



DRAFT

Creating a Sustainable Licensing Program



***Medical Board of California
Physician and Surgeon Licensing & Information Center
Business Process Reengineering Study***

**Version: 0.1d
Date: January 19, 2010**



*This report was prepared by Hubbert Systems Consulting, Inc.
under contract with the Medical Board of California (MBC)*



*** DRAFT ***

Medical Board of California
Business Process Reengineering Study
Creating a Sustainable Licensing Program

REVISION LOG

Date	Version	Revisions
January 19, 2010	0.1d	Initial release of draft



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1 Executive Summary

Background

In recognition that the MBC Licensing Program had a series of underlying systemic problems, the Executive Director directed the Licensing Chief to start the process of hiring a Business Process Reengineering consultant 18 months ago. At the same time, the Licensing Chief undertook a number of initiatives to begin the process of rebuilding the Licensing Program into a stronger and more efficient organization capable of processing its workload within statutory timeframes and in a quality manner. The BPR Study is intended to identify the steps remaining to complete this rebuilding process.

The Licensing Program hired Hubbert Systems Consulting Inc. (HSC) in August 2009 to conduct a four-month Business Process Reengineering (BPR) Study. The BPR Study is part of a multi-phased plan that was presented by the Licensing Program Chief to the MBC Executive Committee in October 2009.

Business Process Reengineering (BPR) Study

The purpose of the BPR Study is to identify improvements in the Licensing Program to increase process efficiency, facilitate consistent and continued statutory and regulatory compliance and improve focus on customer service. The scope included licensing and renewal processing and those MBC offices that support licensing and renewal processes such as the Consumer Information Unit (CIU) Call Center, Information Systems Branch (ISB), and Graduate Medical Education (GME) outreach.

The HSC BPR Study Team worked closely with MBC's Licensing Program Chief, her staff and the Executive Director throughout the BPR Study. Business process maps were developed, current process and workload were observed,



recommendations developed to meet the BPR study objectives and the outline of an implementation plan presented. The report and its recommendations will serve as a road map for rebuilding the MBC Licensing Program over the next 24 months.

Due to various factors related to the current environment, short-term directives, and the anticipated increase in application receipt and workload from January through June, the HSC BPR Study Team informally released several recommendations in advance of the publication of this report, as requested by the MBC Licensing Chief. These recommendations are in various stages of implementation.

The BPR study supports the program's long-term objectives to:

- Create a sustainable organization with appropriate processes and procedures, resources levels and the systems to efficiently process its workload and match supply/effort to predictable as well as unanticipated demand
- Fully comply with current statutes and regulations, including processing timeframes
- Deliver a high level of satisfaction for MBC's stakeholders - medical license applicants as well as for others associated with the licensing process
- Provide a professionally satisfying team work environment

When viewed from the perspective of MBC and its stakeholders, rebuilding the Licensing Program into an efficient, results-oriented program with sufficient flexibility to meet ever changing and variable demands is one of the organization's top priorities. Implementation of the BPR recommendations will require significant amounts of effort and support from MBC management, staff, and the Board.

However, the anticipated benefits of a stronger organization, consistent statutory and regulatory compliance, and increased applicant, healthcare professional, MBC staff and customer satisfaction more than justify the effort required.



Key Observations

The Licensing Program can generally be characterized as a reactionary organization where the focus of the resources shifts throughout the year in response to changing near-term priorities. Over the last year the organization experienced significant shifts in priorities. For example, priorities shifted in response to the demands of residents and fellows needing licensure to start and/or continue training. Another example of a shift in priorities was the extensive training and quality assurance reviews required when temporary staff were brought on to assist in eliminating the backlog when the organization was resource constrained. What is unclear is whether this is because the workload naturally shifts or whether the changes are reactionary to the “crisis at hand”; the latter is considered most likely due to the historical lack of workload management reports and the inadequate staffing in the organization.

Key observations from the BPR Study include:

- **Processes and procedures and other vital infrastructure elements require significant improvement to meet the demands of the Licensing Program.**

Over the last 18 months, there has been a considerable effort made to upgrade the infrastructure, such as the creation of the Application Policies and Procedures Manual and these efforts must continue. The staff assigned to the infrastructure improvements are also assigned other tasks such as new staff training, quality review for newly trained staff, database coordination with MBC Information Systems Branch (ISB) and Department of Consumer Affairs Office of Information Services (DCA OIS), workload metrics gathering and reporting, and senior level application processing. This has made it difficult to power through the work required. The BPR Study Team observed several infrastructure projects started and stopped due to short term urgent shifts in



priorities. Infrastructure improvements must have a higher priority and dedicated resources assigned to them.

- **The Licensing Program has been resource (staff) constrained over the past several years.** Temporary staff, including Retired Annuitants and Student Assistants, combined with the use of overtime have been used to address this constraint. These temporary resources have also added complexities, as training and additional management are required for these fractional and less experienced resources. Many of the problems the Licensing Program has experienced over the last several years will be eliminated through proper staffing, decreasing use of temporary staff and overtime, and integrating positive organizational changes.
- **The current staff-to-management ratio is at the unreasonable level of approximately 20:1.** As a result, the two application licensing managers are often unavailable to staff to answer questions; therefore, staff go to other staff for answers to questions, often resulting in inconsistencies. The managers also have little time to oversee infrastructure projects. It is recommended that additional management be added to the organization to achieve a more appropriate level of supervision and the program be reorganized around logical functional groupings.
- **The Licensing Applicant Tracking System is inadequate for the transactional-based work.** The 20+ year old database is cumbersome to navigate, sometimes creating extremely archaic business rules. For example, with the current database system, Postgraduate Training Authorization Letter (PTAL) application files remain open for several years until licensure or closed for due diligence. This makes regulatory compliance tracking and reporting difficult. The Licensing Program can be made more efficient by rethinking some work processes related to the Applicant Tracking System (ATS) and making modifications in the near-term to the ATS that will be incorporated into the new system. The Department of Consumer Affairs plans to replace the Applicant



Tracking System and Consumer Affairs System with BREEZE2 in December 2012. This replacement database should significantly improve operations.

- **Management reports have historically been non-existent, with no real time information concerning the status of the organization's workload and application inventory.** Management of the program is nearly impossible without workload reports to identify total inventory, inventory fluctuations, and aging inventory. Licensing Program workload reporting created through manual counts was started in August 2008 and identified nearly 7,000 applications awaiting some form of action. A software reporting tool was obtained by MBC Information Systems Branch (ISB) in August 2009 and ISB, MBC and the BPR Study Team worked together to automate initial workload reports; this eliminated the need for manual counting. However, considerable effort is still needed in this area to provide the appropriate level of reporting to effectively manage the resources and application resources.
- **The Licensing Program workload fluctuates throughout the year.** This is due to a combination of a variation in the number of applications received on a weekly and monthly basis and the demands of the residency program applications. The residency programs represents a significant, six-month workload peak with a July 1 licensing deadline each year. These fluctuations magnify the existing management, staffing and workload challenges and create additional issues. Management would benefit from a better workload forecasting tool, which includes a five-year history, so that resources can be adjusted to address workload fluctuations.
- **During the BPR Study, considerable effort was expended toward eliminating the licensing backlog.** The backlog can be attributed to all of the issues listed in the above bulleted items. It would be unwise to immediately declare success now that the backlog has been eliminated. If the organization proceeds ahead without correcting these identified issues, then MBC can likely expect another "backlog-type" issue to reemerge from the Licensing Program



in the future. It is recommended that a more appropriate goal for the organization would be to conduct initial application reviews within 60 calendar days of application receipt. (Sixty calendar days is 30 days less than the current regulatory timeframe of 90 days.) Resources such as Retired Annuitants, Student Assistants, and overtime should be continued until that level is sustained for several months.



Over the last 18 months, the Licensing Program management team started, and in some cases completed, a series of initiatives to improve the performance of the organization, including:

Table 1 - Creating a Sustainable Licensing Program (Phase 1)

	Recent Activities	Benefits
Process and Procedures	<ul style="list-style-type: none">Developed policy and procedure manual for processing physician applications and assessing supporting documents (other sections such as Senior Staff review needs to be completed)	<ul style="list-style-type: none">Provides consistent standards for staff to review applications and determine actions
Resources	<ul style="list-style-type: none">Hired and trained 9 new full-time employees in 2009 (5 replaced long-term staff who retired in 2009)Trained several MBC staff from other programsHired and trained 12 new part-time Retired Annuitants and Students Assistants in 2009 to augment the work of full-time staff (8 since October 2009)Created and deployed an effective training program in support of these resources	<ul style="list-style-type: none">Trained 17 new review staff hired since January 2009 as well as other MBC staff required to eliminate the backlog by the end of Dec. 2009More license reviewers available to review applications and supporting documents, thus lowering processing times and eliminating the backlogLower staff-to-applicant caseloads assisted in reducing processing times, allowing better customer service



	Recent Activities	Benefits
Web Application Access System (WAAS) Project	<ul style="list-style-type: none"> • Developed new online WAAS for applicants to check status of their application in real-time • Implemented December 2009 • Continue to determine improvements and ensure reliability and timeliness of data presented 	<ul style="list-style-type: none"> • Major step towards establishing electronic communications (e.g. MBC Web site and email) as the primary communications for all applicants in the licensing process, but a long ways from state of the art unified communications approach • Provided increased license application status info services to applicants • Reduced the number of application status-related calls to MBC • Accomplished significant ATS data clean-up • Implemented document handling and recording procedures.
Management Reports	<ul style="list-style-type: none"> • Obtained and integrated Ad Hoc Software Reporting Tool to generate automated management reports in August 2009 • Created automated management reports for application inventory and work productivity in September 2009 	<ul style="list-style-type: none"> • Significantly improved understanding into dynamics behind program workload • Enabled management to effectively deploy resources



	Recent Activities	Benefits
Eliminate the Backlog	<ul style="list-style-type: none">• Eliminated the licensing backlog through a coordinated MBC staff effort on December 23, 2009	<ul style="list-style-type: none">• Customer satisfaction• Meeting regulatory timeframe• Collectively learned a lot about the organization and its systemic problems• Improving employee morale

The initiatives listed above address underlying systemic problems and create a solid investment in a series of building blocks in the Licensing Program. At the same time, it is apparent that more needs to be done in terms of investing in the Licensing Program's resources, infrastructure and data systems in order for the Program to be a sustainable organization capable of executing its work effectively, and providing high customer satisfaction.



Recommendations

Observations across business processes and support entities were found to have common themes. Recommendations developed based on these observations fit into three categories: Infrastructure, Information Technology (IT) and Resources. The recommendations included in this report are a collective list identified by the MBC Licensing Program or by HSC BPR Study Team.

Table 2 – General Observations and Recommendations

The table on the following page provides a one-page overview of the observations and recommendations discussed further in the main body of this report. The table includes:

- **General observations** for each of the three recommendation categories: Infrastructure, Information Technology, and Resources and Organization
- **BPR Study recommendations** for each category with **Priority level** (High, Medium and Low), **Cost level** (High, Medium and Low), and **Benefits** for each recommendation.

These recommendations are discussed in further detail in Section 6 with additional information in Section 9.3. Recommendations include information on the costs and benefits, qualitative and quantitative metrics and recommended priority.

Table 2 – General Observations and Recommendations

Overall observations:

- The Licensing Program has a series of underlying systemic problems that are significantly inhibiting the organization from operating efficiently.
- If the organization proceeds without correcting these issues, then MBC can likely expect another “backlog-type” issue to reemerge from the Licensing Program in the future.

Note: In the table below, there is not a one-to-one correlation for each general observation and recommendation. There is a direct correlation between each recommendation and the priority, cost and benefit

	General Observations	Recommendations	Priority	Cost	Benefits
Infrastructure	<ul style="list-style-type: none"> ➤ Processes and procedures and other vital infrastructure elements require significant improvement to meet the demands of the Licensing Program ➤ 76% of US/CAN and 94% IMG applications and supporting documents have errors upon first review ➤ Electronic clearinghouse (e.g. FSMB, AMA) can improve information flow ➤ Licensing staff are most valuable resource and needs to be involved in implementing BPR recommendations ➤ Commitment to a vibrant QA program essential ➤ Clarification needed requiring PTAL renewals and ATS changes needed to track and manage PTALs ➤ Application of WAAS, updating the Web site portal are good initial steps to improving stakeholder communications ➤ Potential value in adopting a Postgraduate Training Program permit for US/Can applicants 	<ol style="list-style-type: none"> 1. Continue to advance Policy and Procedure Manuals 2. Increase uninterrupted time available for review tasks 3. Strengthen program-wide Quality Assurance (QA) processes 4. Create process to capture and assess Staff suggestions 5. Implement a Continuous Process Improvement program 6. Revise Application and Instructions 7. Implement Application Set-up Worksheet 8. Integrate Checklist into Application 	High Medium High	Medium Low Low	<ul style="list-style-type: none"> • Improved staff effectiveness and standardized process • Improved staff time for application processing • Increased productivity through reduction of errors
		<ol style="list-style-type: none"> 9. Revise Fee Schedule and Licensing Invoice Letter 10. Implement Application Update Forms 11. Continue use of FSMB forms and expand to iPickup 12. Resolve Postgraduate Training Authorization Letter (PTAL) issues and make appropriate changes 13. Update MBC Website content on Applicant Tab 14. Implement Consumer Information Unit enhancements 15. Assess use of AMA's Physician Professional Database 16. Evaluate viability of Postgraduate Training Permit concept 	Medium Medium High Medium Medium High	Low Medium Medium Low Low	<ul style="list-style-type: none"> • Continuous improvement and staff satisfaction • Increased collaboration, staff morale and stakeholder satisfaction • Faster application processing through less “errors” and omissions • Allows for improved efficiencies and adds staff productivity metrics • Improved communications between MBC and applicants • Improved communications between MBC and applicants • Higher productivity and stakeholder satisfaction • Improved staff effectiveness and overall process improvement • Better tracking and management of PTALs
Information Technology	<ul style="list-style-type: none"> ➤ Management Reports have historically been non-existent, with no real time information concerning the status of the organization's workload ➤ ATS is inadequate for the transactional-based work especially when a IMG applicant transitions from postgraduate training to a medical license ➤ Significant efficiencies available through extending how the Program communicates electronically ➤ Significant process efficiencies have been gained by similar organization through transitioning to document control systems 	<ol style="list-style-type: none"> 1. Implement new Management Report recommendations 2. Track DCA/ISB requests and action items 3. Evolve ATS capabilities to address MBC needs 4. Explore ways to increase use of electronic communications 5. Assess approach for DCA/ISB secured portal electronic L3A/B 6. Actively support DCA's development of the BREEZE2 Database System 7. Evaluate use of a Document Management System 	High Medium High Medium Medium	Medium Low Medium Medium Medium	<ul style="list-style-type: none"> • Real-time information will improve the management effectiveness • Improved communications • Improved staff effectiveness and overall process improvement • Improved communications between MBC and stakeholders • Faster document submittals/license approvals
		<ol style="list-style-type: none"> 1. Advance Staffing recommendations - Seek approval for 7 additional full time staff and managers. Immediately hire 4 additional positions approved in BCP 2. Reorganize Licensing Program and reinforce roles and responsibilities 3. Restructure Administrative Support workflow 4. Change name of Consumer Information Unit 5. Shift clerical work done by Review Staff to Support Staff 6. Continue to create and deploy effective training programs 7. Work inventory to achieve initial review within 60 days 8. Establish performance objectives, program-wide staffing plans and metrics 	High High Medium High Medium Medium	Medium Medium Medium Low Low Low	<ul style="list-style-type: none"> • Significant improvement in MBC processes though integration of modern IT database • Better workload distribution and improved document tracking • Create a properly sized and effective organization with minimal use of overtime and temporary staff • More effective and collaborative organization with improved employee morale with increased accountability, reporting and consistency • Increase ability to address varied skillsets needed • Better customer service • Improved staff effectiveness and employee satisfaction • Create professionally satisfying work environment and higher work quality • Higher stakeholder satisfaction and increase staff morale • Increase management's ability to address workload fluctuations and identify staff issues
Resources and Organization	<ul style="list-style-type: none"> ➤ Licensing Program has been resource constrained over the past several years. ➤ The current staff-to-management ratio is at the unreasonable level of approximately 20:1 ➤ The organization and its processes are out of alignment with its mission ➤ The organization needs a combination of initiatives including continuous improvement, quality control and training to improve the work environment and increase customer satisfaction ➤ The effective use and management through performance metrics is critical to meet expectations 	<ol style="list-style-type: none"> 1. Advance Staffing recommendations - Seek approval for 7 additional full time staff and managers. Immediately hire 4 additional positions approved in BCP 2. Reorganize Licensing Program and reinforce roles and responsibilities 3. Restructure Administrative Support workflow 4. Change name of Consumer Information Unit 5. Shift clerical work done by Review Staff to Support Staff 6. Continue to create and deploy effective training programs 7. Work inventory to achieve initial review within 60 days 8. Establish performance objectives, program-wide staffing plans and metrics 	High High Medium High Medium Medium	Medium Medium Medium Low Low Low	<ul style="list-style-type: none"> • Create a properly sized and effective organization with minimal use of overtime and temporary staff • More effective and collaborative organization with improved employee morale with increased accountability, reporting and consistency • Increase ability to address varied skillsets needed • Better customer service • Improved staff effectiveness and employee satisfaction • Create professionally satisfying work environment and higher work quality • Higher stakeholder satisfaction and increase staff morale • Increase management's ability to address workload fluctuations and identify staff issues



Implementation Schedule

It is recommended that the implementation of the recommendations be split into two phases for the following reasons:

- Overall complexity and scope of the Implementation Plan
- The "limited" amount of staff effort that can be devoted to these recommendations while maintaining current workloads
- The uncertainty to some of the scope and cost of work identified

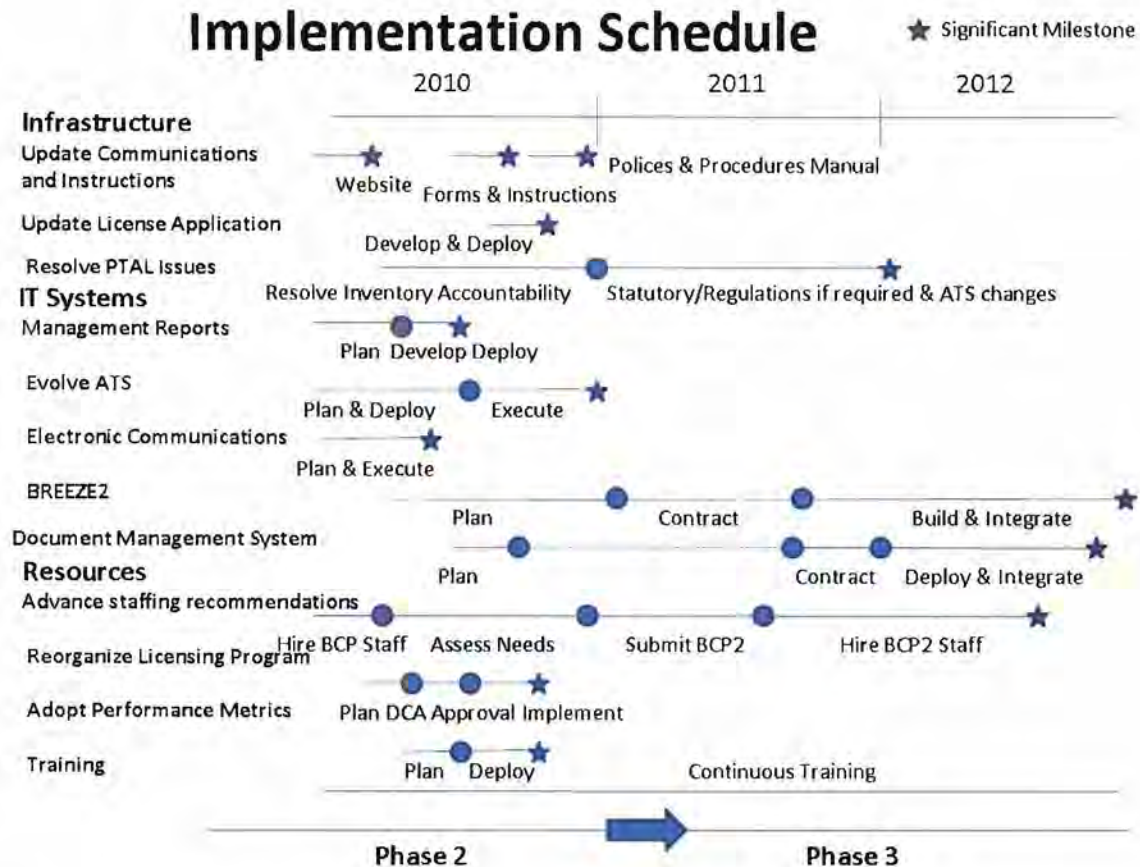
Phase 2 ¹includes those BPR Study recommendations to be worked on and/or completed by December 2010, and Phase 3 are longer-term initiatives that are considered cost effective recommendations but beyond the planning horizon and resource allocation of this study – Phase 3 activities will be planned in 2010 or in the case of BREEZE2 supported as part of Phase 2.

Below is a proposed Implementation Schedule which has as its priority to complete the majority of the BPR recommendations in 2010 with recognition that several items are significantly complex that it will take several years to complete, depending on resource allocations in 2011.

¹ Phase 1 activities were completed prior to January 2010 and were described earlier in this section.



Figure 1 - Implementation Schedule



The relative level of effort required to execute the Phase 2 tasks are estimated to be:

- **Licensing Program Effort** – It is estimated that at least three (3) full-time equivalent staff will be required to completed the Phase 1 work currently underway and the recommended work to be executed in 2010 as part of Phase 2
- **MBC Information Technology Effort** – It is estimated that approximately one-half (0.5) full-time equivalent staff will be required to complete the Phase 1 work currently underway and the recommended work to be executed in 2010 as part of Phase 2



- **Other MBC Resources** – Additional staff time (as members of work groups and committees) will be required to complete the Phase 1 work currently under way and the recommended work to be executed in 2010 as part of Phase 2



Roles and Responsibilities

The implementation of the BPR process needs to be embraced as part of a broader continuous improvement process wherein the organization:

- Provides for a higher level of customer satisfaction
- Adapts a culture of embracing change rather than resisting it
- Is organized around functional responsibilities with appropriate levels of supervision
- Is built on trust and respect at all levels
- Has the infrastructure, information technology systems and resource levels appropriate to execute its mission
- Has the tools and perspective to manage the assignment of organizational as well as individual workload metrics
- Is a better environment to work and grow in one's career
- Is supported by its management to fully effect the recommendations outlined

Given the importance of this effort, it is imperative that the Licensing Program Chief and Management Staff be provided support from the Executive Director and the Board to assure the implementation of the recommendations:

- The Licensing Chief will need to spend a considerable amount of time (up to 30%) managing the implementation of this plan – being responsible both to the Licensing Team as well as the Executive Director, the Board, and the Licensing Committee for the Plan's execution
- Members of Licensing Program Management Team, reporting to the Licensing Chief, will be responsible for the execution of a large portion of the tasks as outlined in the plan



- Other MBC personnel including IT, GME Outreach manager, will be tasked with implementing specific support activities to execute the recommendations

Report Structure

The detailed report in the sections that follow provides overviews, observations, recommendations and an implementation plan for the licensing and renewal processes and supporting components.

The appendices contain detailed information on the staff roles and responsibilities, Business Process Maps for the Cashiering, Licensing, Renewal and Call Center processes, and additional observations related to these functions. This level of detail will provide value to the teams and individuals responsible for implementing the recommendations.



2 MBC Business Process Reengineering (BPR) Study

This section provides an overview of the MBC Business Process Reengineering (BPR) Study including the:

- Objectives and scope as identified in the Statement of Work
- Approach and methodology used to complete the objectives and tasks identified in the Statement of Work
- Layout of this report

2.1 Objectives

The mission of the Medical Board of California (MBC) is to protect health care consumers through proper licensing and regulation of physicians and surgeons. MBC has also realized that there are efficiencies to be gained through process improvements that will result in faster turnaround of physician and surgeon license applications, while not adversely affecting public safety.

In August 2009, MBC procured the services of Hubbert Systems Consulting, Inc. (HSC) to conduct a four-month Business Process Reengineering (BPR) Study to improve overall efficiency and effectiveness of the Licensing, Renewal and Call Center processes. This study is being conducted by HSC staff (the BPR Study Team) in collaboration with the MBC Licensing Program Staff.

The objectives of the BPR Study are to outline a series of actions to:



- Decrease the number of days to process a physician and surgeon application from receipt to the final decision regarding issuance or denial of a physician and surgeon license
- Improve licensing renewal efficiencies
- Comply with regulatory requirements set forth in California Code of Regulations (CCR) Title 16, Division 13
- Improve focus on customer service by providing accurate and timely information through the Consumer Information Unit (CIU) call center

2.2 Scope

The scope of the MBC BPR Study includes the processes and entities that support Postgraduate Training Authorization Letters (PTALs), Initial Licensure, and License Renewals for physicians and surgeons. Entities include:

- Licensing Section (Administrative Support, Application Review, Senior Review and Licensing)
- Licensing Operations (Cashiering, Consumer Information Unit (CIU), and Renewals),
- MBC Information Systems Branch (ISB),
- MBC Web site, and
- Graduate Medical Education (GME) Outreach

Special Program Permits were removed from the project scope early in the BPR Study by MBC staff.

The Licensing Program is responsible for other activities that are not covered under the scope of this MBC BPR Study including:

- Issuing Fictitious Name Permits (FNP)



- Administering the Continuing Medical Education (CME) program
- Approving Ambulatory Surgery Center Accrediting Agencies
- Licensing Allied Health Professions (Registered Dispensing Opticians (RDOs), Research Psychoanalysts (RPs) and Midwives)
- Recognition of International Medical School²

This report addresses the following tasks identified in the Statement of Work. Each task identified in the Statement of Work was assigned a number. The task number has been incorporated with the task description for traceability purposes. The tasks completed with delivery of this report include:

- Task 1: Research and review of information relating to the current MBC physician and surgeon licensing application and renewal processes and Web Center applications, including the Source Material listed in the Statement of Work.
- Task 2: Research and review the statistical data collected from 2002 to present including Source Material and analyze the data for number of incoming and reviewed applications, renewal applications, applications for Senior Staff review and outcome, and issued and denied licenses.
- Task 3: Meet with MBC Management team to review the draft Policies and Procedures Manual, make recommendations to modify the document and then complete as input to the Business Plan.
- Task 4: Map licensing and renewal processes in collaboration with Chief of Licensing Program to present to the Executive Director and modify the same as appropriate based on that review.
- Task 5: Define the reports needed to effectively manage the Licensing Program and flow of applications including reports generated from Web Center, ATS and CAS and other sources and develop a Scope of Work and timetable to accomplish producing these reports.

² As defined in Title 16, §1314.1



- Task 6: Research and review all staff members' roles and responsibilities for the various licensing and renewal tasks and Web Center functions and analyze and recommend appropriate staffing levels, seniority, and roles and responsibilities.
- Task 7: Develop a draft Business Plan to improve efficiencies and performance (timeliness, quality and management reports) of the MBC licensing and renewal processes and Web Center functions and the staffing required to implement the Business Plan.
- Task 8: Meet with MBC Management team to review the draft Business Plan with proposed workflow, determine appropriate modifications, and revise the Business Plan.
- Task 9: Define any organizational changes, and staff roles and responsibilities and identify any possible budget effects.
- Task 10: Develop Implementation, Communication and Training Plans and recommended follow-up. *NOTE: Training Plans were developed by MBC staff.*

A follow-up audit will occur three months after the submission of the report to evaluate MBC's progress in the assessment and implementation of recommendations identified in this report.

2.3 Approach and Methodology

The first step to improving a process is to analyze the current process in order to understand the activities, their relationships, and the values of relevant metrics.

HSC's process analysis approach involves the following tasks:

- Define the process boundaries that mark the entry points of the process inputs and the exit points of the process outputs.
- Construct a process flow diagram that illustrates the various process activities and their interrelationships.
- Analyze the information gathered and make recommendations to improve the process.



The BPR Study Team gathered information from MBC staff interviews, available source documents, policies and procedures, statistical data, and observations of current processes. Throughout this effort, the BPR Study Team worked closely with MBC staff.

2.4 Creating a Sustainable Licensing Program – The BPR Study Report

This report provides narrative and analysis for the different areas involved in the processing of license and Postgraduate Training Authorization Letter (PTAL) applications and renewals.

Licensing and PTAL Processes

For each step in the Licensing and PTAL process, an overview and observations are provided in the main body of the report with additional information such as staff roles and responsibilities and business process flow diagrams included in Section 9.1 - Business Process Flows.

Overview - Provides a high level information of the Licensing and PTAL processes and a brief summary for each of the steps in the Licensing and PTAL processes.

Observations - Interviews with MBC Staff and research conducted to develop the Business Process Flow Diagrams captured additional useful information. This supplemental information is presented in the form of observations and is provided after the overview of the Licensing and PTAL processes. The information in the overviews and the observations were used as the foundation for the development of the BPR Study recommendations.



Staff Roles and Responsibilities - A detailed description of the staff roles and functions is included to supplement the Business Process Flow diagrams.

Business Process Flow Diagrams - Provides a visual representation of the current process flow, inputs and outputs. This facilitates understanding and analysis of a process, especially if there are many decision points and alternative process flows. Additional information on the figures used in the Business Process Flow Diagrams included in this document can be found in Section 9.1.1, Page 124.

Licensing and PTAL Support

There are areas and components within the MBC Organization that support the Licensing and PTAL processes such the MBC Web site and the Consumer Information Unit (CIU). An overview, observations, staff roles and responsibilities, and flow diagrams (where appropriate) are provided in this section. The information and observations were used to develop BPR Study recommendations related to these areas and components.

Additional Considerations

A separate section has been included in this report to address additional and relevant licensing-related items identified by MBC staff during the BPR Study but outside the processing and support components. Items discussed in this section are the suite of FSMB products and services, the Postgraduate Training Registration Form, and the Postgraduate Training Permit concept. An overview and observations are provided for these items. Recommendations are also provided for these items.



Recommendations

Recommendations were developed based on the observations, information gathered and MBC staff interviews conducted during the BPR Study. The recommendations were grouped into common “themes” found across the observations and include: infrastructure, Information Technology (IT) and resources.

Due to various factors related to the current environment, short-term directives, and the anticipated increase in application receipt and workload from January through June, the BPR Study Team informally released several recommendations in advance of the publication of this report as requested by the MBC Licensing Chief. These recommendations are in various stages of implementation.

Implementation Plan

A preliminary implementation plan has been provided for recommendations identified for implementation over the next 12 months. This plan can be used by MBC Staff as a foundation for further discussion and action.

BPR Study Next Steps

This section outlines the remaining tasks in the Statement of Work.



3 Licensing and Postgraduate Training Authorization Letter (PTAL) Processes

This section includes a description and analysis of the current Physicians and Surgeons licensing and Postgraduate Training Authorization Letter (PTAL) environment including application inventory, workload, processes, workflow, staff roles and responsibilities, and observations related to the environment.

The Licensing and PTAL processes described in this section include:

- Initial licensure applications for Physicians and Surgeons for United States and Canadian (US/CAN) and International Medical School Graduates (IMG)
- Applications for a PTAL
- License renewals

Applications and Application Inventory

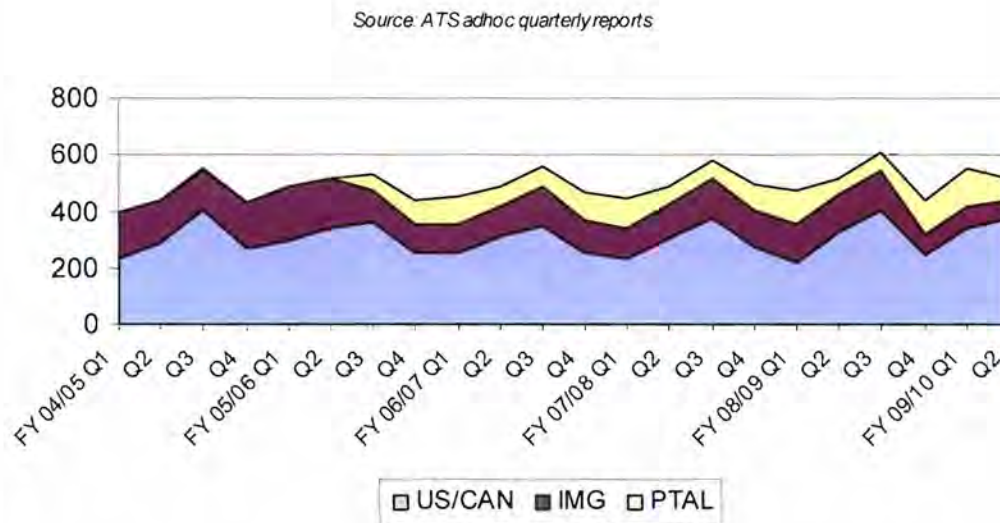
Applications are received by MBC throughout the year for applicants seeking medical licensure or IMGs seeking a PTAL. A PTAL is required for IMGs seeking postgraduate training in California-based postgraduate training programs.

