MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: February 1, 2026
ATTENTION: Members, Medical Board of California
SUBJECT: Information Systems Branch Summary
STAFF CONTACT: Sean Eichelkraut, Information Technology Manager II

Requested Action:

This report is intended to provide the Members with an update on the Information Systems Branch (ISB) at the Medical Board of California (Board). No action is needed at this time.

Staffing Updates:

- Information Technology Specialist I, IBM COGNOS/SQL Developer, position filled (January 2026) and training has begun.
- Information Technology Associate, Junior/Website Developer, position filled (December 2025) and training has begun.
- Interviews underway for the Information Technology Specialist I, Enforcement Business Analyst, position.

Infrastructure Updates:

- New laptops and monitors are in the process of being deployed to all Board staff as part of the standard 5-year computer refresh cycle.

Complaint Tracking System Update:

The Complaint Tracking System (CTS) is a web application in development to provide patient and/or authorized representatives with status information relating to complaints submitted to the Board, more efficiently than traditional paper letters sent by postal mail or phone calls, which are limited to regular business hours and consume staff time that could otherwise be used for processing complaints. After Board Members provided initial requirements and approval to proceed with this project, Interested Parties meetings were held in 2023 to gather additional suggestions from all Interested Parties. All suggestions for additional functionality were reviewed for technical and legal feasibility and incorporated into the Minimum Viable Product (MVP) requirements and presented to the Board Members and public at the November 30, 2023, Board meeting, where it was approved to begin the formal Statewide Information Management Manual (SIMM) Project Approval Lifecycle (PAL) process. After receiving approval to proceed in late 2024, development of the system started in 2025.

February 2026 Update: Testing is still in progress. The focus has shifted from configuration of individual activities to now having Board leadership review complaints in their entirety from a user's perspective. Launch date is dependent on testing results.

Medical Board of California iOS App Update for iOS 17:

Originally launched in July 2018, the Medical Board of California iOS App is getting some updates to keep up with Apple's ongoing enhancements to the iOS operating system. Failing to conform to Apple's standards for operating system updates could result in the app being removed from the Apple Store for consumers to obtain, so these updates are being made proactively to mitigate that risk. While updating the project, push notifications are being implemented to keep the app updating even when the application is no longer running in the background. Originally, push notifications were deemed out of scope, as an original requirement was to not track any user information. Feedback about the app has suggested that users are willing to opt into some obfuscated level of tracking to incorporate this push notification functionality. Usage will be tracked by non-identifying device IDs and no personal information about users will be tracked.

February 2026 Update: Apple approval was granted but the upgrade path requiring users to uninstall the old application and reinstall the new application was not optimal. Working to build a deployment method where the new application will appear in the App Store as an "update" to the existing application instead of having users potentially confused by two versions of the application being able to be installed side by side. Release will proceed as soon as this is accomplished.

Consultant/Expert Management Application Update:

The Consultant/Expert Management Application (CEMA) was developed by Board staff in 2017 to track the Medical Consultants and Experts that the Board contracts with to review complaints. The application replaced a prior system that only tracked details about Medical Experts and required an overhaul to keep up with technological standards of the time. Since that time, Board staff have made many minor enhancements CEMA. Recent changes in hourly rates and training requirements for Medical Consultants and Experts, needs to automate parts of the contracting process, and application security evolvement presented the opportunity to rebuild CEMA to meet these new requirements. While the core functionality will remain the same, the system is being rebuilt to modernize the application and add efficiencies for the analysts that use the application and the Medical Consultants and Experts that contract with the Board.

February 2026 Update: Enhancements for the hourly rates by specialty, training requirements, automation of the contract renewal notifications and security enhancements are with the Consultant/Expert Unit for testing. Release is dependent on testing results but will proceed after approval by the program.

Direct Online Certification Submission (DOCS) Update:

The Direct Online Certification Submission (DOCS) service is a secure, fast, and reliable online document delivery system that allows medical schools and postgraduate training programs to submit certain primary-source licensing documents to the Board.

February 2025 Update: As of January 1, 2026, 1,686 (+102) Medical School Users representing 871 (+38) Medical Schools world-wide and 7,582 (+471) Postgraduate Training Program Users representing 7,970 (+488) Postgraduate Training Programs at 1,010 (+20) Facilities are currently registered in DOCS.

