



2014 - 2015 ANNUAL REPORT Medical Board of California

2005 Evergreen Street, Suite 1200, Sacramento, CA 95815 • (916) 263-2389 • www.mbc.ca.gov

Executive Summary

The Medical Board of California (Board) continued its focus on the issues of prescription drug abuse and inappropriate prescribing by concentrating on educational opportunities for physicians. In September 2014, the Board hosted a free continuing medical education (CME) course in Los Angeles on Extended-Release and Long-Acting Opioid Analgesics Risk Evaluation and Mitigation Strategy (ER/LA Analgesics REMS) that was developed by the U.S. Food and Drug Administration. The course was well attended and physicians were able to obtain three CME credits for the three-hour course. In addition, in November 2014, after numerous Prescribing Task Force meetings with interested parties, significant public comment, and discussions with experts in the field of pain management, the Board approved a new document entitled [Guidelines for Prescribing Controlled Substances for Pain](#) (Guidelines). These Guidelines are intended to educate physicians on effective pain management in California by avoiding undertreatment, overtreatment, or other inappropriate treatment of a patient's pain. The Guidelines' primary

objective is improved patient outcomes and reduction of prescription overdose deaths. The new Guidelines contain a significant amount of information and are supplemented with as many resources as practical via the appendices and links to websites that further assist a physician when prescribing controlled substances for pain. Lastly, in May 2015, the Board won State Information Officers Council (SIOC) Awards for both of its public service announcements (PSA), which address the issue of prescription drug abuse and misuse. The [PSA](#) directed to physicians, featuring Board Member Michael Bishop, M.D., won the SIOC Silver Award. The [PSA](#) featuring Olympic gold medalist Natalie Coughlin, directed to consumers, won the SIOC Gold Award.

The Board also continued its goal of transparency for all consumers by sponsoring [Assembly Bill 1886](#) (Eggman, Chapter 285, Statutes of 2014), which changed the requirements for information available on the Board's website regarding physicians. Prior to the passage of this

Executive Summary (continued on page ii)

Current Physician and Surgeon Licenses by County

Data is for physicians with a renewed and current license excluding those in an inactive, retired, or disabled license status. The breakdown of those license statuses is: California - 2,106, Out of State - 4,265, Total - 6,371.

Alameda	5,037	Inyo	43	Monterey	898	San Luis Obispo	795	Trinity	8
Alpine	3	Kern	1,098	Napa	487	San Mateo	2,903	Tulare	506
Amador	63	Kings	127	Nevada	244	Santa Barbara	1,250	Tuolumne	121
Butte	490	Lake	69	Orange	9,856	Santa Clara	7,830	Ventura	1,792
Calaveras	46	Lassen	43	Placer	1,180	Santa Cruz	716	Yolo	526
Colusa	8	Los Angeles	29,118	Plumas	22	Shasta	420	Yuba	44
Contra Costa	3,296	Madera	214	Riverside	3,054	Sierra	0	Unidentified California county*	1,590
Del Norte	31	Marin	1,516	Sacramento	4,704	Siskiyou	72	California total	108,594
El Dorado	311	Mariposa	13	San Benito	43	Solano	940	Out-of-State total	23,776
Fresno	1,978	Mendocino	198	San Bernardino	3,905	Sonoma	1,438	Current licenses total	132,370
Glenn	11	Merced	249	San Diego	10,308	Stanislaus	996		
Humboldt	270	Modoc	6	San Francisco	6,202	Sutter	191		
Imperial	144	Mono	32	San Joaquin	1,094	Tehama	45		

*Due to the location listed in the address of record, the county cannot be identified.

The Mission of the Medical Board of California

The mission of the Medical Board of California is to protect health care consumers through the proper licensing and regulation of physicians and surgeons and certain allied health care professions and through the vigorous, objective enforcement of the Medical Practice Act, and to promote access to quality medical care through the Board's licensing and regulatory functions.

Executive Summary *(continued from page i)*

bill, most public disciplinary information for physicians could only be posted on the Board's website for 10 years. This Board-sponsored bill allows the Board to post the most serious disciplinary information on the Board's website for as long as it remains public.

