Sunset Review Oversight Report

Part I

Midwifery Program

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.

To help guide the Board on midwifery issues, effective January 1, 2007, the Board was mandated to have a Midwifery Advisory Council (MAC). The MAC is composed of three LMs (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 and on which to advise the Board on, and the MAC also identifies issues and requests approval from the Board to propose solutions to 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, provides updates on the issues and outcomes of MAC meetings, and requests Board approval for future agenda items.

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Major Legislation/Regulations Since the Last Sunset Review

Refer to Full 2026 Medical Board Sunset Report.

Section 2 – Fiscal and Staff Issues

The Licensed Midwifery Program is funded through the collection of fees. The fees collected for the program go into the Licensed Midwifery Fund. LMs submit an application and initial license fee of $450 and have a biennial renewal fee of $300. Renewal fees constituted approximately 83 percent of fee revenue received in the LM Fund over the last four fiscal years.

In addition to revenue collection, program expenses and loans are paid out of the LM fund. When the program was implemented in 1994, it received a $70,000 General Fund loan to ensure solvency. This loan was repaid over ten years and paid in full in 2004.

Beginning in FY 2014/15, an appropriation was established to fund the personnel needed to administer the program. Starting in FY 2017/18, the Board began requesting repayment from the program for the staff resources to perform the licensing and enforcement functions. In 2018/19 the fund's budget authority increased from $13,000 to its current level of $120,000.

The fund has a structural imbalance, as yearly expenditure exceed yearly revenue. Current application and renewal fee amounts are based on recommendations from an independent 2020 fee study, which the Legislature approved through the Board's 2022 Sunset Review process. However, these fee amounts do not generate sufficient revenue to support program operations. Further, the minor growth in the LM licensee population outlined in Table 6 provides no material impact on long-term solvency at current fee levels.

Table 4 illustrates that total fee revenue ranged from $81,000 to $98,000 over the last four fiscal years (FY 2022/23 through FY 2025/26), far below the fund's $120,000 budget authority [please see the fund condition in Table 2(a) for details]. The fund expensed the full $120,000 budget authority in each of the last three fiscal years. Consequently, the fund experienced a 37% reduction in year-end fund balance from FY 2022/23 through FY 2025/26. If the current fee structure is unchanged, the fund is projected to be insolvent by FY 2029/30. Although the Budget Act authorizes the Licensed Midwifery Fund to expend up to $120,000 annually, this amount is insufficient to support the resources required to operate the program. The Board's shared services workload and the associated costs for administering the licensing and enforcement functions of the program exceed the current budget authority. The fund will need an increase in budget authority to align with actual costs and a fee increase to ensure solvency [for more information, please see Section 10, New Issues].

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There have been no General Fund loans from the Licensed Midwifery Fund.

Table 2(a) - Fund Condition Midwifery (Dollars in Thousands)					**Status Quo As of 10/22/2026**			
(Dollars in Thousands)	FY 22/23	FY 23/24	FY 24/25**	FY 25/26***	FY 26/27 (CY)	FY 27/28 Pre GB*	FY 28/29	FY 29/30
Beginning Balance	$258	$223	$231	$186	$141	$78	$42	$4
Prior-Year Adjustments	$2	$0	$-48	$2	$-30	$0	$0	$0
Total Revenue	$87	$87	$98	$81	$97	$94	$92	$92
Total Resources	$347	$310	$281	$269	$208	$172	$134	$96
Budget Authority	$120	$120	120	$120	$120	$120	$120	$120
Program Expenditures (State Operations)	$116	$72	$88	$120	$120	$120	$120	$120
Statewide General Administrative Expenditures (Pro Rata) (State Operations)	$8	$7	$7	$8	$10	$10	$10	$10
Fund Balance	$223	$231	$186	$141	$78	$42	$4	$-34
Months in Reserve	**33.9**	**29.2**	**17.4**	**13.0**	**7.2**	**3.9**	**0.4**	**-3.1**

