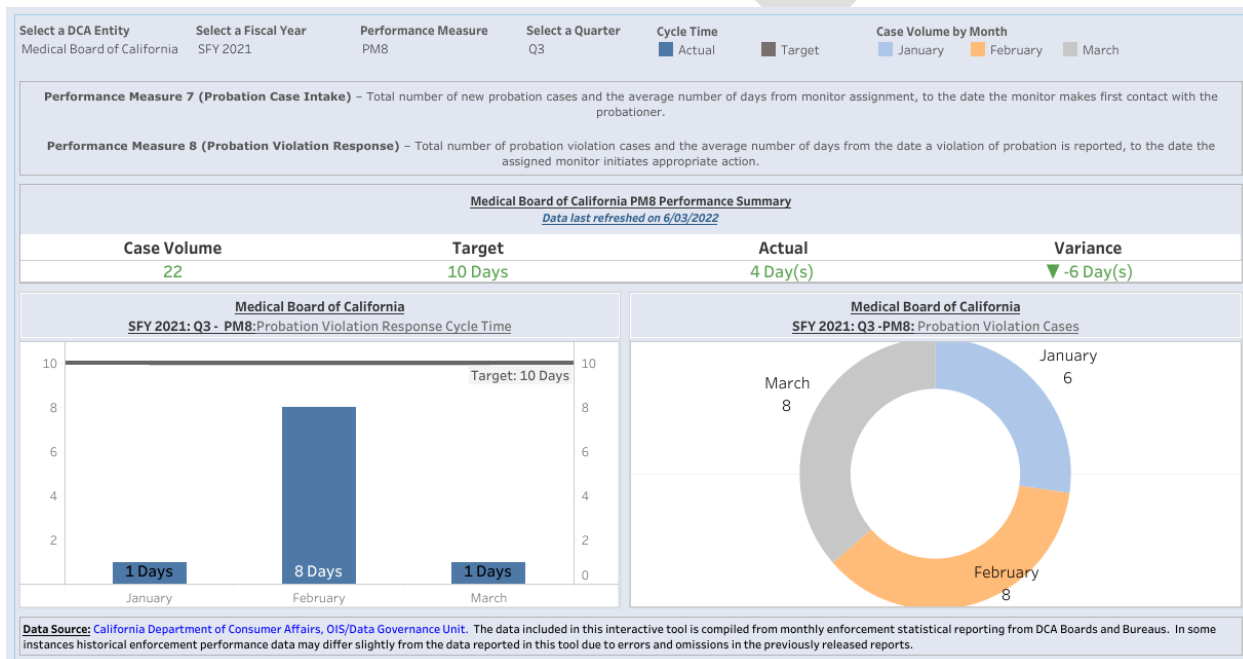
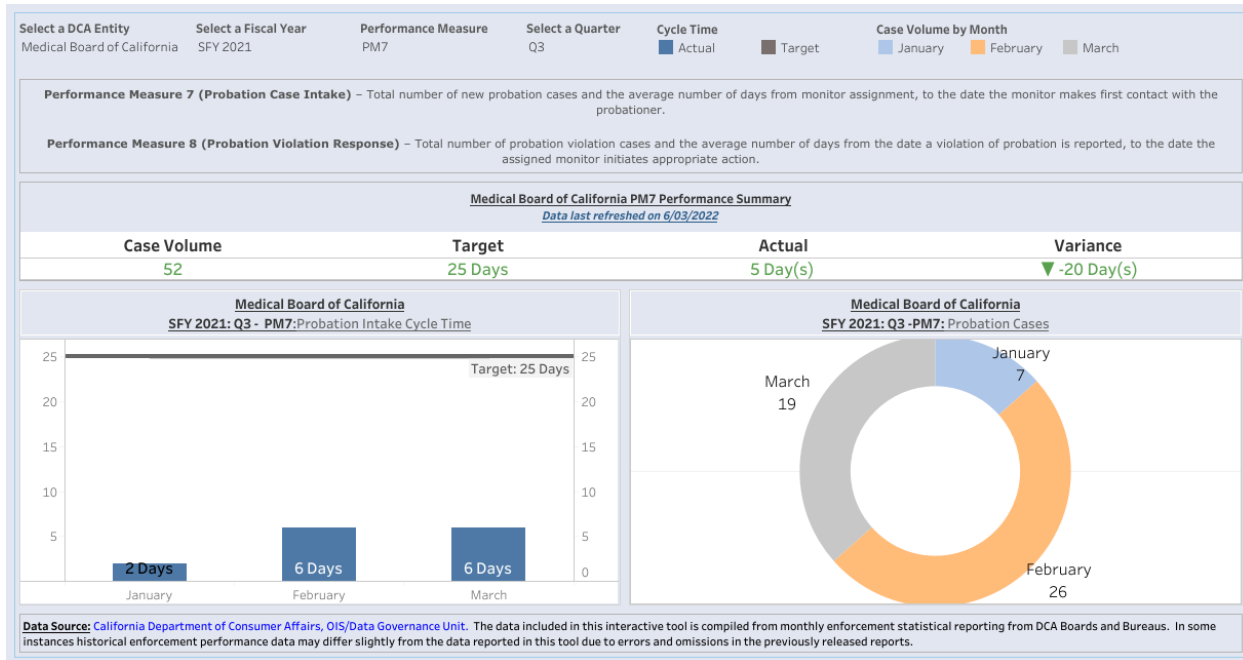