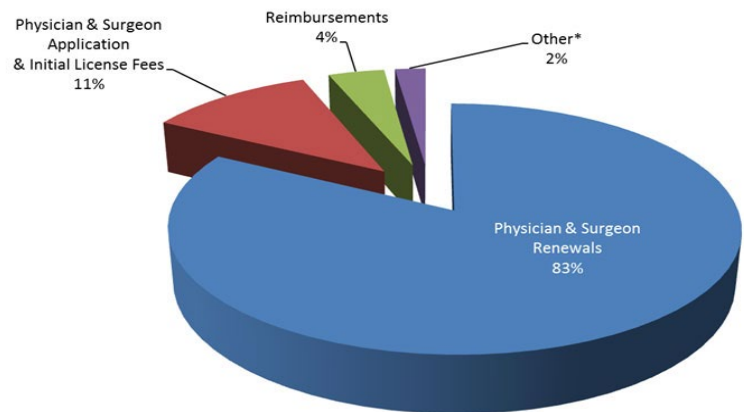
In January 2015, the Board launched a Twitter account to educate consumers and physicians by providing information on the Board's roles, laws, and regulations, as well as providing information on Board events and meetings. Twitter provides outreach on the Board's consumer protection mission to the public and encourages public engagement in the activities of the Board.

Board Members and Board staff participated in the Board's first annual Legislative Day on February 26, 2015. Board Members and staff visited legislative offices to provide Legislative Members with information on the Board and its roles and duties. The Board Members met with the Chairs of the Senate and Assembly Business and Professions Committees, as well as other Legislators and legislative staff.

Medical Board of California 2014–2015 Fiscal Year

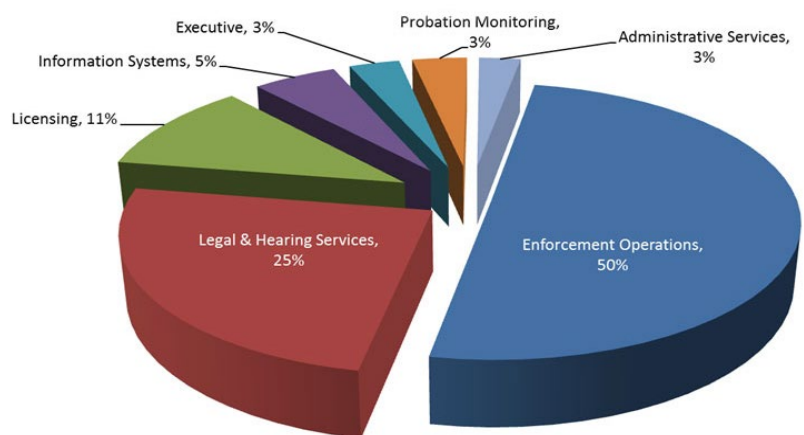
Revenues & Reimbursements

Physician & Surgeon Renewals	\$46,962,000	83%
Physician & Surgeon Application & Initial License Fees	\$6,420,000	11%
Reimbursements	\$2,171,000	4%
Other Regulatory Fees, Delinquency/Penalty/ Reinstatement Fees, Interest on Fund, Miscellaneous*	\$1,180,000	2%
Total Receipts	\$56,733,000	100%



Budget Distribution

Enforcement Operations	\$30,323,000	50%
Legal & Hearing Services	\$14,907,000	25%
Licensing	\$6,503,000	11%
Information Systems	\$3,155,000	5%
Executive	\$1,909,000	3%
Probation Monitoring	\$2,065,000	3%
Administrative Services	\$1,577,000	3%
Total	\$60,439,000	100%



Licensing Summary

The Board's Licensing Program continues to achieve its mission of protecting the health care of consumers through the proper licensing of physicians and surgeons and certain allied health care professionals. The Licensing Program also issues fictitious

name permits, and licenses non-nurse midwives, research psychoanalysts, spectacle and contact lens dispensers, registered dispensing optician businesses, and polysomnographic trainees, technicians and technologists. The Licensing Program also approves

Licensing Summary (continued on page iii)

Licensing Summary *(continued from page ii)*

accreditation agencies that accredit outpatient surgical settings in which general anesthesia is being used.