** Pre Governor's Budget.*
***The prior-year adjustment of –$48,000 in 2024/25 reflects the remaining program expenditures incurred in FY 2023/24 (totaling $120,000, composed of $72,000 and $48,000).*
****A prior-year adjustment of -$30,000 will be reflected in FY 2026/27 to account for the remaining FY 2024/25 program expenditures incurred in 2024/25 (totaling $120,000, composed of $88,000, $30,000, and a $2,000 adjustment in FY 2025/26)*

- *Note: Prior-year adjustments were required in FYs 2024-25 and 2025/26, and will be required in FY 2026/27 because year-end expense transfers were not completed within the year-end accounting window. Assumes workload revenue projections are realized in CY and ongoing. Assumes yearly expenditures reach the full budget authority from FY 2025/26 and ongoing.*

Under current law, the Board estimates that the LM's budget authority must be increased by $260,000, from $120,000 to $380,000, to align with actual expenditures. Additionally, a two-step fee increase is needed to ensure sufficient revenue to support ongoing program operations. Initial licensing and renewal fees would increase to $1,450 effective January 1, 2028, and to $1,620 effective January 1, 2030, and ongoing. Table 2(b) reflects the Midwifery Fund Condition with the estimated revenue generated from the proposed fee increases [for

more information, please see Section 10, New Issues].

Table 2(b)- Fund Condition Midwifery (Dollars in Thousands)					Proposed Fee Increase As of 10/22/2026			
(Dollars in Thousands)	FY 25/26	FY 26/27 (CY)	FY 27/28 Pre GB*	FY 28/29	FY 29/30**	FY 30/31	FY 31/32	FY 32/33
Beginning Balance	$186	$141	$78	$184	$143	$124	$125	$125
Prior-Year Adjustments	$2	$-30	$0	$0	$0	$0	$0	$0
Total Revenue w/Fee Increases (Effective 1/1/2028 & 1/1/2030)***	$81	$97	$236	$366	$388	$409	$409	$409
Total Resources	$269	$208	$314	$550	$531	$533	$534	$534
Current Budget Authority	$120	$120	$120	$120	$120	$120	$120	$120
Estimated Budget Authority Increase	$-	$-	$260	$260	$260	$260	$260	$260
Total Proposed Budget Authority	$120	$120	$380	$380	$380	$380	$380	$380
Program Expenditures (State Operations)	$120	$120	$120	$380	$380	$380	$380	$380
Statewide General Administrative Expenditures (Pro Rata) (State Operations)	$8	$10	$10	$27	$27	$28	$29	$29

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Fund Balance	$141	$78	$184	$143	$124	$125	$125	$125
Months in Reserve****	**13.0**	**7.2**	**5.4**	**4.2**	**3.6**	**3.7**	**3.7**	**3.7**

** Pre Governor's Budget.*
** Step One Fee Increase effective 1/1/2028. Fee Amount: $1,450 (Initial and Renewal Fees).*
*** Step Two Fee Increase effective 1/1/2030 and ongoing. Fee Amount: $1,620 (Initial and Renewal Fees).*
**** Reflects total estimated revenue with the proposed two-step fee increase.*
*****Months in reserve are based on the relationship between the year-end fund balance and the following year's projected monthly expenditures. As expenditures increase, months in reserve may initially decline even when fund balances increase, as seen in FY 2027/28.*

- *Note: Prior-year adjustments were required in FYs 24-25 and 25-26, and will be required in FY 26-27 because year-end expense transfers were not completed within the year-end accounting window. Assumes workload revenue projections are realized in CY and ongoing. Assumes yearly expenditures reach the full budget authority from FY 2025/26 and ongoing.*

Further, the Board is examining the impact of creating a Licensed Midwifery Committee (LMC). The Board estimates an additional yearly cost of $246,800 dollars for five committee members and an executive officer. Further, the Board estimates that the LM's budget authority must be increased by $503,000, from $120,000 to $623,000, to align with actual and additional projected committee expenditures. Additionally, a two-step fee increase would be needed to ensure sufficient revenue to support ongoing LMC operations. Initial licensing and renewal fees would need to increase to $2,390 effective January 1, 2028, and to $2,670 effective January 1, 2030, and ongoing. Table 2(c) reflects the Midwifery Fund Condition with the estimated revenue generated from the proposed fee increases and budget authority required for the LMC [for more information, please see Section 10, New Issues].

