



MEDICAL BOARD OF CALIFORNIA

Protecting consumers by advancing high quality, safe medical care.

Licensing Program
2005 Evergreen Street, Suite 1200
Sacramento, CA 95815-5401
Phone: (916) 263-2382
Fax: (916) 263-2487
www.mbc.ca.gov

Gavin Newsom, Governor, State of California | Business, Consumer Services and Housing Agency | Department of Consumer Affairs

LICENSE INFORMATION FOR LICENSED PHYSICIANS FROM MEXICO PILOT PROGRAM

Pursuant to Business and Professions Code section 853, the Medical Board of California (Board) will allow up to thirty (30) licensed physicians specializing in family medicine, internal medicine, pediatrics and obstetrics and gynecology, to practice medicine in California for a period not to exceed three (3) years. The three-year license to practice under the Licensed Physicians from Mexico Pilot Program is nonrenewable.

As an applicant, you are personally responsible for all information disclosed on your application, Forms MP1A – MP1F, and any responses that may have been completed on your behalf by others. An application may be denied based upon omission, falsification or misrepresentation of any item or response on the application or any attachment. The Board considers violations of an ethical nature to be a serious breach of professional conduct.

Each applicant's credentials for licensure in California are reviewed on an individual basis. The Board has the authority to deny licensure based upon an applicant's act of dishonesty, unprofessional conduct, conviction of a crime, or inability to practice medicine safely.

MINIMUM REQUIREMENTS

- License fee - \$900 (nonrenewable).
- Fingerprints – applicants shall have their fingerprints completed at a California Live Scan facility. Applicant will need to use the *Request for Live Scan Service* form that is included in this packet. Refer to the [Office of the Attorney General's website](#) for Live Scan facilities in California.
- Applicant must be licensed, certified or recertified, and in good standing in their medical specialty in Mexico. This certification or recertification shall be performed, as appropriate, by the Consejo Mexicano de Ginecología y Obstetricia, A.C., the Consejo Mexicano de Certificación en Medicina Familiar, A.C., the Consejo Mexicano de Medicina Interna, A.C., or the Consejo Mexicano de Certificación en Pediatría, A.C.
- A passing score on the board review course (in each specialty area) with a score equivalent to that registered by the United States applicants when passing a board review course.
- Family physicians must demonstrate specific documentation (equivalent to U.S. reporting standards) that they have completed fifty (50) live births.
- Obstetricians and gynecologists must be fellows in good standing of the American College of Obstetricians and Gynecologists.
- Passed an interview examination developed by National Autonomous University of Mexico (UNAM).

LICENSE INFORMATION FOR LICENSED PHYSICIANS FROM MEXICO PILOT PROGRAM

- Complete the Board-approved six-month orientation distant learning program.
- Completed English-as-a-second-language (ESL) classes focused on both verbal and written subject matter.
- Enrollment in ESL classes from an approved program in California.
- Enrollment in a six-month externship program where the applicant shall be employed during the Mexico Pilot Program.
- United States Social Security card (valid to work only) or Individual Taxpayer Identification Number (ITIN).
- Employment verification with a nonprofit community health center who has been approved by the Board to participate in the Mexico Pilot Program.

GENERAL INFORMATION

- Please print or type.

Mail Application to:

Medical Board of California
Licensing Program
Attn: Mexico Pilot Program
2005 Evergreen Street, Suite 1200
Sacramento, CA 95815-3831

MEXICO PILOT PROGRAM APPLICANT CHECKLIST

Listed below are the minimum application and supporting materials required for a Mexico Pilot Program applicant to obtain a three-year nonrenewable license. This list is not all-inclusive as additional items may be necessary based on responses provided on the *Application* or information obtained from other entities.

| Application and Fees | |
|---|--|
| Application for Licensed Physician from Mexico Pilot Program | Complete all fields, answer all questions and have the application notarized. All pages (Forms MP1A – MP1F) must be submitted together. |
| License Fee (nonrenewable) | The License Fee is \$900 (nonrenewable). *Currency must be in U.S. dollars. Certified check, cashier's check, personal check, or money order made payable to: Medical Board of California |
| Licensure, Specialty Board and Examination Documentation | |
| Licensure Verification | Applicants must be licensed physicians in Mexico. License verification is required from <u>each</u> state, territory or province and country that has issued the applicant a license. <i>The documentation must be mailed directly from the licensing entity to the Board to be acceptable. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from the licensing entity attesting that the copy is a true and correct copy of the original.</i> |
| Specialty Board Documentation | Applicants must be certified or recertified and in good standing in their medical specialty in Mexico. Applicants are required to provide primary source license verification from one of the specialty boards below to certify their medical specialty. <ul style="list-style-type: none"> • Consejo Mexicano de Ginecología Obstetricia, A.C. • Consejo Mexicano de Certificación en Medicina Familiar, A.C. • Consejo Mexicano de Medicina Interna, A.C. • Consejo Mexicano de Certificación en Pediatría, A.C. <i>The documentation must be mailed directly from the specialty board to the Board to be acceptable. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from the specialty board attesting that the copy is a true and correct copy of the original.</i> |