Enforcement Performance Measures  
Q3 Report (January – March 2021)

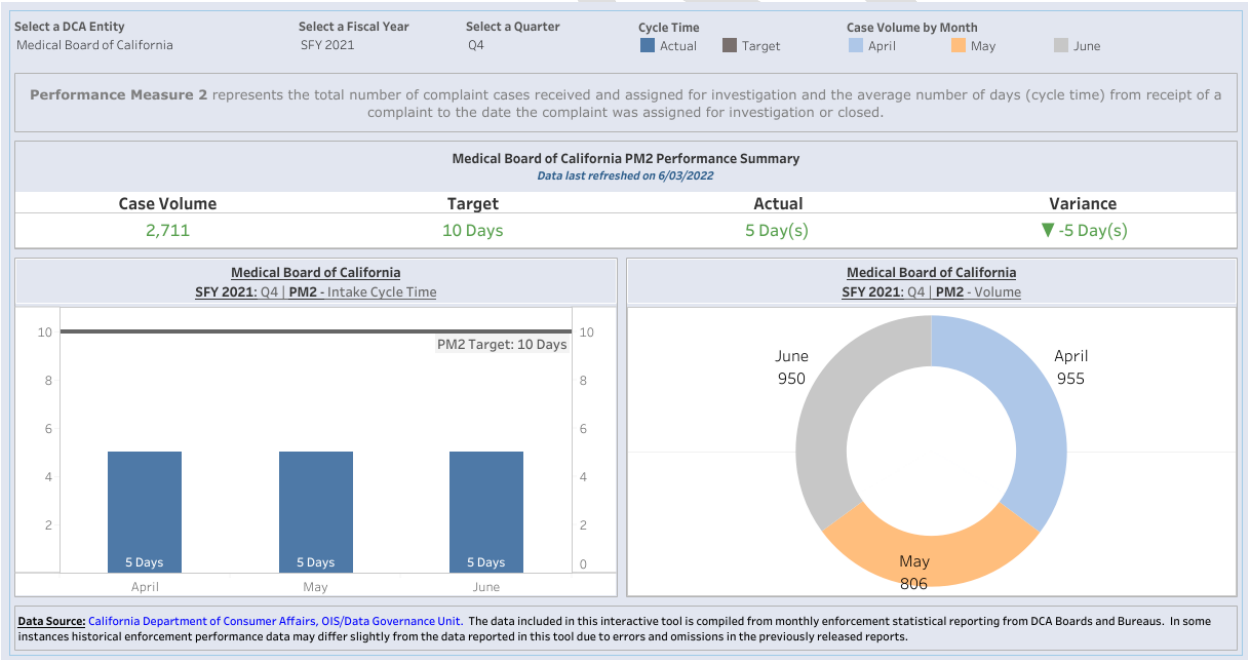
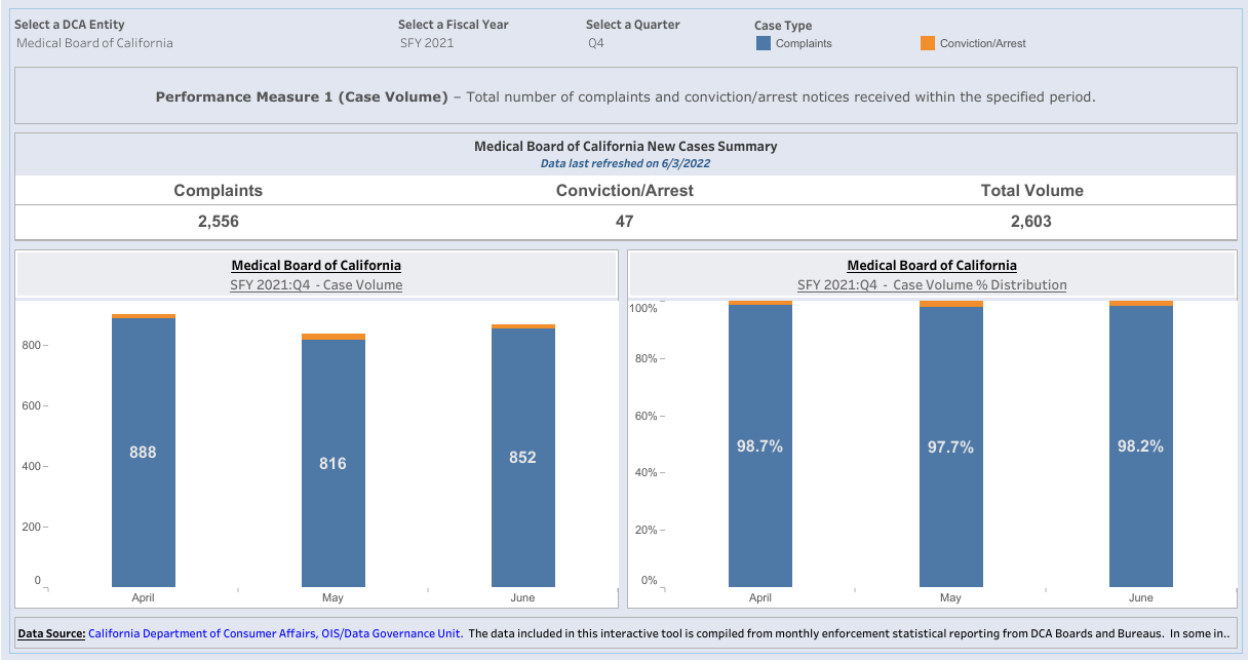