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Table 2(c)- Fund Condition Midwifery (Dollars in Thousands)					Proposed Fee Increase w/Committee As of 10/22/2026			
(Dollars in Thousands)	FY 25/26	FY 26/27 (CY)	FY 27/28 Pre GB*	FY 28/29	FY 29/30**	FY 30/31	FY 31/32	FY 32/33
Beginning Balance	$186	$141	$78	$307	$243	$213	$215	$217
Prior-Year Adjustments	$2	$-30	$0	$0	$0	$0	$0	$0
Total Revenue w/Fee Increases (Effective 1/1/2028 & 1/1/2030)***	$81	$97	$359	$602	$637	$672	$672	$672
Total Resources	$269	$208	$437	$909	$880	$885	$887	$889
Current Budget Authority	$120	$120	$120	$120	$120	$120	$120	$120
Estimated Budget Authority Increase	$-	S-	$503	$503	$503	$503	$503	$503
Total Proposed Budget Authority	$120	$120	$623	$623	$623	$623	$623	$623
Program Expenditures (State Operations)	$120	$120	$120	$623	$623	$623	$623	$623
Statewide General Administrative Expenditures (Pro Rata) (State Operations)	$8	$10	$10	$43	$44	$47	$47	$47
Fund Balance	$141	$78	$307	$243	$213	$215	$217	$219

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Months in Reserve****	**13.0**	**7.2**	**5.5**	**4.4**	**3.8**	**3.8**	**3.9**	**3.9**

** Pre Governor's Budget.*
** Step One Fee Increase effective 1/1/2028. Fee Amount: $2,390 (Initial and Renewal Fees).*
*** Step Two Fee Increase effective 1/1/2030 and ongoing. Fee Amount: $2,670 (Initial and Renewal Fees).*
**** Reflects total estimated revenue with the proposed two-step fee increase.*
*****Months in reserve are based on the relationship between the year-end fund balance and the following year's projected monthly expenditures. As expenditures increase, months in reserve may initially decline even when fund balances increase, as seen in FY 2027/28.*

- *Note: Prior-year adjustments were required in FYs 24-25 and 25-26, and will be required in FY 26-27 because year-end expense transfers were not completed within the year-end accounting window. Assumes workload revenue projections are realized in CY and ongoing. Assumes yearly expenditures reach the full budget authority from FY 2025/26 and ongoing.*

Table 4 - Fee Schedule and Revenue

Fee	Current Fee Amount	Statutory Limit	FY 22/23 Revenue	FY 23/24 Revenue	FY 24/25 Revenue	FY 25/26 Revenue	% of Total Revenue*
LICENSED MIDWIFERY FUND							
Licensed Midwife Duplicate Cert Fee	$25.00	$25.00	$0	$0	$0	$0	N/A
Licensed Midwife Application and Initial License Fee (BPC 2520) (16 CCR 1379.5)	$450.00	$450.00	$13,000	$13,000	$16,000	$8,000	16%

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Licensed Midwife Biennial Renewal Fee (BPC 2520) (16 CCR 1379.5)	$300.00	$300.00	$67,000	$63,000	$70,000	$63,000	83%
Licensed Midwife Delinquency Fee (BPC 2520) (16 CCR 1379.5)	$50.00	$50.00	$1,000	1,000	1,000	1,000	1%
Licensed Midwifery Penalty Fee	$150.00	$150.00	$0	$0	$1,000	$0	0%
*Not including revenue from Investment Income - Surplus Money Investments							

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Section 3 – 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 after receiving an application whether the application is complete and accepted for filing or is deficient. If the application is deficient, the Board's notice will identify what specific information is required to cure each deficiency. 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, both application volume and processing times remained consistent during the four-year review period.