The Licensing Program issued 5,882 new physician's and surgeon's licenses. This was an increase of 360 (6.5%) more new licenses than the previous fiscal year. The Licensing Program recognized 54 international medical schools pursuant to California Code of Regulations, Title 16, Division 13, (CCR) Section 1314.1(a)(1). The Licensing Program was able to perform the initial application review of all physician's and surgeon's applications within the 60 working days regulatory time frame. Staff continues to identify opportunities to streamline and improve the application process and improve the Licensing Program's outreach efforts.

Prior to January 1, 2015, Business and Professions Code (BPC) section 30 required all applicants, prior to being licensed, to have a U.S. Social Security Number (SSN)

that allowed the individual to work in the U.S. The passage of Senate Bill 1159 (Lara, Chapter 752), which became effective January 1, 2015, amended BPC section 30 to allow applicants to use a valid U.S. Individual Taxpayer Identification Number (ITIN) instead of an SSN. Individual applicants who have either a valid SSN or ITIN are now eligible to apply for a license.

On July 1, 2015, the BreEZe system was updated to allow physician's and surgeon's applicants to check certain deficiencies of their application. The information is only for date-forward applications. Applications that were filed prior to July 1, 2015 will be updated to reflect certain deficiencies when additional documents are received and reviewed by staff. This will allow applicants to identify some of the deficient items needed to complete their application without contacting the Board.

Licensing Program Activity

	FY 13-14	FY 14-15
Physician Applications Received	6,308	6,850
Physician Licenses Issued		
FLEX/USMLE ¹	4,571	4,808
NBME ¹	284	268
Reciprocity with other states (B&P Code §2135)	667	806
Total new licenses issued	5,522	5,882
Renewal licenses issued – with fee	59,963	61,130
Renewal licenses issued – fee exempt ²	4,751	5,181
Total licenses renewed	64,714	66,311
Physician Licenses in Effect³		
California address	106,284	108,594
Out-of-state address	24, 442	23,776
Total	130,726 ⁴	132,370⁵
Fictitious Name Permits		
Issued	1,130 ⁶	1,229⁷
Renewed	3,833	6,434
Total number of permits in effect	10,835	12,242

¹ FLEX: Federation Licensing Exam.

USMLE: United States Medical Licensing Exam.

NBME: National Board Medical Exam.

² Includes physicians with disabled, retired, military, or voluntary services license status.

³ Excludes physicians with an inactive, retired, or disabled license status.

⁴ Total Physician Licenses in Effect including inactive, retired or disabled license status – 137,320.

⁵ Total Physician Licenses in Effect including inactive, retired or disabled license status – 138,741.

⁶ Includes 26 Fictitious Name Permits issued on behalf of the Board of Podiatric Medicine.

⁷ Includes 27 Fictitious Name Permits issued on behalf of the Board of Podiatric Medicine.

	FY 13-14	FY 14-15
Special Faculty Permits		
Permits issued	1	3
Permits renewed	2	13
Total active permits	19	22
Licensing Enforcement Activity		
Licenses Issued with Public Letter of Reprimand	0	0
Probationary license granted	15	10
License denied (no hearing requested)	0	6
Statement of Issues to deny license filed	4	6
Statement of Issues granted (license denied)	3	2
Statement of Issues denied (license granted)	0	1
Statement of Issues withdrawn	0	1

Allied Health Care Professions Licenses/Registrations

	Issued	Current
Licensed Midwife	42	361
Dispensing Optician	63	991
Contact Lens Dispenser	81	993
Non-Resident Contact Lens Seller	0	7
Spectacle Lens Dispenser	245	2,143
Research Psychoanalyst	7	90
Polysomnographic Trainee	25	45
Polysomnographic Technician	19	78
Polysomnographic Technologist	46	512
Accreditation Agencies for Outpatient Settings	0	5

Verification & Reporting Activity Summary

	FY 13-14	FY 14-15
License Status Verifications		
Telephone verifications	13,788	9,763
Non-verification telephone calls	67,366 ¹	59,880²
Authorized Licensing Verification System (LVS) Internet users	534	388
Web license look-up	1,560,289	1,463,837³
Certification Letters and Letters of Good Standing	8,413	10,936
Reporting Activities		
Disciplinary reports mailed to health facilities upon written request pursuant to B&P Code §805.5	323	144
Adverse Actions reported to the National Practitioner Data Bank (NPDB)	640 ⁴	557⁵
B&P Code §805 & §805.1 reports of health facility discipline received	105/ ⁶	96/⁷

¹ Does not include the 8,005 listed under Consumer Inquiries on page v.