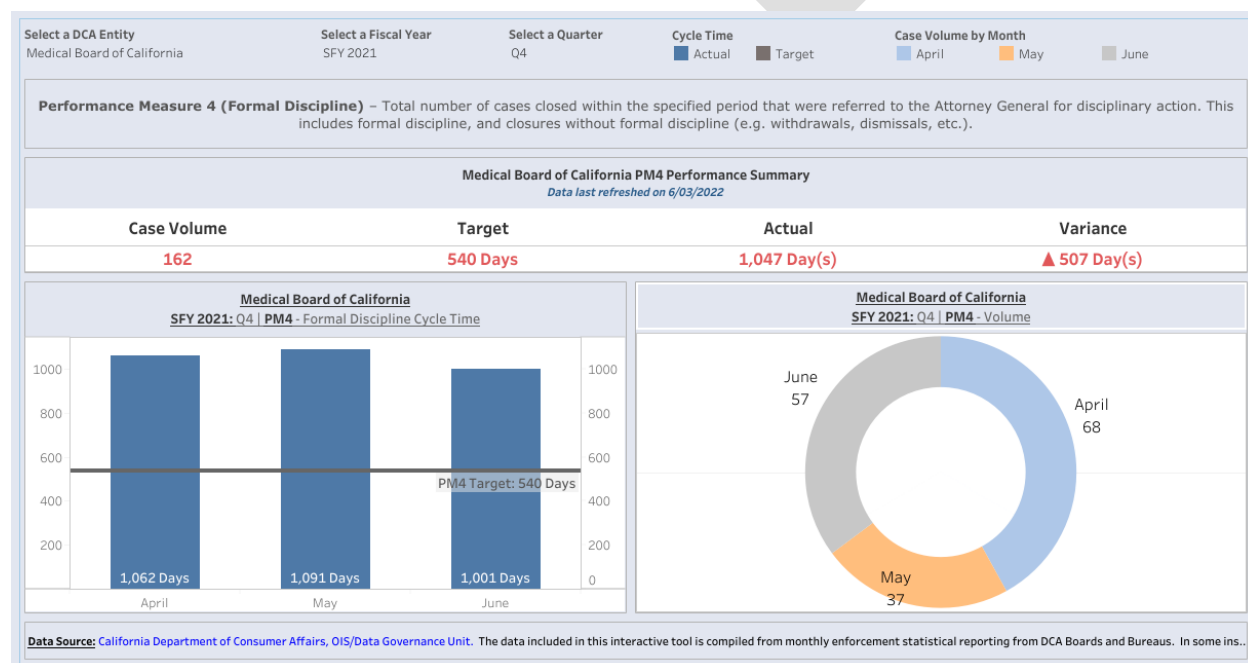
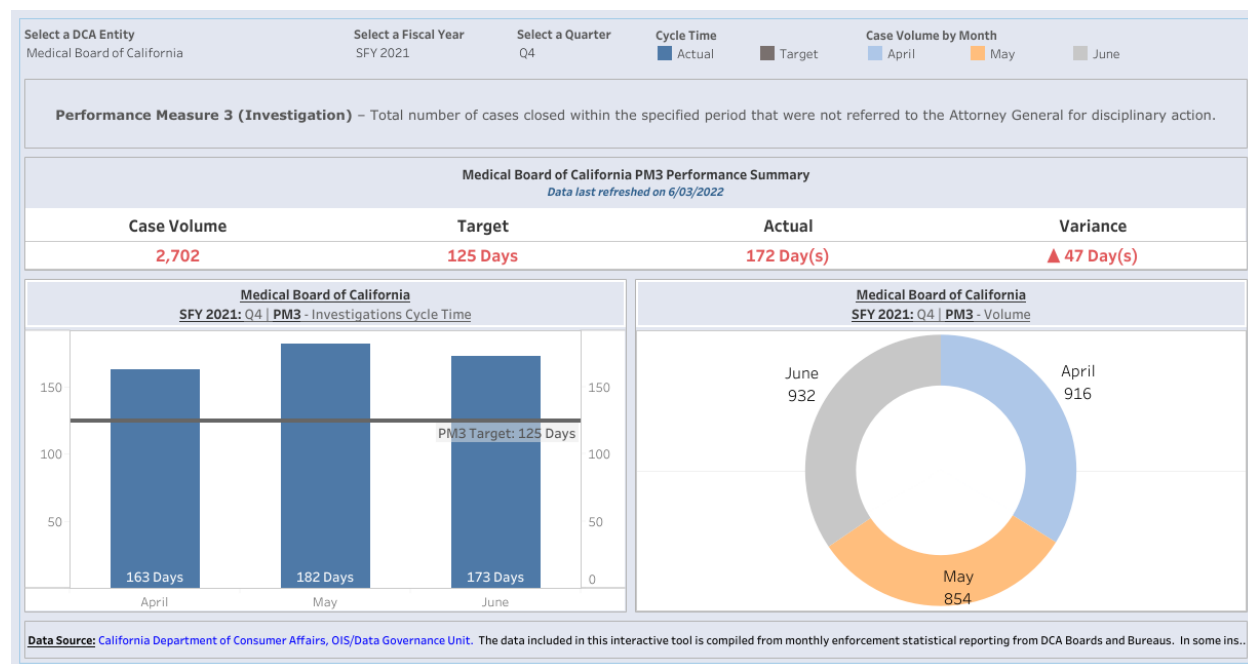