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

Table 6 - Licensee Population					
		FY 22/23	FY 23/24	FY 24/25	FY 25/26
Licensed Midwife	Active[a]	492	474	494	488
	Delinquent/Expired	109	85	111	119
	Out-of-State	-	42	46	41
	Out-of-Country	-	1	1	1
	Retired Status *if applicable*	-	15	14	21
	Inactive	-	9	7	3
	Other	-	0	0	0

[a] Active status is defined as able to practice. This includes licensees that are renewed, current, and active.

Table 7a. Licensing Data by Type - Licensed Midwife										
	App Type	Received	Approved /Issued	Closed	Pending Applications			Application Process Times		
					Total (Close of FY)	Complete (within Board control)*	Incomplete (outside Board control)*	Complete Apps	Incomplete Apps	Total (Close of FY)
FY 22/23	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	28	34		5	N/A	N/A	12	43	42
	(Renewal)	-	234	-	-	N/A	N/A	-	-	16
	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

FY 23/24	(License)	29	26		7	N/A	N/A	12	33	31
	(Renewal)	-	219	-	-	N/A	N/A	-	-	17
FY 24/25	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	36	34		10	N/A	N/A	14	39	38
	(Renewal)	-	245	-	-	N/A	N/A	-	-	35
FY 25/26	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	18	21		1	N/A	N/A	10	30	26
	(Renewal)	-	226	-	-	N/A	N/A	-	-	28
* Optional. List if tracked by the board.										

Table 7b. License Denial				
	FY 22/23	FY 23/24	FY 24/25	FY 25/26
License Applications Denied (no hearing requested)	0	0	0	0
SOIs Filed	0	1	0	0
Average Days to File SOI (from request for hearing to SOI filed)	0	202	0	0
SOIs Declined	0	0	0	0
SOIs Withdrawn	0	0	0	0
SOIs Dismissed (license granted)	0	0	0	0
License Issued with Probation / Probationary License Issued	0	0	0	0
Average Days to Complete (from SOI filing to outcome)	0	0	0	516

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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.

Table 8(a). Examination Data		
California Examination		
	License Type	Licensed Midwife
	Exam Title	North American Registry for Midwives Examination
FY 2022/23	Number of Candidates	283
	Overall Pass %	80
	Overall Fail %	20
FY 2023/24	Number of Candidates	333
	Overall Pass %	82
	Overall Fail %	18
FY 2024/25	Number of Candidates	308
	Overall Pass %	77
	Overall Fail %	23
FY 2025/26	Number of Candidates	286
	Overall Pass %	75
	Overall Fail %	25
	Date of Last OA	2024
	Name of OA Developer	Professional Testing Corporation
	Target OA Date	N/A

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 verifications (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

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institution or agency must provide a detailed narrative of the events and circumstances leading to the action(s).

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

All reports concerning the applicant's criminal history, prior disciplinary actions, or other unlawful acts 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 to establish the identity of the applicant and 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 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 previous licenses held, and the Board must receive an LV directly from each jurisdiction's licensing agency verifying the applicant's licensure information and whether any action has been taken against the license. If the LV indicates that an action has been taken, certified documents from the jurisdiction's licensing agency 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 after conducting an independent, comprehensive assessment of 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 Bureau for Private Postsecondary Education has no role in the Board's approval of

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midwifery schools.

Currently, there are seven 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 reassessment 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 not yet received an application for approval of an international midwifery school.

Continuing Education/Competency Requirements

Pursuant to 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 within the scope of midwifery practice, 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, as those records 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 five 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 conducts a review to determine compliance with the law.

If an LM fails the audit either by not responding or by 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.

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

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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).