The figure below shows a quarterly view of the applications received starting in the first quarter (Q1) of Fiscal Year 2004/05 (FY 04/05) and identifies “spikes” in applications receipts through the year. PTAL applications and IMG applications for licensure remain relatively constant through the years, with slight increases in Q1 (July – September). US/CAN applications show the largest “spike” in Q3 (January – March). In FY 08/09, up to 600 new applications per month were received during Q3. The “peak period” is attributed to an increase in US/CAN applications seeking licensure on/before July 1 to continue residency programs and start fellowship programs. The fluctuations in total application inventory and in specific types of applications (US/CAN, IMG and PTAL) require additional



workload and resource management to prevent a backlog. Additional overtime is used to address the increased inventory during these times.

Figure 2 – Quarterly view of applications received per month (average)



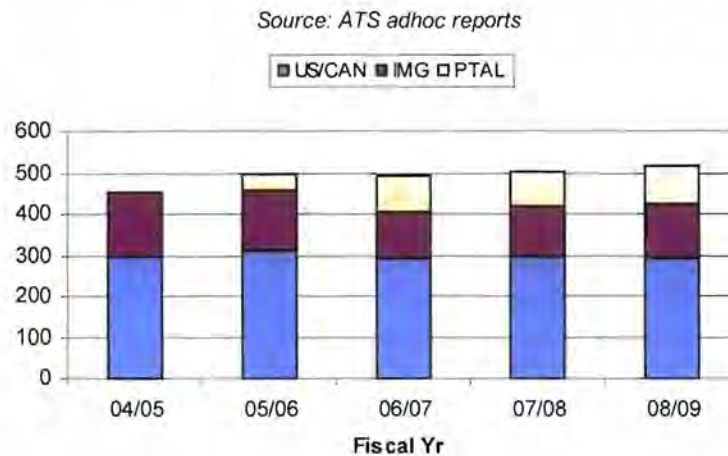
NOTES:

1. Data was provided by FY Quarter. Monthly average was calculated by dividing quarter total by three.
2. Data is as of January 11, 2010.
3. PTAL applications received a specific code in the Applicant Tracking System (ATS) starting in FY 05/06. Prior to that time, ATS did not differentiate between an IMG applicant seeking a PTAL or a license.

The figure below shows the average number of license and PTAL applications received by MBC per month over the past five fiscal years. During Fiscal Year 2008/09 (FY 08/09), MBC received an average of 520 new applications a month (130 per week) for a total of 6,200 new applications. The figure below also shows there has been a slight increase (average +/-3%) in application submission starting in FY 04/05 through FY 08/09.



Figure 3 – Annual view of applications received per month (average)



NOTES:

1. Data was provided by FY Quarter. FY quarters were totaled and monthly average was calculated.
2. PTAL applications received a specific code in the Applicant Tracking System (ATS) starting in FY 05/06. Prior to that time, a PTAL application was considered an IMG application in ATS.

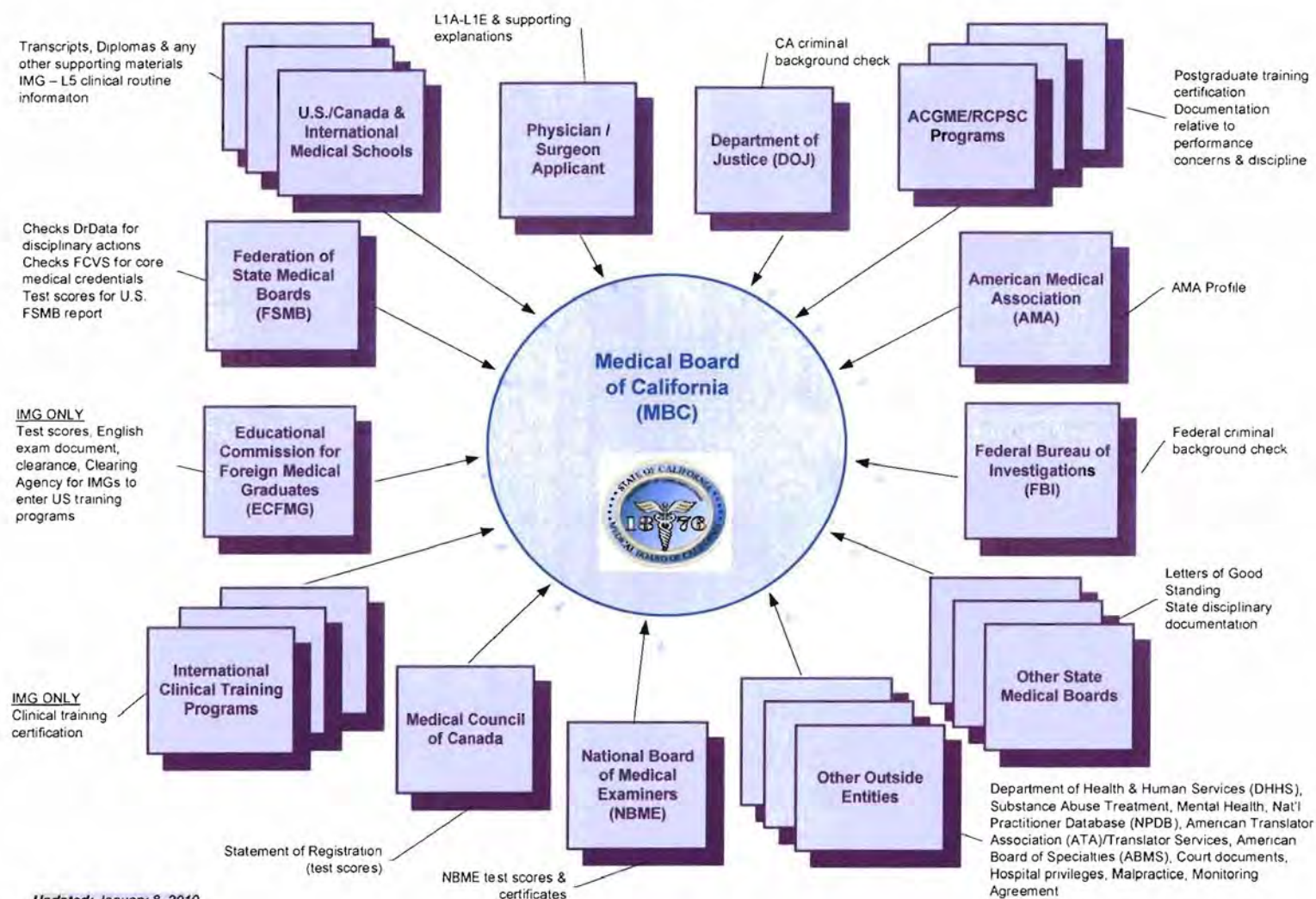
The application review process for licensure and PTALs entails a comprehensive evaluation of the applicant's qualifications. Requirements are based on State of California statutes and regulations. The application includes several components including the base application (L1A – L1E) as well as additional forms and supporting documentation. A complete US/CAN application requires a minimum of thirteen (13) types of documentation from external entities; with additional documentation needed for an IMG application. The figure below shows the external entities that provide supporting documentation in the PTAL and Licensing application process. The amount of required supporting documentation is dependent on the applicant's unique situation and information provided on the application.



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Figure 4 - External Entities in the PTAL and Licensing Application Process



Updated: January 8, 2010



Once all required documentation is submitted and reviewed, 99% of complete applications result in the issuance of a license or a PTAL. The time to complete the review of an individual application and render a licensure or a PTAL decision varies based on:

- Information provided in the application and supporting documentation
- The length of time to obtain all required information from external entities
- The workload of the Licensing Program Staff.

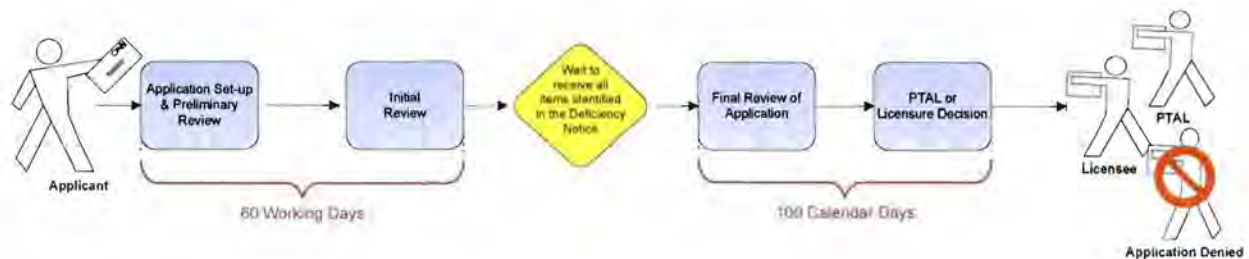
Regulatory Timeframes for Application Processing

Although the time to process an application varies, application processing is required to comply with regulatory timeframes. The figure below shows the PTAL and license application processing timeframes prescribed by Title 16, California Code of Regulations, §1319.4. From the date of application receipt³, the Licensing Program has 60 working days (approximately 90 calendar days) to complete the initial review and inform the applicant of any deficiencies in their application. Deficiencies can include missing or erroneous forms or information. After all deficiencies have been resolved and the application is deemed a completed application, the Licensing Program has 100 calendar days to inform the applicant of the PTAL or licensure decision.

³ The application is considered received when MBC receives both the application and application fees.



Figure 5 - Application Processing Timeframes



In addition to the application processing timeframes identified above, current regulations⁴ also authorize MBC to close an application when an applicant does not exercise due diligence in the completion of the application. Failure to complete the application within one year constitutes failure to exercise due diligence. MBC may provide the applicant the option to update the application within 30 days or the application will be closed.

Inventory and Backlog

When applications are received by MBC, they become part of the inventory awaiting initial review. Applications are generally processed in the order they are received. The inventory will grow if, in any given time period, more applications are received than initial reviews are completed.

An application in inventory and awaiting initial review ages every day. The figure below shows the categories of *inventory awaiting initial review*: Under the current nomenclature, inventory awaiting initial review in the “over 90 calendar days” category is called *backlog*. All applications in backlog are not meeting the regulatory requirements for initial review. From an applicant’s perspective, the

⁴ CCR, Title 16 § 1306

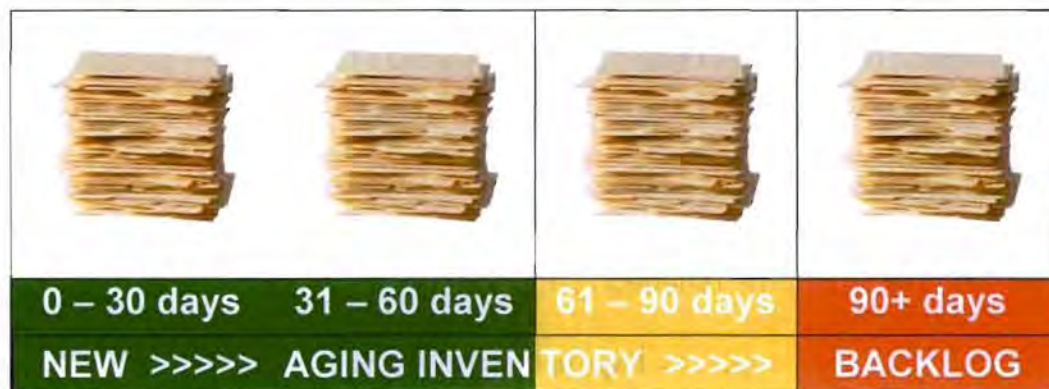


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backlog results in longer initial review period and ultimately a delay in a licensure decision.

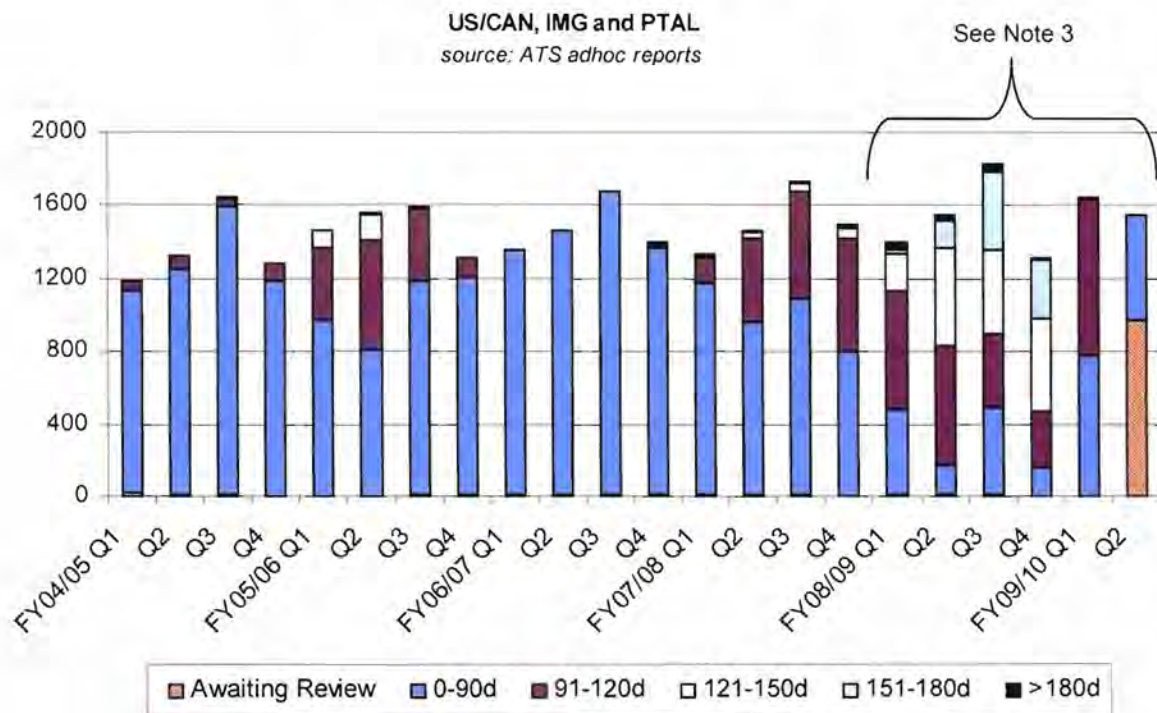
Figure 6 - Categories of Inventory Awaiting Initial Review





The BPR Study Team analyzed data the MBC Information Systems Branch (ISB) extracted from the Applicant Tracking System (ATS) for an ad hoc report. The report identified the length of time to complete an initial review for applications received *in a specific quarter*. The figure below provides a graphical representation of the data. Looking at FY 04/05 Q1 (July 2004 – September 2004), the chart shows almost all of the 1,200 applications received in that three-month timeframe had initial reviews completed within 90 days of receipt (shaded in purple), with a small amount of applications having the initial review completed in the 91-120 day timeframe (shaded in maroon).

Figure 7 – Days to Complete Initial Review



Notes:

1. This data provides the length of time to complete an initial review for applications received in the identified quarter.
2. Data is as of January 11, 2010.
3. Per Governor's Executive Order: Overtime (OT) eliminated Aug 1 to Oct 15 2008 (FY 08/09, Q1 and Q2), two (2) furlough days/mo Feb thru June 09 (FY 08/09 Q3 and Q4), three (3) furlough days/mo effective Jul 1 2009 (FY 09/10 Q1-Q4)
4. In FY 05/06 Q3, PTALs received a separate designation in the Applicant Tracking System (ATS). Prior to that date, PTALs were considered IMGs.



The figure also shows:

- Since FY 04/05 Q1, there have been two periods where a backlog has occurred. Typically for each backlog period, there was an increase in the length of time to complete the initial review for several quarters, before the backlog situation was eliminated.
- Applications received in FY 09/10 Q1 (July 2009 – September 2009) had significantly better initial review timeframes than the previous quarter, FY 08/09 Q4 (April 2009 – June 2009), indicating resolution of the backlog.

The Licensing Chief developed a plan to address the increased backlog and presented it to the Board's Executive Committee in October 2009. Based on feedback by the Board's Executive Committee, the Executive Director provided the following directives to the MBC Licensing Chief in October 2009:

- Eliminate backlog (defined as new applications not reviewed over 90 calendar days) by December 30, 2009.
- Efforts to eliminate backlog will have no adverse impact on the current volume of licenses and PTALs issued.

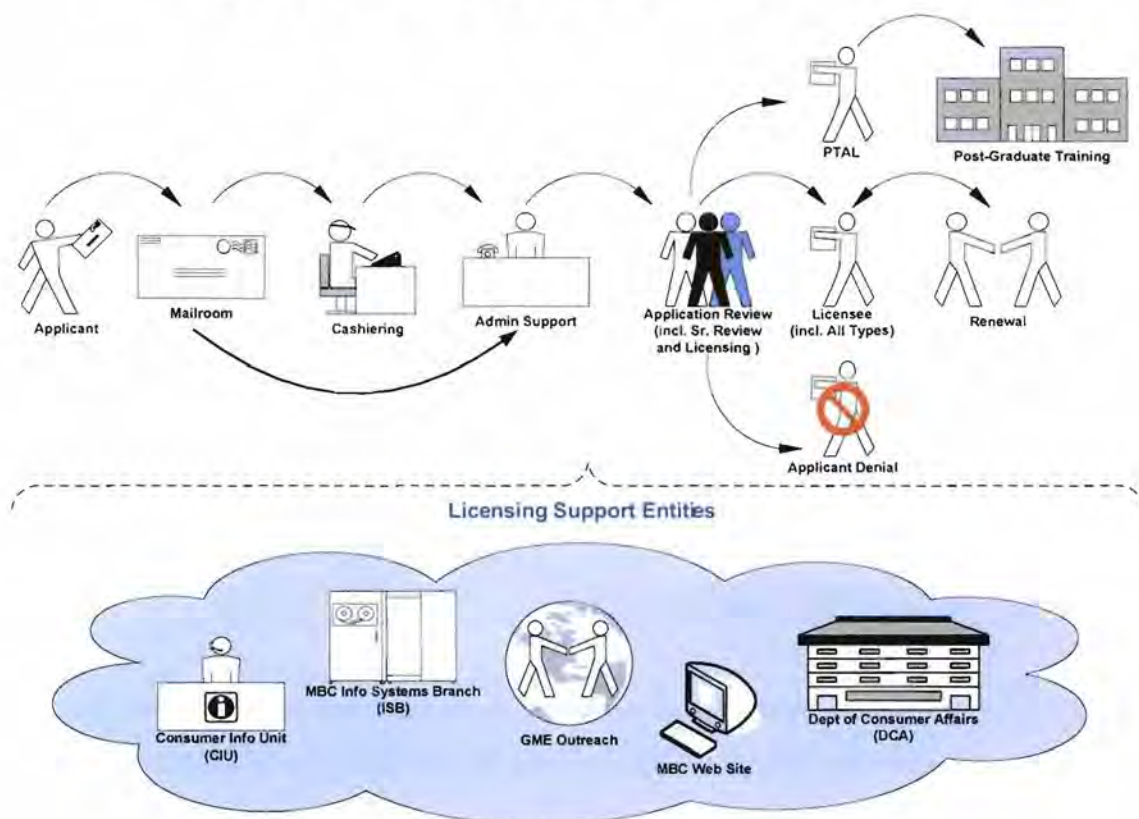
The Licensing Program eliminated the backlog as directed by December 23, 2009. There was no adverse impact on the volume of licenses and PTALs issued. Continued focus on aging inventory and use of several recently developed reports will prevent the future recurrence of the backlog.



Application Processing

The Figure below represents a high-level view of the licensing and PTAL processes. The icons shown below will be used throughout this section to describe the components within licensing and PTAL processes.

Figure 8 - Overview of PTAL and Licensing Processes



- STEP 1: Applications and supporting documentation are received from the applicant by the MBC Mailroom and opened. Any mail that contains payments is forwarded to Cashiering. If the mail does not contain payments, the mail goes directly to the Licensing Administrative Support Staff.



- STEP 2: Monies are processed by the MBC Cashiering staff. A report of the monies received by DCA Cashiering staff is reviewed by the MBC Cashiering staff. The Cashiering Staff forward the mail to the Administrative Support Staff for further processing.
- STEP 3: Administrative Support Staff process and distribute incoming mail, create the application file, conduct a preliminary review of the application for completeness, and update the Applicant Tracking System (ATS) indicating the receipt of the application and supporting documents. Administrative Support Staff send the applicant a letter acknowledging receipt of the application and fees and provides the applicant the unique Applicant Tracking System (ATS) number.
- STEP 4: Review Staff conduct the initial review of the application and supporting documents. If an application is not complete, the Review Staff sends the applicant a deficiency notice. The applicant must submit corrected or additional documentation or contact the responsible entity to submit the additional documentation to MBC. The Review Staff can continue to process the application and required documents through the decision unless the application meets the criteria for Senior Review. Once the application is complete, the decision is made to issue a license or PTAL. An application file can be closed after one year if the applicant does not exercise due diligence and complete the application. Applications deemed ready for licensure or issuance of a PTAL receive a quality control review to verify the application is complete and approved. Review staff issue a PTAL.
- STEP 5: If an issue (such as a serious mental health issue, academic problem, dishonesty, or drug or alcohol use) is disclosed by the applicant or discovered during the Step 4 (the application review process), Senior



Review staff may require additional information. Senior Staff will conduct an additional level of application review. The licensure decision can be to:

- Issue a license or PTAL
 - Issue a probationary license
 - Issue a license with a public letter of reprimand
 - Deny the application
 - Close the application file after one year if the applicant does not exercise due diligence in the completion of the application
- STEP 6: If the licensure decision results in issuing a license, the license is issued to the applicant and the Web site updated with the license information.
 - STEP 7: Renewal staff process license renewals within two years of the issuance of the initial license and every two years thereafter.

Based on the information available and what was observed during the BPR Study, it appears that the current seven-step workflow described above is adequate at the current time.



3.1 Step 1: MBC Mailroom



Mailroom

The mailroom at 2005 Evergreen Street distributes incoming mail for the Medical Board of California. Mail is sent either directly by the sender to the Evergreen location or to the Department of Consumer Affairs central mailroom 1625 North Market Blvd. The on-site mailroom at Evergreen Street is part of the MBC organization but was not part of the scope of the BPR Study.

The mail is sorted by MBC unit. If a check is enclosed, the check and all enclosures are forwarded to the Cashier for processing. If the mail does not contain payments, the mail goes directly to the Licensing Administrative Support Staff. Mailroom staff delivers all other mail to the appropriate MBC staff by early afternoon.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.2, page 127.



3.2 Step 2: Cashiering



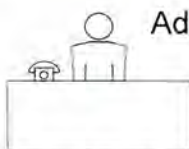
Cashiering

The Cashiering Staff sorts and processes four general types of mail in which money is included:

- **New application with a check included** – an ATS record is created, the check tendered and the application forwarded to the Administrative Support Staff Inbox for processing.
- **Check with no documents** – a copy of the check is made on 'hot pink' paper and forwarded to the Administrative Support Staff Inbox for the Review Staff to research. Once staff knows how to apply the check amount, the ATS record will be updated.
- **Fee invoices with check**– applies the payment amount to the corresponding ATS record. The check is tendered and the 'blue' fee invoice is forwarded to Licensing for distribution to the appropriate staff.
- **License renewal invoices with check**– fees received are recorded in ATS and then the Consumer Affairs System (CAS) record is updated to reflect payment of fees. The check will be tendered and the renewal invoice questionnaire will be scanned into CAS.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.3, Page 129.

3.3 Step 3: Administrative Support



Admin Support

Administrative Support sorts the mail and completes tasks common to all applications such as:

- Application file set-up
- Updating ATS with demographic information and qualification method



- Federation of State Medical Boards (FSMB) and American Medical Association (AMA) checks
- Fingerprint checks
- Generation of the letter acknowledging application receipt
- Preliminary review of application for completeness (no blank boxes or responses)

The Z-project staff is included in the Administrative Support staff and is responsible for logging all application-related documentation received at MBC into ATS and updating the Application Requirements Status Field in ATS with a "Z". The "Z" indicates the document has been received but not reviewed. This information updates the MBC Web site application, Web Applicant Access System. The Web Applicant Access System was launched on December 1, 2009 and allows the applicant on-line real-time information on their application status.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.3, page 129.

3.4 Step 4: Application Review



The Application Review process verifies that the PTAL and licensure requirements identified in California statutes and regulations have been met. Applications are reviewed by type of applicant – U.S. and Canadian medical school graduate (US/CAN) or International medical school graduate (IMG). Supporting documents are reviewed to determine if they meet the requirements (approved) or deficient.

The Application Review process includes:

- Conducting the initial review of the application and supporting documents



- Generating a deficiency notice if needed
- Processing incoming application documents
- Communication with applicant and support entities
- Assessing the need for Senior Staff Review
- Conducting final review prior to licensure

Quality Review is also a component of Application Review and occurs after the Application Review is complete and prior to Licensing. Review Staff issue PTALs. Applications approved for licensure are forwarded to Licensing (Step 6).

For the purposes of the MBC BPR Study, the role of the Fingerprint Coordinator is contained in the Application Review process. Any communication with the California State Department of Justice (DOJ), including fingerprint results, is done through the Fingerprint Coordinator.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.5, page 135.

3.5 Step 5: Senior Review



If an issue is disclosed by the applicant or discovered during the application review process, an application may be forwarded for Senior Staff review and additional documentation may be needed prior to making a PTAL or licensure decision. Examples of issues include serious mental health issues, academic problems, dishonesty and drug or alcohol use. A Senior Review results in the issuance of one of the following:

- Unrestricted license
- Probationary license
- Public Letter of Reprimand



- Denial of application

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.6, page 138.

3.6 Step 6: Licensing



Once a license application review is complete and approved, the final step in the Licensing Process is licensing. A final check is made, the Applicant Tracking System (ATS) is updated, the Consumer Affairs System (CAS) is updated and a license is sent to the licensee.

Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.7, page 144.

3.7 Step 7: License Renewals



In contrast to the considerable amount of application and credentialing documentation review that is required for PTAL and initial licensures, the license renewal process is an automated process with only exceptions requiring a manual review and resolution. The figure below shows that over the past five fiscal years, MBC processed between 56,000 and 61,000 renewals annually with an increase since FY 05-06.⁵

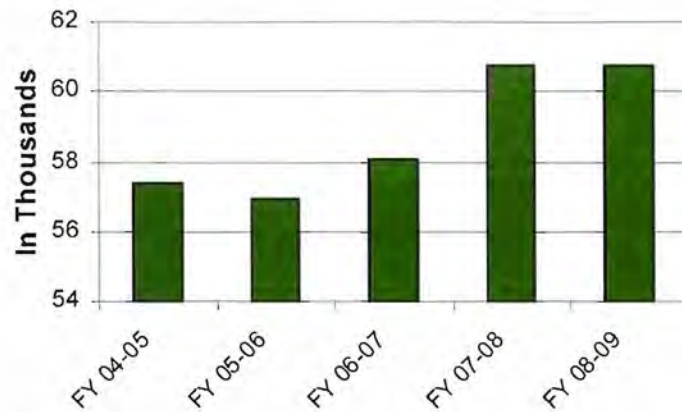
⁵ MBC Annual Reports 04-05 through 08-09



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Figure 9 - Total Licenses Renewed



Information on the roles and responsibilities and the Business Process Flow can be found in Section 9.1.8, page 146.



3.8 Observations

3.8.1 Observations – MBC Mailroom



Mailroom

1. The heaviest volume of mail is on the Monday after a Furlough Friday.
2. Mail is counted and logged on the first week of the month for shared services costs.

3.8.2 Observations – Cashiering



Cashiering

1. Incorrect fees are received by the Cashiering Unit – Additional staff time is required to process checks that are not consistent with any fees. It is thought that the Fee Schedule included in the application may be misinterpreted by the applicant. In addition, the BPR Study Team identified that the current Licensing Fee Invoice Form may cause confusion when received by the applicant.

3.8.3 Observations – Administrative Support



Admin Support

1. There is no centralized and permanent Administrative Support Staff manager - The current Administrative Support Staff performing the tasks identified in the Administrative Support process flows include individuals with Office Technician (OT), Retired Annuitant (RA) and Student Assistant (SA) classifications. Under the current Licensing Program organization, this staff is supervised by multiple managers making it difficult to provide centralized and consistent management. A temporary manager has been assigned starting October 1, 2009, but only through January 2010.



2. Diverse skill sets are required to complete tasks in Administrative Support processes - Application set-up and preliminary review tasks vary from very clerical tasks with minimal analysis (such as verifying all forms received, creating the "application received" letter) to tasks that are mostly clerical with some analysis of the application and supporting documentation (such as determining the Qualification Method).
3. Application files are not always completed in receipt date order in the Administrative Support Business Process - Applications are processed by Administrative Support Staff in the order they are received and a single Administrative Support Staff individual is responsible for completing all the tasks for each file. Each individual works at a different rate. This results in the Review Staff receiving files out of receipt date order. For example, application files with an application receipt date of the 15th may have all Administrative Support process tasks completed before an application with a receipt date of the 10th. The temporary manager assessed receipt and assignment of application set-up and revised the process to ensure all work is completed within three (3) working days.
4. The current staffing for the Z-project is heavily dependent on Student Assistants (SAs) - The Web Applicant Access System (WAAS) allows applicants to view application status online via the MBC Web site and uses the information input by Z-project staff, a part of the Administrative Support Staff. Although WAAS was implemented on December 1, 2009, the project required data entry starting in September 2009. Administrative Support Staff assigned to the Z-project update ATS with application and supporting document information. WAAS depends on timely and accurate entry of application and supporting documentation received at MBC. Turnover for Student Assistants is traditionally higher than turnover of permanent staff, resulting in an ongoing risk for projects that have a heavy concentration of Student Assistants. It is assumed this was not the original staffing plan, but



due to competing priorities, using Student Assistants became the only viable alternative as no existing permanent staff could be pulled from reviewing applications.

5. The current process allows multiple letters to be created and sent to an applicant - During the Administrative Support Process, if an application is missing fingerprints or the application is not filled out completely, a notice is sent in addition to an "application received" letter.
6. Performance metrics and objectives have not been established for Administrative Support Staff - The Administrative Support Staff tasks are an essential part of processing applications, but there are no metrics or performance objectives established for these tasks. Application files were not counted until they enter the Application Review Process. Starting in October 2009, the process was changed whereas received applications are counted when the application and fee are received and the method for licensure (pathway) is entered into ATS by Administrative Support Staff. Applications age from the receipt date at the start of the Administrative Support Process. Time spent on the Administrative Support process tasks accrue as part of the 60-working (90-calendar) day regulatory timeframe for completion of an application's initial review.

In addition, there is limited ability to measure the rate at which applications move from Administrative Support to Application Review. This flow must be managed so that staffing and performance objectives for both processes can be adjusted to address any variances in application receipt.

Review Staff interviews in early October identified that new application files are being received by the Review Staff up to three weeks after receipt date. As of December 1, 2009, it has been reported Administrative Support Staff is working on applications that are seven or less calendar days old.



Work products from the Administrative Support Process have errors -

These errors can result in a delay in completing the initial review and additional work for the Review Staff. Effective November 2009, a quality review of Administrative Support Staff ATS input was instituted. There have not been quality metrics and objectives established for the Administrative Support Process.



3.8.4 Observations – Application Review



1. US/CAN application reviews are typically less complex and take less time - IMG application reviews require more time because US/CAN medical schools use standard curriculums and supporting documentation. IMG applications can have medical schools and clinical clerkships located anywhere in the world and the curriculum may not meet statutory and regulatory education requirements. As a result, an IMG's application and supporting documentation require more time and skills to review and assess. Often an IMG reviewer starts out as a US/CAN reviewer and is promoted to an IMG reviewer.
2. The Policies & Procedure Manual and Decision Log are used in review process - The current Policies & Procedures Manual used by Administrative Support Staff and Review Staff is intended to provide the course of action required to process the license and PTAL applications and all documentation supplied by the applicant and various entities in support of the application. The Decision Log is a "companion document" to the Policies & Procedures Manual, identifying approved clarifications or modifications to the Policies and Procedures Manual and other pertinent information.

Creation, publication and implementation of the initial Policies and Procedures Manual and the Decision Log within the past year was a significant effort and noteworthy accomplishment by the Licensing Program.

It is critical that the Policies & Procedures Manual and Decision Log be:

- Complete
- Comprehensive



- Easy to follow and understand
- Up to date and reflect current requirements and practices

Documents such as the Policies and Procedures Manual and the Decision Log are considered “living documents”. “Living documents” are refined through iterative processes that keep the documents current so they remain an effective tool for Licensing Program Staff. The Decision Log is updated as policy changes, but a process has not been established yet to incorporate the Decision Log into the Policies & Procedures Manual.