² Does not include the 8,775 listed under Consumer Inquiries on page v.

³ Statistics from Medical Board's 'BreEZe Online License Verification' page.

⁴ Includes 607 MDs, 13 Doctors of Podiatric Medicine, 15 Physician Assistants, 2 Denials by the Physician Assistant Board, 3 Registered Dispensing Opticians Program, 0 Licensed Midwives and 0 Denials by Licensing Program.

⁵ Includes 551 MDs, 3 Registered Dispensing Opticians Program, 0 Licensed Midwives and 3 Denials by Licensing Program.

⁶ Includes 98 805 Reports against MDs, 3 Doctors of Podiatric Medicine and 4 Physician Assistants; 2 805.01 Reports Against MDs.

⁷ Includes 96 805 Reports and 4 805.01 Reports against MDs.

2014 Licensed Midwife Annual Report Summary¹

	2013	2014
Clients served as primary caregiver at the onset of care	5,052	5,386
Clients served with collaborative care available through or given by a licensed physician and surgeon	2,720	2,763
Clients served under the supervision of a licensed physician and surgeon	444	161
Planned out-of-hospital births at the onset of labor	3,028	3,397
Planned out-of-hospital births completed in an out-of-hospital setting:	2,559	2,833
Twin Births	6	1
Multiple Births (other than Twin Births)	0	1
Breech Births	20	12
VBAC (vaginal births after the performance of a Cesarean section)	109	150
Complications - Resulting in the mortality of the mother prior to transfer	0	0
Complications - Resulting in the mortality of the mother after transfer	0	0
Complications - Resulting in the mortality of the infant prior to transfer	3	2
Complications - Resulting in the mortality of the infant after transfer	10	2
Antepartum - Primary care transferred to another health care practitioner (elective)	308	401
Antepartum - Urgent or emergency transport of expectant mother	89	113
Intrapartum - Elective hospital transfer	398	492
Intrapartum - Urgent or emergency transfer of an infant or mother	58	69
Postpartum - Elective hospital transfer of mother	41	57
Postpartum - Elective hospital transfer of infant	37	31
Postpartum - Urgent or emergency transfer of a mother	42	37
Postpartum - Urgent or emergency transfer of an infant	32	39

¹ Conclusions should not be drawn from this summary as data does not specify whether the death is fetal, intrapartum or neonatal; whether the affected perinate had congenital anomalies incompatible with life; or whether the perinate was born in or out of a hospital. Births are attended by the licensed midwife as the primary caregiver.

Enforcement Summary

On July 1, 2014, the Board established its Complaint Investigation Office (CIO). This unit, comprised of six Special Investigators (non-sworn) and a Supervising Special Investigator I, is tasked with investigating quality of care investigations following a medical malpractice settlement or judgement, cases against physicians charged with or convicted of a criminal offense, and physicians petitioning for reinstatement of a license following revocation or surrender of his or her license. During FY 2014-2015 the Special Investigators in the CIO investigated and closed 296 cases and referred 26 to the Attorney General's (AG's) Office to take disciplinary action against the licensee's physician's and surgeon's license. The 26 referrals accepted by the AG's Office consisted of 12 convictions, 13 Petitions for Reinstatement and one medical malpractice case.