Continuing Education			
Type	**Frequency of Renewal**	**Number of CE Hours Required Each Cycle**	**Percentage of Licensees Audited**
Licensed Midwife	Every 2 Years	36	5%

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Section 4 – Enforcement Program

The number of complaints involving licensed midwives remained relatively stable during the four-year review period, with 20 complaints received in FY 2022–23, 40 in FY 2023–24, 38 in FY 2024–25, and 40 in FY 2025–26. Disciplinary outcomes during the same period included surrenders, probationary actions, and public reprimands. In FY 2025–26, there were no revocations or surrenders imposed and no public reprimands were issued, but there was one probation action. The Board uses licensed midwives as consultants under BPC section 2519.5 and subject matter experts in enforcement matters involving licensed midwives.

Over the last four years, disciplinary activity remained limited, reflecting the relatively small size of the licensed midwife population and complaint caseload. Outcomes varied from year to year, with disciplinary actions consisting primarily of surrenders and probationary actions.

During the four-year review period, the Board filed five accusations against licensed midwives. No accusations were filed against LMs in FY 2023–24, and two accusations were filed in each of FY 2024–25 and FY 2025–26.

Most complaints received regarding LMs relate to the care provided during labor and delivery. The Board also receives complaints regarding the unlicensed practice of midwifery.

During the most recent two fiscal years, FY 2024-25 and FY 2025-26, the Board accepted two stipulations. Both were recorded in FY 2024-25, with none recorded in FY 2025-26.

Table 8. Enforcement Statistics

	FY 22/23	FY 23/24	FY 24/25	FY 25/26
COMPLAINTS				
Intake				
Received	19	40	37	40
Closed without Referral for Investigation	0	0	0	0
Referred to INV	20	40	36	39

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Pending (close of FY)	0	0	1	2
Conviction / Arrest				
CONV Received	1	0	1	0
CONV Closed Without Referral for Investigation	0	0	1	0
CONV Referred to INV	1	0	0	0
CONV Pending (close of FY)	0	0	0	0

Source of Complaint [1]				
	FY 22/23	FY 23/24	FY 24/25	FY 25/26
Public	9	14	21	29
Licensee/Professional Groups	0	17	7	0
Governmental Agencies	4	4	1	3
Internal	1	1	1	1
Other	0	0	1	3
Anonymous	6	4	7	4
Average Time to Refer for Investigation (from receipt of complaint/conviction to referral for investigation)	4 Days	6 Days	9 Days	10 Days
Average Time to Closure (from receipt of complaint / conviction to closure at intake)	0 Days	0 Days	0 Days	0 Days
Average Time at Intake (from receipt of complaint / conviction to closure or referral for investigation)	4 Days	6 Days	9 Days	10 Days
INVESTIGATION				
Desk Investigations				
Opened	15	35	37	33
Closed	13	36	34	34
Average days to close (from assignment to investigation	188 Days	98 Days	135 Days	66 Days

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closure)				
Pending (close of FY)	12	12	15	26
Non-Sworn Investigation				
Opened	0	0	0	0
Closed	0	0	0	0
Average days to close (from assignment to investigation closure)	0 Days	0 Days	0 Days	0 Days
Pending (close of FY)	0	0	0	0
Sworn Investigation				
Opened	4	10	11	3
Closed	6	8	8	4
Average days to close (from assignment to investigation closure)	682 Days	250 Days	375 Days	516 Days
Pending (close of FY)	7	10	9	10
All investigations				
Opened	20	40	36	39
Closed	16	30	31	37
Average days for all investigation outcomes (from start investigation to investigation closure or referral for prosecution)	207 Days	115 Days	179 Days	141 Days
Average days for investigation closures (from start investigation to investigation closure)	185 Days	93 Days	129 Days	66 Days
Average days for investigation when referring for prosecution (from start investigation to referral for prosecution)	366 Days	420 Days	904 Days	620 Days
Average days from receipt of complaint to investigation closure	210 Days	175 Days	135 Days	75 Days
Pending (close of FY)	20	22	26	36