Interviews identified that the Policies & Procedures Manual is not complete, but the “core” application processes have been documented. The BPR Study Team believes this is the result of competing priorities and lack of dedicated full-time staff is delaying further work on the Policy & Procedures Manual and other infrastructure-related activities. The BPR Study Team will provide comments on the Policy & Procedures Manual separately from this report.

It is important that Review Staff adhere to the Policies & Procedures identified in the manual. Adherence promotes standard practices and predictable outcomes. Interviews identified that not all Review Staff adhere to the current Policies & Procedures but could not identify why. These deviations are identified during the Quality Review process.

3. The period between application receipt and the start of initial review allows required supporting documentation to be received and processed – BPR Study interviews indicated less than two percent (2%) of US/CAN and IMG applications are considered complete (application, fees and all necessary supporting documentation) at time of receipt. During the time period between application receipt and the start of initial review, supporting documentation is received from external entities, processed and matched up with the application file. At the time of initial review, a higher number of



applications are complete and fewer deficiencies are identified related to outstanding supporting documentation due to the period between application receipt and initial review. Metrics in November 2009 through mid-January 2010 indicate the percentage of applications assessed as complete at the time of initial review and sent straight to licensure average 24% for US/CAN and 5% for IMG. PTAL applications assessed as complete at the time of initial review was 9% for that same time period. .

Careful consideration must be given on how much to optimize the timeframe between application receipt and initial review. For example, if the time between application receipt and initial review was reduced to less than 60 days, it is assumed that more deficiency notices would be created due to missing supporting documentation adding to the overall Licensing Program workload.

4. For applications that have deficiencies and do not require Senior Review, it is estimated that between 70 – 75% of application processing is completed when initial review is completed - The remaining 25 - 30% includes processing the required supporting documentation to resolve the deficiency, quality review, final ATS updates and licensing. For applications that go straight to licensure, it is estimated that that 85-90% of application processing is complete when initial review is completed.
5. Significant effort has been made to meet initial review regulatory timeframes – Regulations⁶ require application have an initial review completed within 60 working days⁷ of receipt. Applications that have been awaiting initial review for over 60 working days (90 calendar days) are considered backlog. An overview of the backlog was discussed in Section 3 - Licensing and Postgraduate Training Authorization Letter (PTAL)

⁶ CCR Title 16 §1319.4 (a)

⁷ 60 working days equates to roughly 90 calendar days. Licensing Program documentation sometimes refers to initial review time in calendar days (days) .



Processes. The analysis of ATS data indicates that the backlog has been a recurring issue from as far back as FY 04/05. The recent backlog started in FY 07/08 Q2 and continued to increase through FY 08/09 Q4. A plan to reduce the backlog was established and implemented by the Licensing Program Chief in October 2009. The backlog was eliminated on December 23, 2009. Inventory must be monitored regularly to ensure a backlog is does not occur again. Metrics were recently put in place to monitor inventory and forecast workload 90 days in advance. The Licensing Program staff, ISB and the BPR Study Team are working together to use ATS data to generate the metrics and develop processes to more efficiently plan and monitor staffing, workload and inventory.

6. It is assumed that the regulatory timeframe for MBC to render a licensure decision is being met – Regulations⁸ require a licensure decision within 100 calendar days of the receipt of a completed⁹ application. The current structure of the ATS data does not easily allow reporting on processing timeframes after the initial review is completed. Analysis of the ad hoc reporting available during the BPR Study indicated the time MBC is waiting for the applicant to resolve deficiencies is included in the timeframe calculations. Wait time like this should not be included when assessing licensing processing timeframes, as the application is not yet complete and the wait time is outside the control of MBC. The BPR Study Team, Licensing Program Staff and ISB staff have initiated discussions on this issue and possible future options.

Because ATS data was not available to confirm regulatory compliance, the BPR Study Team used current workflow to assess the likelihood of regulatory compliance. If an application is incomplete upon initial review,

⁸ CCR Title 16 §1319.4 (b)

⁹ The definition of a completed application is not defined in regulations. The definition commonly used for a completed application is an application having all required information to render a licensure decision. The determination is made by MBC Review Staff.



the applicant is notified by letter of the deficiency (or deficiencies). The required supporting documentation received at MBC is processed and reviewed in the order it was received. The application review does not wait for all required documentation to be received before the application is reviewed.

If an application does not require Senior Review, an application is considered complete when the last document is processed and the reviewer confirms all deficiencies are resolved. The completed application is forwarded to Quality Review and licensed within five business days. The current workflow supports the assumption that the regulatory timeframe for rendering a licensure decision is being met for applications not requiring a Senior Review.

If an application requires a Senior Review, the application is forwarded to Senior Review staff. Additional supporting documentation may be required for Senior Review. The application is not considered complete until the additional supporting documentation for Senior Review is received and processed. Once all documentation is received, the Senior Review is conducted, a licensure decision is rendered and the applicant is informed of the licensure decision. The applicant has 30 days to request an Administrative Hearing if they wish to contest the licensure decision. The Deputy Attorney General (DAG) represents MBC at the Administrative Hearing at DOJ. A recommendation from the Administrative Hearing is forwarded to the Board for final licensure decision. This workflow supports the assumption that the regulatory timeframe for rendering a licensure decision is being met for applications requiring a Senior Review.

7. Review Staff workload is monitored to retain balance – Review staff workload is assigned by application type - US/CAN and IMG and then by first initial of applicant's last name. Letters of the alphabet with a smaller volume are grouped together to achieve a reasonably sized workload.



Licensing Program Management regularly reviews workloads and adjusts them to maintain a balance. Workloads were assessed and rebalanced in September 2008, July 2009, and again in early December 2009 when additional IMG staff was added. The next scheduled workload review is February 2010.

8. Reviewer's individual contact information is on outgoing correspondence to the applicant - This allows applicants to contact Review Staff directly. Although this provides a "personalized" approach, reviewers estimate that responding to phone calls and emails take up between two and four hours a day. Any changes made that decrease the amount of time spent on these tasks would increase the time available for application review tasks. The successful implementation of the WAAS project is expected to show a long-term decrease in application status inquiries.
9. Staff indicate there can be multiple calls for same issue, sometimes within the same day – Review Staff interviews indicate instances where the applicant, licensing service and others calling on behalf of the applicant call the Reviewer, sometimes within the same day, about the same issue (often application status inquiries). This increases the number of calls and the amount of time Review staff spend on tasks other than application review. Any changes made that decrease the amount of time spent on these tasks would increase the time available for application review tasks. The successful implementation of the WAAS project is expected to show a long-term decrease in application status inquiries. Once the backlog is eliminated, it is expected that these inquiries may decrease.
10. Metrics are not currently available or analyzed regarding Review Staff phone calls and emails - The implementation of the WAAS project is expected to show a long-term decrease in application status inquiries. Phone call metrics are available through the CIU, but these same metrics are not currently available for Review Staff phone calls. There are no



metrics on incoming emails to Review Staff. This limits the ability to accurately measure the overall impact of the WAAS project. As an alternative, Review Staff should be regularly surveyed to determine any changes to phone call and email volume.

11. Review Staff perform clerical tasks - Interviews with MBC Licensing

Program Staff identified that under the current workflow, there are clerical tasks performed by the Review Staff. These tasks may be more appropriate under the Administrative Support Staff functions. Examples include:

- Filing miscellaneous mail into an application folder - Currently "Miscellaneous Mail" (mail received in advance of MBC receiving the application) is delivered to Review Staff. In order to determine what Review Staff the Miscellaneous Mail should be delivered to, the mail is sorted consistent with current application assignments: US/CAN or IMG and first letter of last name. In some cases, it is easy to determine whether the mail is for a US/CAN or IMG applicant (such as a medical school transcript). In other cases, it is not easily identifiable and the Administrative Support Staff responsible for sorting the Miscellaneous Mail must make an educated guess. In this case, mail intended for an IMG application can be erroneously delivered to US/CAN Reviewer or vice versa. Review Staff holds the "Miscellaneous Mail" until the application file is received from Administrative Support Staff and is ready for initial review. At that time, the Review Staff goes through the "Miscellaneous Mail" looking for any documentation received related to that application. Part of the current process is that the Review Staff will check their "counterpart's" Miscellaneous Mail if the applicant indicates that they have already sent the document.
- Making copies of any original documents sent as supporting documentation with the application. Any original documents submitted



with the application (such as medical school diploma) are required by regulations to be returned to the applicant¹⁰. A copy is made and put in the application file. A letter is generated itemizing what original documents are being returned to the applicant. The letter and any original documents are given to Administrative Support Staff to return by certified mail.

12. Supporting documentation received separately from the application may be delivered to wrong reviewer – A few types of supporting documentation do not easily identify the applicant as a US/CAN or IMG (For example Form L3A/B (Certificate of Completion of ACGME/RCPSC Postgraduate Training)), requiring Administrative Support Staff to determine which reviewer the mail should go to. As a result, mail can potentially be delivered to the wrong reviewer. To address this issue, reviewers check with their “counterpart” reviewer if an application file is missing supporting documentation prior to creation of a deficiency letters.

13. There is no License/PTAL application update form – If the applicant wants to update any information on the application initially submitted, the full application (L1A – L1E) must be resubmitted. The L8 form was used for updates and was discontinued several years ago, resulting in the use of the L1A-L1E for updates. BPR Study research could not identify the reason why the L8 form was discontinued. Current process requires Review Staff to compare the current application with the updated application. During BPR Study interviews, it was identified that using this application update method:

- Requires a significant amount of work (versus using an update form)
- Frequently results in a deficiency letter due to inconsistent or missing information other than the information being updated.

¹⁰ CCR Title 16 §1323(a)



14. Counts for "Applications Reviewed and Awaiting document" contains applications over one year old and PTALs – Current regulations¹¹

authorize MBC to close an application when an applicant does not exercise due diligence in the completion of the application. Failure to complete the application within one year constitutes failure to exercise due diligence. MBC may provide the applicant the option to update the application within 30 days or the application will be closed.

BPR Study interviews indicate that:

- Due diligence determination is currently a manual process
- When MBC has notified applicants in the past of possible application closure, approximately 50% of applicants will respond, provide proof of due diligence and the file will remain open.

Applications meeting this criteria were identified in August 2009. Due to the Licensing Program focus on application processing and elimination of the backlog, applicants have not been notified and applications remain open and counted in the "Applications Reviewed and Awaiting Documents". Applications counted in this category do not impact regulation processing timeframes because they are waiting for some type of applicant action (such deficiency resolution).

Applications that have PTALs issued also are counted in "Applications Reviewed and Awaiting Documents" and are discussed separately below in PTAL-related observations.

15. Application and instructions require review and modifications –

Recommended updates for the application have been compiled by Licensing Program staff. The recommendations are based on Review Staff experience, applicant and GME Program comments. Suggestions were also

¹¹ CCR, Title 16 § 1306



provided by newer staff during training sessions in September and October 2009.

The BPR Study Team reviewed the application and instructions and agrees with the previously identified need to revise the application and instructions. Research and interviews identified that application errors may be prevented with clearer and concise application and instructions. Application and instruction comments with recommendations developed by the BPR Study Team will be provided to the Licensing Program separate from this document.

16. PTAL-related observations – The PTAL observations have been grouped by subtopic to facilitate review of the information provided in this observation.

Statutes and Regulations

Current regulations¹² require IMGs who seek postgraduate training in California to obtain:

- A PTAL prior to enrollment in a California-based postgraduate training program. This is done to ensure the medical school and clinical training requirements have been met.
- Licensure by the end of the 36th month of training.¹³

PTALs are valid for one year from issue date. Currently, there is no limit to the number of times a PTAL can be renewed and no fees are assessed for PTAL renewals. Common problems with PTALs renewed multiple times are the increased likelihood that test scores will expire and placement in a

¹² Business and Professions Code § 2111 (PTAL), Business and Professions Code § 2102 (IMG Licensure)

¹³ MBC "Application and Licensing Physician and Surgeons, Frequently asked questions" – June 2009



postgraduate training program will be difficult. During BPR Study interviews, questions came up regarding the statutory and regulatory language related to PTALs. It is unclear if the PTAL was required to be renewed after a resident is enrolled in a California-based postgraduate training program.

How PTALs are identified in ATS

Starting in Q2 of Fiscal Year 05-06, a new Pathway (Qualification Method) was developed for ATS allowing PTAL applications to be identified separately. This allowed better data collection on PTAL applications. Process improvements continue for this pathway as it is important to identify and maintain data and improve the ability to track:

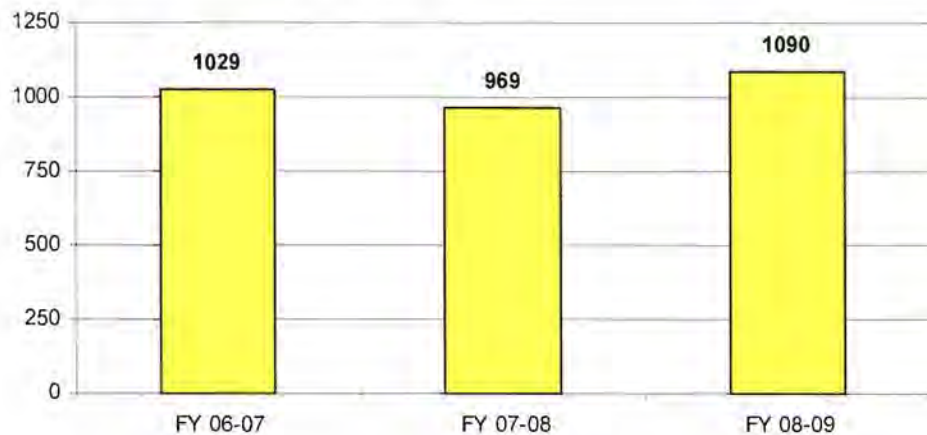
- The PTAL application from receipt to the issuance of a PTAL
- Any PTAL renewals
- The License application for an applicant that received a PTAL

PTAL Volume

Approximately 1,000 PTAL applications are received annually as indicated in the figure below. Based on annual application receipts of 6,000, about 15% of the all applications received are seeking a PTAL. Based on recent metrics, it is estimated that out of 1,000 PTAL applications received, at least 950 result in the issuance of a PTAL once the application is considered complete.



Figure 10 - PTAL applications received



Application receipt and processing metrics have always included PTALs and licenses. Prior to January 2009, metrics were only available for licenses issued. No automated method to capture PTALs issued (except those issued upon initial review) has been identified. Starting in January 2009, metrics for PTAL issuance have been manually collected and reported. Any past comparisons of applications received and licenses issued appear to be skewed as the applications received metrics included applications and PTALs, but only licenses issued were reported.

PTAL Processing

From a high-level, PTAL application processing is similar to license application processing. As shown in the table below, several of the same forms and documents are required for a PTAL application and a license application. Based on these similarities, it is reasonable to assume the level of effort to process a PTAL application is comparable to a license application.



Table 3 - Application Forms, Supporting Documentation and Fees

Application Forms Supporting Documentation Fees	PTAL App	IMG License App	US/CAN License App
L1A - L1E	✓	✓	✓
L2 - Certificate of Medical Education	✓	✓	✓
L3A/B - Cert of Completion ACGME/RCPSC Postgraduate raining		✓	✓
L4 - Cert of Current Post Grad Training Enrollment		✓	✓
L5 - Certificate of Clinical Clerkships	✓	✓	
L6 - Certificate of Clinical Training	✓	✓	
Fingerprints	✓	✓	✓
Official Exam Transcripts	✓	✓	✓
Medical School Transcript	✓	✓	✓
Certified Copy of Medical Degree	✓	✓	✓
Official Letters of Good Standing		✓	✓
Fees - App Fee \$493/ License Fee \$808 or \$416.50	✓	✓	✓
Original Official English Translation for Non-English documents	✓	✓	

Unlike an application resulting in licensure, an application file that results in the issuance of a PTAL remains open. The file is still considered active and counted as inventory awaiting action. The file must be retained by MBC for a minimum of one year and this requires time, effort and space to store these files. Within a year from issue date, PTAL holders must either:

- Renew the PTAL, or
- Notify MBC what Postgraduate Training program they are enrolled in through the Postgraduate Registration Form (Form 07M-157A).

PTAL Renewals

If the application is renewed (currently through the submission of a new L1A-L1E) or a Form 07M-157A (PGT Registration Form) has been received and processed, the application file continues to remain in an open status. An application file remains in open status for a minimum of one year after PTAL issuance and currently has no maximum. No statistics were available to analyze the frequency of PTAL renewals. After the applicant has completed



required postgraduate training, a license application is submitted and supporting documentation from the PTAL application, such as medical school transcripts and proof of clinical clerkships is used for the supporting documentation for the license application if the PTAL applicant seeks California licensure.

Based on current statutes and regulations, if the applicant has not renewed the PTAL or notified MBC after a year, the file may be closed after due diligence is completed ¹⁴.

Summary for the PTAL observation

In summary, the BPR Study has identified:

- Clarification is needed if PTAL requires renewal while applicant is enrolled in a residency program
- There is no limit to the number of PTAL renewals that can be issued. No fees are assessed for a PTAL renewal
- PTAL files remain open for a minimum of two years after a PTAL is issued and are counted in Licensing Program overall inventory while they remain open
- PTALs require additional data fields and/or programming in ATS to be effectively tracked
- PTALs require additional and extended tracking
- PTALs applications require an additional level of reporting compared with licenses applications
- There is a similar amount of documentation and effort required to process a PTAL and a license application, but the PTAL is inherently different than a license

¹⁴ CCR, Title 16, §1306.



17. Resource-related observations - Several resource-related observations were identified during the BPR study:

- a. *Budget Change Proposal (BCP) status* – A BCP is a proposal to change the level of service or funding sources for activities authorized by the Legislature, or to propose new program activities not currently authorized¹⁵. A BCP was submitted in June 2008 and the Governor's office approved 7.8 additional positions with the Licensing Program starting July 1, 2010. The 7.8 additional positions were needed to process the increase in the number of applications received over the past several years and maintain processing within regulatory timeframes.

During October and November 2009, additional staff was hired to eliminate the licensing backlog and maintain processing times within regulatory timeframes. In October 2009, six (6) Student Assistants and two (2) Retired Annuitants were hired. In November 2009, four (4) of the 7.8 new positions were hired on a temporary basis.

While the BCP adds one (1) supervisor and 6.8 new staff, there does not appear to be sufficient staff to complete infrastructure work identified in this report and process applications to comply with regulatory timeframes.

- b. *Resource management tools must continue to be refined* – Several resource management tools (forecasts, staffing plans, processes, objectives and metrics) were developed prior to the start or during the BPR Study based on the needs of the Licensing Program. It is anticipated these tools will continue to be refined through iterative use.

¹⁵ <http://www.dof.ca.gov/budgeting/>



- c. *Resource assignments and performance objectives are reviewed and adjusted monthly to effectively manage inventory and prevent a backlog* – Figure 2 – Quarterly view of applications received per month (average) shows the application receipts by FY quarters and identifies fluctuations in application receipts, requiring flexibility in resource management to address workload fluctuations. Based on the ATS data analyzed for FY 08/09, US/CAN application receipt has the highest quarterly variance, ranging from 630 (Q4 – April through June) to 1210 (Q3 – January through March). Monthly resource planning has evolved during the BPR Study to include forecasted application receipts, current application inventory, workload distribution and performance metrics. Resource planning processes should continue to evolve and mature through iterative use.
- d. *Current staff to manager ratio exceeds norm* – Typical staff to manager ratios range from 4:1 to 10:1 depending on type of work. Under the current Licensing Program organization, the staff to manager ratio for application processing is approximately 20:1. Two (2) managers (Staff Services Manager I (SSM1)) are responsible for the management of approximately 40 permanent and temporary staff.

The responsibilities and activities of the Licensing Program management are driven by the Medical Board's mission and current statutes and regulations (such as processing timelines). Addressing these responsibilities and completion of activities becomes more complex when managing resources that are:

- Not full-time (fractional resources),
- Changing (due to resignations, promotions or retirements),
- Less experienced,



- Spread across multiple classifications,
- Assigned to different responsibilities, or
- Responsible for a variable workload

The BPR Study Team observed the existence of all of these factors in the Licensing Program organization, particularly in Administrative Support Staff and Review Staff.

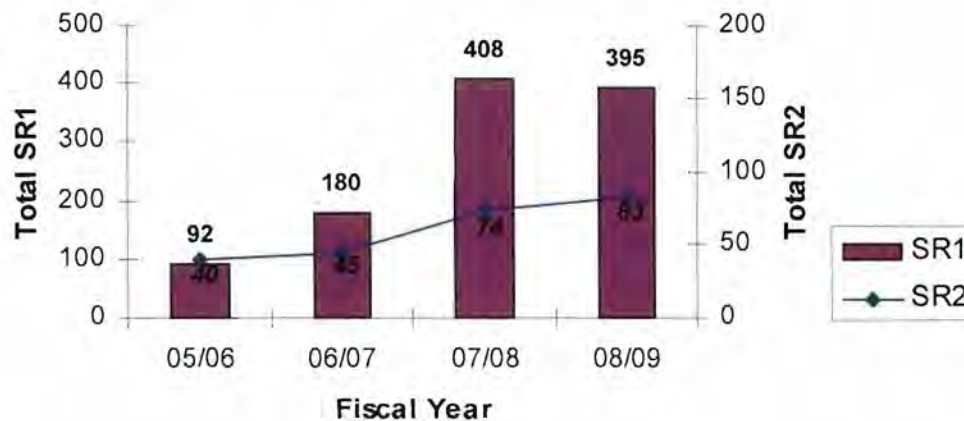


3.8.5 Observations – Senior Review



1. Since FY 05/06, there have been increases in Senior Reviews Level 1 (SR1) and Senior Reviews Level 2 (SR2). The Figure below shows that SR1s have had a greater increase since FY 05/06 than SR2s. This significant increase in SR1s and SR2s results in a comparable increase in workload for staff responsible for Senior Review.

Figure 11 – Total SR1 and SR2 files



FY	Total Applications Received	SR1 files	SR1 %	SR2 files	SR2 %
05-06	6090	92	1.51%	40	0.66%
06-07	6034	180	2.98%	45	0.75%
07-08	6192	408	6.59%	74	1.20%
08-09	6169	395	6.40%	83	1.35%

2. The SR1 criteria was re-evaluated in 2009. The Licensing Program evaluated SR1 criteria and determined that certain SR1 criteria did not pose a risk to public safety, such as applicants taking a leave of absence for



maternity leave. Select criteria was removed from the SR1 list. SR2 criteria was not changed.

3.8.6 Observations - Licensing



Application Review
(inc. Sr. Review and Licensing)

There are no observations or issues identified for the Licensing Process.

3.8.7 Observations - Renewals



Renewal

There are no documented policies and procedures for the License Renewal staff. This is not currently causing an issue because there

is minimal turnover in the staff responsible for license renewals, but should be addressed in the future. Documented policies and procedures ensure standard processes are identified, consistent information is provided and backup training is facilitated.

Renewal Staff currently reports to the Licensing Operations Manager and this function is grouped with allied health professional certificates and licenses.

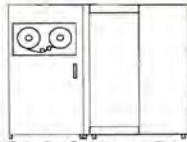
Consideration should be given to move this function under the same manager as the Licensing function so that there could be increased communication and coordination related to the issuance of physician wall certificates and pocket identification cards.



4 Licensing and Postgraduate Training Authorization Letter (PTAL) Support



Consumer Info Unit
(CIU)



MBC Info Systems Branch
(ISB)



GME Outreach



MBC Web Site

MBC functions that support PTAL and licensing processing and the renewal process include the Consumer Information Unit (CIU), Information Systems Branch (ISB), Graduate Medical Education (GME) Outreach and the MBC Web site that is maintained by ISB.

4.1 Consumer Information Unit (CIU)¹⁶

The Consumer Information Unit (CIU) provides telephone support to medical professionals and health care consumers for MBC-related inquiries such as application questions, license verification and complaints. It is considered part of the Licensing and Renewal processes since applicants call the CIU with various license application and renewal questions, the most common being the status of the application. One of the biggest challenges that the CIU faces is meeting the needs of a diverse set of callers –

- Medical professionals
- Health care consumers
- Individuals with limited time
- Individuals seeking specific information
- Individuals not knowing what they want
- Individuals who want to talk, but the issue is unrelated to any MBC function.

¹⁶ This information was taken directly from a CIU/Web Center Overview provided by Doug Hume of MBC's CIU staff to the BPR Study Team in early September 2009.



In September 2009, CIU Staff totaled one manager and six FTE staff including one vacancy. In November 2009, CIU Staff totaled one manager, five FTE (including one vacancy) and one Student Assistant. One FTE staff position was converted to an IT classification and functions as the Web Center Administrator.

Monthly Status Reports from January 2009 through July 2009 indicated the CIU receives between 10,000 and 14,000 calls per month¹⁷. During the three-month period of August 2009 and October 2009, calls identified as application questions totaled between 2,000 and 2,900 per month, one of the top two types of calls ("Other" is the other most common type of call). For the same period, renewal questions totaled between 900 and 1,250 calls per month¹⁸.

The CIU uses a computerized client-server based phone system called the Web Center. This product was purchased from Verizon and was implemented at MBC in December 2008. Prior to December 2008, the CIU used a bank of phones with a message box that held 50 calls. CIU staff would have shifts to return calls.

Additional information can be found in Section 9.1.9, page 148.

Observations - CIU

1. The implementation of Web Center in December 2008 is a tremendous overall improvement from the prior phone system - Improvements include better CIU resource management and call routing, increased data collection, availability of statistical reporting and enhanced caller experience.
2. Training materials have been developed by the Web Center Administrator and include a multi-day training session - These training materials are used as Policies and Procedures. Documented policies and procedures ensure

¹⁷ SOURCE: Total Segments Received from the Workgroup Segments – Call Center Workgroup Status Report and includes answered, abandoned, callback and calls not answered.

¹⁸ SOURCE: Outcome Statistic Report – Call Center Outcome Statistics



standard processes are identified, consistent information is provided and backup training is facilitated.

3. Turnover rates for CIU staffing are high - In 2008, there was 100% turnover of CIU Office Technician (OT) staff. In July 2009 there was one Manager (Office Services Supervisor II (OSS II)) and six (6) OTs. Between July 2009 and December 2009, turnover has been 85% (only one OT out of six remained). Currently, there are 1 Manager (OSS II) and 5 OTs (1 vacant), 1 Student Assistant (SA) and 1 Web Administrator. No specific cause was identified for the high turnover rate. High turnover rates provide several management challenges. It was indicated during BPR Study interviews that the CIU may require a higher classification level than an Office Technician (OT) and this may decrease turnover rates.
4. The call tree was revised based on meeting with Licensing Chief and Executive Director the week of November 23rd - The revisions are intended to enhance caller experience by improving caller options and routing. Call flows should be regularly monitored to ensure the needs of different caller types are met.
5. Monthly CIU statistics from Web Center are available and can be used to identify issues and possible improvements – Regular review and analysis of Web Center statistics and CIU outcome codes summary could identify issues, resulting in changes that increase the quality of the services provided by the CIU. Outcomes codes should be designed to identify issues and possible improvements. The changes could be outside the CIU such as Web site updates, changes to application, or internal policies and procedures.
6. Between August 2009 and October 2009, the CIU outcome code "Applicant Application questions" totaled between 25% and 33% of all monitored outcome codes (between 2000 and 3000 calls per month) - The



implementation of the Web Applicant Access System (WAAS) project is expected to show a long-term decrease in calls related to application status checks. Historically after implementations like the WAAS project, there may be a short-term increase if the users have issues, information is incorrect or not presented clearly.

A new outcome code called "Application Status Check" was implemented on November 9th to isolate application status calls from the general category of "Applicant Application Questions". Additional WAAS-related outcome codes implemented include:

- WAAS - General Questions
- WAAS – Web site Support
- WAAS – ATS Number request
- WAAS - Discrepancies

Variances to "Applicant Application questions", "Application Status Check" and the new WAAS outcome codes should be monitored closely and regularly to assess if changes are required in the WAAS project.

The BPR Study team worked with WAAS project staff to provide a brief report with project-specific recommendations prior to the WAAS implementation.

7. Between August 2009 and October 2009, the CIU outcome code "other" was approximately 25% of all monitored outcome codes (between 2200 and 2300 calls - "Other" is assigned by agents when there is no other applicable outcome code. As stated before, outcome codes should be designed to identify issues and possible improvements and the amount of calls in this category is large considering there are over 20 outcome codes.



8. Call statistics are only collected for calls coming into Web Center - No call statistics are currently collected for calls that go directly to the Executive Office or directly to the Review Staff. The implementation of the WAAS project is expected to show a long-term decrease in calls related to application status checks, but this can only currently be monitored for calls coming through the Web Center. Some type of call statistics may be available for these phone lines through DCA. Through observation and interviews, both the Executive Office and Review Staff receive a considerable amount of calls per day.
9. The current name, "Consumer Information Unit", may unintentionally result in physicians and other non-consumers calling the Executive Office for assistance.

4.2 MBC Information Systems Branch (ISB)

ISB provides technical support to the Licensing Program and serves as the liaison between DCA Office of Information Services (OIS) and the Licensing Program Staff for MBC-related changes. Other ISB responsibilities include maintenance and enhancements to the MBC Web site, data extraction and reporting on data from ATS and Consumer Affairs System (CAS). Organizationally, ISB reports to the MBC Deputy Director.

MBC ISB serves as the liaison between DCA Office of Information Services (OIS) and the Licensing Program Staff for MBC-related changes. DCA OIS is responsible for ATS and CAS maintenance and enhancements. These systems are used by the Boards and Bureaus under the DCA organization. DCA-OIS is developing an Agency-wide online application system, BREEZE2, that will meet MBC's application processing needs. It is scheduled for implementation December 2012.



Observations – MBC ISB

1. There has been a significant increase in the use of ISB resources – Over the course of the BPR Study, the Licensing Program has leveraged the knowledge of the ISB staff to create and refine reporting using ATS data to streamline Licensing Program functions.
2. Several new reports have recently been created to assist in performance and workload assessment - The BPR Study Team worked jointly with Licensing Program staff and ISB on the requirements and development of additional reports to assist the Licensing Program in metric development and workload assessment.

4.3 Graduate Medical Education (GME) Outreach

Graduate Medical Education (GME) Outreach supports the Licensing process by providing education and assistance to GME Program Coordinators and residents preparing to submit their license application. Organizationally, the GME Outreach Coordinator is assigned to the Executive Office, but works closely with the Licensing Program Chief and Review Staff.

It is estimated that 35% of the applications received are from residents actively enrolled in GME programs or planning to start training. With a significant amount of applicants coming from a common source, GME outreach is vital to reiterate policies, procedures, and information that will facilitate the application process for both the applicant and MBC. Additional goals for GME Outreach efforts are to increase the quality of the applications received, decrease the number of calls to the CIU and to the license review staff. This is most efficiently done through GME



Outreach efforts in group settings by identifying common issues and answering frequently asked questions.

The State of California has approximately 9,284 residents and fellows¹⁹ in 850 (est.) Postgraduate Training (PGT) and specialty programs across 175 (est.) teaching hospitals and institutions. Of these 9,284 residents and fellows, it is estimated that 2,000 residents and fellows a year require licensure before July 1 in order to start or continue their postgraduate training. Many fellows are licensed in another state but require California licensure prior to starting their training. For US/CAN Medical School Graduates, licensure is required by the end of their 24th month of training. For IMGs, licensure is required by the end of their 36th month of training.²⁰ The difference in requirements is due to the additional time afforded to IMGs to familiarize themselves with the unique aspects in U.S. health care delivery systems.

MBC has historically shown a marked increase in applications received during the months of January through March (Q3 based on Fiscal Year July - June). This increase is attributed to residents seeking licensure by July 1.

The GME Outreach Coordinator represents MBC to GME Programs and provides a single point of contact and additional resource for GME Program Directors and Coordinators and residents enrolled in California-based PGT programs. The GME Outreach Coordinator conducts, participates in or provides:

- **Presentations at new resident orientations** – Occurring in June and July, these 20-minute presentations at the major teaching hospitals provide an overview of MBC, the Licensing Program and the resident's responsibilities.
- **Full-day Licensing Fairs** – Are conducted at teaching hospitals to provide assistance to residents who are completing license applications. During the full-day licensing fairs, the MBC GME Coordinator and the GME office make

¹⁹ Medical Education issue of JAMA Sept 23/30, 2009

²⁰ California Business & Professions Code § 2170 (US/CAN) § 2102 (IMG)



available on-site fingerprint services, a photographer, original document verification, one-on-one assistance, and copying services. The Licensing Fairs are conducted across the state and average two per month.

- **Licensing and Outreach Information Meetings** – Conducted on an as-needed basis, these provide information on general topics related to Licensing. The meetings target GME Directors and Coordinators, but the general public can attend. These types of meetings were conducted in October 2009, one in Oakland and one at UC Irvine. A total of 80 individuals (est.) attended these two meetings. Members of the BPR Study Team attended the Oakland Meeting.
- **Ongoing support to GME Programs** – Throughout the year, GME Program Coordinators will use the GME Outreach Coordinator as a resource for assistance, guidance and obtaining status of residents process toward licensure.