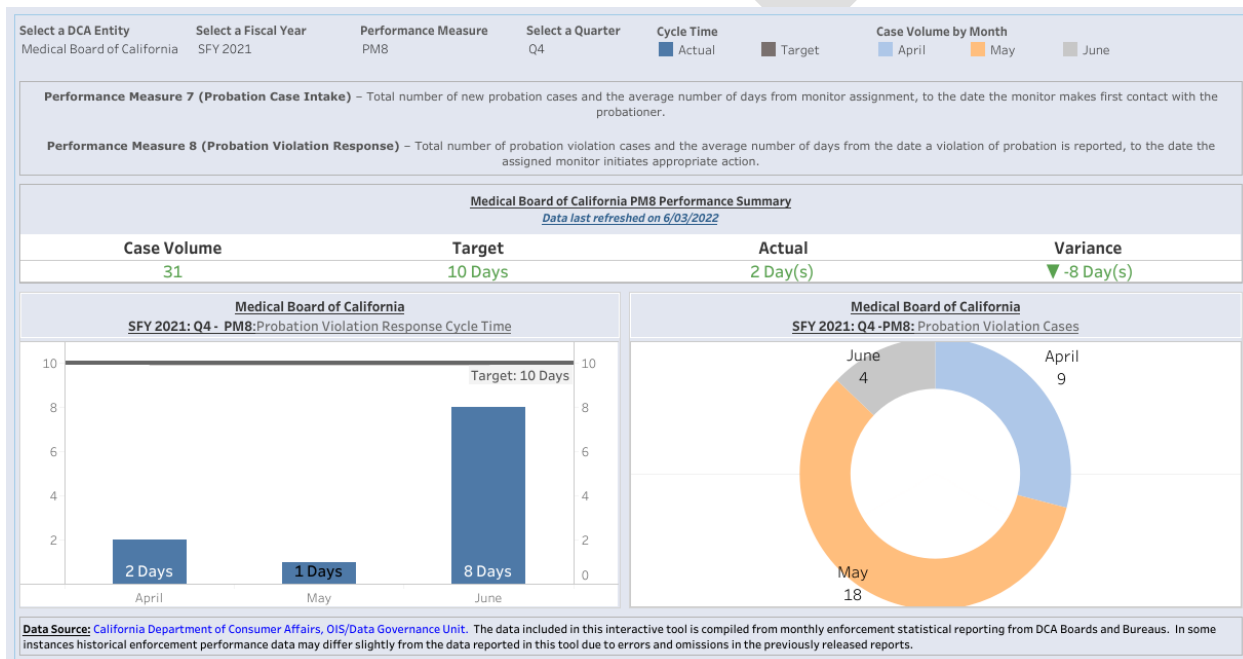
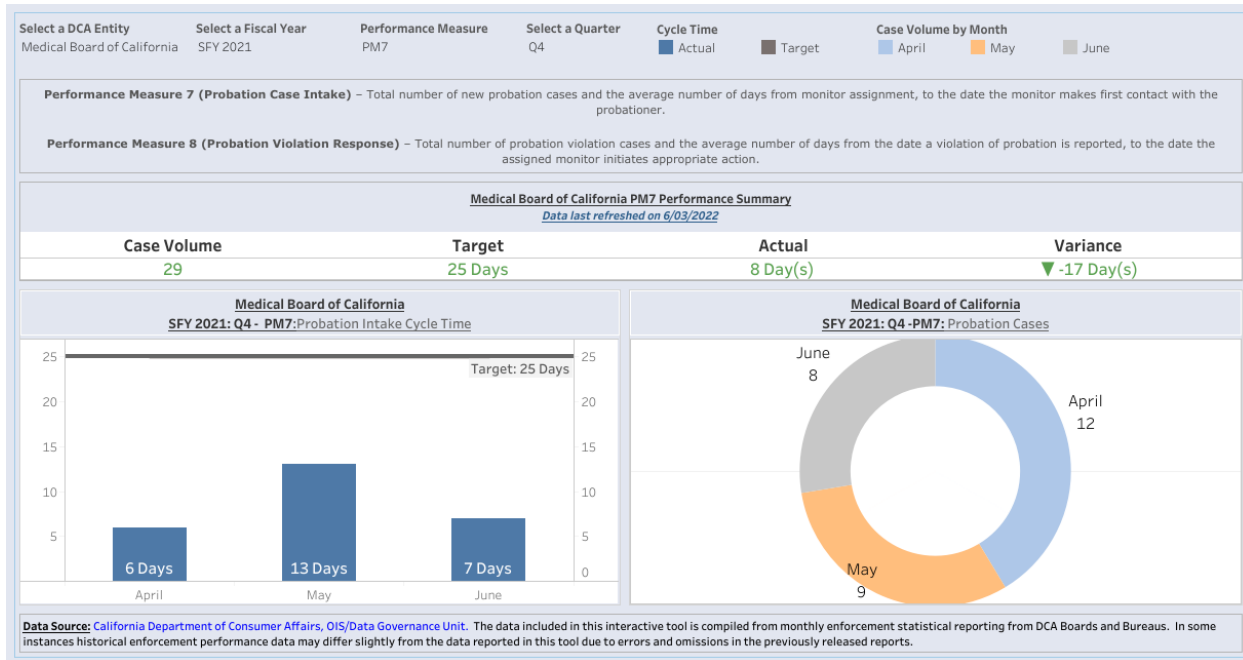