Also on July 1, 2014, in compliance with Senate Bill (SB) 304 (Lieu, Chapter 515, Statutes of 2013), the Board transferred its investigative staff to the new unit within the Department of Consumer Affairs entitled the Health Quality Investigation Unit (HQIU). Therefore, all complaints that require investigation by a sworn investigator are now transmitted to the HQIU for investigation. This law did not change the requirements for these cases to be investigated through the vertical enforcement model and therefore both an investigator

and a Deputy Attorney General from the AG's Office are assigned to investigate the violations in the complaint. The Board is responsible for reviewing the outcome of the

Enforcement Summary (continued on page vi)

Enforcement Program Action Summary Physicians & Surgeons

	FY 13-14	FY 14-15
Complaints/Investigations¹		
Complaints received	8,329	8,267
Complaints closed by Complaint Unit	5,341	7,578
Investigations¹		
Cases opened	1,562	1,381
Cases closed	1,331	1,469
Cases referred to the Attorney General (AG)	491	471
Cases referred for criminal action	67	76
Number of probation violation reports referred to the AG	27	20
Consumer Inquiries		
Consumer inquiries	8,005	8,775
Jurisdictional inquiries	4,403	4,826

¹ Some cases closed were opened in a prior fiscal year.

Physicians & Surgeons Complaints Received by Type & Source	Fraud	Health & Safety ¹	Non-Jurisdictional ²	Gross Negligence/ Incompetence ³	Other Category	Personal Conduct ⁴	Unprofessional Conduct ⁵	Unlicensed/ Unregistered	Total
Public	60	46	369	3,260	22	27	1,549	155	5,488
B&P Code⁶	0	8	3	659	112	101	19	0	902
Licensee/ Prof. Group⁷	9	14	21	66	11	25	98	24	268
Government Agency⁸	6	21	3	106	77	217	374	84	888
Misc./Anonymous	16	36	100	210	8	38	213	100	721
Totals	91	125	496	4,301	230	408	2,253	363	8,267

¹ Health and Safety complaints, e.g., excessive prescribing, sale of dangerous drugs, etc.

² Non-jurisdictional complaints are not under the authority of the Board and are referred to other agencies such as the Department of Health Care Services, Department of Managed Health Care, etc.

³ Gross Negligence/Incompetence complaints are related to the quality of care provided by licensees.

⁴ Personal Conduct complaints, e.g., licensee self-abuse of drugs/alcohol, conviction of a crime, etc.

⁵ Unprofessional Conduct complaints include sexual misconduct with patients, discipline by another state, failure to release medical records, etc.

⁶ Reference is to B&P Code §800 and §2240(a) and includes complaints initiated based upon reports submitted to the Board by hospitals, insurance companies and others, as required by law, regarding instances of health facility discipline, malpractice judgments/settlements, or other reportable activities.

⁷ Licensee/Professional Group includes the following complaint sources: other Licensee, Society/Trade Organization, and Industry.

⁸ Governmental Agency includes the following complaint sources: Internal, Law Enforcement Agency, other California State Agency, other State, other Unit of Consumer Affairs, and Federal or other Governmental Agency.

Enforcement Summary *(continued from page v)*

investigation for approval, but the investigation is now performed outside of the Board's auspices.

When SB 304 became operative on January 1, 2014, it also mandated accredited outpatient surgery settings to submit adverse events to the Board within specified time limits. These reports have to be submitted no later than five days after the adverse event has been detected, or, if that event is an ongoing threat to the health, welfare, or safety of patients, medical personnel or the public, the event must be reported to the Board no later than 24 hours upon discovery. During FY 2014-2015, 104 adverse events were reported including surgical mishaps or deaths, improper use of surgery products or devices, case management errors resulting in poor quality of patient care, environmental circumstances resulting in patient death or disability, or criminal wrongdoings by medical personnel inflicted upon a patient. The Board reviews each adverse event report and takes appropriate action either with the assistance of an approved accreditation agency or through the Board's Enforcement Program.

On January 1, 2015, Assembly Bill 1886 became effective. This bill restructured the statute related to public disclosure information, requiring the Board to restore documents previously removed from its website. Staff in the Board's Discipline Coordination Unit (DCU) identified over 7,000 disciplinary records requiring the posting of public disclosure information to the website. DCU staff worked to scan the related public disciplinary documents and make them available on the Board's website. This

legislation provides transparency to the public in requiring the cases with significant disciplinary action to remain on the Board's website as long as they are public, thereby furthering the Board's mission of consumer protection.