Starting last year, the GME Outreach Coordinator, together with the Licensing Program Chief, worked closely with the teaching hospitals to obtain a consolidated list of residents requiring licensure by July 1. From the consolidated list, MBC identified approximately 1,200 residents and fellows needing licensure. These applications received priority processing and their status was monitored and reported back to the teaching hospitals regularly. This effort assisted the teaching hospitals to ensure application processing was completed and a licensure decision was rendered before July 1. The data collection process was refined this year to include a standard file layout and enhanced instructions to facilitate the collection of data at MBC.

Observations – GME Outreach

1. Outreach activities do not have quantitative metrics available to assess efficacy and confirm GME program needs are being met – Current indicators of effective GME outreach are continued and successful working relationships with California's teaching hospitals, GME staff and residents.



Successful GME outreach could be correlated to an earlier submission of license applications or an increase in application quality, but metrics are not in place to fully assess the effectiveness of GME outreach activities. In the October 2009 Outreach meeting in Oakland, participants had several positive comments regarding MBC's GME outreach efforts. Observations by the BPR Study Team were consistent with these comments.

2. AMA data may have information that MBC could use to identify residents and fellows currently enrolled in GME programs - This data could be analyzed and provide additional value including potential licensee identification. Further discussion on the potential use of AMA data is provided in the Section 5.2 Postgraduate Training (PGT) Registration Form, page 92.



4.4 The MBC Web Site

The MBC Web site (www.mbc.ca.gov) is the primary communication portal between MBC and the public. Physicians, applicants and healthcare consumers use the Web site to obtain information on the multitude of services that MBC provides. The Web site contains information on applications, license verification, complaint information and MBC activities. It supports the Licensing and Renewal processes by providing information, resources, forms related to these processes and provides the Web site user several avenues to contact MBC for additional information. The Web site was reviewed only as it relates to PTAL, licensing and renewal processing. The Licensing Program is responsible for maintaining the PTAL and License Web site information. Licensing Operations is responsible for the renewal Web site information.

The homepage is shown in the figure below.



Figure 12 - MBC Web Site Homepage



Organizationally, the Web site is the responsibility of ISB and is maintained and updated on an as needed basis. The State of California has Web site standards²¹, but the BPR Study Team could not find any additional MBC-specific guidelines for updates. A form is required for Web site updates and submitted to the Web User group. The Web User group meets monthly or every other month to review completed Web site update forms. Cyclical reviews of Web site content do not appear to be conducted to ensure content is valid and current.

The figure below shows the applicant tab and the subtabs under the applicant tab. This area of the MBC Web site is most frequently used by licensure applicants. For IMGs seeking a PTAL, information is contained under the "Quick Links" area within the applicant tab, but is simply a link to the application and instructions.

²¹ http://www.cio.ca.gov/stateIT/pdf/IOUCA_Usability_Recommendation_Adopted_071406.pdf



Figure 13 - MBC Web Site Applicant Tab



Web Applicant Access System (WAAS)

A Web site enhancement under development during the BPR Study was the Web Applicant Access System (WAAS) project and was implemented on December 1, 2009. Implementation provides the ability to access license application status using the applicant's unique ID created in ATS. Implementation of this project is intended to increase the applicant's ability to independently perform license and PTAL application status inquiries and decrease the time that MBC staff (CIU and Licensing Program staff) spend responding to these types of inquiries. By decreasing the time Licensing Program staff spends responding to applicant status inquiries, more time is available to complete application processing and answer other types of calls in the CIU.



The following figure shows the Web pages displayed when an applicant accesses the WAAS application.

Figure 14 - WAAS Web Pages

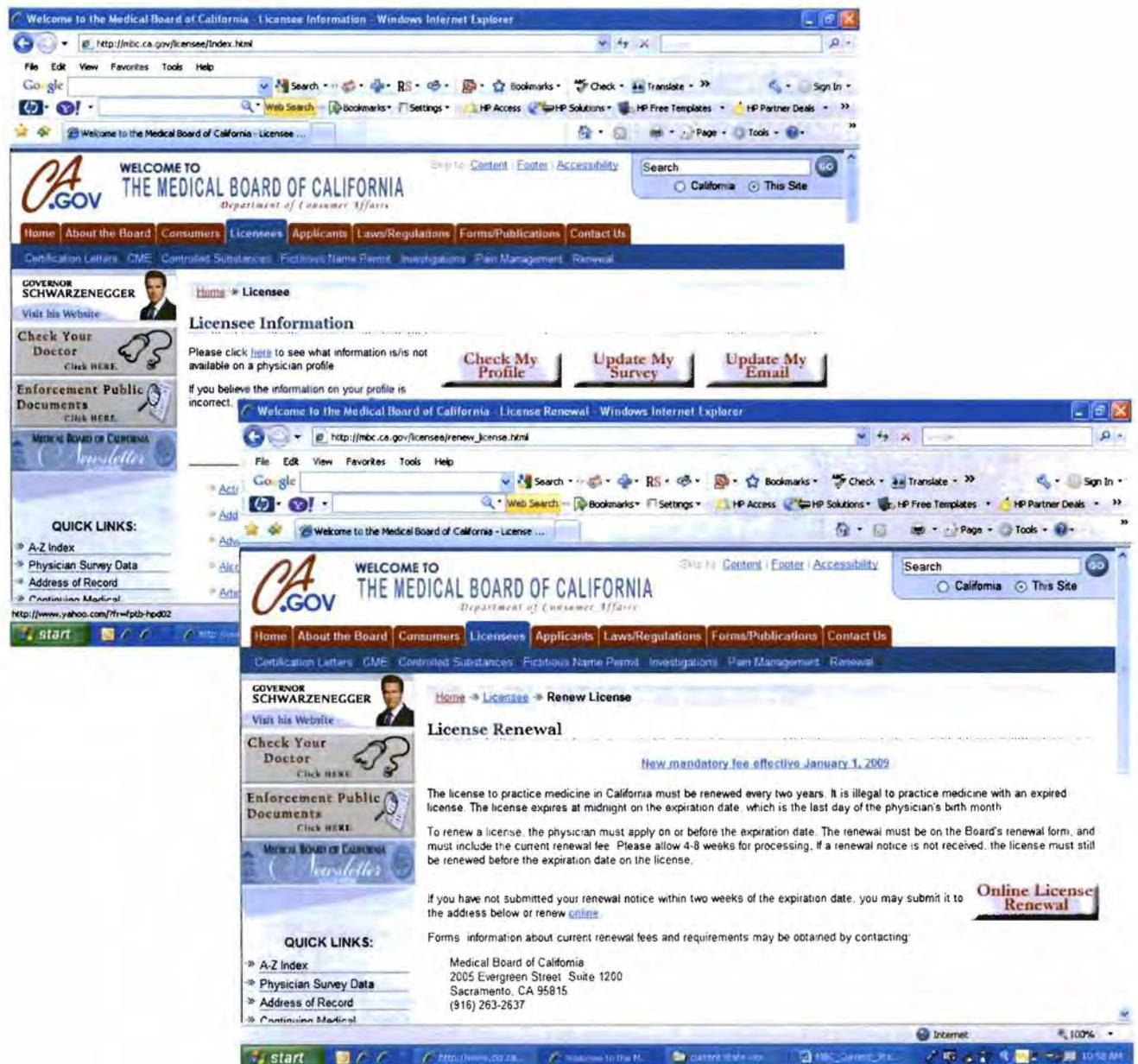




Renewals

From the Licensee Tab from the main web page, the figure below shows the Renewal subtab.

Figure 15 - MBC Web Site Renewal Tab





Webmaster

Web site users have the option to email the Webmaster from three locations:

- A general “email Webmaster” under Customer Service Options listed on the MBC home page
- In the “REQUEST A CALLBACK!” option under the Customer Service Options listed on the MBC home page if an individual would like to contact the Medical Board anonymously
- Under Web site management on the “Contact Us” tab.

Applicants and Licensees can also use the “REQUEST A CALLBACK!” option that emails the CIU and results in a phone call from the CIU. The information required requesting a callback does not have a field to identify what the nature of the request is; the caller has to wait until the CIU contacts the individual to provide additional information. If an applicant or licensee cannot find the information they are seeking on the Web site, their options are to email the webmaster, request a callback or call MBC or the CIU directly. There is currently not a live chat option available through the Web site. A live chat option is available through the Web Center, but would require an assessment of staff skills and additional effort to implement.

The Webmaster receives an average of 300 emails per month from the MBC Web Site. The email is checked at the beginning and throughout the business day. Approximately one-third of the emails come from applicants requesting an application package or fingerprint cards; these emails are forwarded to the CIU Webmaster who sends the requested information. The remaining 200 are regarding laws, regulations, statistical information, or complaints and are received from consumers, physicians and other interested parties. Emails are sent to the appropriate staff. More complex emails are answered by the Web site Webmaster such as scope of practice, training, and supervision requirements for residents.



Observations – MBC Web Site

1. Limited PTAL information is available on the Web site – For IMGs seeking a PTAL, the information is contained under the “Quick Links” area within the applicant tab, but is simply a link to the application and instructions. Information on PTALs is embedded in the application instructions, but no information was available on the Web site. It is assumed that IMGs either receive initial information on the PTAL requirements through the GME programs or call the CIU. Additional calls to the CIU may be logged under the outcome code “Applicant Application Questions”, making it difficult to assess PTAL-related calls to the CIU.
2. Applicant tab on Web site requires format and content updates – BPR Study Team analysis has concluded that the format and information provided for applicants most likely does not meet their needs. It provides more general licensing information in a narrative format. At the start of the BPR Study the information on the web page provided 2003 – 2004 licensing statistics, but has since been updated.
3. The MBC Web site is updated as needed; Cyclical reviews do not occur to ensure content is current and user appropriate - There are multiple MBC components that must be continually coordinated with current, clear, concise and consistent information including:
 - Application instructions
 - Web site content
 - Policies and Procedures (and Decision Log)
 - Outgoing communication

If information in any of these components is vague, wordy or inconsistent with the other components, then there is a high probability of errors, delays in application processing, confusion and dissatisfaction.



Web site content should be regularly reviewed and updated to support the principle of clear, concise and consistent information and the alignment of the MBC components. Clear, concise and consistent language across the Web site will most likely reduce CIU calls and provide better quality in the applications received at MBC.

4. Use of the term "Webmaster" on the MBC Web site is different than the generally accepted use of the term "Webmaster" and may cause confusion for Web site users - "Webmaster" is normally used to describe the individual responsible for the technical aspects of a Web site including design, maintenance and enhancements. Web site users normally contact the Webmaster with Web site issues such as navigation problems or errors in Web site content. MBC's use of the "Webmaster" on the Web site is expanded to include all Web site user communication to MBC; this can include technical issues as well as information or application questions. This may cause confusion and result in additional calls to the CIU. Web sites often use a general mailbox (such as info@mbc.ca.gov) for users to send non-technical questions.



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5 Additional Considerations

This section has been included to address additional and relevant licensing-related items identified by MBC staff during the BPR Study but outside the processing and supporting components. Items discussed in this section are FSMB products and services, the Postgraduate Training Registration Form, and the training permit concept.



5.1 FSMB Products and Services

The Federation of State Medical Boards (FSMB) has made available to state Medical Boards a number of services targeted to enhance the efficiency of licensing processes. These products and services include:

- **E-transcripts** – provides an electronic version of the USMLE test score transcript.
- **Federation Credential Verification Service (FCVS)** – A centralized process and repository for state medical Boards to obtain physician's medical credentials.
- **iPickup** – provides electronic copies of FCVS packets available to state Medical Boards.
- **GME Connect** – allows Postgraduate training programs to enter GME credentialing information online through a secured portal.
- **Uniform Application and the State-specific Addendum** – an online application system that can be used in physician licensing.

Expedited Licensure is not a service, but a concept. In its research, the BPR Study Team found documentation on this concept and will provide a brief overview and assessment as it relates to MBC Licensing processes.

MBC uses the E-transcripts service to obtain USMLE scores. MBC accepts FCVS and will use the documentation contained in an FCVS packet as long as the document, including signatures, seals and verifications, meets current California statutes and regulations. MBC is making progress towards the implementation of iPickup. Further assessment of how GME Connect can provide the same information as the current L3A/B Form (Certificate of Completion of ACGME/RCPSC Postgraduate Training) will determine if it is a viable and additional alternative for MBC.



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A table with additional information of FSMB Products and Services including expedited licensure and BPR Study observations can be found in Section 9.2, page 152.



5.2 Postgraduate Training (PGT) Registration Form

Individuals enrolled in any California Postgraduate Training (PGT) Program are required by Business and Professions Code § 2065 (US/CAN graduates) and § 2066 (IMGs) to complete a Postgraduate Training Registration Form (Form 07M-157A). A sample of this form is included in Section 9.1.2.

Information on this form includes:

- Demographic information - Name, home/mailling address, Social Security Number, and phone numbers (email address is not requested).
- Education and PGT information - Medical School of Graduation and date, Postgraduate Training program, Accreditation Council for Graduate Medical Education (ACGME) ID, specialty and Program Director information.

According to the Administrative Support Staff, who receive and date stamp the PGT Registration forms, approximately 90% are sent from the California PGT programs in bulk, and the remaining 10% are sent either separately or with the license application. Most of the forms appear to be sent anywhere from two to three months prior to the program start date to three months after, with most being sent from the programs in June and September. The GME Outreach coordinator also obtains completed forms when doing on-site visits.

PGT Registration form processing is different for IMGs and US/CAN because it is unlikely that a US/CAN application file exists at the time a PGT Registration form is received. IMGs will have an application file as they are required by law to obtain a PTAL prior to the start of PG Training. In contrast, the US/CAN Medical School graduate may have an application on file only if they have previously sent in an application for licensure.



The PGT Registration forms for US/CAN Medical School graduates are date stamped by Administrative Support Staff and placed alphabetically in the file drawer at an Administrative Support Staff's desk. They are not checked on ATS or matched up with an application file (because of the small likelihood that an application file exists), unless they are sent in with the application. Forms for US/CAN Medical School graduates are not matched up with the application when the application is received. There has been recent activity with processing the US/CAN PGT Registration forms. The BPR Study team did not do further research as these activities were identified midway through the creation of this report.

The PGT Registration forms for IMGs are currently treated like any other incoming mail - date stamped, checked, logged as received in ATS by Z-project staff. The forms are then distributed to IMG reviewers, who verify the program on the ACGME Web site, log in the information into ATS notes, and place the form in the applicant's file.

The primary purpose of the submission of this form is to comply with the law. In addition to complying with the law, this form provides value to the IMG Review Staff. An IMG with a PTAL can have an application file open for years before obtaining a postgraduate training position. Receipt of this form communicates to MBC that an applicant with a PTAL has been accepted into a PG Training Program within California.

Currently, there is no timeframe specified for submission of this form, no penalty for the PG participant for failure to submit this form, and no cross-check to verify all individuals enrolled in California-based PG Training have submitted a form and are in compliance with Business and Professions Code § 2065 (US/CAN graduates) and § 2066 (IMGs).

Additional Observations

The AMA database may contain resident information for purchase that MBC can use -
Research was done by the BPR Study Team to identify and assess alternative methods and sources to obtain the data captured on the PGT Registration Form. It appears that



the AMA may have a large portion of this data available for purchase in the AMA's Physician Professional Data (PPD). This data could be used in lieu of the PGT Registration Form and to meet current statutory compliance requirements. The PPD data could be used to:

- Verify IMGs enrolled in residency programs have a valid PTAL in ATS
- Assist the Licensing Program in workload and staffing projections by identifying the residents needing licensure.

MBC must make the final determination if obtaining the information from a source other than the resident would satisfy compliance with Business and Professions Code § 2065 (US/CAN graduates) and § 2066 (IMGs) and meet MBC's needs. Further discussion is contained in the Infrastructure Recommendations, Section 9.3.1, IF-15.



5.3 Postgraduate (PG) Training Permit Concept

This concept would require all residents to obtain a training permit in order to participate in an ACGME-accredited Postgraduate Training program within California. PG Training Permits would be similar to PTALs. The BPR Study Team was asked to include a brief narrative and assessment of PG Training Permits in this report as it relates to the scope of the BPR Study.

Currently IMGs are required to obtain a PTAL authorizing an individual to participate in Postgraduate training within California. MBC provides a PTAL once an applicant has demonstrated satisfactory completion of education, testing and training requirements and have had no other issues (such as a serious mental health issue, academic problem, dishonesty, or drug or alcohol use) that would adversely affect public safety. The PG Training Permit concept would require US/CAN Medical School graduates to obtain a training permit. It is unclear whether IMGs would continue to receive a PTAL or the PTAL would be discontinued and IMGs would be required to obtain a training permit.

Based on research by the BPR Study Team, there appears to be two justifications on how PG Training permits would provide value:

- Justification #1: Prevention of the workload “crunch” resulting from applicants requiring licensure by July 1. Historically, there is a substantial increase in applications received from January through March every year and this increase can result in a backlog of applications awaiting initial review and application processing through licensure.
- Justification #2: Residents that would be ineligible for licensure due to issues prior to the completion of Medical School might be screened out earlier.



This concept has been previously evaluated by MBC in November 1997 and November 2006. This concept was recently brought up again by an attendee at a GME Outreach meeting in October 2009. The concept was not pursued in 1998 because of substantive changes to the licensing requirements that had recently taken effect. The BPR Study Team is not aware of any advancements of this concept since it was brought up in October 2009. The Federation of State Medical Boards (FSMB) published a report in 1996 on this concept.²² To implement a Postgraduate Training permit would require:

- *A significant policy shift for MBC.* Currently only IMGs are required by law to obtain authorization prior to the start of a California Postgraduate Training Program. As indicated in the previous section, all individuals enrolled in any California Postgraduate Training Program are required to complete a Postgraduate Training Registration Form (Form 07M-157A) as defined by Business and Professions Code § 2065 (US/CAN graduates) and § 2066 (IMGs).
- *Significant outreach efforts to all impacted entities.*
- *Significant changes to current statutes and/or regulations* which normally take several years.
- *Changes to current process flow* – It is assumed the PG Training process would be similar to the current PTAL process for IMGs. The process changes would be sizable, but could be leveraged from existing processes.
- *Significant increase in staff* for a period of time to address the increased workload. There would essentially be twice the number of applications to process for a period of time that includes the run out of applications under the current statutes and regulations and for the applications under the new statutes and regulations.
- *A comprehensive assessment to determine the likelihood that the PG Training permit process would identify ineligible applicants earlier.* This assessment was not conducted for this BPR Study as it was outside the scope. The level of analysis would need to include a historical study of the applications that have gone to senior-

²² FSMB Article: http://www.fsmb.org/pdf/1996_grpol_Phys_Enrolled_Postgrad_Training_Programs.pdf



level review and would need to derive a statistically significant correlation between senior-level review outcomes and earlier identification of ineligible applicants. The assessment should also identify impacts to resource and workload and what required activities (for example, statutory and regulatory changes) would be needed.

Additional Observations

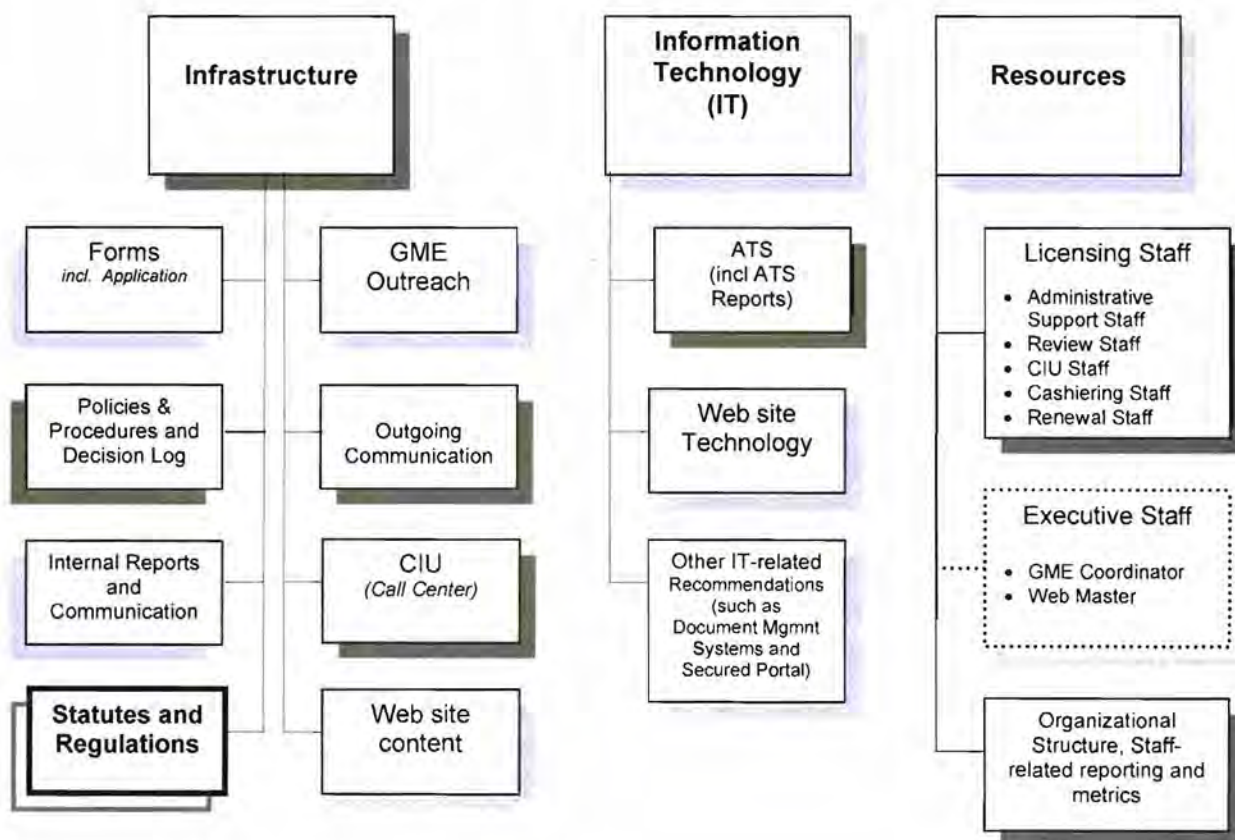
The justifications identified to the BPR Study Team on how a PG Training Permit would provide value had differing rationale - Justification #1 supports the PG Training Permit concept as the method to prevent the workload “crunch”. If the PG Training Permit was implemented, the workload “crunch” would occur prior to the start of PG Training instead of between years 1 and 2 (for US/CAN) and years 2 and 3 (for IMGs). Justification #2 supports the PG Training Permit concept as a method to identify residents earlier that would be ineligible for licensure. If MBC Executive Staff and Board consider the concept of a PG Training Permit to be viable, the BPR Study Team strongly recommends a special study to assess the efficacy of this major policy shift prior to any sizable effort is placed in furthering the PG Training permit concept.



6 Recommendations

Observations across the business processes and support entities were found to have common themes. Recommendations were developed based on these observations and other information gathered and grouped by these themes into recommendation categories. The figure below shows the recommendation categories and what each includes. The categories will also facilitate review and assessment of the recommendations.

Figure 16 – Recommendation Categories





The recommendations included in this section are a collective list identified by either the MBC Licensing Program Staff prior to the start of the BPR Study or the BPR Study Team during the BPR Study. Through a collaborative effort with MBC Licensing Program Staff, the BPR Study Team has taken the recommendations identified prior to the start of the BPR Study and provided information necessary to facilitate assessment and implementation. Recommendations identified by the BPR Study Team during the BPR Study were done in cooperation with the MBC Licensing Program.

Due to various factors related to the current environment, short-term directives, and the anticipated increase in application receipt and workload from January through June, the BPR Study Team informally released several recommendations in advance of the publication of this report as requested by the MBC Licensing Chief. These recommendations are in various stages of implementation.

With the implementation of any of these recommendations, it is strongly recommended that quality assurance measures are continued and new measures are incorporated into the processes where appropriate. Often when objectives are tied to measurement of output (such as increasing the number of initial reviews completed), quality can be comprised. It is necessary that both efficiency and quality be balanced in each and every action supporting MBC's mission of protecting health care consumers through the proper licensing of physician and surgeons.

Additional detail and information on these recommendations, including recommended quantitative and qualitative metrics to assess the efficacy of the each recommendation, can be found in Section 9.3 starting on page 158.

A summary of the recommendations is included in the following table.



Table 4 – Recommendation Summary

The Recommendation Summary table provides the following information:

- **Recommendation** - The recommendation, its ID and category (Infrastructure, IT or Resources) is identified with a brief summary. The brief summary incorporates some observations and anticipated benefits once implemented.
- **Cost Scale and high-level identification of costs** – Costs identified include anticipated expenses, time, resources or anticipated impact to staff or current process. The identified costs are used to determine the value of the recommendation (high/medium/low) on the cost scale.

Cost Scale	
High	Anticipate one or more of the following: <u>significant</u> expense (>\$250K), time to complete (> 12 months), change to resources (relative to other recommendations), impact to staff (extensive training), current process (major updates to policies and procedures, application, web site)
Medium	Anticipate one or more of the following: <u>moderate</u> expense (between \$50K and \$250K), time to complete (between 6 and 12 months), change to resources (relative to other recommendations), impact to staff (minimal training), current process (small updates to manuals, web site, internal/external communication)
Low	Anticipate one or more of the following: <u>minimal</u> expense (< \$50K), time to complete (< 6 months), change to resources (relative to other recommendations), impact to staff (minimal training), current process (small updates to manuals, web site, internal/external communication)

- **Benefit Scale and high-level identification of benefits** – Benefits identified include anticipated improvements to the organization, productivity, application processing and customer service as well as anticipated reductions in cost, time or resources. The identified benefits are used to determine the value of the recommendation (high/medium/low) on the benefit scale.

Benefit Scale	
High	Anticipate one or more of the following: <u>significant</u> improvement to organization, productivity, work environment, application processing and customer service or <u>significant</u> reductions in cost, time or resources
Medium	Anticipate one or more of the following: <u>moderate</u> improvement to organization, productivity, work environment, application processing and customer service or <u>moderate</u> reductions in cost, time or



	resources
Low	Anticipate one or more of the following: <u>minimal</u> improvement to organization, productivity, work environment, application processing and customer service or minimal reductions in cost, time or resources

- **Priority** – Priority is assigned to determine target completion date and assist MBC in further planning associated with recommendation implementation.

Priority Scale definition	
High	Recommendation is <u>critical</u> to current and ongoing operations and should be implemented <u>as soon as possible</u> . This recommendation may be a prerequisite for the advancement of other recommendations. Priority should be given to resource allocation for recommendations assessed with a "high" priority.
Medium	Recommendation is <u>important</u> to ongoing operations and will support the creation of a sustainable Licensing program. A recommendation assessed as medium priority may require significant planning, resources or time to implement.
Low	Recommendation is of value to operations or long-term sustainability of the Licensing Program, but <u>not critical or important</u> . A recommendation assessed as low priority may require significant planning, resources or time to implement.

- **Recommended Phase** – Recommendations developed in the BPR Study are a component of the Licensing Program Plan presented by the Licensing Chief to the Board in October 2009. Phase 1 activities were completed by December 2009. Phase 2 identifies activities to be completed within the next 12 months (through December 2010) and Phase 3 identifies activities to be started after January 2011.
- **Target Completion Date** for recommendation to be completed. If the recommendation has intermediate goals (such as an assessment), these are identified within the Target Completion Date.



Table 4 - Recommendation Summary

CATEGORY Sub-Category	ID #	Recommendation	Cost Level	High-level Costs	Benefit Level	High-level Benefits	Priority	Phase	Target Completion Date
INFRA Process +Procedures	IF-1	Continue to advance Policy and Procedure Manuals This includes completing the application policies and procedures manual (the physician application review sections are complete), enhancing its format, creating a review and update process that can be used for all policy and procedure manuals and developing licensing renewal policies and procedures. This will support the principles of clear, concise and consistent information and improve consistency in processing. Staff training is required and a dedicated resource is recommended for these tasks.	Medium	<ul style="list-style-type: none">Development timeDedicated resourceStaff Training and rolloutCyclical Review and update	High	<ul style="list-style-type: none">Standardized processesEasier to read and locate information	High	2	Dec 2010
INFRA Process +Procedures	IF-2	Increase uninterrupted time available for Review tasks Review Staff estimate two to four hours a day are spent on phone calls and e-mails. Reducing the time spent on phone calls and email will increase time available for review tasks. <u>OPTION 1:</u> Reclassify existing CIU staff and/or augment CIU staff with properly trained staff able to answer calls that currently go to Review Staff. <u>OPTION 2:</u> Temporarily relieve Review Staff of returning e-mails and phone calls within established timeframe when workload is high.	Low	<ul style="list-style-type: none">OPTION 1: Possible need for additional CIU staff, TrainingOPTION 2: Increased time for returning calls and emails, possible escalation of calls to Executive Staff	Medium	<ul style="list-style-type: none">Increased time for reviewers to complete initial review and application processing activities.	Medium	OPTION 1: 2 OPTION 2: As needed	OPTION 1: Dec 2010 OPTION 2: As needed
INFRA Process +Procedures	IF-3	Strengthen program-wide Quality Assurance (QA) processes Ensuring the application has met all requirements prior to licensure and issuance of PTAL supports the mission of MBC. The current QA program must be maintained including the recently added enhanced QA of deficiency letters for new staff and application set-up and Z-Project. Additional training will ensure Licensing Staff understands QA benefits.	Low	<ul style="list-style-type: none">Time and resources to maintain QA processesStaff TrainingUpdating processes and procedures	High	<ul style="list-style-type: none">Standardized processesReduced errorsIncreased efficiencyIncreased metric reliabilityIncreased staff morale	High	2	May 2010
INFRA Process +Procedures	IF-4	Create process to capture and assess Staff suggestions Establishing a repository and process to capture and assess staff suggestions will increase communication, knowledge, and enhance a professional work environment by gathering and documenting staff ideas in policy, procedure, process changes.	Low	<ul style="list-style-type: none">IN PROCESSTime and resources to review, assess and implement suggestions	High	<ul style="list-style-type: none">Suggestions from staff doing work are often viable and practicalIncreased collaborationIncreased morale	Medium	2	Mar 2010
INFRA Process +Procedures	IF-5	Implement a Continuous Process Improvement (CPI) program MBC should integrate into its long-range planning, the adoption of a scalable CPI program. This requires executive sponsorship and an organizational leader knowledgeable in the selected CPI methodology. Additional assessment is required.	Medium	<ul style="list-style-type: none">Time and resources to select a CPI methodologyTime and resources to implement the CPI programTime and resources to maintain the CPI programStaff trainingUpdating processes and procedures	High	<ul style="list-style-type: none">Standardized processesReduced errorsIncreased efficiencyIncreased metric reliabilityIncreased staff morale	Medium	3	Jun 2011 (assess)
INFRA Licensing Application	IF-6	Revise Application and Instructions Revise application and instructions based on staff recommendations and a historical study of errors found in application and supporting documentation. This will result in receiving applications with fewer errors, reducing deficiency letters sent to applicants and MBC workload. Subsequent and coordinated changes will be required for Web site content, Policy + Procedure Manuals, outgoing correspondence, CIU scripts.	Medium	<ul style="list-style-type: none">Development + replacement of existing formForms managementStaff TrainingCyclical review and update	High	<ul style="list-style-type: none">Clearer information to applicantDecrease in phone callsDecrease in application errors	High	2	Oct 2010
INFRA Licensing Application	IF-7	Implement Application Set-up Worksheet Application Set-up Worksheet would replace current "pink form" used by Support Staff. Worksheet incorporates all tasks assigned to Support staff in setting up new application file folders and subsequent preliminary review and increases accountability and ability to	Low	<ul style="list-style-type: none">Replace existing formForms managementStaff TrainingCyclical review and update	Medium	<ul style="list-style-type: none">Better ability to measureIncreased accountability	Medium	2	Sep 2010