More than 152,781 (+6,201) documents have been uploaded for 34,510 (+958) applicants since launching the platform:

Applicant Documents Uploaded by Month
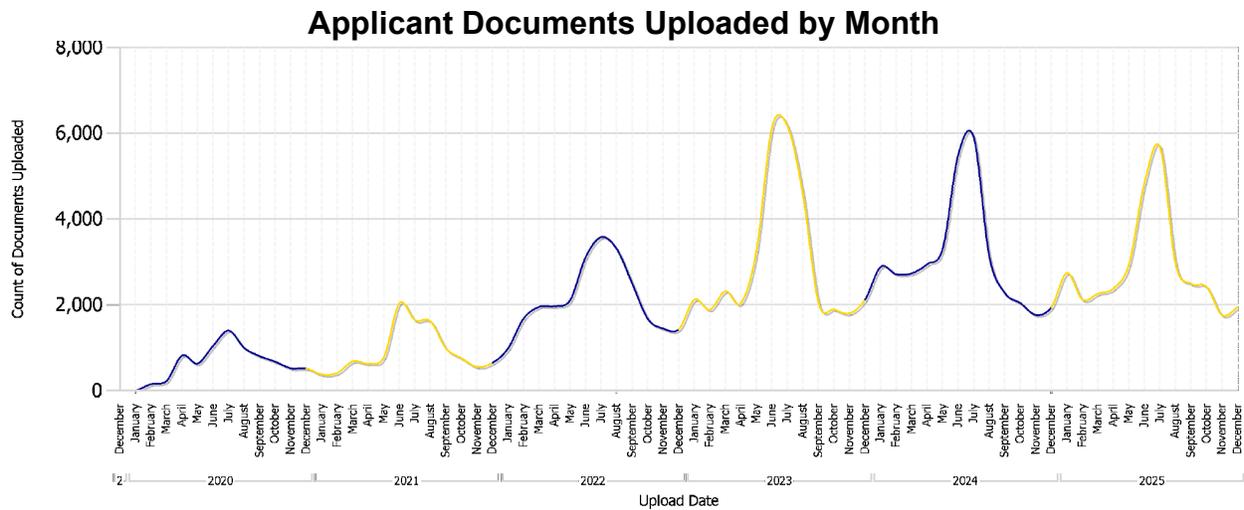
More than 4,944 (+925) documents have been uploaded for 4,186 (+763) licensees since January 1, 2025, when the platform enhancements were launched to allow licensee document uploads:

Licensee Documents Uploaded by Month
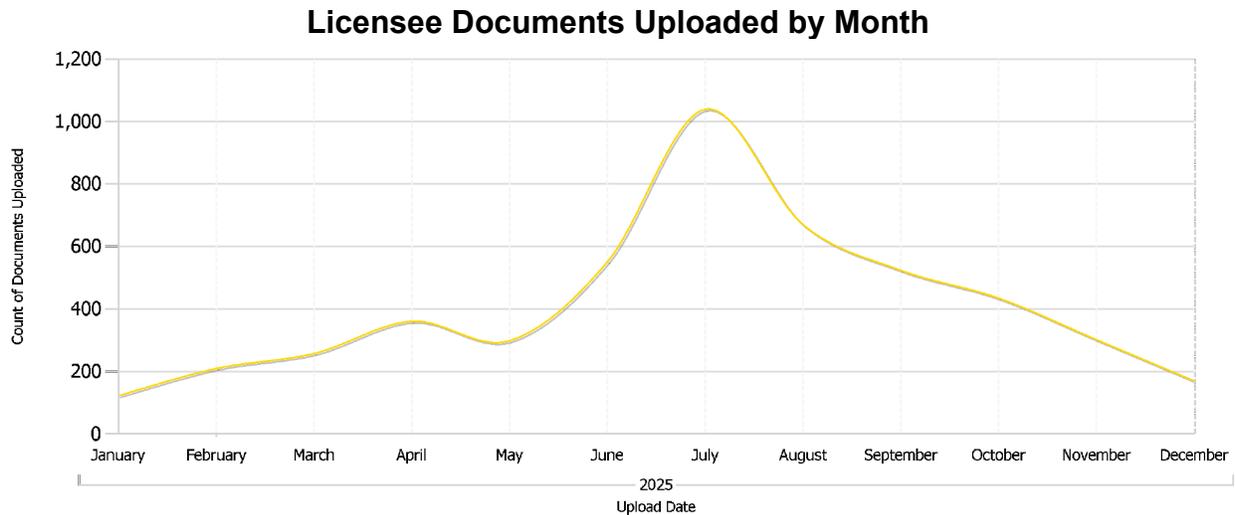
Volunteer Physician Registry Update:

The Volunteer Physician Registry (VPR) is intended to be used by clinics or other entities seeking volunteer physicians. Physicians in the registry have provided information about areas where they would be willing to volunteer and have provided details regarding their area of practice and foreign language proficiency. Originally implemented in 2006 and most recently refreshed in December 2018, the web application was due for cosmetic and technological improvements to ensure compliance with State of California and accessibility standards. For security and support considerations, the existing volunteer accounts will be migrated to the new system, but license authentication will be performed using the IDEAL (Interoperability Development Effort to Authenticate Licensees) interface.

**February 2026 Update:** Active volunteer count has increased to 941 (+5).

HCAI Survey Update:

AB 133 authorizes the California Department of Health Care Access and Information (HCAI), formally the California Office of Statewide Health Planning and Development (OSHPD), to collect additional workforce data from healing arts boards through California Business and Professions Code 502 effective July 1, 2022. Additional data collection items include: Anticipated year of retirement, physical address of primary and secondary practice locations and types, date of birth, gender identity, National Provider Identifier (NPI), work hours, sexual orientation, and disability status.

February 2026 Update: Work for AB 91 (Harabedian, Chapter 357 of 2025 Statutes) is currently on hold pending coordination with Department of Consumer Affairs (DCA) Office of Information Services (OIS), since the delayed implementation date is not until January 1, 2028. The HCAI survey will require updates to change the way the Race and Ethnicity questions are structured and add additional responses. HCAI has also asked for changes to the Sexual Orientation and Gender Identity questions that will be made at the same time. The deployment of the updates will be coordinated with OIS for a date to be determined.

Over 270,140 (+23,978) surveys have been completed, representing 87.03% (+1.81%) of the Renewed and Current Physician and Surgeon population.

HCAI Surveys Completed Per Month
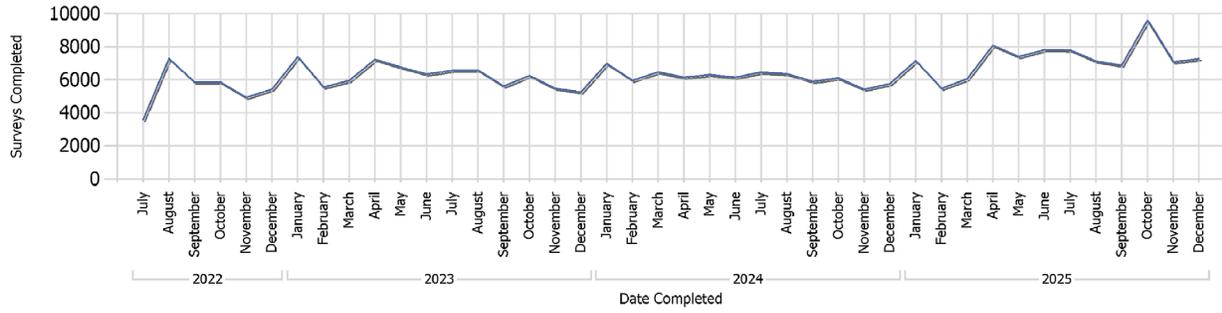
HCAI Survey Response Rate for Current Licensing Population