Malpractice Settlement Reports Received Per Business and Professions Code Section 801.01 by Specialty Practice

Specialty/Subspecialty	No. of Reports ¹	No. of Physicians ²
Allergy and Immunology	1	651
Anesthesiology	24	6,006
Cardiology	13	3,390
Colon and Rectal	6	197
Critical Care	2	1,418
Dermatology	4	2,177
Emergency Medicine	23	4,532
Facial, Plastic, Reconstructive Surgery	1	1,010
Gastroenterology	10	1,725
General/Family Practice	63	10,115
General Surgery	42	4,000
Gynecology	20	6,019
Hematology	2	1,131
Internal Medicine	55	28,415
Neonatal/Perinatal	2	683
Nephrology	15	1,222
Neurological Surgery	20	559
Neurology	3	2,130
Obstetrics	45	6,019
Ophthalmology	13	2,868
Orthopedic Surgery	47	3,420
Otolaryngology	14	1,649
Pain Medicine	4	634
Pathology	4	4,010
Pediatrics	14	10,985
Physical Medicine & Rehabilitation	1	1,199
Plastic Surgery	21	952
Preventive Medicine	1	1,043
Psychiatry	16	7,458
Pulmonology	1	1,567
Radiology	43	6,399
Rheumatology	2	706
Thoracic Surgery	11	487
Urology	14	1,256
Vascular Surgery	4	311

¹ The procedure was performed in the practice specialty/subspecialty; however, the physician may or may not have been certified in the specialty/subspecialty area.

² California physicians certified in specialty according to the 2013-2014 American Board of Medical Specialties Certification Statistics Report.

Reports Received Based Upon Legal Requirements

	FY 13-14	FY 14-15
Medical Malpractice		
Insurers: B&P Code §801.01	570	476
Attorneys or Self-Reported or Employers: B&P Code §801.01	145	125
Courts: B&P Code §803	6	2
Total Malpractice Reports	721	603
Coroners' Reports: B&P Code §802.5	2	5
Criminal Charges & Convictions: B&P Code §802.1 & §803.5	41	95
Health Facility Discipline Reports Medical Cause or Reason: B&P Code §805	98	96
Health Facility Reports: B&P Code §805.01	2	4
Outpatient Surgery Settings Reports Patient Death: B&P Code §2240(a)	12	9

Enforcement Program Action Summary

Physicians & Surgeons	FY 13-14	FY 14-15
Administrative Actions		
Accusation	273	310
Petition to Revoke Probation/Accusation and Petition to Revoke	30	21
Amended Accusation/Petition to Revoke	60	70
Number of completed investigations referred to the AG awaiting the filing of an Accusation as of June 30, 2015	112	104
Number of cases over 6 months old that resulted in the filing of an Accusation	229	254
Administrative Outcomes		
Revocation	51	45
Surrender (in lieu of Accusation or with Accusation pending)	77	85
Suspension	1	0
Probation with Suspension	16	14
Probation	121	122
Probationary License Issued	15	10
Public Reprimand	90	86
Other Actions (e.g., exam required, educational course, etc.)	4	3
Accusation Withdrawn ¹	17	14
Accusation Dismissed	0	10
Dispositions of Probation Filings		
Probation Revoked or License Surrendered	12	10
Additional Suspension and Probation	1	1
Additional Suspension or Probation	12	12
Public Reprimand	1	0
Petition Withdrawn/Dismissed	3	2
Referral and Compliance Actions		
Citation and Administrative Fines Issued	45	5 ²
Petition Activity		
Petition for Reinstatement of License Filed	14	7
Petition for Reinstatement of License Granted	8	11
Petition for Reinstatement of License Denied	7	8
Petition for Penalty Relief Granted ³	35	28
Petition for Penalty Relief Denied ³	11	9
Petition to Compel Exam Filed	12	12
Petition to Compel Exam Granted	12	12
Petition to Compel Exam Denied	0	0
License Restrictions/Suspensions Imposed While Administrative Action Pending		
Interim Suspension Orders	21	14 ⁴
Temporary Restraining Orders	0	0 ⁴
Other Suspension Orders	53	38 ⁵
License Restrictions/Suspensions/Temporary Restraining Orders Sought and Granted by Case Type		
NOTE: Some orders granted were sought in prior FY.	Sought	Granted
Gross Negligence/Incompetence	2	3
Inappropriate Prescribing	9	8
Unlicensed Activity	0	0
Sexual Misconduct	6	5
Mental/Physical Illness	12	6
Self-Abuse of Drugs or Alcohol	12	11
Fraud	7	5
Criminal Charges/Conviction of a Crime	5	1
Unprofessional Conduct	14	13
Total	67	52

¹ Accusations withdrawn for the following reasons: physician passed a competency exam; physician met stipulated terms and conditions; physician was issued a citation/fine instead; physician died, etc.