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DIVISION OF INVESTIGATION				
Average Days to Refer to Division of Investigation (from complaint receipt to referral for investigation)	55	108	145	117
Average Days for Division of Investigation to Complete (from DOI receipt to return to program of referral)	662	250	375	516
Average Days from Return to Referral to AG (from DOI investigation to AG referral)	97	0	88	74
CITATION AND FINE				
Citations Issued	2	1	0	1
Average Days to Complete (from complaint receipt / inspection conducted to citation issued)	786 Days	12 Days	0 Days	7 Days
Amount of Fines Assessed	$1,050	$500	$0	$750
Amount of Fines Reduced, Withdrawn, Dismissed	$0	$0	$0	$0
Amount Collected	$0	$350	$0	$0
CRIMINAL ACTION				
Referred for Criminal Prosecution	2	1	1	0
ACCUSATION				
Accusations Filed	1	0	2	2
Accusations Declined	1	0	0	1
Accusations Withdrawn	0	0	0	0
Average Days from Referral to Accusations Filed* (from AG referral to Accusation filed)	77 Days	90 Days	80 Days	163 Days
INTERIM ACTION				
ISO & TRO Issued	0	0	0	0
PC 23 Orders Issued	0	0	0	0
Other Suspension/Restriction Orders Issued	1	1	0	0

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Referred for Diversion	0	0	0	0
Petition to Compel Examination Ordered	0	0	0	0
DISCIPLINE				
AG Cases Initiated (cases referred to the AG in that year)	2	2	2	5
AG Cases Pending Pre-Accusation (close of FY)	0	3	4	7
AG Cases Pending Post-Accusation (close of FY)	3	2	3	3
DISCIPLINARY OUTCOMES				
Revocation	0	0	0	0
Surrender	2	1	1	0
Suspension only	0	0	0	0
Probation with Suspension	0	0	0	0
Probation only	3	1	0	1
Public Reprimand / Public Reproval / Public Letter of Reprimand	2	0	0	0
Other	0	0	0	0
DISCIPLINARY ACTIONS				
Proposed Decision	0	0	0	0
Default Decision	0	0	0	0
Stipulations	7	2	1	2
Average Days to Complete After Accusation (from Accusation filed to imposing formal discipline)	455	845	557	303
Average Days from Closure of Investigation to Imposing Formal Discipline	439	998	264	352
Average Days to Impose Discipline (from complaint receipt to imposing formal discipline)	1232	1858	576	1347
PROBATION				
Probations Completed	1	2	0	1

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Probationers Pending (close of FY)	3	2	2	0
Probationers Tolled *	0	0	0	0
Petitions to Revoke Probation / Accusation and Petition to Revoke Probation Filed	0	0	0	0
SUBSEQUENT DISCIPLINE				
Probations Revoked	0	0	0	0
Probationers License Surrendered	1	2	0	0
Additional Probation Only	0	0	0	0
Suspension Only Added	0	0	0	0
Other Conditions Added Only	0	0	0	0
Other Probation Outcome	0	0	0	0
SUBSTANCE ABUSING LICENSEES				
Probationers Subject to Drug Testing	no sub abusing licensees	no sub abusing licensees	no sub abusing licensees	no sub abusing licensees
Drug Tests Ordered	0	0	0	0
Positive Drug Tests	0	0	0	0
PETITIONS				
Petition for Termination or Modification Granted	0	0	0	0
Petition for Termination or Modification Denied	0	0	0	1
Petition for Reinstatement Granted	0	0	0	0
Petition for Reinstatement Denied	0	0	0	0
DIVERSION				
New Participants	no diversion	no diversion	no diversion	no diversion
Successful Completions				
Participants (close of FY)				
Terminations				

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Terminations for Public Threat				
Drug Tests Ordered				
Positive Drug Tests				

[1] Source of complaint refers to complaints and convictions received. The summation of intake and convictions should match the total of source of complaint.