Survey Completed
141,544
87.03%

No Survey
21,094
12.97%
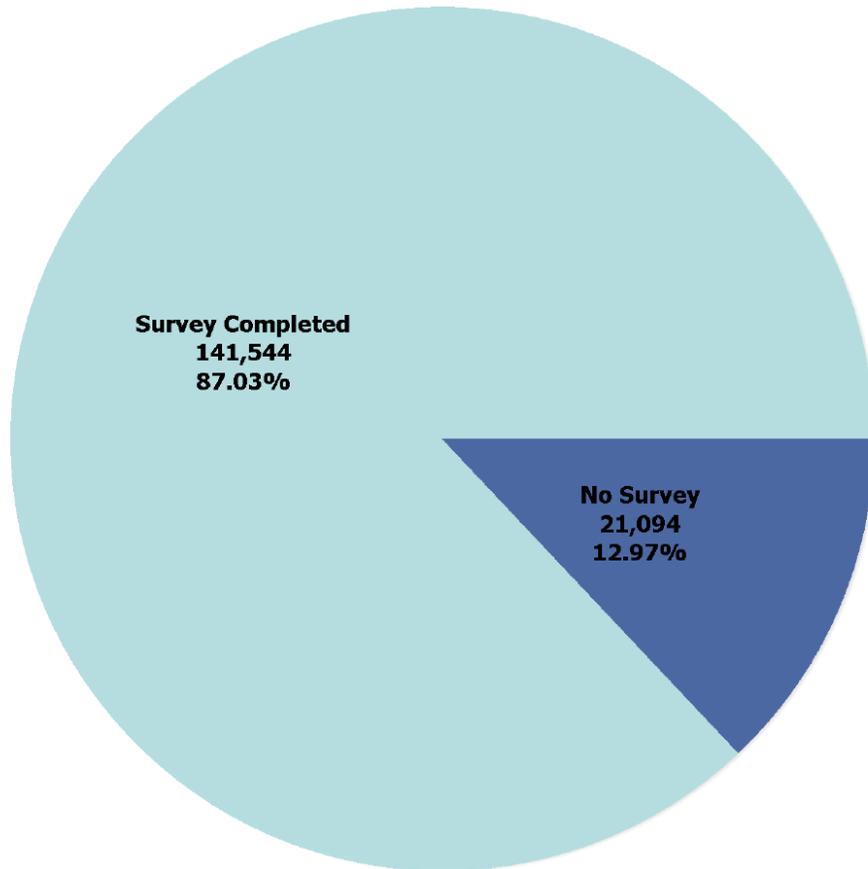
BreEZe Online Complaint Form Redesign Update:

The Information Systems Branch (ISB) Breeze Business Integration team is working with the Department of Consumer Affairs (DCA) Office of Information Services (OIS) BreEZe team to implement the recent changes made to the Board's hard copy Complaint Form to the BreEZe Online Complaint Form. The goal of these updates is to streamline the forms to attempt to collect as much relevant data and medical releases as possible in the early stages of the complaint submission process. The paper form updates have led to an increase in initially required information and releases being provided with complaints submitted in hard copy. On May 5, 2021, the BreEZe Online Complaint Form was updated to warn individuals who submit a complaint anonymously, that if the Board is unable to obtain documentation or evidence of the complaint allegations, the complaint may not be able to be pursued and it will not be possible to provide updates regarding the complaint. The goal is to encourage complainants to provide their contact information so additional communication can occur if necessary. Additional enhancements are still in the development stages as the Board works with OIS to continue to improve BreEZe. ISB is currently working with the vendor on changing some of the BreEZe screens core functionality to make the process more user friendly for complainants.

February 2026 Update: Per the DCA OIS, additional issues were found with the solution developed by the vendor and the code was held back from inclusion in the October 23, 2025, BreEZe release. OIS hopes the code can be incorporated now in early March 2026 and configured for release in a subsequent release, most likely to mid-2026.

BreEZe Electronic Only Renewal Notice Project:

The Information Systems Branch (ISB) Breeze Business Integration team is working with the MBC Executive and Licensing leadership on a project to phase out initial paper license renewals to achieve mandated budget reductions and increase efficiency. The board will replace the multiple page paper renewal packet currently mailed to all licensees if they have not renewed by 120 days prior to the expiration date, with a single page letter notifying licensees that their license is ready for online renewal and future notices will only be sent via email. It will also reenforce the importance of licensees keeping their email address up to date with the Board as required by law. Licenses expiring June 2025 will be the first group to not receive the paper renewal packet. Licensees are currently notified 180 days prior to their license expiration and if they successfully renew before the 120-day milestone, they do not receive any additional paper notices.