² Effective 7/1/14, the Board's sworn staff within the Enforcement Program transferred to the Division of Investigation's Health Quality Investigation Unit. The authority to issue a citation by the Enforcement Program was lost due to this transition. The statistic reflects citations issued by the Board's Chief of Licensing only.

³ Penalty Relief includes Petitions for Modification of Penalty and Petitions for Termination of Probation.

⁴ Pursuant to B&P Code §2220.05 (c), ISOs and TROs were granted in the following priority categories: 0-gross negligence/incompetence resulting in death or serious bodily injury, 0-drug or alcohol abuse involving death or serious bodily injury, 1-excessive prescribing, 1-sexual misconduct with a patient, and 1-practicing under the influence of drugs/alcohol.

⁵ Includes 4-Automatic Suspension Orders per B&P Code §2236, 7-license restrictions per Penal Code §23, 7-license restrictions pursuant to court order, 11-out-of-state suspension orders per B&P Code §2310, 0-stipulated agreement to suspend or restrict the practice of medicine, and 9-suspension/cease practice orders issued for violation of probation condition.

Enforcement Program Action Summary

Physicians & Surgeons

Reports Per Business and Professions Code Sections 805 & 805.01

	805	805.01
Total Reports Received	96	4
Peer Review Body Type		
Health Care Facility/Clinic	53	4
Surgical Center	1	0
Health Care Service Plan	24	0
Professional Society	0	0
Medical Group/Employer	18	0
Outcomes of Reports Received		
Accusation Filed	0	0
Pending Disposition	30	4
Cases Closed	66	0

Enforcement Processing Time Frames

Average and median time (calendar days) in processing complaints during the fiscal year, for all cases, from date of original receipt of the complaint, for each stage of discipline, through completion of judicial review:

	FY 13-14 ¹		FY 14-15	
	AVG	MED	AVG	MED
Complaint Process	67	43	141	113
Investigation Process (Non-Sworn & Sworn)	245	205	N/A	N/A
Investigation Process (Non-Sworn)	N/A	N/A	91	57
Investigation Process (Sworn)	N/A	N/A	310	292
AG Process (time to file accusation)	110	86	92	66
Other stages of the legal process (e.g., after charges filed)	443	402	417	382

¹ The report used to obtain this information does not accurately exclude the days between any closed and reopened activities, resulting in the number of days being greater than the actual number of days to complete these processes.

Enforcement Field Operations Caseload	FY 14-15 ¹	
Health Quality Investigation Unit Caseload²	Statewide	Per Investigator
Active investigations	1,087	14
AG assigned cases ³	465	6
Probation Unit Caseload⁴	Statewide	Per Inspector
Monitoring Cases ⁵	614	36

¹ Average is determined by using the total number of authorized positions, including vacant positions.

² Includes physicians and surgeons, licensed midwives, research psychoanalysts, dispensing opticians program, outpatient surgery settings, polysomnographic program, doctors of podiatric medicine, physician assistants, psychologists, and osteopathic physicians and surgeons.

³ These cases are at various stages of AG processing and may require supplemental investigative work, such as subpoena services, interviewing new victims or witnesses, testifying at hearings, etc.

⁴ Includes physicians and surgeons, licensed midwives, research psychoanalysts, and dispensing opticians program.

⁵ 89 additional monitoring cases were inactive because the probationer was out of state as of June 30, 2015.