Table 4 - Recommendation Summary

CATEGORY Sub-Category	ID #	Recommendation	Cost Level	High-level Costs	Benefit Level	High-level Benefits	Priority	Phase	Target Completion Date
INFRA Licensing Application	IF-8	<p>measure task completion and accuracy. Information on the form could be used by license and QA reviewers. A sample is included in Section 9 of the BPR Study Report.</p> <p>Integrate Checklist into Application</p> <p>This new checklist is intended to be integrated into the application and used by the applicant to verify all required documents and forms are included prior to application submission to MBC. Applicant can also use checklist to verify and identify date documents were requested by external entities (such as transcripts from Medical School). The checklist would be sent in with the application. A sample is included in Section 9 of the BPR Study Report.</p>	Low	<ul style="list-style-type: none"> • New form • Staff Training • Cyclical Review and update • Possible short-term increase in CIU calls 	High	<ul style="list-style-type: none"> • Provides better guidance to applicant • Allows MBC to obtain add'l info not available on current forms • Increased quality of applications received • Long-term decrease in calls to MBC 	Medium	2	Jun 2010
INFRA Licensing Application	IF-9	<p>Revise Fee Schedule and Licensing Invoice Letter</p> <p>Current fee schedule and invoice letter are confusing and result in additional work for Cashiering and Licensing staff and possible delays in licensure. Samples of revised form and letter are included in Section 9 of the BPR Study Report.</p>	Low	<ul style="list-style-type: none"> • Replace existing form • Forms management • Staff Training • Cyclical review and update 	Medium	<ul style="list-style-type: none"> • Clearer information to applicant • Decrease fee-related errors • Decrease in calls to MBC 	High	2	Jun 2010
INFRA Licensing Application	IF-10	<p>Implement PTAL/License Application Update Form</p> <p>Currently, any update to the PTAL/License application (L1A-L1E) requires a new and fully completed application. There is no apparent benefit and results in additional reviewer time and errors unrelated to the updated information. At one time, a separate Application update form (L8) was used. This recommendation supports the use of an Application update form.</p>	Medium	<ul style="list-style-type: none"> • Development + replacement of existing form • Forms management • Staff Training • Cyclical review and update 	High	<ul style="list-style-type: none"> • Decrease in application errors 	High	2	Sep 2010
INFRA Forms	IF-11.1	<p>Continue use of FSMB's eTranscripts</p> <p>eTranscripts provides an electronic version of the USMLE test score transcript through a secured portal. Use of this service is working and should continue.</p>	N/A	N/A	N/A	N/A	N/A	N/A	IMPL
INFRA Forms	IF-11.2	<p>Continue acceptance of FSMB's FCVS</p> <p>FCVS creates a Physician Information Profile with primary source verification and documents required for licensure. MBC accepts the documents as long as they meet current statutory and regulatory requirements. Use of this service is working and should continue. MBC should monitor information about the FCVS enhancements scheduled for implementation in 2010 to determine benefit to current MBC processing.</p>	N/A	N/A	N/A	N/A	N/A	N/A	IMPL
INFRA Forms	IF-11.3	<p>Implement iPickup for electronic FCVS packet</p> <p>This FSMB service electronically sends FCVS documents to a state Medical Board. It is currently not being used at MBC, but once implemented could save time for both MBC staff and the applicant. A process will need to be established and documented and staff will require training.</p>	Low	<ul style="list-style-type: none"> • Establish process • Identify staff to receive and process iPickup notifications 	Medium	<ul style="list-style-type: none"> • Only print what's needed • Less mail to process 	Medium	2	Jun 2010 (IN PROCESS)
INFRA Forms	IF-11.4	<p>Assess Use of FSMB's GME Connect info in lieu of L3A/B (Certificate of Completion of ACGME/RCPSG Postgraduate Training).</p> <p>GME Connect allows GME programs to provide credentialing verifications to FSMB online through a secured portal. GME Connect should be assessed further to determine use and benefit. Options for MBC to assess include accepting this data in the FCVS packet or allowing the submission GME Connect data in hardcopy form with a wet signature to be allowed in lieu of an L3A/B.</p>	Low	<ul style="list-style-type: none"> • Create or analyze crosswalk between L3A/B and info from GME Connect to determine if its use is feasible. 	Medium	<ul style="list-style-type: none"> • Possibly more efficient process for GME Program to complete 	Medium	2	Feb 2011
INFRA Forms	IF-11.5	<p>Monitor FSMB developments for Uniform Application + State-specific Addendum</p> <p>These products would replace the Physician Licensing Application (Forms L1A- L1E) and require significant MBC effort to implement. MBC should monitor the status of these products, but focus resources on the development of the Breeze2 system that will replace the Application Tracking System (ATS).</p>	N/A	<ul style="list-style-type: none"> • N/A 	N/A	<ul style="list-style-type: none"> • N/A 	N/A	N/A	N/A



Table 4 - Recommendation Summary

CATEGORY Sub-Category	ID #	Recommendation	Cost Level	High-level Costs	Benefit Level	High-level Benefits	Priority	Phase	Target Completion Date
INFRA PTAL	IF-12	Resolve Postgraduate Training Authorization Letter (PTAL) issues and implement changes Current issues include, but are not limited to, statutory and regulatory requirements, PTAL renewal limit and fees, file retention, licensing inventory and workload impact, and Application Tracking System (ATS) constraints.	Medium	<ul style="list-style-type: none"> Time and resources for special project and subsequent work Licensing Committee and Board involvement for policy direction 	High	<ul style="list-style-type: none"> Better management of PTALs Better tracking + reporting of PTALs 	High	2 (ASSESSMENT) 3 (STATUTORY + REGULATORY CHANGES)	Dec 2011
INFRA Website	IF-13	Update MBC Web site content on Applicant Tab Current Web site information is outdated and incomplete. <ol style="list-style-type: none"> Update Applicant tab to more applicant-specific information Separate application from instructions Add PTAL-specific tab Limit use of Webmaster to technical-related issues; use general mailbox for non-technical inquiries (for example, info@mbc.ca.gov) Have option for WAAS users to send email to WAASinfo@mbc.ca.gov to reduce CIU calls Add fields to callback info for requestor to include ATS info and nature of inquiry Create cyclical Web site review and update process 	Medium	<ul style="list-style-type: none"> Resources required to review website, propose updates and implement Requires a Dedicated and specialized resource Possible short-term increase in CIU calls because information is in a "different place" Training for MBC Licensing Program Staff (Review Staff, Executive Admin staff, CIU staff) Process to check generic mailboxes Resources to create processes, including cyclical review. 	High	<ul style="list-style-type: none"> Long-term decrease in phone calls to CIU as Web site should become primary source of information for physicians and healthcare consumers. Increased quality in application 	High	2	Oct 2010
INFRA CIU	IF-14	Implement Consumer Information Unit (CIU) enhancements The CIU provides MBC phone support. CIU recommendations include <ul style="list-style-type: none"> monthly review of outcome codes to determine subsequent action (for example, Web site update or need for new outcome code), regular assessment of call tree used when callers phone CIU, and ability to update Web Center calendar. 	Low	<ul style="list-style-type: none"> Time and resources to conduct research, review reports 	Medium	<ul style="list-style-type: none"> Enhanced feedback loop between CIU and other licensing-related components 	High	2	Jun 2010 (IN PROCESS)
INFRA GME	IF-15	Assess use of AMA's Physician Professional Database (PPD) Preliminary research indicates AMA PPD has data on residents currently enrolled in GME programs. This may provide value to MBC in PTAL verification, PGT registration, workload projections, and targeted outreach.	Medium	<ul style="list-style-type: none"> Time and resources to do complete assessment New process to accept and process AMA file Revision to current PGT Registration Form processing 	High	<ul style="list-style-type: none"> Single source for data Increased accuracy Reduction (or elimination) of Form 07M-175A May have other uses 	Medium	TBD	Sep 2010
INFRA Other	IF-16	Evaluate the viability of the Postgraduate (PG) Training Permit Concept Concept requires PG Training Permits for all residents prior to the start of PG training. This concept was previously evaluated in 1997 and 2006, and identified again in October 2009. BPR Study Team asked to assess. Significant policy shift, statutory and regulatory changes are required. Substantial increase in workload for run out period assuming both old policy and new policy would be in effect for a period of time. Special Study recommended if MBC wants to further consider this concept.	High	<ul style="list-style-type: none"> Significant Statutory and regulatory changes Significant workload increase during "run out" period for existing statutes and regulations Significant internal and external documentation and communication updates 	unknown	<ul style="list-style-type: none"> Unknown 	Low	3	Sep 2011
IT Management Reports	IT-1	Implement New Management Report Recommendations There are over 20 reports identified within this recommendation to assist the Licensing Program. Some were assessed as immediate priority and implemented during the BPR Study to assist in managing application inventory awaiting initial review. Reports assessed as high priority include those associated with: <ul style="list-style-type: none"> Application Review Process (through initial review) PTALs issued Administrative Support Processes Pended Mail waiting review Quality measurements Real-time management "dashboard" reporting 	Medium	<ul style="list-style-type: none"> Licensing Program and ISB staff required to assess and prioritize report Report development Licensing Program staff to analyze and act on data provided in the reports 	High	<ul style="list-style-type: none"> Automated reports will increase Review Staff time for application processing Data can be used for staff planning and performance objective development Increased accountability to staff 	High	2	Jun 2010



Table 4 - Recommendation Summary

CATEGORY Sub-Category	ID #	Recommendation	Cost Level	High-level Costs	Benefit Level	High-level Benefits	Priority	Phase	Target Completion Date
IT Management Reports	IT-2	Track DCA/ISB requests and action items Creating a DCA/ISB request and action item log would assist Licensing Program Staff in the identification and tracking of requests to DCA and ISB. Currently these items are not tracked consistently.	Low	<ul style="list-style-type: none"> Licensing Staff to create and maintain action item list DCA/ISB/Licensing Staff to define requirements and implement Process to be established 	High	<ul style="list-style-type: none"> Increased communication Better tracking and accountability 	Medium	2	Jun 2010
IT Applicant Tracking System	IT-3	Evolve ATS to address MBC needs <ol style="list-style-type: none"> Modify ATS to allow better tracking of PTALs, regulatory compliance, deficiency reporting. Modify ATS so that data will not be erased if pathway is changed. Modify online payment option to allow separate payments by the applicant. Modify ATS to allow expiration date (or test date) to be captured so that reports (and letters) can be automatically generated if test scores are expiring. 	High	<ul style="list-style-type: none"> DCA/ISB/Licensing Staff to define requirements and implement 	High	<ul style="list-style-type: none"> Increased ability for ATS to meet MBC's processing needs 	High	2	Dec 2010
IT E-communication	IT-4	Explore ways to increase use of electronic communication Increasing use of e-communication with applicants and external entities will reduce overall timeframes and workload. There is currently a heavy dependence on hardcopy communication, although there are areas where e-communication is increasing such as ePickup and email notification to applicant that license application has been approved. Increased use of email for deficiency notices is recommended. Other recommendations in this study support increase use of e-communication.	Medium	<ul style="list-style-type: none"> Licensing program and ISB Resources to implement and maintain Customer/stakeholder learning curve 	Medium	<ul style="list-style-type: none"> Improved customer satisfaction Improved staff productivity Improved stakeholder communications 	Medium	2	Jun 2010
IT E-communication	IT-5	Assess option for DCA/MBC ISB secured portal for electronic L3A/B Staff takes time ensuring signatures are correct and the seal is valid on Form L3A/B (Certificate of Completion of ACGME/RCPSG Postgraduate Training). Receiving this form via a secured portal would reduce overall processing timelines.	High	<ul style="list-style-type: none"> Resource Licensing Program and ISB staff to assess feasibility Licensing program and ISB resources to implement and maintain Outreach to GME programs 	High	<ul style="list-style-type: none"> Reduction in time associated with obtaining L3A/B from GME programs 	Medium	2	Jun 2010 Assess Dec 2010 Implement
IT Database	IT-6	Actively support DCA's development of the BREEZE2 Database System California Department of Consumer Affairs (DCA) is in the process of developing an Agency-wide application system to replace the current Application Tracking System (ATS). Anticipated implementation is December 2012. MBC involvement is critical so that requirements are identified early in system development. Continued support through implementation will ensure requirements have been appropriately addressed.	High	<ul style="list-style-type: none"> Significant cost to DCA/State of California for the development and deployment of new system Cost of Licensing Program and ISB staff required in support of the planning and turnover to BREEZE2 	Medium	<ul style="list-style-type: none"> 2010 technology will lead to improvements in Licensing Program processes Significant management insight into workflow Lower long-term costs through achieving higher productivity and employee satisfaction Higher customer satisfaction 	High	2 & 3	Dec 2012
IT Document Management	IT-7	Evaluate use of a Document Management System There are a wide variety of Document Management Systems (DMS) available that provide better workflow, tracking and reporting and increase use of electronic imaging in processing. Implementing a DMS requires significant planning, resources and training as well as a strong infrastructure to support the substantial changes. BPR Study Report provides State resources for further assessment.	High	<ul style="list-style-type: none"> Significant workflow changes Possibly significant internal and external documentation and communication updates 	Medium	<ul style="list-style-type: none"> Significantly better and more secure document management Better workload distribution Increased tracking Better management oversight Improved customer satisfaction 	Medium	2	Oct 2012
Resources Staffing	R-1	Advance Staffing Recommendations This recommendation will address the resource constraints the Licensing Program has experienced over the past several years. In addition, some recommendations identified during this BPR Study require staffing changes. Assumption has been made that the Licensing Program will hire four (4) staff from BCP effective July 1, 2010. Staffing recommendations include reclassification of existing staff and acquisition of seven (7) additional positions through a future BCP.	High	<ul style="list-style-type: none"> Create and submit BCP Hire additional staff Identifying and training "Floaters" Additional management, planning and coordination required for float staff Additional staff needed and trained in both IMG and US/CAN 	High	<ul style="list-style-type: none"> Increased effectiveness of Licensing Program Better management and oversight Reduced staff to manager ratios Stronger infrastructure increases likelihood of long-term sustainability Increased capability to plan for and address workload fluctuations 	High	2	Oct 2010



Table 4 - Recommendation Summary

CATEGORY Sub-Category	ID #	Recommendation	Cost Level	High-level Costs	Benefit Level	High-level Benefits	Priority	Phase	Target Completion Date
						<ul style="list-style-type: none"> Ability to minimize impact of staff planned and unplanned absences 			
Resources Organization	R-2	Reorganize Licensing Program and reinforce roles and responsibilities The reorganization will result in functional groupings and includes: <ol style="list-style-type: none"> Creation of a new Front-end/Back-end unit under Licensing Section Restructure of existing Application Processing Units to focus on only US/CAN or IMG. Currently units do both. Consolidation and realignment of infrastructure-related functions into one unit. Senior Review 2 and Special Programs will also be included in this unit. Additional level of management to support the five (5) units in Licensing Section. 	High	<ul style="list-style-type: none"> Reorganization from current structure Potential staff resistance 	High	<ul style="list-style-type: none"> Increased accountability Increased reporting Increased consistency 	High	2	Sep 2010
Resources Organization	R-3	Restructure Administrative Support workflow Restructuring the workflow will address varied skills sets needed to complete application set-up and preliminary review tasks. It will also allow application files to flow to Review Staff in receipt date order.	Medium	<ul style="list-style-type: none"> Initial assessment of skillsets required for each task Assignment of appropriately skilled staff Continued assessment of assigned staff Potential staff resistance as shift from individual tasks to team concept 	High	<ul style="list-style-type: none"> Increased ability to address varied skillsets needed in front-end tasks Promote team concept across support staff Staff will develop expertise in one area more quickly Faster recognition of workload issues 	Medium	2	Sep 2010
Resources Organization	R-4	Change name of Consumer Information Unit (CIU) The current name may unintentionally result in physicians and other non-consumers calling the Executive Office for assistance. Recommend change to "Physician and Consumer Information Unit".	Low	<ul style="list-style-type: none"> Update Web Center call tree Update the Web site Update internal or external documentation and correspondence Train staff 	Medium	<ul style="list-style-type: none"> Better customer service More accurate call metrics (call metrics not captured for Executive Office) 	High	2	Sep 2010
Resources Organization	R-5	Shift clerical tasks done by Review Staff to Support Staff Identification and alignment of clerical tasks to Support Staff will increase time Review Staff have to complete application review tasks.	Low	<ul style="list-style-type: none"> Realignment of currently assigned responsibilities for Review Staff and Support Staff Increased workload for Support Staff Additional Training and Quality Review 	Medium	<ul style="list-style-type: none"> Increase in time for Review Staff to perform application reviews Application will be more complete when Review Staff starts tasks Higher job satisfaction for Review Staff Increased ability for Support Staff to expand skill sets 	Medium	2	Jun 2010
Resources Training	R-6	Continue to create and deploy effective training programs Current training program for application processing is based on classroom training with real application files, observation and one-on-one mentoring. Continued focus on creating, refining and deploying training programs will benefit the Licensing Program with increased teamwork, collaboration, staff knowledge and skills. Typically when training opportunities are available, there is a higher level of job satisfaction.	Low	<ul style="list-style-type: none"> Dedicate resource to create, refine, maintain and deploy training programs Staff time for training 	Medium	<ul style="list-style-type: none"> Professionally satisfying work environment Increased morale Increased teamwork, collaboration, job satisfaction Higher work quality 	Medium	2	Aug 2010
Resources Performance Metrics	R-7	Continue to work inventory to achieve initial review within 60 calendar days This will allow management a reasonable "buffer" of time to identify and address unanticipated issues, such as higher than anticipated staff absences, that could result in a recurrence of a backlog.	Medium	<ul style="list-style-type: none"> Working at continued pace 	High	<ul style="list-style-type: none"> A reasonable "buffer" of time to address unanticipated issues 	High	2	Apr 2010
Resources Performance Metrics	R-8	Establish performance objectives, program-wide staffing plans, and metrics These management tools will ensure Licensing Program staff has the information to manage workload and resources. The BPR Study Team worked with Licensing Program to develop performance objectives, preliminary staffing plans, and metrics for Application Review Staff to assist in the efforts focused on eliminating the backlog. These tools can be refined and leveraged to create tools for other areas of the Licensing Program.	Low	<ul style="list-style-type: none"> Dedicated resource to maintain Time and resources to do analysis, make adjustments and take corrective action Resources and time to identify, capture and analyze metrics and determine any corrective action 	High	<ul style="list-style-type: none"> Ability to measure task duration Ability to identify staffing issues Increased ability to address workload fluctuations 	High	2	Sep 2010



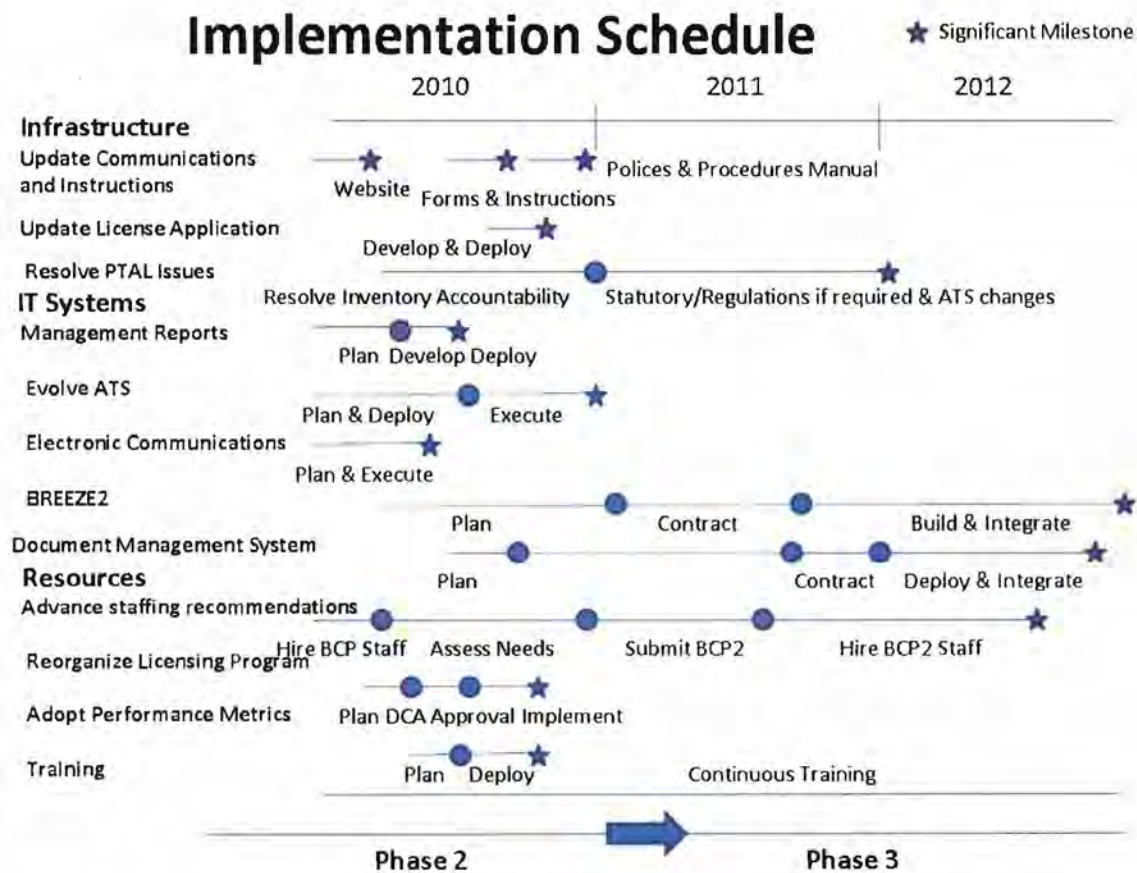
7 Preliminary Implementation Plan

The Preliminary Implementation Plan provided in this section will function as a road map to implement the recommendations identified in Section 6. Based on discussions between the BPR Study Team and MBC Management, this Implementation Plan will be used as a foundation for continued planning and refinements by MBC Licensing Staff in coordination with the Board's Licensing Committee. MBC Licensing Staff must be involved in the process of building a strong Licensing Program by actively participating in the further development and execution of the implementation plan as part of an overall effort to create a more collaborative working environment.



The proposed implementation schedule below represents a balance between the practicalities of limited resources and the necessity to rapidly improve the efficiencies within the Licensing Program. As presented, the majority of the infrastructure and resource recommendations will either be completed or significant progress will be made in 2010. Some of the Information Technology (IT) recommendations are higher cost items and will take until at least 2012 to complete.

Figure 17 - Implementation Schedule





Given the complexity of the overall effort, the relatively “limited” amount of staff effort that can be devoted to these recommendations, and the uncertainty to some of the scope and cost of work identified, it is recommended that the overall work effort be split in two future phases:

- Phase 2 includes the recommendations that will be worked on and/or completed within the next 12 months
- Phase 3 includes longer-term initiatives that are considered cost effective recommendations but beyond the planning horizon and resource allocation of this study or may have limited benefit until further studied. Phase 3 activities will be planned in 2010 or in the case of BREEZE2, supported as part of Phase 2.

The Licensing Committee should be involved in reviewing the list of recommendation and the draft implementation plan with the objective of making refinements and finalizing the Plan’s target completion date at the April 2010 Board meeting. The MBC Licensing Chief will provide monthly status reports to the Executive Director and Licensing Committee on the Implementation Plan’s progress. A status update will be provided to the Board quarterly as part of the Licensing Committee’s report and in the Licensing Chief’s report.

The Preliminary Implementation Plan

A preliminary Implementation Plan presented in this section is built around implementing most of the recommendations during 2010. This preliminary Plan outlines the:

- Recommended management approach to executing the work
- Identified resources required to execute the work
- Responsible individual(s) for executing the work



Management Approach

To accomplish this range of work, it is envisioned that a number of different management approaches be used to implement the recommendations:

- **Special Project** – For the most complex issues, a Special Project Team (Special Teams) will be assigned to work through the implementation steps and the Licensing Committee will be called upon to support these efforts. These Special Teams will be comprised of staff from across the MBC organization and, in some cases, other stakeholders will be involved. It is envisioned that a Project Manager will be assigned to lead the overall project, coordinating the efforts to the various people who are providing input to the process.
- **Licensing Program (LP) Project** – For those tasks that are generally smaller in scope, the Licensing staff will be primarily tasked with completing the project with assistance from other staff in MBC as needed. LP projects will be managed by a Licensing Program Manager or a Project Manager, depending on its complexity.
- **Licensing Program and Information Systems Branch (LP/ISB) Project** – Many of these tasks are Information Technology projects and, as such, will need to be managed collaboratively by the Chief of Licensing and the Chief of ISB Branch or their designees.
- **Business As Usual (BAU)** – These tasks should be incorporated into the existing work processes and implemented as part of an on-going continuous improvement program and managed by the Licensing Program Management Team.

In order to accomplish the Implementation Plan, it is recommended that a Continuous Process Improvement Team be established within the Licensing Program. The team will be made up of high performance staff that will be called upon to support individual Continuous Process Improvement initiatives as well as become champions for the overall Continuous Process Improvement effort. It is envisioned that this Team will



rotate its membership over time and that membership be promoted as a step in an individual's career development.

Estimated Resources

The relative level of effort required to execute the tasks in 2010 are estimated to be:

- **Licensing Program Effort** – For each recommendation, the required tasks need to be determined in greater detail and a refined estimate of the staff time required to complete each task will lead to determining the total staff effort needed. Since the Licensing Program's top priority is processing applications within regulatory timeframes, determining which staff and how much time individual staff can devote to these projects must be determined to coordinate the order and pace the recommendations are implemented. The Implementation Plan chart below will be used as a template to coordinate this effort to complete the Phase 1 work currently underway and the recommended work to be executed in 2010 as part of Phase 2.
- **MBC Information Technology Effort** – The same effort described above will be used to determine the IT staffing effort needed and staff assigned to complete the Phase 1 work currently underway and the recommended work to be executed in 2010 as part of Phase 2.
- **Other MBC resources** – Other resources will be required to complete the Phase 1 work currently under way and the recommended work to be executed in 2010 as part of Phase 2. It is anticipated that the total amount of time will be minimal.

It is recognized that the majority of this work will be assigned to staff that have other assigned work and priorities. The Resource Plan assumes that the remaining Budget Change Proposal (BCP) positions will be hired shortly and the temporary staff assigned to the Z-Project and reviewing license applications will remain during this effort and other MBC staff will be available to support this effort.



Table 5 - Preliminary Implementation Plan

ID #	Recommendation	Priority	Target Completion Date	Management Approach	Preliminary Estimate 2010 Resource Requirements					Responsible Individual/Team
					Licensing Program Staff	IT Staff	Project Manager	Other MBC Staff	Total Staff	
IF-1	Continue to advance Policy and Procedure Manuals	High	12/31/10	LP Project	X	0	X	X	X	Project Manager Licensing Committee
IF-2	Increase uninterrupted time available for Review tasks	Medium	12/31/10	BAU	X	0	0	0	X	US/CAN & IMG Licensing Managers
IF-3	Strengthen program-wide Quality Assurance processes	High	05/31/10	LP Project	X	0	X	0	X	QA Team Lead
IF-4	Create process to capture and assess Staff suggestions	Medium	03/31/10	BAU	X	0	0	0	X	US/CAN & IMG Licensing Managers
IF-5	Implement a Continuous Process Improvement program	Medium	06/30/11	LP Project	X	X	X	0	X	Licensing Program Management Team
IF-6	Revise Application and Instructions	High	10/31/10	LP Project	X	0	X	X	X	Project Manager
IF-7	Implement Application Set-up Worksheet	Medium	09/30/10	LP Project	X	0	0	0	X	Project Manager
IF-8	Integrate Checklist into Application	Medium	06/30/10	LP Project	X	0	0	0	X	Project Manager
IF-9	Revise Fee Schedule and Licensing Invoice Letter	High	06/30/10	LP Project	X	0	0	0	X	Project Manager

Resources: 'X' indicates resources will be involved, '0' indicates resources will not be involved



ID #	Recommendation	Priority	Target Completion Date	Management Approach	Preliminary Estimate 2010 Resource Requirements					Responsible Individual/Team
					Licensing Program Staff	IT Staff	Project Manager	Other MBC Staff	Total Staff	
IF-10	Implement Application Update Form	High	09/30/10	LP Project	X	0	0	0	X	Project Manager
IF-11	Expand use of FSMB Products	N/A	06/01/10	LP Project	X	0	0	X	0	Project Manager
IF-12	Resolve Postgraduate Training Authorization Letter (PTAL) issues and implement changes	High	12/31/11	Special Project	X	X	X	X	0	Licensing Chief Licensing Committee
IF-13	Update MBC Web site content on Applicant Tab	High	10/31/10	IP/ISB Project	X	X	X	X	X	Project Manager
IF-14	Implement Consumer Information Unit enhancements (CIU)	High	06/30/10	BAU	X	0	X	0	0	CIU Manager
IF-15	Assess use of AMA's Physician Professional Database (PPD)	Medium	09/30/10	LP Project	X	X	X	0	0	US/CAN & IMG Licensing Managers
IF-16	Evaluate the viability of the Postgraduate (PG) Training Permit Concept	Low	09/30/11	Special Project	0	0	0	0	0	Licensing Chief Licensing Committee
IT-1	Implement New Management Report Recommendations	High	06/30/10	IP/ISB Project	X	X	X	X	X	Project Manager

Resources: 'X' indicates resources will be involved, '0' indicates resources will not be involved



ID #	Recommendation	Priority	Target Completion Date	Management Approach	Preliminary Estimate 2010 Resource Requirements					Responsible Individual/Team
					Licensing Program Staff	IT Staff	Project Manager	Other MBC Staff	Total Staff	
IT-2	Track DCA/ISB requests and action items	Medium	06/30/10		X	0	0	0	X	<i>To Be Determined</i>
IT-3	Evolve ATS to address MBC needs	High	12/31/10	IP/ISB Project	X	X	0	0	X	Project Manager
IT-4	Explore ways to increase use of electronic communications	Medium	06/30/10	IP/ISB Project	X	X	X	0	X	<i>To Be Determined</i>
IT-5	Assess approach for DCA/MBC ISB secured portal for electronic L3A/B	Medium	06/30/10	IP/ISB Project	X	X	0	0	X	<i>To Be Determined</i>
IT-6	Actively support DCA's development of the BREEZE2 Database System	High	12/31/12	DCA/MBC Project	X	X	0	X	X	ISB Chief Licensing Chief
IT-7	Evaluate use of a Document Management System	Medium	12/31/12	Special Project	X	X	X	0	X	Licensing Chief
R-1	Advance Staffing Recommendations	High	12/31/10	LP Project	X	0	0	X	X	Licensing Program Management Team
R-2	Reorganize Licensing Program and reinforce roles and responsibilities	High	09/30/10	LP Project	X	0	0	X	X	Licensing Program Management Team
R-3	Restructure Administrative Support workflow	Medium	09/30/10	LP Project	X	0	X	0	X	Administrative Supervisors

Resources: 'X' indicates resources will be involved, '0' indicates resources will not be involved



ID #	Recommendation	Priority	Target Completion Date	Management Approach	Preliminary Estimate 2010 Resource Requirements					Responsible Individual/Team
					Licensing Program Staff	IT Staff	Project Manager	Other MBC Staff	Total Staff	
R-4	Change name of Consumer Information Unit (CIU)	High	09/30/10	LP Project	X	0	0	X	X	Consumer Information Unit Manager
R-5	Shift clerical tasks done by Review Staff to Support Staff	Medium	06/30/10	LP Project	X	0	0	0	0	Administrative Supervisors
R-6	Continue deploying effective training programs	Medium	08/31/10	LP Project	X	0	0	0	0	Training Supervisor
R-7	Continue to work inventory to achieve initial review within 60 days	High	03/31/10	Special Project	0	0	0	0	0	Licensing Chief
R-8	Establish performance objectives, program-wide staffing plans, and metrics	High	09/30/10	LP Project	X	0	X	0	0	Licensing Program Management Team

Resources: 'X' indicates resources will be involved, '0' indicates resources will not be involved



Roles and Responsibilities

The implementation of the BPR recommendations needs to be embraced as part of a broader continuous improvement process wherein the organization:

- Provides for a higher level of customer satisfaction
- Adapts a culture of embracing change rather than resisting it
- Is organized around functional responsibilities with appropriate levels of supervision
- Is built on trust and respect at all levels
- Has the infrastructure, information technology systems, and resource levels appropriate to execute its mission
- Has the tools and perspective to manage the organization's, as well as, individual workload metrics
- Is a better environment to work and grow in one's career
- Is supported by management to fully implement the recommendations outlined

Given the importance of this effort, it is imperative that the Licensing Program Chief and management staff be provided support from the Executive Director, the Board and the Licensing Committee to assure the implementation of the recommendations:

- **The Licensing Chief** will need to spend a considerable amount of time (up to 30%) managing the implementation of this plan – being responsible both to the Licensing Team as well as the Executive Director, the Board, and the Licensing Committee for the Plan's execution
- **Members of Licensing Program Management Team**, reporting to the Licensing Chief, will be responsible for the execution of a large portion of the tasks as outlined in the plan
- **A newly formed Continuous Process Improvement Team** will be formed and called upon to execute the work as part of their expanded job descriptions



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- A close partnership between the Licensing Program and **Information Systems Branch (ISB)** will be required to coordinate and implement the IT recommendations
- **Other MBC personnel** including IT, GME Outreach manager, will be tasked with implementing specific support activities to execute the recommendations



8 BPR Study Next Steps

The following SOW task will be completed in the next step of the BPR Study:

Task 11: Perform a follow-up audit three months after the final report is issued and revise the recommendations as appropriate

A follow-up audit will occur three months after the submission of the report to evaluate MBC's progress in the assessment and implementation of recommendations identified in this report. The audit will be scheduled for late March 2010.