For the 2024 baseline, 85+% of renewals were performed online and approximately 50% of those online renewals were completed more than 120 days prior to the expiration date.

February 2026 Update: Updated informational charts and tables below.

Renewal Method Percentage
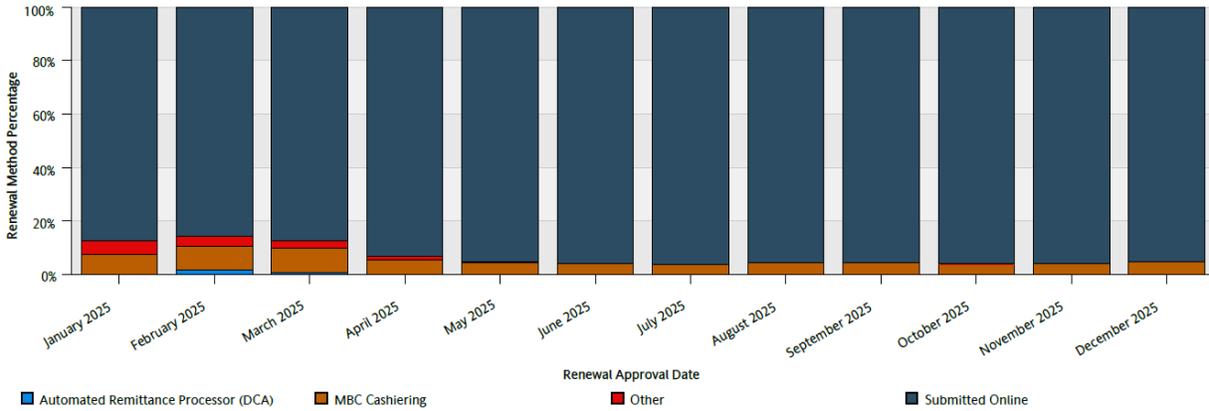
| Renewal Method Percentage	January 2025	February 2025	March 2025	April 2025	May 2025	June 2025	July 2025	August 2025	September 2025	October 2025	November 2025	December 2025	Average
Automated Remittance Processor (DCA)		1.68%	0.72%		0.17%	0.04%		0.02%	0.02%				0.44%
MBC Cashiering	7.48%	9.01%	9.19%	5.47%	4.23%	4.01%	3.75%	4.47%	4.66%	3.99%	4.25%	4.74%	5.44%
Other	5.04%	3.68%	2.70%	1.33%	0.40%	0.19%	0.14%	0.05%		0.02%		0.02%	1.36%
Submitted Online	87.48%	85.63%	87.38%	93.20%	95.20%	95.75%	96.11%	95.47%	95.33%	95.99%	95.75%	95.24%	93.21%

Online Renewal Timeframes
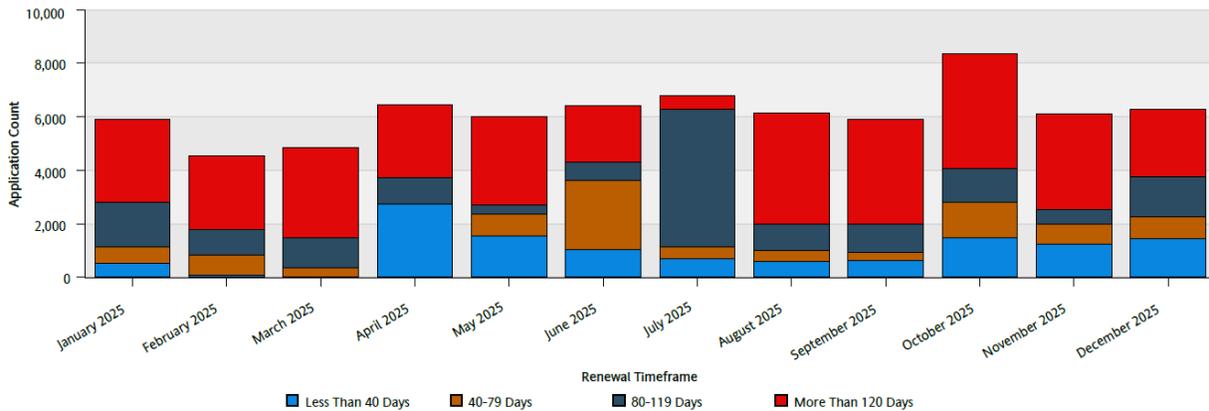
Application Count	January 2025	February 2025	March 2025	April 2025	May 2025	June 2025	July 2025	August 2025	September 2025	October 2025	November 2025	December 2025	Total
Less Than 40 Days	511	72	9	2,756	1,552	1,054	682	587	617	1,479	1,235	1,455	12,009
40-79 Days	635	754	346		807	2,568	460	415	332	1,331	745	814	9,207
80-119 Days	1,667	959	1,127	962	337	671	5,128	984	1,040	1,271	549	1,481	16,176
More Than 120 Days	3,084	2,757	3,366	2,722	3,319	2,110	518	4,142	3,928	4,287	3,594	2,533	36,360
Total	5,897	4,542	4,848	6,440	6,015	6,403	6,788	6,128	5,917	8,368	6,123	6,283	73,752