Administrative Outcomes by Case Type¹

	Revocation	Surrender	Suspension Only	Probation with Suspension	Probation	Probationary License Issued	Public Reprimand	Other Action	Total Actions
Gross Negligence/Incompetence	6	16	0	1	40	0	53	2	118
Inappropriate Prescribing	9	15	0	2	18	0	2	1	47
Unlicensed Activity	1	3	0	1	4	0	3	0	12
Sexual Misconduct	4	2	0	3	2	0	0	0	11
Mental/Physical Illness	6	19	0	0	11	0	0	0	36
Self-Abuse of Drugs/Alcohol	5	12	0	4	26	0	0	0	47
Fraud	3	5	0	2	1	0	0	0	11
Conviction of a Crime	1	2	0	1	2	0	6	0	12
Unprofessional Conduct	10	11	0	0	18	10	22	0	71
Miscellaneous Violations	0	0	0	0	0	0	0	0	0
Totals by Discipline Type	45	85	0	14	122	10	86	3	365

¹ Pursuant to B&P Code §2220.05(c), disciplinary actions were taken in the following priority categories: 26 - gross negligence/incompetence resulting in death or serious bodily injury, 0 - practicing under the influence resulting in death or serious bodily injury, 26 - excessive prescribing, 7 - sexual misconduct with a patient, and 10 - practicing under the influence of drugs/alcohol.

Enforcement Action Summary

Allied Health Care Professions¹

	FY 13-14 ¹	FY 14-15 ²
Complaints/Investigations		
Complaints received	126	216
Complaints closed by Complaint Unit	58	184
Investigations		
Cases opened	54	34
Cases closed	46	55
Cases referred to the AG	5	6
Cases referred for criminal action	2	0
Number of Probation Violation Reports referred to AG	0	0
License Restrictions/Suspensions Imposed While Administrative Action is Pending		
Interim Suspension Orders	0	0
Other Suspension Orders ²	0	1
Administrative Actions		
Accusation	7	4
Petition to Revoke Probation	0	0
Amended Accusation/Petition to Revoke Probation	0	0
Statement of Issues to deny application	0	0
Number of completed investigations referred to AG's Office awaiting the filing of an Accusation as of June 30, 2015	0	1

¹ Allied Health Care Professionals include information for the programs under the Board only – licensed midwives, research psychoanalysts, dispensing opticians program, outpatient surgery settings, and polysomnographic program.

² Includes 1 license restriction per Penal Code §23 for the dispensing opticians program.

³ Penalty Relief includes Petitions for Modification of Penalty and Petitions for Termination of Probation.

	FY 13-14 ¹	FY 14-15 ²
Administrative Outcomes		
Revocation	2	3
Surrender (in lieu of Accusation or with Accusation pending)	1	1
Probation with Suspension	0	0
Probation	0	1
Probationary License Issued	0	0
Public Reprimand	0	2
Other Actions (e.g., exam required, Education course, etc.)	0	0
Statement of Issues Granted (License Denied)	0	0
Statement of Issues Denied (License Granted)	0	0
Accusation/Statement of Issues Withdrawn	0	0
Accusation Dismissed	0	0
Dispositions of Probation Filings		
Additional Probation or Suspension	0	0
Probation Revoked or License Surrendered	0	0
Petition Withdrawn or Dismissed	0	0
Referral and Compliance Actions		
Citation and Administrative Fines Issued	0	0
Office Conferences Conducted	0	0
Petition Activity		
Petition for Reinstatement of License filed	0	0
Petition for Reinstatement of License granted	0	1
Petition for Reinstatement of License denied	0	0
Petition for Penalty Relief granted ³	0	0
Petition for Penalty Relief denied ³	0	0
Petition to Compel Exam granted	0	0
Petition to Compel Exam denied	0	0

Medical Board of California

Fiscal Year 2014 - 2015
Board Members

Michelle Anne Bholat, M.D.
Michael Bishop, M.D.
Dev GnanaDev, M.D.
Randy W. Hawkins, M.D.
Howard Krauss, M.D.
Sharon Levine, M.D.
Ronald H. Lewis, M.D.

Elwood Lui
Denise Pines
David Serrano Sewell, J.D.
Gerrie Schipske, R.N.P., J.D.
Jamie Wright, Esq.
Barbara Yaroslavsky
Felix Yip, M.D.