

MEDICAL BOARD OF CALIFORNIA
LEGISLATIVE ANALYSIS

BILL NUMBER: AB 470
AUTHOR: Valencia
CHAPTER: Chaptered, #330
BILL DATE: March 13, 2023, Amended
SUBJECT: Continuing Medical Education: Physicians and Surgeons
SPONSOR: California Medical Association
POSITION: Support

DESCRIPTION OF CURRENT LEGISLATION

Updates continuing medical education (CME) requirements to encourage physicians to pursue CME courses that improve the quality of physician-patient communication in a manner that is culturally and linguistically competent.

AB 470 was not amended after the previous Board meeting.

IMPLEMENTATION TASKS

- Report in Board newsletter (expected to be published in December 2023).

BACKGROUND

CME is intended to maintain, develop, or increase the knowledge, skills, and professional performance that a physician and surgeon uses to provide care, or to improve the quality of care provided to their patients. [Business and Professions Code \(BPC\) section 2190.1](#) provides for many of the statutory requirements related to CME. Among other provisions, this section provides requirements that CME providers must follow to include curriculum related to cultural and linguistic competency in the practice of medicine in all coursework.

Accreditation organizations, like the Accreditation Council for Continuing Medical Education (ACCME), accredit CME providers and help ensure the coursework they offer is “relevant, practice-based, effective, based on valid content, and independent of commercial influence.”¹

¹ <https://www.accme.org/accreditation-rules>

At the time of renewal, physicians must certify under penalty of perjury that they have met the 50-hour CME requirement for that renewal period. Typically, Board staff audit five percent of the physicians who renew their license each month to verify that they met CME requirements.

ANALYSIS

According to the author’s fact sheet:

“California is a melting pot of cultures and languages; making it a minority-majority state. In fact, nearly 43% of all Californians speak another language other than English at home.

With such a wide variety of ethnic, racial, and religious backgrounds, it is critical that our healthcare professionals be able to clearly and effectively communicate with their patients in a manner that is culturally appropriate and in the proper language. Similarly, patients should be able to receive the medical care they need without having to overcome language barriers.”

AB 470 would make two changes:

- Update the general criteria that CME courses must meet to emphasize the importance of improving the quality of physician-patient communication.
- Provide that the associations that accredit CME courses may update their standards related to cultural and linguistic competency to ensure program standards meet the needs of California’s changing demographics and properly address language disparities, as they emerge. Further, the standards are required to be updated with an advisory group that has expertise in cultural and linguistic competency issues and is informed of federal and state statutory threshold language requirements, with prioritization of languages in proportion to the state population’s most prevalent primary languages spoken by 10 percent or more of the state population.

This bill is not expected to change the Board’s workload associated with auditing a physician’s compliance with CME requirements. AB 470 is expected to help support the cultural and linguistic competence of physicians in this state, who serve a diverse population.

FISCAL: No anticipated costs to the Board.

SUPPORT: AltaMed Health Services
 California Commission on Aging
 California Health+ Advocates
 California Rheumatology Alliance
 California State Association of Psychiatrists
 Kaiser Permanente
 National Latino/a Physician Day

OPPOSITION: None identified.

ATTACHMENT: [AB 470, Valencia – Continuing Medical Education: Physicians and Surgeons.](#)
Version: 10/07/23 – Chaptered