Table 9. Enforcement Aging						
	FY 22/23	FY 23/24	FY 24/25	FY 25/26	Cases Closed	Average %
Investigations (Average %)						
Closed Within:						
90 Days	10	21	15	24	70	63%
91 - 180 Days	2	6	8	3	19	17%
181 - 1 Year	1	1	3	4	9	8%
1 - 2 Years	1	0	2	5	8	7%
2 - 3 Years	1	0	3	1	5	4%
Over 3 Years	1	0	0	0	1	1%
Total Investigation Cases Closed	16	28	31	37	112	100%
Attorney General Cases (Average %)						
Closed Within:						
0 - 1 Year	0	0	0	1	1	8%
1 - 2 Years	1	1	1	1	4	31%
2 - 3 Years	1	0	0	0	1	8%
3 - 4 Years	5	1	0	0	6	46%
Over 4 Years	1	0	0	0	1	8%

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Total Attorney General Cases Closed	8	2	1	2	13	100%

Mandatory Reporting

Business and Professions Code section 2510 requires hospitals to report to the Board each transfer to a hospital by an LM involving a planned out-of-hospital birth. These reports are not complaints alleging inappropriate treatment; rather, they are mandated reports received by the Board. Each report is reviewed by the Board's Enforcement Program to determine whether further action is warranted.

The Board received the following hospital transfer reports pursuant to BPC section 2510:

- FY 2022/23: 230
- FY 2023/24: 219
- FY 2024/25: 208
- FY 2025/26: 180

The midwifery program does not have a specific complaint intake or investigation timeframe required by statute. Consistent with its consumer protection mandate, the Board evaluates each complaint and report received and strives to initiate and complete investigations as expeditiously as possible while ensuring a thorough review of the facts and circumstances presented.

Citation and Fine

The Board utilizes its citation and fine authority, when appropriate, to address violations that may not warrant formal disciplinary action. Citation and fine authority may be used for matters such as recordkeeping deficiencies, practice violations, and other compliance-related issues within the Board's jurisdiction. During the four-year review period, the Board issued two citations in FY 2022–23, one citation in FY 2023–24, no citations in FY 2024–25, and one

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citation in FY 2025–26.

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.

Table 11. Cost Recovery (dollars in thousands)

	FY 2022/23	FY 2023/24	FY 2024/25	FY 2025/26
Total Enforcement Expenditures*	$309,124	$177,106	$312,188	$208,309 ***
Potential Cases for Recovery **	7	2	1	1
Cases Recovery Ordered	6	2	1	1
Amount of Cost Recovery Ordered	$56,026.81	$95,580	$65,000	$20,000
Amount Collected	$26,324	$10,200	$10,450	$8,088

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* Enforcement expenditures include internal Board shared services, Health Quality Investigations, AGO, and Administrative Hearing expenses. The Licensed Midwifery Program has a yearly budget authority of $120,000 for administrative, licensing, and enforcement expenditures. Once the full authority has been reached, all remaining enforcement expenditures that have not been charged to the LM Fund are absorbed by the Medical Board Contingent Fund budget authority.
** "Potential Cases for Recovery" are those cases in which disciplinary action has been taken based on violation of the applicable license practice act.
***Total year-end enforcement expenditures not available at the time of this report for FY 2025/26. The enforcement expenditure of $208,309 dollars is an estimate.

Table 12. Restitution (dollars in thousands)

	FY 22/23	FY 23/24	FY 24/25	FY 25/26
Amount Ordered	0	0	0	0
Amount Collected	0	0	0	0

Section 5 – Public Information Policies

Refer to Full 2026 Medical Board Sunset Report.

Section 6 – Online Practice Issues

Refer to Full 2026 Medical Board Sunset Report

Section 7 – Workforce Development and Job Creation

Refer to Full 2026 Medical Board Sunset Report.

Section 8 – Current Issues

Refer to Full 2026 Medical Board Sunset Report.

Section 9 – Board Action and Response to Prior Sunset Issues

Refer to issue #3, Section 9, in Part I – Physicians

Section 10 – New Issues

Refer to Full 2026 Medical Board Sunset Report for discussion on the proposed Licensed Midwifery Committee and fee scenarios.

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