| MEXICO PILOT PROGRAM APPLICANT CHECKLIST | |
|--|--|
| Board Review Course Scores | Primary source verification from Mexico demonstrating a passing score on the board review course, with a score equivalent to that registered by the United States applicants when passing a board review course. <i>The documentation must be mailed directly from the issuing board to the Board to be acceptable. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from the specialty board attesting that the copy is a true and correct copy of the original.</i> |
| Family Physicians | Family physician applicants must demonstrate specific documentation (equivalent to U.S. reporting standards) that they have completed fifty (50) live births. <i>The Certificate of Documentation of Live Births (MP1F) must be mailed directly from the facility to the Board to be acceptable. The documentation must be on the Board's form, contain a seal from the issuing entity or notarized and be signed by an authorized representative.</i> |
| Obstetricians and Gynecologists | Obstetrics & Gynecology applicants must demonstrate they are fellows in good standing of the American College of Obstetricians and Gynecologists (ACOG). <i>The documentation must be mailed directly from ACOG to the Board to be acceptable. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from ACOG attesting that the copy is a true and correct copy of the original.</i> |
| Interview Examination by National Autonomous University of Mexico (UNAM) | Primary source verification of passing an interview examination developed by UNAM. <i>The documentation must be mailed directly from UNAM to the Board to be acceptable. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from UNAM attesting that the copy is a true and correct copy of the original.</i> |

| MEXICO PILOT PROGRAM APPLICANT CHECKLIST | |
|--|--|
| Education Documentation | |
| Six-Month Orientation Program | <p>Primary source verification of successful completion of the Board-approved six-month orientation distant learning program developed by Natividad Medical Center in Monterey and UNAM.</p> <p><i>The documentation must be mailed directly from UNAM to the Board to be acceptable. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from UNAM attesting that the copy is a true and correct copy of the original.</i></p> |
| Completion of ESL Classes in Mexico | <p>Official transcript from Mexico verifying completion of English-as-a-second-language (ESL) Classes.</p> <p><i>The documentation must be mailed directly from the school in Mexico to the Board to be acceptable. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from the school attesting that the copy is a true and correct copy of the original.</i></p> |
| Proof of Enrollment in ESL Classes in California | <p>Primary source verification of enrollment in ESL classes from an approved program in California. Applicant must be enrolled within thirty days of arrival in the U.S.</p> <p><i>The documentation must be mailed directly from an approved program in California to the Board to be acceptable. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from the approved California program attesting that the copy is a true and correct copy of the original.</i></p> |
| Proof of Enrollment in Six-Month Externship | <p>Primary source verification of enrollment in a six-month externship program affiliated with a medical school in good standing in California, at place of employment.</p> <p><i>The documentation must be mailed directly from the Board-approved clinic and associated hospital to the Board to be acceptable. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from the medical school attesting that the copy is a true and correct copy of the original.</i></p> |

| MEXICO PILOT PROGRAM APPLICANT CHECKLIST | |
|---|--|
| Government Documentation | |
| U.S. Social Security Card / Individual Tax Identification Number | A photocopy of the United States Social Security card (valid to work only) or Individual Tax Identification Number (ITIN). |
| Other | |
| Employment Verification | <p>Applicant must provide proof of employment terms and agreement with a nonprofit community health center that has been approved by the Board to participate in the Mexico Pilot Program.</p> <p><i>The documentation of the employment agreement must be mailed directly from the nonprofit community health center to the Board to be acceptable; form MP1E. The documentation must be on official letterhead, contain a seal from the issuing entity and be signed by an authorized representative. The Board will accept a certified copy with a statement from the employer attesting that the copy is a true and correct copy of the original.</i></p> |
| Explanation to Application Question | This form must be used to provide a detailed written explanation for a “yes” response to a question on the Board’s application. A separate form is required for each question. |