9 Appendices

This section contains supplementary information referenced in the main body of the report. It has four subsections:

Business Process Flows – This section contains definitions for the business process flow figures used in the process flows. Current staff roles and responsibilities are also identified in this section as they relate to the process flows.

FSMB Products and Services – This section contains supplemental information and observations on the FSMB products and services described in Section 5.1, starting on page 90.

Recommendations – Additional Information – This section includes a further description of the recommendations in Section 6 - Recommendations, starting on page 99. Supporting detail and information is provided to facilitate recommendation evaluation by MBC Licensing Program staff.

Sample Forms and Web Pages – This section has current and proposed forms and web pages identified throughout the report.

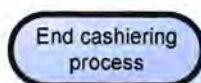


9.1 Business Process Flows

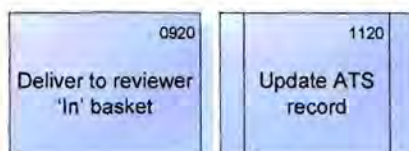
9.1.1 Business Process Flow Figures

The Business Process Flows (flowcharts) created for this BPR Study are comprised of several basic figures:

Terminator: This shape tells you where the flowchart ends.



Rectangle: The rectangle is the most common shape. It is used to show a process, task, action, or operation. It shows something that has to be done or an action that has to be taken. The double lined rectangle represents a predefined process, meaning the process is documented in a policy and procedure. The single line rectangle represents a process conducted, but not necessarily documented.



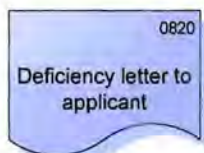
Decision: A decision asks a question. The answer to the question determines which arrow you follow out of the decision shape. The arrows flowing from the decision shape are labeled Yes or No.



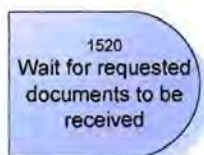
Off Page Connector: This shape means the flow refers to a process flow on another page. Letters in the shape refer you to the appropriate flowchart.



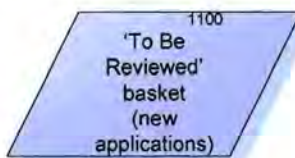
Document: A rectangle with a curved bottom represents a document or report.



Delay: The Delay shape represents a waiting period where no activity is done. Delays should be analyzed to see if they can be minimized or eliminated.



Input: A parallelogram is used to show input. Examples of input are receiving a report, getting mail, getting an application, etc.



The Data Dictionary is used in conjunction with the process flows to provide information in another format or information not captured in the process flows such as:

- Identifier – a unique four-digit number to
- Category and Subcategory - for further identification and grouping
- Description – of
- What group/role performs this function
- Additional Information



Both the Data Dictionary and the process flows are considered "living documents". These documents will need to be maintained and refined through an iterative process of review and updates to remain an effective tool for the Licensing Program Staff.

The Data Dictionary will be provided to MBC under separate cover.

The process flows were developed in Visio based on an agreement with MBC Licensing Staff and MBC Information Systems Branch (ISB). The Data Dictionary was developed in MS-Word. Both the process flows and Data Dictionary were compiled from information gathered through existing documentation made available to the BPR Study Team and interviews with MBC staff. The Process Flows were verified by MBC Staff unless otherwise noted.



9.1.2 Mailroom Business Process

The Mailroom Clerk:

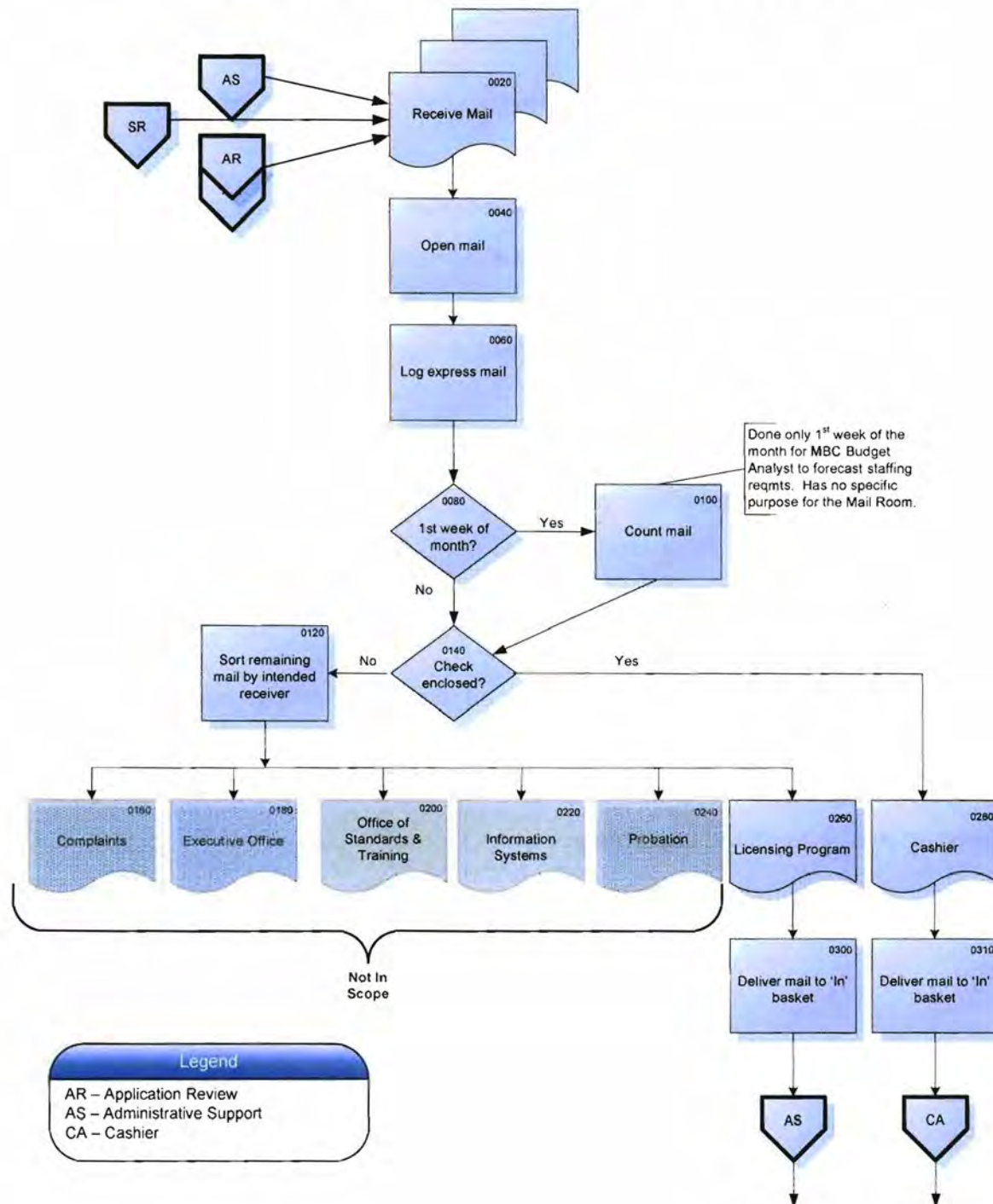
- Opens and date stamps mail with the date received in the mailroom. This is done on each business day.
- Logs Express mail (e.g., FedEx, DHL, certified mail) with the tracking number issued by the delivery service. Tracking numbers are logged in an MS Excel spreadsheet by carrier name, along with a count of the pieces of mail received by that carrier, and the intended receiver. Each unit will receive a copy of the Express Mail log sheet along with their daily mail.
- Counts all USPS general mail the first week of each month. This is done for the MBC Budget Analyst and serves no specific purpose for the mailroom itself. These counts are used to compute shared services costs (money reimbursed to the Board by certain affiliated healing arts programs for services rendered by Medical Board staff).
- Sorts mail by MBC unit. If a check is enclosed, the check and all enclosures are forwarded to the Cashier for processing. Each unit will receive a copy of the Express Mail log sheet along with their daily mail. The log is used to verify that the expressed mail is received accurately.
- Delivers mail each business day to the appropriate MBC unit by early afternoon.



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Figure 18 - Business Services – Mail Room Process Flow (MR)





9.1.3 Cashiering Business Process

The Cashiering Staff sorts and processes four general types of mail in which money is included:

New application with a check included – an ATS record is created for the new applicant using the applicant's name, date of birth, social security number, and the payment amount. The check will be tendered and the application forwarded to the Administrative Support Staff Inbox for processing.

Check with no documents – a copy of the check is made on 'hot pink' paper and forwarded to the Administrative Support Staff Inbox for the Review Staff to research. The original check will be held at the Cashier's until Review Staff responds with a 'blue' fee invoice filled out defining how to apply the received fees and to which ATS record. The instructions may also direct the cashiering staff to return the check to the sender because an ATS record could not be found. The Cashier requests that Review Staff return the completed 'blue' fee invoice within five (5) days, in order to comply with the State Administrative Manual (SAM) guidelines for undeposited receipts²³. Once staff knows how to apply the check amount, the ATS record will be updated.

Fee invoices with check– applies the payment amount to the corresponding ATS record. The check is tendered and the 'blue' fee invoice is forwarded to Licensing for distribution to the appropriate staff.

License renewal invoices with check– fees received are recorded in ATS and then the Consumer Affairs System (CAS) record is updated to reflect payment of fees. The check will be tendered and the renewal invoice questionnaire will be scanned into CAS.

²³ The State Administrative Manual (SAM), Chapter 8000, §8032.1 states: "Accumulated receipts of any amount will not remain undeposited for more than ten working days".

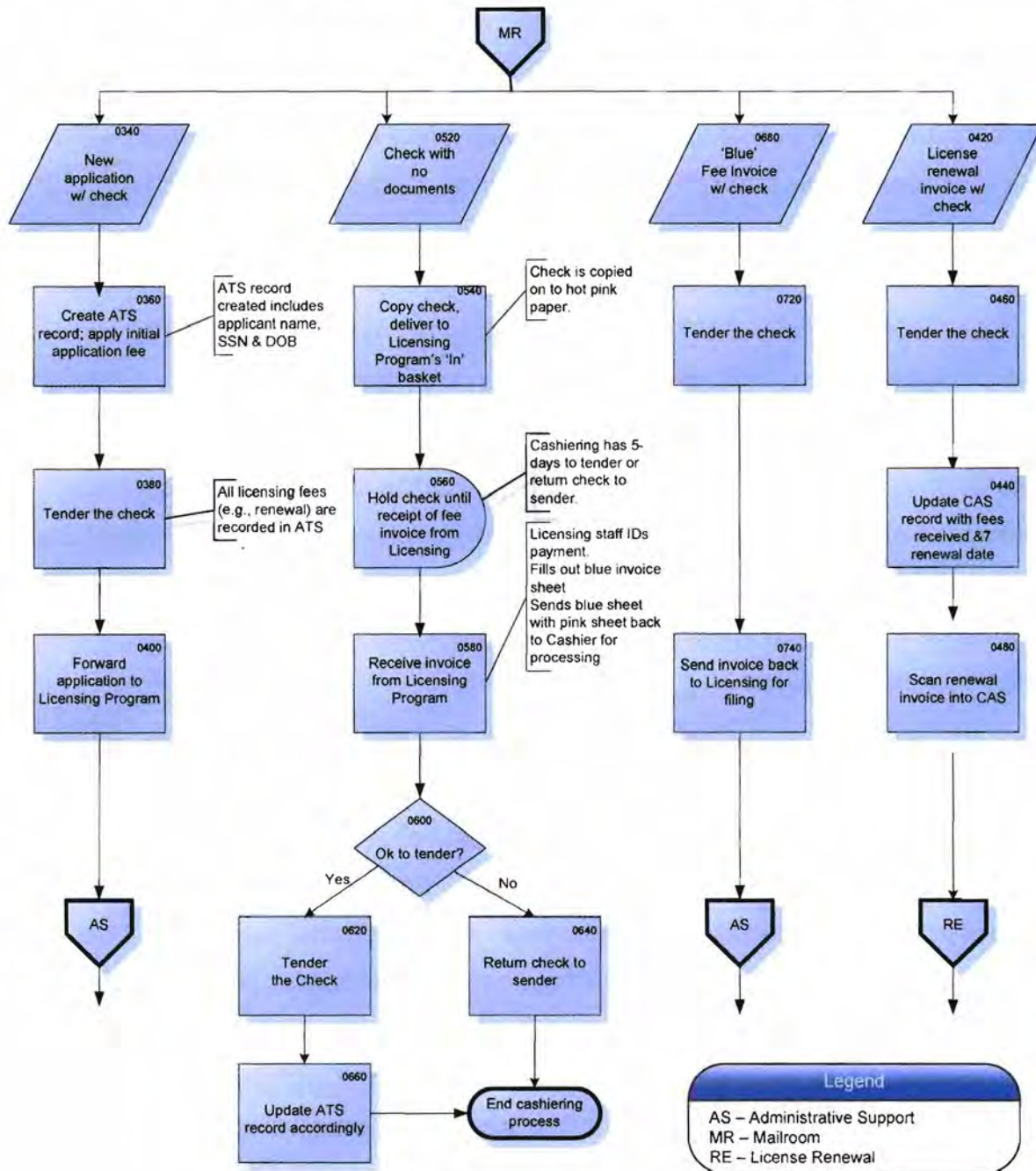


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Figure 19 - Licensing Program – Cashiering Process Flow (CA)





9.1.4 Administrative Support Business Process

Administrative Support Business Process Overview

The Administrative Support Staff:

- Sorts mail in the 'In' basket for the Licensing Program Unit. The date received in the Unit is stamped on each piece of mail. This date initiates the 60- working days in which an initial review of the application must take place and applicant notified of the application status²⁴. Supporting documentation for applications is alphabetized, sorted by type (US/CAN or IMG) and delivered to the appropriate staff member's mail slot located in the mail area. These documents are picked up by designated Z-project Staff who will update the ATS record.
- Sets up an applicant file folder when a new application is received. This includes printing the American Medical Association (AMA) profile and the Federation of State Medical Boards (FSMB) check. The ATS record is updated with demographic information such as the applicant's address, phone number, email address, and the date application received.
- Conducts a cursory review of the application (L1A-L1E) for completeness (notary, all boxes filled in). If the application is incorrectly filled out, staff generates an application deficiency letter to advise the applicant of the errors and requests a new application be completed. In addition to review of the application, a check for fingerprint cards or Live Scan receipt is done. If no fingerprint cards or no Live Scan receipt is enclosed, the miscellaneous fingerprints cards basket is checked and the Live Scan folder is checked for Live Scan results. If unable to locate cards or Live Scan results, a fingerprint deficiency letter is mailed to the applicant. If fingerprint cards are enclosed or located in the miscellaneous fingerprints basket, then one card is attached to the application file, the other is placed in the basket for fingerprint

²⁴ CCR Title 16, § 1319.4



cards waiting to be processed. If Live Scan results are found, they are included in the application file.

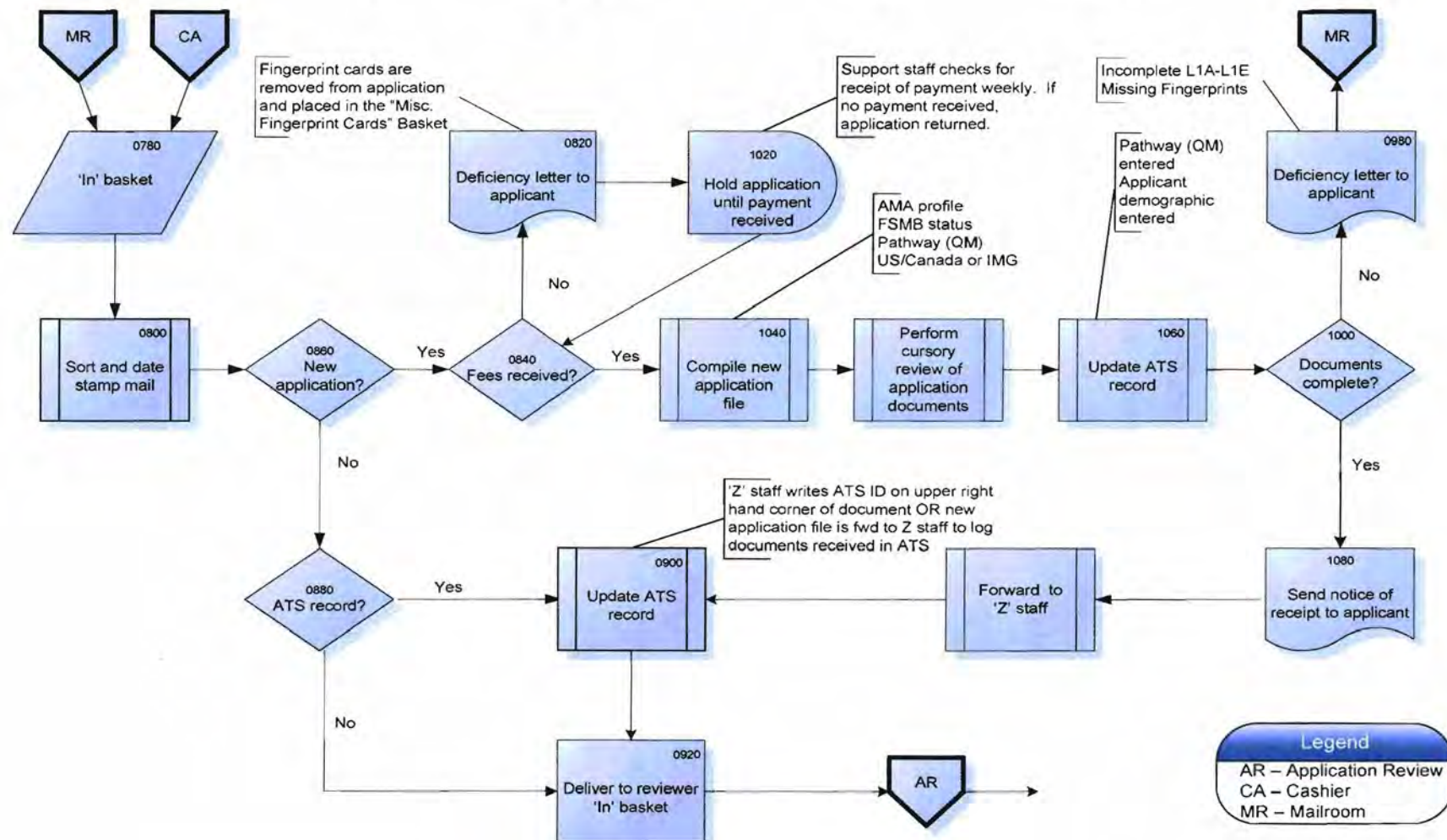
- Determines licensing pathway based on information provided on the application L1A or L1B forms and enters pathway on ATS record. The licensing pathway is used to specify the California statute the applicant is applying for licensure under. Within the statute, requirements for licensure are identified (such as postgraduate training and exam scores). For example B&P § 2170 identifies the requirements for licensure for US/CAN Medical School Graduates.
- Generates letter acknowledging application receipt.
- Generates Web Payment letter informing applicant they have 30 days to submit an application or fees will be refunded when fees are received but there is no application. The letter is sent if no application is received two weeks after receipt of payment.
- Generates a deficiency letter and sends it to the applicant if application is received, but there is no record of fees received. If no fees are received within 30 days, the application is destroyed and any original copies of documents (e.g., diploma) are returned by certified mail to the applicant.

The Z-project Staff:

- Receives new application files from Administrative Support Staff. The application and any supporting documentation (i.e., transcripts, diplomas) are recorded in ATS with a 'Z' identifier. This identifier indicates that the documents have been received but not yet reviewed.
- Retrieves loose application documents (i.e., L2 – L6) that have been placed in the appropriate reviewer's mail slot located in the mail area. These documents are recorded in ATS by updating the Application Requirements Status Field with a 'Z'.
- Delivers new application files and loose application documents to the appropriate reviewer's 'In' basket.



Figure 20 - Licensing Program – Administrative Support Process Flow (AS)





9.1.5 Application Review Business Process

Application Review Business Process Overview

The Application Reviewer:

- Conducts initial file reviews. During this review multiple documents are assessed for completeness and accuracy. The ATS record is updated accordingly.
- Generates and sends letters to applicants noting all missing or incomplete documents. Application is filed in the 'pending review' file drawer until receipt of requested document(s).
- Processes documents delivered to 'In' baskets daily. Incoming application documents are reviewed and filed in the appropriate application file. The ATS record is updated. If the document is not acceptable or incomplete, a new document is requested in writing. If an ATS record is not found, the document is filed in the 'Miscellaneous Mail' basket. Miscellaneous mail is checked regularly as new applications arrive.
- Initiates Senior Level Review of an application that meets prerequisite criteria, such as addictions, driving violations (drug or alcohol related), mental health issues, postgraduate training problems, dishonesty, etc.
- Conducts final review of the application file prior to sending it to licensure. This entails a recheck of all documentation to ensure all requirements are met and the ATS record is updated as well as detailing all steps in the ATS notes.
- Receives, responds to, and initiates telephone calls with applicants or those calling on behalf of the applicant. These calls can be as simple as applicant wanting status on his/her application, to the reviewer clarifying missing or corrected information from an international medical school.



- Receives, responds to, and initiates emails. These emails can be as simple as applicant wanting status on his/her application to the reviewer requesting and clarifying missing or corrected documentation from an international medical school.

The Fingerprint Coordinator:

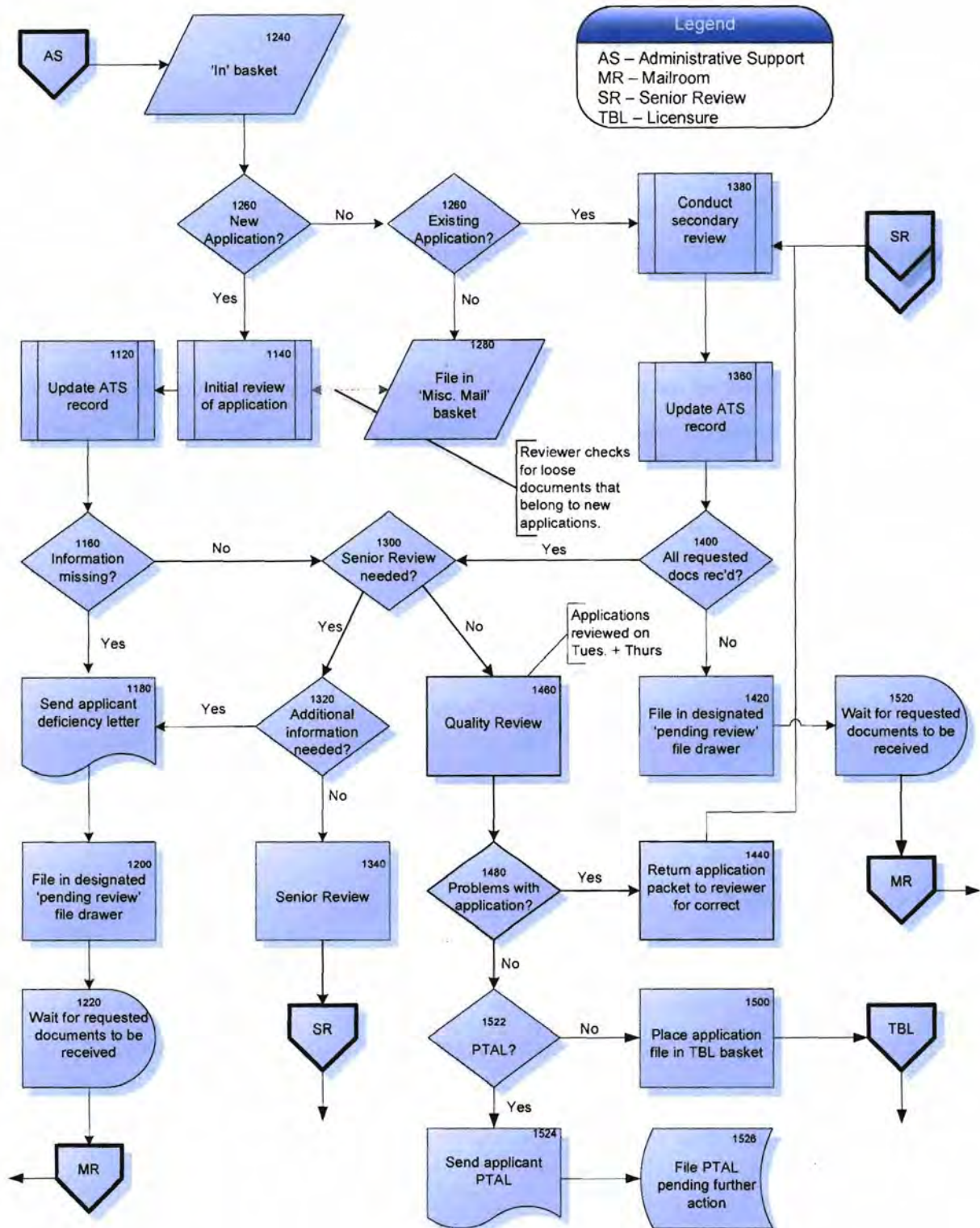
- Is the liaison with the California State Department of Justice (DOJ) regarding status and updates on applicants fingerprint cards and Live Scan submissions.
- Maintains a list of all fingerprint cards sent to DOJ.
- Packages and mails fingerprint cards to DOJ.
- Follows up on fingerprint cards and results that remain outstanding.
- Sorts, matches and distributes DOJ and FBI results to appropriate application reviewer.



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Figure 21 - Licensing Program – Application Review Process Flow (AR)





9.1.6 Senior Staff Review Business Process

Senior Review Business Process Overview

Senior Review may be required if an issue exists that may impair or limit the ability of the applicant to practice medicine safely. An issue can be disclosed by an applicant or an issue can be identified by the fingerprint process (through DOJ or the FBI) or another external entity (FSMB, AMA, or a postgraduate program). Examples of issues include serious mental health issues, academic problems, dishonesty and drug or alcohol use. If the issue is determined to require Senior Staff involvement, the application file is sent for the Licensing Manager for review. If the Licensing Manager approve the application for Senior Review the application file is reviewed by the Senior Review Staff Team. This team is comprised of a Senior Review 2 (SR2) Analyst, Deputy Attorney General (DAG), Legal, Executive, and Management staff. Senior Review Staff also consults with Medical consultants.



NOTE: *Senior Review Staff Business Process Flows are currently in draft format as they have not been finalized by MBC staff. These process flows were being developed in Power Point by MBC staff when the BPR Study started. The BPR Study Team used the draft version to create the Visio copy included in this document. The BPR Study Team did not meet with Senior Staff to confirm the accuracy of these flows as verification is being completed by MBC staff outside the BPR Study.*

Senior Review Level 1

- File sent for review goes to the Licensing Manager who enters required information and reviews the file. If the file is approved, ATS is updated and the file is returned to the Reviewer to continue through the routine process. If it is determined that the application needs to go to Senior Review Level 2, it is forwarded to the SR2 Analyst.



Senior Review Level 2

- If the file is determined to require a Level 2 Senior Review, the SR2 triage Analyst does an initial review. If additional information is necessary, the SR2 triage Analyst requests the information and/or documentation from the original source entity or the applicant.
- Once all information and/or documentation is available, the SR2 Analyst prepares a summary memo and circulates it to the Senior Review Staff Team for review. The Team will meet to discuss the file. If necessary, additional information and/or documentation may be requested of the applicant or other entities.
- Upon completion of the review, the Team will render a recommendation of an unrestricted license, probationary license, public letter of reprimand (PLR), ²⁵or denial of application.
 - **Unrestricted license** – If the recommendation is for issuance of an unrestricted license, the file is returned to the Reviewer to continue through routine processing.
 - **Probationary license** – If the recommendation is for issuance of a probationary license, the SR2 Analyst prepares a probationary stipulation document. Legal Staff is consulted as needed. The Licensing Chief reviews the document for accuracy. Once the document is ready, the Licensing Chief signed the document and it is mailed to the applicant for consideration of terms.
 - The applicant has 60- days to respond. If no response is received, in most cases the application is deemed withdrawn. The applicant has the opportunity at this point to request an Administrative Law Judge (ALJ) hearing.

²⁵ Effective January 1, 2009



- Upon an applicant's request for changes to facts or terms, the Licensing Chief and MBC Deputy Director or Executive Director will discuss the request, and if acceptable, a new probationary stipulation document is drafted and the process begins again.
- If the applicant accepts the facts and terms, the probationary stipulation is forwarded to Enforcement where a case in CAS is opened and the Board Members are mailed to probationary stipulation document for a vote.
- If the Board accepts the stipulation, the file is returned to licensing staff to complete the application process. If two (2) Board members vote no, it is brought to the Board for discussion and vote.
- If the Board rejects the stipulation, the SR2 Analyst mails an application denial letter to the applicant. The applicant has the opportunity at this point to request an Administrative Law Judge (ALJ) hearing.
- If the denial is accepted by the applicant, the file is stored in the "Red Drawer" (file room). Enforcement is notified of the status. The applicant is advised he/she can reapply in three (3) years.
- If an ALJ hearing is requested by the applicant, the SR2 Analyst prepares a transmittal and sends to the Supervising DAG. The case is assigned to DAG who will create a Statement of Issues.
- If necessary, DAG and applicant's attorney will discuss a stipulated settlement.
- Enforcement receives the proposed decision and mails to the Board Members for a vote. If the proposed decision recommends an unrestricted license and the Board agrees, the file is returned to the Licensing Staff to complete the file. If the recommendation is for a probationary license and the Board agrees, Enforcement serves decision and order on applicant to the Probation Unit and Licensing. Applicant has an opportunity to petition for reconsideration.

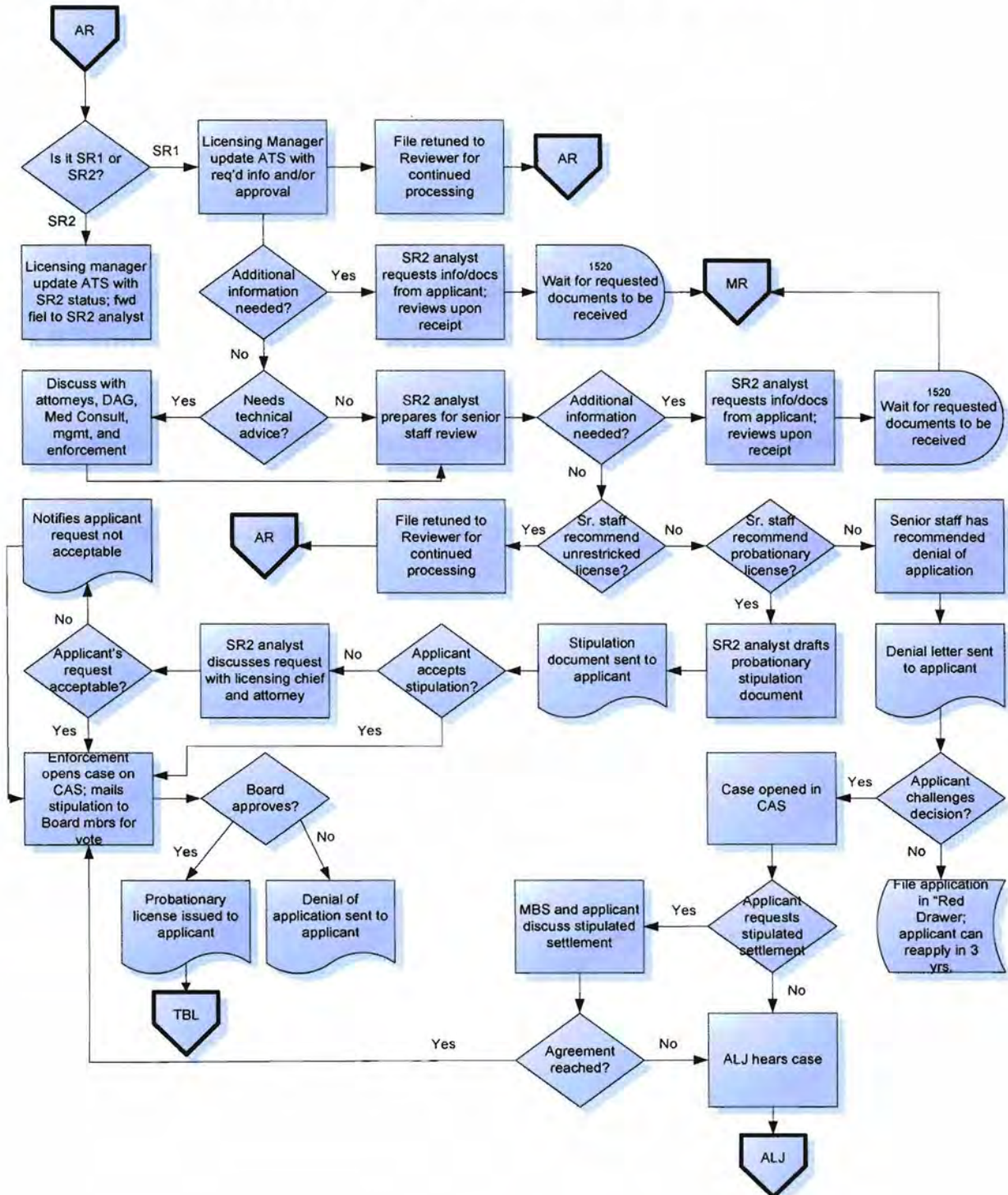


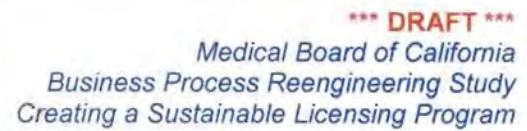
- A hearing is scheduled. The ALJ will issue a proposed decision recommending either (1) unrestricted license, (2) probationary license, (3) Public Letter of Reprimand ²⁶ or (4) denial of application.
- If the proposed decision by the ALJ is for denial and the Board agrees, Enforcement notifies the applicant, at which time he/she may petition for reconsideration.
- **Public Letter of Reprimand** – If the recommendation is for issuance of an license with a Public Letter of Reprimand, the PLR is identified on the Web site for three (3) years after the license is issued. The nature of the PLR is not identified.
- **Denial of application** – if the recommendation is for the denial of the application, then just as with the Board's denial of a probationary stipulation the applicant has the opportunity to accept the decision and re-apply in three (3) years; or request an ALJ hearing.