Enforcement Performance Measures  
Q4 Report (April – June 2021)







## Licensing Performance Measures Annual Report (July 2021 – June 2022)

State Fiscal Year  
SFY 2025

DCA Entity  
Medical Board of California

License Type  
(All)

Application Type  
(All)

Select Next Page  
(All)  
O

Total Application Volume

Target Processing Time Complete Applications

Processing Time Complete Applications

Processing Time Incomplete Applications

Complete Applications – Applications were deemed complete at the time of initial review and did not require additional information/documentation from the applicant prior to approval.

Incomplete Applications – Applications were deemed incomplete at the time of initial review and required additional information/documentation from the applicant prior to approval.

Board/Bureau	License Type	Application Type	Total Application Volume	Target Processing Time Complete Applications	Processing Time Complete Applications	Processing Time Incomplete Applications
Medical Board of California	Licensed Midwife	Initial Licensing Application	35	40	11 Day(s)	26 Day(s)
	Physician and Surgeon	Initial Licensing Application (without a PTAL)	5,667	84	64 Day(s)	132 Day(s)
		Physician and Surgeon Initial Licensing Application..	405	60	0 Day(s)	1,317 Day(s)
	Postgraduate Training Authorization Letter (..	Initial PTAL Application	34	84	0 Day(s)	570 Day(s)
	Postgraduate Training License (PTL)	Initial Application	1,925	84	45 Day(s)	81 Day(s)
	Registered Polysomnographic Te..	Initial/Upgrade Application	30	30	14 Day(s)	36 Day(s)
	Registered Polysomnographic..	Initial/Upgrade Application	35	30	14 Day(s)	73 Day(s)
	Registered Polysomnographic Tr..	Initial Application	14	30	11 Day(s)	207 Day(s)
	Research Psychoanalyst	Initial/Upgrade Licensing Application	2	30	16 Day(s)	74 Day(s)
	Special Faculty Permit	Initial Application	3	150	0 Day(s)	161 Day(s)
	Special Programs (Individual)	Initial Application	51	45	24 Day(s)	93 Day(s)
	Special Programs (Organization)	Initial Application	0	120	0 Day(s)	0 Day(s)
	Student Research Psychoanalyst	Initial Licensing Application	2	30	20 Day(s)	0 Day(s)

## Licensing Performance Measures Annual Report (July 2020 – June 2021)

State Fiscal Year  
SFY 2017

DCA Entity  
Medical Board of California

License Type  
(All)

Application Type  
(All)

Select Next Page  
(All)  
O

Total Application Volume

Target Processing Time Complete Applications

Processing Time Complete Applications

Processing Time Incomplete Applications

Complete Applications

 – Applications were deemed complete at the time of initial review and did not require additional information/documentation from the applicant prior to approval.

Incomplete Applications

 – Applications were deemed incomplete at the time of initial review and required additional information/documentation from the applicant prior to approval.

Board/Bureau	License Type	Application Type	Total Application Volume	Target Processing Time Complete Applications	Processing Time Complete Applications	Processing Time Incomplete Applications
Medical Board of California	Licensed Midwife	Initial Licensing Application	30	40	0 Day(s)	25 Day(s)
	Physician and Surgeon	Initial Licensing Application (without a PTAL)	6,345	84	0 Day(s)	143 Day(s)
		Physician and Surgeon Initial Licensing Application..	458	60	0 Day(s)	1,312 Day(s)
	Postgraduate Training Authorization Letter (..	Initial PTAL Application	946	84	0 Day(s)	266 Day(s)
	Registered Polysomnographic Te..	Initial/Upgrade Application	29	30	0 Day(s)	329 Day(s)
	Registered Polysomnographic..	Initial/Upgrade Application	63	30	26 Day(s)	210 Day(s)
	Registered Polysomnographic Tr..	Initial Application	29	30	0 Day(s)	110 Day(s)
	Research Psychoanalyst	Initial/Upgrade Licensing Application	1	30	0 Day(s)	179 Day(s)
	Special Faculty Permit	Initial Application	2	150	0 Day(s)	292 Day(s)
	Special Programs (Individual)	Initial Application	47	45	0 Day(s)	149 Day(s)
	Special Programs (Organization)	Initial Application	0	120	0 Day(s)	0 Day(s)
	Student Research Psychoanalyst	Initial Licensing Application	5	30	0 Day(s)	18 Day(s)