"Print Yourself" Wallet License with QR Codes Update:

Allowing licensees to print their own Wallet License Cards saves the Board resources in the generating, printing, and mailing of the plastic cards, which are not as common or useful as they once were. Licensees are able to forward the PDF version of their Wallet License to their employers and others as needed and are instantly available instead of the 4-6 weeks it previously took for plastic cards to reach licensees. QR Codes allow anyone to scan the license to instantly view the licensee's up to date DCA Search profile.

February 2026 Update: 294,952 (+25,635) Wallet Licenses have been generated.

Wallet Cards Generated Per Month
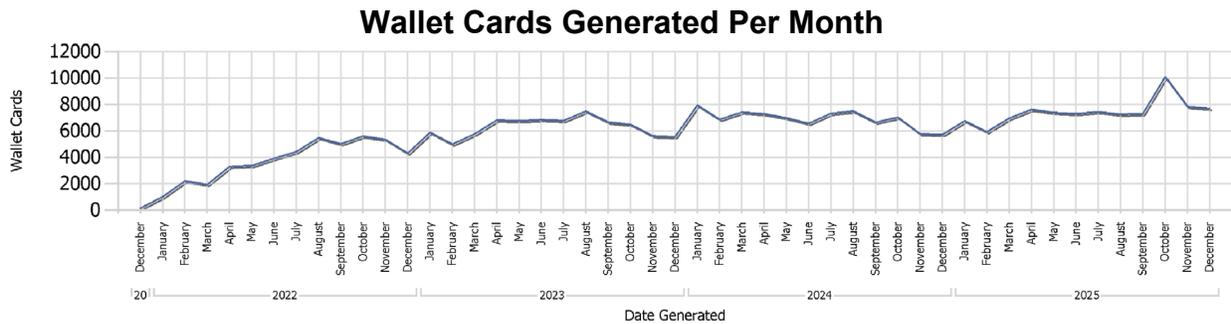
Continuing Medical Education Audit Enhancements:

Since the Board moved to the Breeze system in 2013, the Continuing Medical Education (CME) Audit process has occurred through a multitude of different scripts, jobs, procedures and processes. The first Breeze implementation randomly selected licensees for audit and extracted information used to manually mail-merge letters outside of the Breeze system to be printed and mailed to licensees for them to provide their response (also through postal mail) back to the Board. Board staff would then scan the documents and save them in the system. Eventually, the Board provided an email address for licensees to electronically submit their responses to the Board.

After SB 806 became effective on January 1, 2022, and required licensees to provide an email address to the Board no later than July 1, 2022, the CME Audit procedures were enhanced to start using licensees' emails to notify them that they were randomly selected for the CME audit. To further streamline the process for licensees and internal staff, transactions are being developed in the Breeze system, similar to renewal transactions, that will allow a licensee randomly selected for the CME audit process to receive an email notifying them that a transaction is open in the Breeze system where they can upload their CME audit documentation. That documentation is automatically stored in the database which triggers a notification for internal staff to review the documentation and determine if the individual has satisfied their CME audit. Based on the determination by internal staff, additional automatic emails will notify the licensee that their CME audit is complete. The status of their CME audit process will be visible in their Breeze dashboard. We expect this enhancement will make the process easier on

licensees and reduce the amount of time it takes for internal staff to process CME audit responses.