²⁶ Effective January 1, 2009



Figure 22 - Senior Review Process Flow (SR) - DRAFT



[illegible]



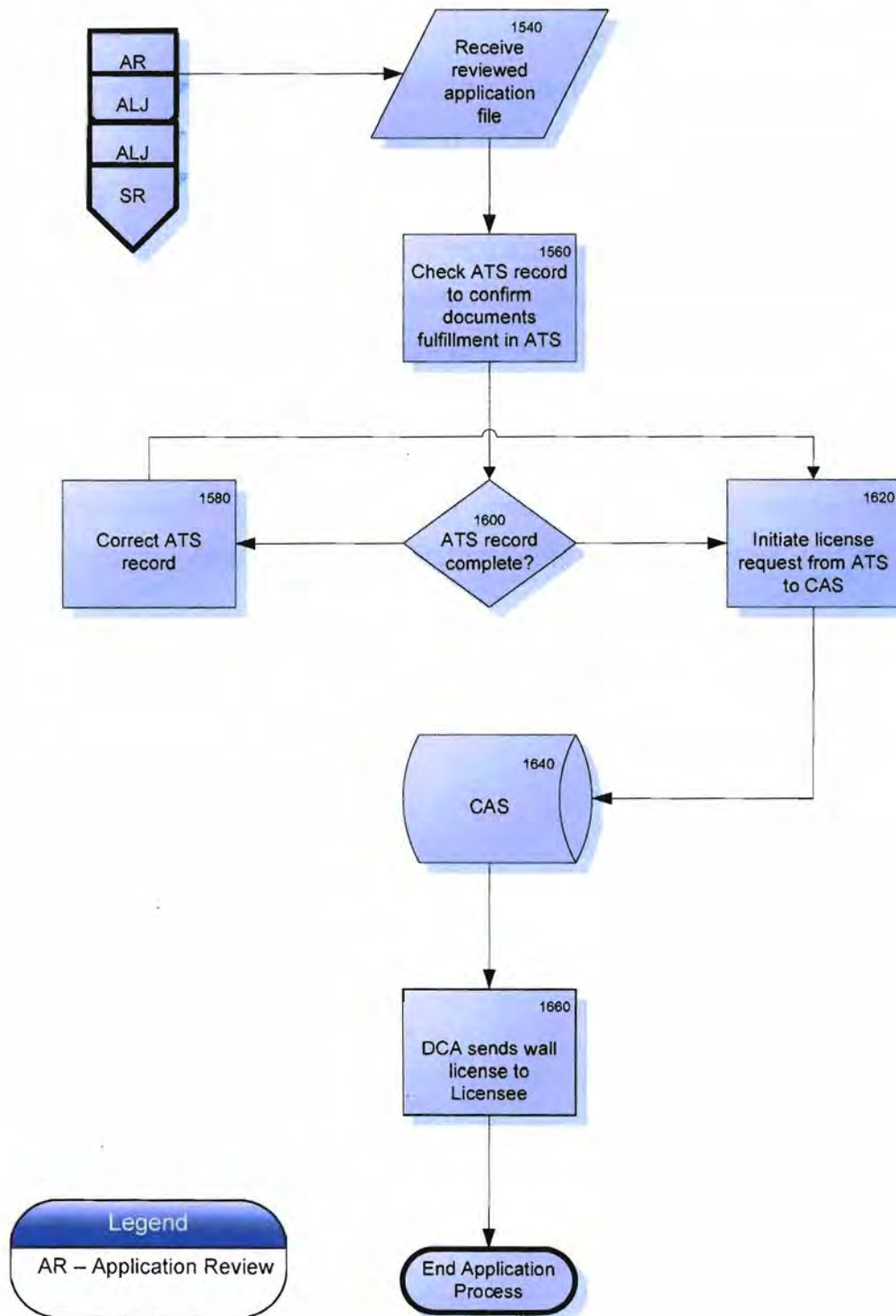
9.1.7 Licensing Business Process

The Licensing Coordinator:

- Conducts final review of the application file with the ATS record to verify all licensing data is accurate prior to submission for a license number. Verifies spelling of name, address, phone, and medical school. Any errors are corrected.
- Initiates and runs computer program that transmits ATS licensing data to CAS for license to be issued.



Figure 24 - Licensing Program – Licensing Process Flow (TBL)





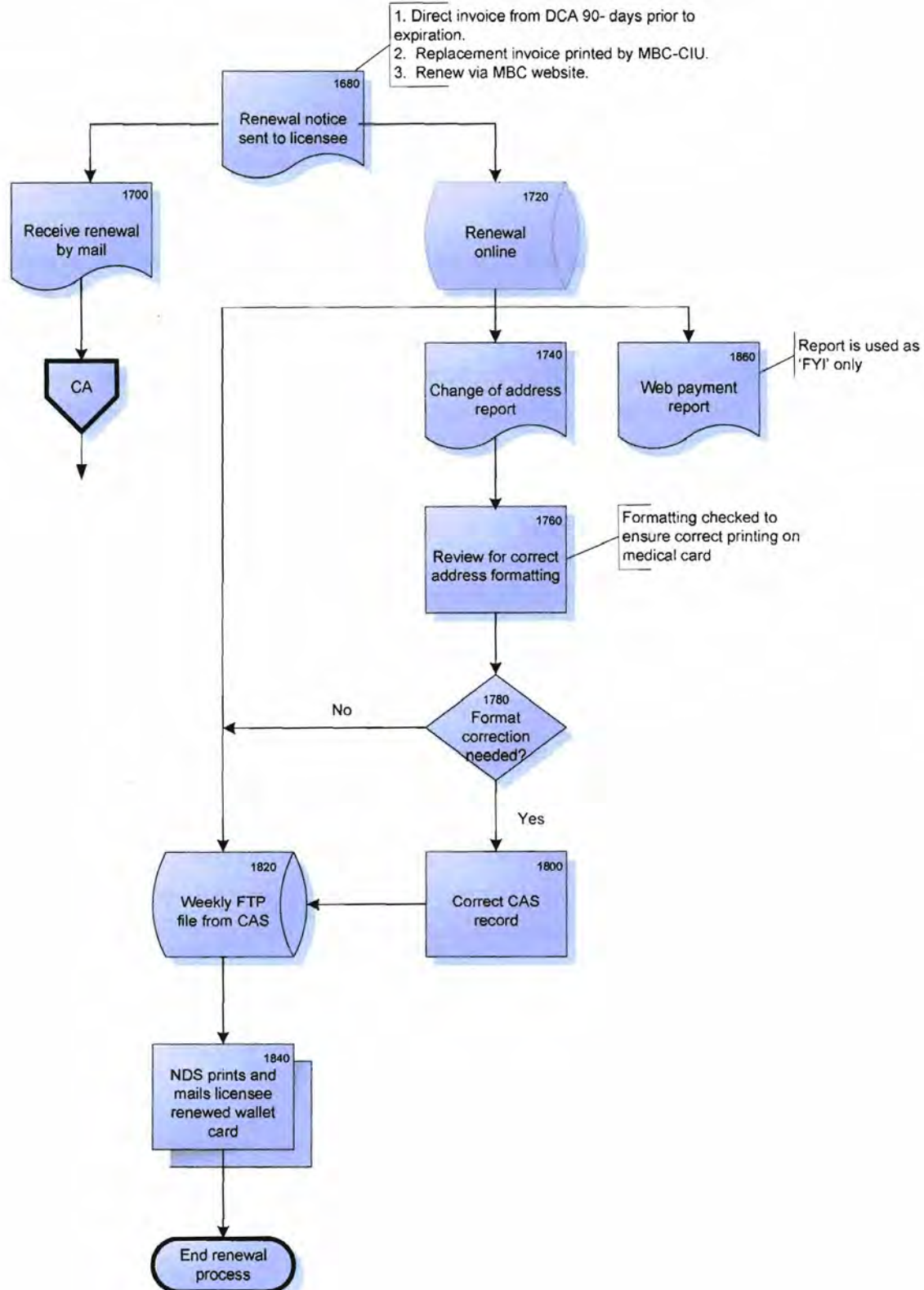
9.1.8 License Renewal Business Process

The Renewal Staff:

- Receive a daily Web Payment report that indicates the number of renewals each day. This report provides no significant purpose for staff.
- Receive a Change of Address report for updates made on the Web during renewal. This report lists all the physician or surgeon names and addresses of which staff visually edits to confirm appropriate formatting of address data. The purpose of this activity is to mitigate potential misprinting of plastic medical cards that are issued upon renewal.
- Initiate a weekly CAS program that generates a report containing all initial, renewal and updated medical card information. The report is electronically submitted to National Data Systems (NDS), the vendor who prints the wallet cards.



Figure 25 - Licensing Program – License Renewal Process Flow (RE)





9.1.9 Consumer Information Unit (CIU) Process

Web Center functionality includes:

Standard Call Routing	Callers select options through a menu system that routes call to specific agents.
Web Callback	MBC also has a link on its Web site (www.mbc.ca.gov) that allows callers to request a callback. The input fields required for a callback are: name, company, email, phone and an option to schedule the callback (immediately, 30m, 60m, 90m, or a specific date and time). These internet requests enter Web Center like a call, but are sent directly into the Call Center's queue. The program code for the screen layout was provided by Verizon and integrated into the MBC Web site, so it is not easily updated.
Skill-based Routing	<p>This functionality allows employees with special skills to be considered before a standard agent. For example, MBC could implement a tiered system based on the caller's response to the menu system and send them to a specific agent.</p> <p><i>The CIU currently uses this functionality for Spanish speaking callers.</i></p>
Web Chat	<p>Web Chat is also known as a "live chat". A Web site user could select Web Chat and ask questions directly to CIU staff through the internet. This feature would also allow agents to send links or related information to the customers related to their inquiries.</p> <p><i>The CIU does not currently use this functionality.</i></p>
Email	When a caller leaves a voice message to an agent, a wav (audio) file is sent to that agent's email address.
Outcomes	<p>Outcome Codes are assigned at the end of each call and specify the subject of the call (applicant question, complaint, fictitious name permit). Reports can be generated based on outcome codes.</p>



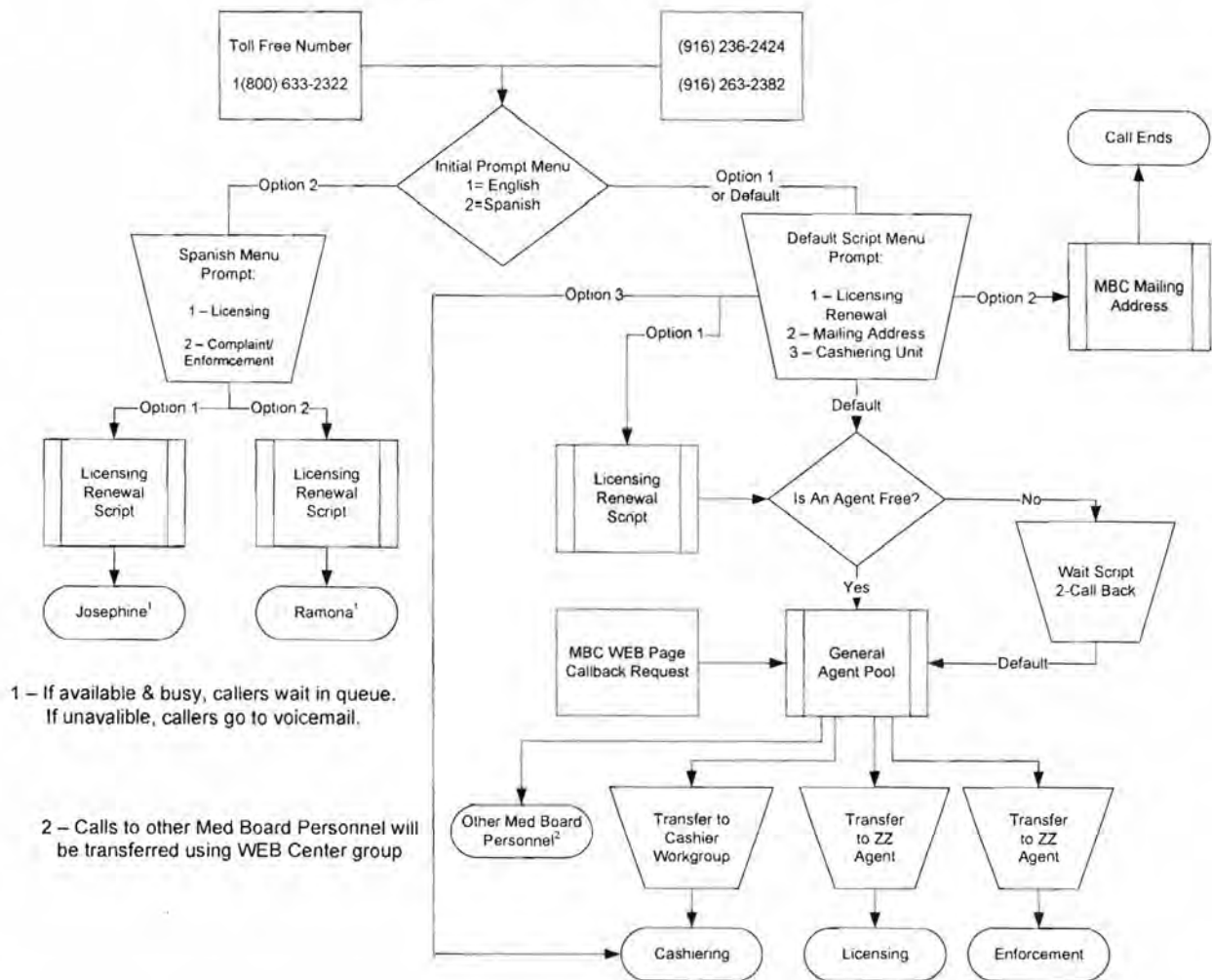
Calls that are made to any of the primary public lines enter the Web Center server. Once calls are “inside” the Web Center, they are routed based on preconfigured settings better enable tracking, routing and control over each phone call. The settings are configured by the Web Center Administrator to provide flexibility. Basic settings include:

Menu System	This allows MBC to create custom menus that route calls based on the caller's input
Agents	The CIU staff providing telephone support are called “agents”. Each agent has a profile established that includes what workgroups the agent is assigned to, skills set, and controls and restrictions.
Workgroups	All Web Center agents are logically grouped and assigned to a workgroup. These groups dictate what calls will go to which agents. For example, a call center agent is in the Call Center Work Group. Calls coming from the CIU phone lines are configured to route to the Call Center Workgroup and use pre-determined selection criteria to route the call to a specific agent.



The figure below shows the call tree when a caller places a phone call to the CIU.

Figure 26 – Web Center Call Tree





Within the menu system, music is played until an agent for the specific workgroup accepts the call. At 56-second intervals the caller is asked if they wish to input their phone number and receive a callback. If the caller opts to stay on the line, the music will continue playing until an agent accepts the call.

When the agent accepts the call, the caller identifies their specific need and the agent provides the appropriate information or transfers the call to the appropriate entity (such as to a specific Review Staff person). At the end of each call an agent is required to assign an outcome code. Outcomes identify the subject of the call. Reports can be generated based on outcome codes.

Data maintained for calls coming into the Web Center include agent name, length of time, outcome. Statistical reports are produced monthly and include several standard call center metrics such as abandoned call rate, wait times, and answer times.



9.2 FSMB Products and Services – Additional Information

Table 6 - FSMB Products and Services

FSMB Product or Service	Description and Additional Information
eTranscripts	<p>Description: Provides an electronic version of the USMLE test score transcript through a secured portal. In addition, if any board action has been reported to FSMB, this information will be included in the eTranscript. This service is available at no charge to Medical Boards. An email notification is sent that the eTranscript is available. eTranscript can be used regardless of a physician's participation in FCVS. If a physician is using the FCVS service, the transcript will be included in the FCVS packet. State Medical Boards are not charged for this service. Fees for a physician to request a transcript be provided to a state Medical Board or other entity are \$50. This fee allows for two transcripts to be provided.</p> <p><i>The Licensing Program currently uses the eTranscript service. It is a responsibility of an individual in the Administrative Support Staff.</i></p> <p>Observations: The eTranscript option provides a paperless method for MBC to obtain this information needed to fulfill examination requirements. The process to obtain this information has been established and Administrative Support Staff perform this function, but the BPR Study Team could not find any documented MBC-specific policy and procedures explaining this process. This process in its current state does not have any issues.</p>
FCVS	<p>Description: The Federation Credentials Verification Service (FCVS) was developed in 1996 to provide a centralized process and repository for state Medical Boards to obtain physician's medical credentials. The goal of FCVS is to reduce the overall time required to obtain a license. FCVS obtains primary source verification of medical education, postgraduate training, examination history, board action history, board certification and identity and creates a Physician Information Profile (packet) that can be sent to state Medical Boards.</p>



FSMB Product or Service	Description and Additional Information
	<p>The physician incurs all costs associated with the creation of the FCVS profile (packet) and directs where the FCVS packet should be sent. Base Cost is \$295, with \$50 examination transcript fees, and all shipping costs. IMGs incur additional fees associated with document translation. After an initial FCVS profile has been created there is a \$90 charge for updates. A US/CAN FCVS profile takes, on the average, 80 days to create, updates take an average of 30 days. FCVS profile creation for IMGs averages 110 days for creation and 30 days for updates. The creation includes the obtaining several documents from multiple primary sources. Updates are required for any subsequent training. For example, if an FCVS packet is started when a physician is in PGT, updates would be required when PGT training is completed and any other training.</p> <p>Based on a conversation between the BPR Study Team and an FSMB representative, enhancements to FCVS are scheduled for implementation by the end of 2010.</p> <p><i>The Licensing Program currently accepts FCVS as long as the documentation meets State of California Requirements.</i></p> <p>Observations: Only selected documents in the FCVS packet are used in the Licensing Process at MBC and include: the ECFMG Certification, Postgraduate Training verification, the Medical School documents and USMLE scores. They may be used in the application processing as long as they meet statutory and regulatory requirements. The documents that are not used are retained until the application is submitted for licensing and then the unused documents are shredded. It is estimated that in a 40 page FCVS packet, up to 12 pages can be used.</p> <p>MBC allows applicants to use FCVS to submit credentials. FCVS packets are accepted, but not mandated by regulations. It is estimated that about 5% of applicants use FCVS (300 based on 6000 applications a year). Documents contained within the FCVS packet and used as part of the license application must meet current California law related to Licensing requirements. If the contents of the FCVS packet do not meet current California law, a deficiency notice is sent to the applicant and the document must be obtained from the primary source. The receipt of an FCVS packet is identified in ATS in the Notes section.</p> <p>An issue identified in the BPR Study was that FCVS documents sometimes do not</p>



FSMB Product or Service	Description and Additional Information
	<p>meet current California law and may result in a deficiency notice sent to the applicant. Examples include a required document contained a signature that appeared to be computer-generated. In that case, a deficiency notice would be sent to the applicant and the required document would need to be resent to MBC, delaying application processing. Another example is a packet where the Medical School documents were not "seal verified"; this resulted in a deficiency notice and delay.</p> <p>In theory, receiving all credential documents in a packet at the same time should save time. It saves mailroom time, as only one piece of mail is handled. It saves the applicant time as there is one central place that houses their credentials. Based on information gathered during this study, a general statement cannot be made that use of FCVS always facilitates the licensing of an applicant in California. Factors include whether the FCVS packet is in the application file at the time of initial review, if all required documents in the FCVS packet are accepted and if no other deficiencies exist in the application.</p>
iPickup	<p>Description: iPickup makes electronic copies of FCVS packets available to state Medical Boards through a secured portal. An email notification is sent that an FCVS packet is available. There are no fees to state Medical Boards or the applicant. This would replace the hardcopy FCVS packets that a state Medical Board currently receives.</p> <p><i>The MBC Licensing Program does not currently use iPickup.</i></p> <p>Observations: The iPickup option provides a paperless method for MBC to obtain FCVS packets. Of a 40-page FCVS packet, it has been estimated that up to 12 pages can be used in application processing. If iPickup is used, only necessary documents would need to be printed; the entire packet could be stored electronically at MBC. Benefits for MBC would be decreased mail at the mailroom, smaller application file size (taking up less file drawer space). Costs would be the time needed to set up process, obtain electronic copies and printing.</p>
GME Connect	<p>Description: An FCVS enhancement that allows PGT Programs to enter GME credentialing verifications online through a secured portal. This information is provided to state Medical Boards in the FCVS packet. Forms can also be printed for wet</p>



FSMB Product or Service	Description and Additional Information
	<p>signature. Information includes – Training level, specialty/subspecialty, attendance, completion information and unusual circumstance information (probation, disciplinary actions, behavioral issues). There is no charge to the GME for its use or the state Medical Board.</p> <p><i>GME Connect is intended to be used by GME Programs as part of the FCVS Credentialing services. MBC could receive information generated from GME Connect as part of an FCVS packet.</i></p> <p>Observations: This process is between GME Programs and FCVS. Further assessment would need to verify all information captured in GME Connect is contained on Forms L3A/B (Certificate of Completion of ACGME/RCPSC Postgraduate Training). If all information is in GME Connect, MBC should consider allowing the Postgraduate Training Program to submit a hardcopy form of the GME Connect data with a wet signature from the Program Director and Hospital seal or Notary.</p>
Uniform Application & State-specific Addendum	<p>Description: The Uniform Application (UA) is an online form used for Physician Licensing developed by FSMB. The form includes data that is common across multiple states such as demographic information, education and examination history. In addition to the Uniform Application, the State-specific Addendum is used as a supplement to the Uniform Application and contains state-specific questions not on the Uniform Application. The state Medical Board can retrieve the self-reported data through an online secured application or a .pdf option is available. The Uniform Application and the State-specific Addendum are accessed through the FSMB Web site (www.fsmb.org). These products can be part of an FCVS packet or completed separately. If an applicant is using FCVS, 70% of the data is pre-populated from FCVS²⁷. Currently there is no cost to the state to develop a State-specific Addendum or use the Uniform Application. In the future, there may be a fee assessed for physicians using these forms. To implement this service, it is estimated to take about four months to complete assessment, develop a State-specific Addendum, test and implement. This timeframe does not include any changes to MBC processes, updates to communication-related components (Web site, policies and procedures,</p>

²⁷ FSMB presentation: License Portability – Setting the Stage, slide 21:
<http://www.docboard.org/aim/pdf/es09-fsmb.pdf>



FSMB Product or Service	Description and Additional Information
	<p>correspondence), or any technical changes required at MBC. From the documentation available to the BPR Study Team, 20 states are participating in either a paper version of the UA or an electronic version – mainly smaller states, with 15,000 or less licensed physicians.</p> <p><i>The Licensing Program does not currently use the Uniform Application or the State-specific Addendum.</i></p> <p>Observations: Standardized forms are used in other industries with success such as health care claims processing. Although there is currently no direct cost to the state Medical Boards there will be an indirect cost to state Medical Boards in resource time to work with FSMB to develop, implement and maintain the State-specific Addendum and the policies and procedures to go with the new forms and process. Additionally, it is not known if fees will be charged to the physician and how much they would be assessed. The California Department of Consumer Affairs (DCA) is developing an agency-wide online application system that will meet the application processing needs for MBC.</p>
Expedited Licensure	<p>Description: Expedited Licensure is a concept that supports license portability, a system of medical licensure that recognizes individual state and territorial jurisdiction while facilitating a process for obtaining and maintaining licenses in multiple states and territories.²⁸ License portability is considered necessary to address the mobility among physicians, growth of telemedicine and access to care issues.</p> <p>This concept would streamline the process for physicians licensed and in good standing in other states. It would recognize certain requirements as met because another Medical Board has already verified the fulfillment of those requirements. Each state would need to develop its own Expedited Licensure requirements.</p> <p><i>MBC has not adopted any Expedited Licensing methodologies.</i></p> <p>Observations: The term "expedited licensure" is not used at MBC. Business and Professions Codes § 2135 and 2135.5 provides Reciprocity under specific criteria for applicants having held a full and unrestricted license in another state for four or more years. Any other changes to current statutes and regulations could take years from</p>

²⁸ FSMB presentation: License Portability – Setting the Stage: <http://www.docboard.org/aim/pdf/es09-fsmb.pdf>



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FSMB Product or Service	Description and Additional Information
	concept to implementation.



9.3 Recommendations – Additional Information

Each recommendation identified in this section includes the following information to facilitate evaluation by MBC Licensing Program staff:

- **Cost** – Cost is defined in terms of time, resources, and money, level of effort and magnitude of change.
- **Benefit** – What this recommendation will provide relative to MBC goals.
- **Metrics** – This information will identify metrics that can be used to measure the effectiveness of a recommendation once implemented. Metrics fall into two categories:
 - *Quantitative metrics* describe data in terms of a numerical representation. For example, there were 200 new applications that had an initial review completed in the month of November.
 - *Qualitative metrics* are measures that describe data in subjective terms including quality, relative characteristics, and properties. For example, a recommendation may result in the increased feeling of teamwork across the MBC Licensing Program Staff.

Quantitative metrics are more precise and often considered more valuable than qualitative metrics. However, there are situations where only qualitative metrics can be derived. In certain cases, it is possible to estimate quantitative metrics from qualitative metrics.

- **Additional Information** – This provides supplemental information related to the recommendation such as additional considerations.



9.3.1 Infrastructure

The section includes recommendations related to:

- Forms
- Policies and Procedures
- Internal Reports and Communications
- GME Outreach
- Outgoing Communication (and Correspondence)
- Consumer Information Unit (CIU)
- Statutes and Regulations

And includes the following recommendations:

Component	Id	Recommendation	Previously Identified by MBC Licensing Program
Infrastructure	IF-1	Continue to advance Policy and Procedure Manuals	✓
	IF-2	Increase Uninterrupted Time Available for Review Tasks	
	IF-3	Strengthen Program-wide Quality Assurance (QA) Processes	✓
	IF-4	Create Process to Capture and Assess Staff Suggestions	✓
	IF-5	Implement a Continuous Process Improvement (CPI) Program	✓
	IF-6	Revise Application and Instructions	✓
	IF-7	Implement Application Set-up Worksheet	
	IF-8	Integrate Checklist into Application	✓
	IF-9	Revise Fee Schedule and Licensing Invoice Letter	
	IF-10	Implement PTAL/License Application Update Form	
	IF-11	Continue use, advancement and monitoring of FSMB Products and Services	✓



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Component	Id	Recommendation	Previously Identified by MBC Licensing Program
	IF-12	Resolve PTAL Issues and Implement Changes	
	IF-13	Update MBC Web Site Content for Applicant Tab	✓
	IF-14	Implement CIU Enhancements	✓
	IF-15	Assess Use of AMA's Physician Professional Data (PPD)	
	IF-16	Evaluate Viability of the Postgraduate (PG) Training Permit Concept	✓



IF-1 - Continue to Advance Policy and Procedure Manuals

Recommendations related to policies and procedures manuals include:

- Complete Application Policies & Procedures Manual and Create Update Process
- Enhance the Current Format of the Application Policies & Procedures Manual
- Develop Licensing Renewal Policies & Procedures Manual

Each of these items is discussed separately below. It is also recommended that a dedicated full-time employee be assigned to Policies and Procedure Manual and Decision Log maintenance. Having a dedicated resource will ensure the manual is kept current and activities identified in this recommendation are completed. If a resource is not dedicated to these tasks, it is likely that completion will be delayed due to conflicting priorities.

Complete Application Policies & Procedures Manual and Create Update Process

The primary sections of the Policies & Procedures Manual used in application processing, Sections 2 through 9, appear to have been finalized, but the entire the Policies & Procedures Manual has not been completed. The copy of the Policies & Procedure Manual provided to the BPR Study Team had section placeholders or sections that are not yet completed. Other sections have either not been finalized or not been started due to competing priorities of the current Licensing Program staff responsible for this manual.

In addition, this recommendation includes creation of an iterative process to regularly update the Policies and Procedures Manual and integrate items from the Decision Log. The process will ensure manual integrity and application review consistency.

Cost	<ul style="list-style-type: none">• Time to review and update• Time to rollout to staff; may require training for MBC Licensing Program staff
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	<ul style="list-style-type: none">• Time for cyclical review and update• Dedicated resource to maintain Policies & Procedures Manual and Decision Log
Benefit	<ul style="list-style-type: none">• Easier to read and locate information; fewer information "gaps"• Anticipated decrease in application processing errors• Anticipated increase in application processing quality
Metrics	<ul style="list-style-type: none">• Qualitative metrics could be obtained through Review Staff and Administrative Support Staff feedback – does the new manual contain what you need to know to do your job?• Quantitative data on Application processing errors is currently collected through existing QA processes. Comparison of data collected prior to the implementation of this recommendation and after the implementation could be used to show a decrease in application processing errors.
Additional Information	<ul style="list-style-type: none">• Consideration should be given to have a dedicated resource responsible for the alignment of all communication-related components (Such as Web site, Policies & Procedures (and Decision Log), and outgoing communication)• Policies and Procedures review comments will be provided to MBC under separate cover with Application revision recommendations.

Enhance the Current Format of the Application Policies & Procedures Manual

Enhancing the format of the current Policies and Procedures Manual support the principles of clear, concise and consistent information. In addition, format revisions should be designed to be easy to accomplish and facilitate future manual updates.

Recommended changes include:

- Use of heading and subheading styles within the document
- Different Table of Contents format
- Version Control (including footers and a revision log)
- Enhancing the manual layout using available MS-Word formatting options to increase readability
- Resolution of any missing information or inconsistencies



A sample of the proposed revisions to the Policies and Procedures manual is in Section 9.4.6, on page 248.

Cost	<ul style="list-style-type: none">• Time to review and revise format and create iterative process• Time to rollout to staff; may require training for MBC Licensing Program staff• Time for cyclical review and update• Dedicated resource to maintain Policies & Procedures Manual and Decision Log
Benefit	<ul style="list-style-type: none">• Easier to read and locate information; fewer information "gaps"• Anticipated decrease in application processing errors• Anticipated increase in application processing quality• Higher rate of autonomy for newer staff; less questions and interruptions to experienced staff• Quicker integration of updates to manual
Metrics	<ul style="list-style-type: none">• Qualitative metrics could be obtained through Review Staff and Administrative Support Staff feedback – does the manual (with the Decision Log) contain all the information you need to do your job?• Quantitative data on Application processing errors is currently collected through existing QA processes. Comparison of data collected prior to the implementation of this recommendation and after the implementation could be used to show a decrease in application processing errors.
Additional Information	<ul style="list-style-type: none">• Consideration should be given to have a dedicated resource responsible for the alignment of all communication-related components (Such as Web site, Policies & Procedures (and Decision Log), and outgoing communication)

Develop Licensing Renewal Policies & Procedures Manual

It is recommended that policies and procedures be created for the License Renewal process. As discussed in the observations, documented policies and procedures do not exist for the License Renewal processes. It is currently not an issue because of the minimal turnover in the Licensing Renewal staff.

Cost	<ul style="list-style-type: none">• Time and resources to develop policies and procedures and an update process
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	<ul style="list-style-type: none">• Time and resources to maintain policies and procedures
Benefit	<ul style="list-style-type: none">• Processing standards are identified• Easier to train new staff with policies and procedures
Metrics	<ul style="list-style-type: none">• Quantitative metrics: None• Qualitative metrics: Improved consistency in processing
Additional Information	<ul style="list-style-type: none">• Consideration should be given to have a dedicated resource responsible for the alignment of all communication-related components (Such as Web site, Policies & Procedures (and Decision Log), and outgoing communication)



IF-2 – Increase Uninterrupted Time Available For Review Tasks

This recommendation was developed during the time the Licensing program was focused on elimination of the backlog and assessing options that would allow Review Staff to focus on application review. This recommendation should be considered when there is substantial application workload.

OPTION 1 – Reclassifying existing CIU staff and/or augmenting CIU staff with properly trained resources would most likely free up Review Staff time spent on phone calls and emails. Possible changes to the Call Center intake process could limit the types of calls the newer staff would be answering. Reviewer's voicemail greetings could be updated with a message or incoming calls to Review Staff could be rerouted to the CIU for faster service.

Cost	<ul style="list-style-type: none">• Reclassifying existing CIU staff• Acquiring and Training new CIU staff• Allocating space and equipment needed for new staff
Benefit	<ul style="list-style-type: none">• Increased uninterrupted time for reviewers to complete initial reviews
Metrics	<ul style="list-style-type: none">• Increase in initial reviews completed
Additional Information	<ul style="list-style-type: none">• Proposal previously submitted to increase CIU by four (4) new staff, but was not approved.

OPTION 2: Temporarily relieve Review Staff from returning emails and phone calls within established timeframe when workload is high – Reviewers indicated they received an email memo indicating an expectation that emails and phone calls would be returned by the end of the following business day. If the timeframe of the current guideline is increased to provide some relief, Web site should be updated to communicate:

- MBC's commitment to completing initial reviews on all applications within regulatory timelines.



- The current receipt date of applications being reviewed (this will require weekly updates to the Web site)

Reviewer's voicemail greetings should also be updated and consistent with the information on the Web site. Once workload has decreased, the response time guideline for emails and phone calls can be resumed.

Cost	<ul style="list-style-type: none">• Increased time for email follow-ups and callbacks• Possible escalation of calls to Executive Staff
Benefit	<ul style="list-style-type: none">• Increased time for reviewers to complete initial reviews and process applications.
Metrics	<ul style="list-style-type: none">• Increase in initial reviews completed
Additional Information	<ul style="list-style-type: none">• NONE



IF-3 – Strengthen Program-Wide Quality Assurance (QA) Processes

As discussed in Section 6 - Recommendations, it is strongly recommended that quality assurance measures are continued and new measures are incorporated into the processes where appropriate. Often when the objectives are tied to measurement of output (such as increasing the number of initial reviews completed), quality can be comprised. It is necessary that both efficiency and quality be balanced in each and every action supporting MBC's mission of protecting health care consumers through the proper licensing of physician and surgeons.

Current quality assurance activities performed in the licensing and PTAL processes should be documented and further refined to maximize effectiveness and increase quality and consistency of application processing. Recommendations IF-7, Implement Application Set-up Worksheet, and IF-8, Integrate Checklist into Application, have incorporated additional quality assurance measures and allow quality assurance to be implemented earlier in the process.

Cost	<ul style="list-style-type: none">• Time and resources to develop and maintain QA processes• Staff Training• Updating processes and procedures
Benefit	<ul style="list-style-type: none">• Standardized processes• Reduced errors• Increased efficiency• Increased metric reliability• Increased staff morale
Metrics	<ul style="list-style-type: none">• Quantitative: Reduction in errors, Increase in customer satisfaction• Qualitative: Improved work environment
Additional Information	<ul style="list-style-type: none">• NONE



IF-4 - Create Process to Capture and Assess Staff Suggestions

Several process and procedural suggestions were identified in the training sessions for new Licensing Program Staff in October 2009. Existing staff frequently identified process and procedural issues and improvements during the BPR Study interviews. Currently, there is no established method or repository to capture staff suggestions for assessment and implementation. It is recommended that a repository be established to capture and a process developed to assess staff ideas and suggestions for possible implementation.

Cost	<ul style="list-style-type: none">• Time and resources to establish process and repository• Time and effort to rollout the process• Time and resources to maintain the repository, assess and implement the recommendations
Benefit	<ul style="list-style-type: none">• Suggestions from staff working in the environment are often viable and practical as they are based on knowledge and practical experience• Increased collaboration among the Licensing Program Staff• Increased morale among the Licensing Program Staff
Metrics	<ul style="list-style-type: none">• Quantitative metrics: Qualitative metrics could be captured on number of suggestions provided and outcome of suggestions• Qualitative metrics: increased morale, feeling of teamwork
Additional Information	<ul style="list-style-type: none">• None



IF-5 – Implement a Continuous Process Improvement (CPI) Program

The BPR Study Team recommends MBC consider the implementation of a Continuous Process Improvement (CPI) program in its long-range planning. The goal of a CPI program is to standardize and streamline processes, eliminate waste, and reduce errors. The benefits of a CPI program include error reduction, increase in efficiency and improved staff morale. Implementing a CPI Program requires executive sponsorship and must be led and championed by an organizational leader with access to knowledge in the selected methodology. There are many CPI methodologies; the most popular include Six Sigma, Lean Thinking, and Theory of Constraints. The table below shows a brief comparison of these CPI methodologies²⁹.

Table 7 - Comparison of Continuous Process Improvement (CPI) Methodologies

Program	Six Sigma	Lean Thinking	Theory of Constraints
Theory	Reduce variation	Remove Waste	Manage Constraints
Focus	Problem focused	Flow focused	System constraints
Primary Effect	Uniform process output	Reduced flow time	Fast throughput

Additional assessment is required by MBC to determine the CPI methodology that best fits the organization. Work products created for this BPR study, including the Business Process Flows, roles and responsibilities, and observations can be leveraged in the implementation of any CPI methodology.

Cost	<ul style="list-style-type: none">• Time and resources to select a CPI methodology• Time and resources to implement the CPI program• Time and resources to maintain the CPI program• Staff Training• Updating processes and procedures
Benefit	<ul style="list-style-type: none">• Standardized processes• Reduced errors• Increased efficiency• Increased metric reliability

²⁹ "Process Improvement – How to Compare Six Sigma, Lean and the Theory of Constraints", Quality Progress – March 2002.



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	<ul style="list-style-type: none">• Staff empowerment
Metrics	<ul style="list-style-type: none">• Varies based on methodology selected
Additional Information	<ul style="list-style-type: none">• NONE



IF-6 - Revise Application and Instructions

The BPR Study Team supports MBC's plan to revise the application and instructions. Based on the BPR Study Team's review of the application and application instructions, revising the application and instructions would most likely result in less errors in applications submitted and fewer applicants calling the CIU and Review Staff.

Examples of recommended revisions include:

- Clarify notary area with signature and jurat – notaries are signing on the wrong line
- Reduce 11 pages of instructions
- Group similar questions together on the L1A – L1E
- Add extra line to exam section

Cost	<ul style="list-style-type: none">• New/revised forms must go through Forms Management Process• Staff and time to review and update application, instructions and manuals• Possible updates to internal and internal communication• Training for MBC Licensing Program staff• Time and resources for cyclical review and update
Benefit	<ul style="list-style-type: none">• Decrease phone calls to CIU or Review Staff as goal is to make instructions more clear and concise• Decrease number of errors found in Application Review• Increased quality of the application packets submitted to MBC
Metrics	<ul style="list-style-type: none">• Quantitative metrics may be obtained through ATS to verify decrease in the application errors. This data could be derived from total number of deficiency letters and total number of errors within a deficiency letter. These metrics could be obtained at established intervals (6 months post-implementation and one-year post implementation).• Quantitative metrics from CIU showing possible decrease in CIU calls related to application instruction questions• Qualitative metrics could be obtained through Review Staff Interviews – are the applications received of higher quality? Are there fewer errors?



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**Additional
Information**

- Application revision recommendations will be provided to MBC under separate cover with Policies and Procedures review comments.



IF-7 - Implement Application Set-up Worksheet

The Application Set-up Worksheet would replace the current Application Worksheet (a.k.a. the "Pink Form") used by Administrative Support Staff and include tasks defined in Chapter 2 of the Policies and Procedures Manual related to application set-up. The checklist will consolidate and clarify Administrative Support Staff responsibilities related to setting up new application file folders and the subsequent preliminary review. Additional columns identifying task completion date, Administrative Support Staff initials and Quality Assurance (QA) information would assist in workload assessment and performance measurements.

Cost	<ul style="list-style-type: none">• Replacement of existing form• New/revised forms must go through Forms Management Process• Training and possible updates to Policies & Procedure Manual• New process can result in uneasiness by staff accustomed to current "Pink" form• Time and resources to complete cyclical review and update of form
Benefit	<ul style="list-style-type: none">• Increased ability to measure Administrative Support Staff task completion and accuracy• Better accountability of staff performing the work identified in the new worksheet
Metric	<ul style="list-style-type: none">• Dates could be extracted from set-up sheet to determine duration applications are in application set-up and preliminary review.• Qualitative metrics could include staff feedback on usefulness and completeness of form and management feedback if form is helpful for assessing performance, quality and workload.
Additional Information	<ul style="list-style-type: none">• The original and proposed <i>Application Set-up Worksheet</i> is included in Section 9.4.4.



IF-8 - Integrate Checklist into Application

Checklists are used to verify all required documents and forms are included prior to submission. Use of the Licensing and PTAL Application checklist could provide higher quality applications and fewer deficiencies out of the initial review process.

The Application checklist would be posted to the Web site in the application or the instructions for applicants to use as self-check before mailing application packet to MBC. The checklist and instructions would request the applicant return the completed checklist with the application. This would allow MBC Administrative Support Staff to crosscheck contents of application packet with a completed checklist.

The Application Checklist would also have additional information from the applicant not previously available to MBC (such as date applicant requested forms to be sent from primary source). The checklist would also reinforce that it is the applicant's responsibility to request or send forms to external entities.

If the applicant does not include the checklist in the application package or the checklist is incomplete, it would not constitute a deficiency. For those situations, Administrative Support Staff could complete an application checklist as part of the application set-up and preliminary review.



Cost	<ul style="list-style-type: none"> • New/revised forms must go through Forms Management Process • Checklist will need to be posted to Web site and included in the application packet • Training for CIU and Review Staff in the event questions arise regarding this Checklist • Possible short-term increase in CIU calls with questions on Application Checklist. A new outcome code should be used to track calls related to the new checklist. This would require documentation updates • Training for Administrative Support Staff to process (but using the form supports tasks related to the preliminary review). • Rollout to Review staff (it is not anticipated that Review staff will have any added responsibility related to this Checklist. It can provide additional information to the Reviewer). • Time for cyclical review and update of the Checklist • Additional document in application folder
Benefit	<ul style="list-style-type: none"> • Allows applicant to perform self-check before submitting the application packet to MBC resulting in the increased quality of the application packets submitted to MBC • Allows MBC to obtain some additional information (such as date applicant requested forms to be sent from primary source) • May decrease phone calls to CIU as checklist answers some applicant questions • May decrease number of errors found in application review • Format allows cross-check by Administrative Support Staff • Additional information is provided to MBC
Metrics	<ul style="list-style-type: none"> • Monitor CIU phone calls through an outcome code specific to Checklist questions. Take action based on outcome code • Quantitative metrics could be obtained through ATS to identify if there is a decrease in deficiency notices generated • Qualitative metrics could be obtained through Administrative Support Staff and Review Staff Interviews – are the applications received of higher quality? Are there fewer errors?
Additional Information	<ul style="list-style-type: none"> • The proposed <i>Application Checklist</i> is included in Section 9.4.3. • If the applicant does not include the checklist in the application package, it would <u>not</u> constitute a deficiency



IF-9 - Revise Fee Schedule and Licensing Invoice Letter

Interviews with Cashiering staff identified issues receiving the correct fees from applicants. These issues result in additional work for the Cashiering Staff and the Review Staff and possible delays in licensure. The BPR Study Team reviewed the following fee-related documents:

- The fee schedule included in the PTAL and license application
- The license invoice letter sent to the applicant near the time of licensing if license fees have not yet been received.

The review determined both of these documents require revisions to clarify the information and simplify the format on the documents. Samples of the original and revised fee schedule and licensing invoice letters are included in Section 9.4.2 (Fee Schedule) and 9.4.5 (Licensing Invoice). It is anticipated that the recommended revisions will resolve the identified issues.

Cost	<ul style="list-style-type: none">• New/revised forms must go through Forms Management Process• Web site will require update with new fee schedule form• Rollout and training for Cashiering and Licensing Program• Any documentation (Policies and Procedures manual) identifying forms and letters will require updates
Benefit	<ul style="list-style-type: none">• Clear and concise information to applicant anticipated to result in less fee-related errors• Decrease in CIU and Cashiering calls related to application questions
Metrics	<ul style="list-style-type: none">• Quantitative metrics: Decrease in applicant questions related to fees. Fewer issues found by Cashiering.• Qualitative metrics: None
Additional Information	<ul style="list-style-type: none">•



IF-10 - Implement PTAL/License Application Update Form

Under current policy, if an applicant would like to update any information submitted on the L1A-L1E, a new L1A-L1E must be completed. Interviews with Review Staff indicated the updated L1A – L1E often has errors unrelated to the updated information such as blank fields or conflicting information when compared with the previously submitted L1A-L1E. These errors result in the generation of additional deficiency letters, applicant resolution and added time for the applicant to obtain a licensure decision. The revised L1A – L1E requires additional time for Licensing Program staff to compare the original and submitted forms and review the content.

In the past, the L8 form was used by the applicant to provide updated application information. It is recommended that the Licensing Program create a special project to create and implement an update form to replace the use of the L1A – L1E for updates. The L8 can be leverage in the development of the new form.

Cost	<ul style="list-style-type: none">• New/revised forms must go through Forms Management Process• Time and resources for MBC to develop new form• Time and resources for any documentation and Web site updates• Time and resources for training Licensing Program staff on new form• Possible short-term increase in CIU calls with questions on new form. A new outcome code should be used to track calls related to the new form.
Benefit	<ul style="list-style-type: none">• Decrease in time to review application update• Decrease in errors or conflicts in update form result in fewer deficiency notices and reduced delays in licensure decision
Metrics	<ul style="list-style-type: none">• Quantitative metrics: Fewer errors on application updates and decreased time to review updates• Qualitative metrics: None
Additional Information	<ul style="list-style-type: none">• There are currently no metrics on what percentage of applications receive an update.



IF-11 – Continue Use, Advancement and Monitoring of FSMB Products and Services

Five (5) FSMB products and services were identified in Section 5.1. The following recommendation addresses the FSMB products and services.

- **eTranscripts** – This service is currently being used by MBC Licensing Program. The BPR Study Team did not have any further recommendations.
- **Federation Credential Verification Service (FCVS)** – The Licensing Program currently accepts FCVS documentation as long as the documentation meets State of California requirements. The BPR Study did not have any further recommendations.
- **iPickup** – The service is currently *not* used by MBC Licensing Program, but MBC is planning on continuing previous efforts to implement iPickup. The BPR Study Team supports MBC's plan to implement. A process will need to be established and documented in the Policies & Procedures manual once it is implemented.
- **GME Connect** – MBC should consider acceptance of a hard copy containing this information with a wet signature in lieu of an L3A/B (Certificate of Completion of ACGME/RCPSC Postgraduate Training). A crosswalk between the two forms identifying any gaps would assist MBC in determining its potential use.
- **Uniform Application and the State-specific Addendum** – Implementation of this will require significant MBC effort. The California Department of Consumer Affairs (DCA) is developing an Agency-wide online application system that will meet the application processing needs for MBC and significant MBC resources will be required to support that effort. In addition, based on the available information related to the Uniform Application and State-specific addendum, it is not known if in the future fees will be assessed for use (See Section 9.2, FSMB Products and Services – Additional Information page 152). The BPR Study Team recommends MBC does not allocate resources to assess or advance the use of Uniform Application and



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State-specific Addendum at MBC at this time, but monitor FSMB developments on this product.



IF-12 – Resolve PTAL Issues and Implement Changes

A special project should be initiated to address and resolve the PTAL-related observations discussed in Section 3.8.4 - Observations – Application Review, page 60:

1. **Clarification if statute and/or regulation requires PTAL renewal while applicant is enrolled in a residency program** - Postgraduate Training Registration Form (Form 07M-175A) could be “linked” to a PTAL to extend the expiration of the PTAL as long as the resident continued in the same residency program.
2. **No limit to the number of PTAL renewals that can be issued** – Further research should be done to determine the average number of PTALs issued. This information may be used to determine if PTAL expiration should be extended beyond one year.
3. **No fees are assessed for a PTAL renewal** - Further research should determine PTAL renewal trends. A nominal fee should be considered if PTAL is valid for only one year because of the processing related to the application update.
4. **Files must be retained for several years, and are counted in a Review Staff inventory and overall workload** – A process should be created and a location identified away from the Review Staff to store all files once a PTAL has been issued. If a renewal is requested or a license application is received, Administrative Support Staff can retrieve the application file and provide it to the Review Staff. Once the application file is removed from an individual Review Staff file drawer, it should no longer be counted in the “Application Reviewed Awaiting Documents” category. A separate category of “Active PTALs” should be created. The “Active PTALs” could be managed as a separate special project by a single resource instead of by individual IMG Review Staff.



5. **PTALs require additional data in ATS to be effectively tracked** – The additional data may require a change to the data structure in ATS. Another option the BPR Study Team briefly discussed with ISB was the possibility of creating an additional Qualification Method 2102PTLL to identify License applications that had a PTAL issued. If this option is viable, the data for this applicant would be retained across two ATS records, linked by the ATS id of the PTAL.
6. **PTALs require additional and extended tracking** – There can be two distinct events for an IMG that participates in Postgraduate training in California: (1) An applicant submits an application and receives a PTAL and (2) an applicant that received a PTAL submits an application for licensure. There is a link between these two distinct events and licensure application processing is less complex because several of the documents are in the application file for the PTAL.
7. **PTALS require an additional level of reporting** – Due to the distinct events described above, PTALs require an additional level of reporting. Currently, an ATS record is opened when an applicant submits a PTAL application and can remain open until a license application has been approved; the timeframe can span several years. Current reporting is skewed when comparing licensure across qualification methods or timeframes from application receipt to licensure. PTAL reporting recommendations are included in the Reporting recommendations listed in Section 9.3.2.
8. **Remove applications from Review Staff files once PTAL has been issued and centralize storage** – This is discussed in number 4 above.

Cost	<ul style="list-style-type: none">• Time and resources to create a Special Project• Time and resources to review and resolve issues• Space to store Application files with active PTALs• Licensing Committee and Board involvement for policy direction
Benefit	<ul style="list-style-type: none">• Decrease in "Applications Reviewed Awaiting Documents" counts• Better management of PTALs• Better tracking of PTALs



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	<ul style="list-style-type: none">• Enhanced reporting of PTALs• Less files stored in IMG Review Staff files
Metrics	<ul style="list-style-type: none">• Quantitative metrics: Enhanced PTAL reporting would provide better metrics• Qualitative metrics: Better PTAL management, tracking and reporting
Additional Information	<ul style="list-style-type: none">• NONE



IF-13 – Update MBC Web Site Content on Applicant Tab

Clear, concise and consistent language across the Web site will most likely reduce CIU calls and result in MBC receiving higher quality applications. Web site changes should include:

1. Update application tab to more applicant-specific information (see Section 9.4.6 – sample updated web pages)
2. Separation of application from application instructions
3. Addition of PTAL-specific tab
4. Limiting the use of Webmaster to technical issues related to the MBC Web site. For non-technical inquiries, Web site should be updated to send to a general mailbox such as info@mbc.ca.gov.
5. Ability for applicant to send an email from Web Applicant Access System (WAAS) web page to MBC if there is a question. This may reduce calls to CIU. A separate general mailbox WAASinfo@mbc.ca.gov could be used if the Licensing Program would like to isolate WAAS-related emails, otherwise use info@mbc.ca.gov.
6. Additional fields in callback info where the requestor can include ATS info and the nature of the request so that CIU can be better prepared when returning the call. This may require changes to the CIU process.
7. Creation of a cyclical Web site review and update process

Cost	<ul style="list-style-type: none">• Time and resources to review Web site and to create updates• Time and resources to update the Web site• Possible short-term increase in CIU calls with questions because Web site info is in a "different place"• Web site updates require rollout and/or training for MBC Licensing Program staff• Time and resource to check info@mbc.ca.gov and WAASinfo@mbc.ca.gov (this could be the same person that monitors the webmaster mail)
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	<ul style="list-style-type: none">• Time and resource to create processes• Time and resource to perform cyclical review and update of Web site
Benefit	<ul style="list-style-type: none">• May decrease phone calls to CIU as goal should be to make Web site primary source of information for physicians and healthcare consumers.
Metrics	<ul style="list-style-type: none">• Decrease in CIU calls• No current metrics are compiled for quality level of incoming applications (number of errors) so no before/after comparisons could be done.
Additional Information	<ul style="list-style-type: none">• A sample of updated Web site content is in Section 9.4.6.• Consideration should be given to have a dedicated resource responsible for the alignment of all communication-related components (Such as Web site, Policies & Procedures (and Decision Log), and outgoing communication)



IF-14 – Implement CIU Enhancements

CIU Recommendations based on observations and interviews include:

1. Review Outcome codes and distributions monthly. If a single outcome code is over 15%, determine if additional codes are required. Outcome code "Other" is approximately 25% of total calls. Prior to Web Applicant Access System (WAAS) implementation in December 2009 "Applicant – application questions" totaled between 25% and 33% of outcomes codes.
2. Identify outcome codes statistics that indicate updates are needed to Web site, outgoing correspondence, or policies and procedures.
3. Determine if ATS id can be input prior to connecting with CIU agent; this could save call time once caller and agent are connected.
4. Regularly assess the call tree to determine if modifications are necessary.
5. Identify Web site as alternative to obtain information when caller calls CIU and is waiting in the queue. Call statistics should be tracked to see if there is a decrease in calls and Web site should be monitored to see if there is an increase in Web site traffic.
6. Web Center schedule needs to be fixed to allow scheduling more than one week in advance. Calendar updates should be allowed up to one year in advance. Currently, the calendar required weekly updates to indicate CIU is closed on the first, second and third Friday of the month due to furloughs.

Cost	<ul style="list-style-type: none">• Time and resources to do research and updates• Time and management resources to regularly review reports and determine if corrective action is needed
Benefit	<ul style="list-style-type: none">• Enhanced feedback loop between CIU and other licensing-related components• Increased focus on callers
Metrics	<ul style="list-style-type: none">• Quantitative metrics: CIU call statistics, Web site traffic• Qualitative metrics: NONE



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Additional Information	<ul style="list-style-type: none">NONE
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IF-15 - Assess Use of AMA's Physician Professional Data (PPD)

It has been determined, at a high-level, that information is available through the AMA that identifies residents currently enrolled in California-based ACGME GME programs. The information is part of the AMA's Physician Professional Data (PPD) and is available for purchase through AMA Database Licensees. The BPR Study Team worked with the MBC GME Outreach Coordinator, a representative from the AMA, and an AMA Database Licensee distributor to determine the availability of data. Possible uses of this data include:

- An alternative method to obtain PGT Registration Form (Form 07M-175A) information
- Ability to verify all IMGs currently enrolled in a California-based ACGME GME program have a valid PTAL on file
- Increased ability for MBC Licensing Program management to project workload by identifying residents that will require licensure
- Increased ability for better and targeted GME outreach

The preliminary evaluation of this data supports this recommendation for MBC Licensing Program to move forward with further assessment to determine if AMA data should be purchase and use of AMA data.

Cost	<ul style="list-style-type: none">• Time, resources and effort to complete evaluation of the AMA data• Time and effort to update outgoing communication related to Form 07M-175A if it is determined it is no longer required• Cost to purchase initial data and subsequent updates• Time, resources and effort to analyze the AMA data
Benefit	<ul style="list-style-type: none">• Single source for data• Increased accuracy of data• Significant reduction (or elimination) in handling and processing Form 07M-175A processing if it is determined it is no longer required



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Metrics	<ul style="list-style-type: none">• Quantitative metrics: Processing cost savings if Form 07M-175A is no longer required, more accurate work load projections• Qualitative metrics: Enhanced GME Outreach
Additional Information	<ul style="list-style-type: none">• Assessment must include determination if regulatory requirements will be met with AMA data. Currently CCR Title 16 § 2065 and 2066 require a resident to submit a PGT Registration Form (Form 07M-175A)



IF-16 – Evaluate Viability of the Postgraduate (PG) Training Permit Concept

If MBC considers the concept of a PG Training Permit to be viable, the BPR Study Team strongly recommends a special study to assess the efficacy of this major policy shift prior to placing any sizable effort in furthering the PG Training permit concept. The special study would require a comprehensive assessment identifying the likelihood and statistical significance that the PG Training permit process would identify ineligible applicants earlier than the current application process. The study should also assess impacts to resource and workload and identify required activities (for example, statutory and regulatory changes).

Cost	<ul style="list-style-type: none">• Additional resources and time to do special study
Benefit	<ul style="list-style-type: none">• Benefit stated in other available documentation indicates earlier identification of residents ineligible for licensure. This has not been confirmed.
Metrics	<ul style="list-style-type: none">• NONE
Additional Information	<ul style="list-style-type: none">• NONE



9.3.2 Information Technology (IT)

The section includes recommendations related to the Applicant Tracking System (ATS) and ATS-based reporting. Additional IT-related recommendations are included in this section if a recommendation would require involvement from ISB or DCA OIS.

Component	Id	Recommendation	Previously Identified by MBC Licensing Program
Information Technology (IT)	IT-1	Implement New Management Reporting Recommendations	✓
	IT-2	Track DCA/ISB Requests and Action Items	✓
	IT-3	Evolve ATS to address MBC needs	
	IT-4	Explore Ways to Increase Use of E-communication	✓
	IT-5	Assess Option for DCA/MBC ISB Secured Portal for Electronic L3A/B	✓
	IT-6	Actively Support DCA's Development of the BREEZE2 Database System	✓
	IT-7	Evaluate use of a Document Management System	



IT-1 – Implement New Management Reporting Recommendations

Additional and enhanced reporting is needed for effective Licensing Program management. Reporting recommendations listed in below are mainly ATS-related; some of the Administrative Support and QA reporting recommendations are outside of ATS, but included here for consistency.

Currently, ATS is not designed to produce these reports, but an ATS ad hoc reporting tool was made available to ISB and the Licensing Program in August 2009 to extract data from ATS and produce reports. The following table provides a summary of the recommended reporting identified in this section with current status and recommended priority (high/med/low). Some of the reporting recommendations identified in this section have already been implemented and are noted as such.

Table 8 - Reporting Recommendation Summary

Category	Id	Report	Is Report being produced? ---- (A)utomated (M)anual ³⁰	Recommended Priority
Admin Support	01	How many applications received from mailroom waiting application-set up and preliminary review? (These are applications that have not been entered in ATS and require manual counting)	Yes (M)	n/a
Admin Support	02	Date of applications being currently processed in Administrative Support Processes (These are applications have not been entered in ATS and the information must be manually identified)	Yes (M)	n/a
Admin Support	03	How many applications completed application set-up and preliminary review processes? May require manual counting	No	Med
Admin Support	04	How many applications have been processed through the Z-project	No	Med
App Review	05	Backlog awaiting initial review (90+ days)	Yes (A)	n/a
App Review	06	Inventory awaiting initial review	Yes (A)	n/a

³⁰ If Manual Reporting is currently done and data is in ATS to produce reports automatically, the BPR Study Team recommends automating the report,



Category	Id	Report	Is Report being produced? ---- (A)utomated (M)anual ³⁰	Recommended Priority
App Review	07	PTAL and license applications with receipt date >= 1 yr awaiting documents to resolve identified deficiencies	Yes (M)	High
App Review	08	Approved PTAL applications with receipt date < 1 yr	Yes (M)	Med
App Review	09	Approved PTAL applications with receipt date >= 1 yr and no update	Yes (M)	Med
App Review	10	Regulatory compliance with the 60-working day initial review timeframe	Yes - adhoc (A) ³¹	Med
App/PTAL issued	11	Regulatory compliance with the 100-calendar day licensure decision timeframe	No	Low
Other	12	Pended Mail Waiting for Review	No	High
Other	13.1	Deficiency Letter generation - Number of applications that had a deficiency letter generated.	Yes (M)	High
Other	13.2	Deficiency Letter generation - The number and type of deficiencies found	No	High
Other	13.3	Deficiency Letter generation - Number of applications that had multiple deficiency letters generated.	No	High
Other	13.4	Deficiency Letter generation - Time between deficiency letter generation and applicant response.	No	High
Other	14	Straight to licensure or PTAL	Yes (M) ³²	High
Other	15	Expired Test Scores	No	Low ³³
Other	16	Quality measurements	Yes (M) ³⁴	High
Other	17.1	PTAL - issuance	Yes (M)	High
Other	17.2	PTALs – renewal frequency	No	Med
Other	17.3	PTALs – PTAL to license issuance tracking	No	Med
Other	18	Application Outcomes to allow identification of abandoned applications	No	Low ³⁵
Other	19	Management Dashboard Reporting	Yes (A)	High

³¹ Produced on an ad hoc basis during BPR study. Information can be derived from weekly inventory reports.

³² Manual counts are for Applications going straight to Licensure only. No counts are currently available for Applications going straight to PTAL.

³³ Assessed as Low Priority because it is unknown the frequency of test score expiration that occurs, although during BPR Study interviews, test score expiration was identified as an issue in application processing, particularly with International Medical School Graduates (IMG).

³⁴ Data on current QA findings is collected manually and corrective action taken when appropriate.

³⁵ Assessed as Low priority because it is unknown if this



Cost	<ul style="list-style-type: none">• Licensing Program staff and ISB time to prioritize and assess reports• ISB time to design and develop reports• MBC Licensing Program staff time to analyze report data and take subsequent action
Benefit	<ul style="list-style-type: none">• Automation of reports will increase Review Staff time for application processing• The data can be used to assist in development of staffing plans and performance objectives (See Recommendation R-8, Establish program-wide performance objectives, staffing plans and metrics)• Increased accountability
Metrics	<ul style="list-style-type: none">• Quantitative – based on report content• Qualitative – Have the report(s) provided better information to Licensing Program management? Have the reports streamlined workflow? Increased Review Staff time?
Additional Information	<ul style="list-style-type: none">• NONE

Metric and reporting recommendations have been grouped by application processing order:

- Administrative Support Process (Application Set-up, Preliminary Review, Z-project updates)
- Application Review Process (through Initial Review)
- Application Review Process – Initial Review completed and Awaiting Documents
- Application Review Process – PTAL and License decision rendered

Additional metric and reporting recommendations outside of the Application Process are included at the end of this recommendation.



Administrative Support Process (Application Set-up, Preliminary Review, Z-project updates)

Some of these metrics are manually captured (self-reported) because an ATS record has not yet been created. Recommendation is to produce (or report if manually captured) weekly or monthly.

1. How many applications received from mailroom waiting application-set up and preliminary review? (These are applications that have not been entered in ATS and require manual counting)
2. Date of applications being currently processed in Administrative Support Processes (These are applications have not been entered in ATS and the information must be manually identified)
3. How many applications completed application set-up and preliminary Review? Is it within performance objectives³⁶? (These are applications have not been entered in ATS and the information must be manually counted)
4. How many applications have been processed through the Z-project? Is it within performance objectives³⁷? NOTE: this information can be derived through ATS data

Application Review Process (through Initial Review)

1. Backlog awaiting initial review (90+ days) - Split by US/CAN, IMG (and PTAL if needed) and Reviewer (or review group) – sorted by first char of last name/ascending, oldest app received date/descending (oldest first).
 - Should also have one list with all Inventory sorted by oldest app received date/descending (oldest first)

³⁶ complete application set-up and preliminary review within 5 workdays, with a long-term goal of 2-3 workdays

³⁷ Complete WAAS update within 10-days of document receipt



- This report is currently being produced weekly
2. Inventory awaiting initial review – Split report by US/CAN, IMG (and PTAL if needed) – sorted by first char of last name/ascending, oldest app received date/descending (oldest first). Counts by 90+ days, 61-90 days, 31-60 days, 0-30 days.
- Should also have one list with all Inventory sorted by oldest app received date/descending (oldest first)
 - This report is currently being produced weekly
 - Exception report should be created to show invalid data combinations such as qualification methods.
 - Another version of this report, to include 75+ days could be produced by reviewer (or reviewer group) to identify short-term (next 2 weeks) workload
 - Once backlog (90+ days) is eliminated, Management may want to split 61-90d into 61-74d and 75-90d since the goal is to get days to initial review down to 60d.

Application Review Process – Initial Review completed and Awaiting Documents

There is a category on the monthly workload report called “Applications Reviewed Awaiting Documents”. Applications in this category are waiting documentation for further processing, such as waiting for documentation from an external entity to resolve identified deficiencies. Assumption is this category could include the following groups which are discussed in further detail below.

GROUP	Description
1	PTAL and license applications with receipt date < 1 yr awaiting documents to resolve identified deficiencies
2	PTAL and license applications with receipt date >= 1 yr awaiting documents to resolve identified deficiencies
3	Approved PTAL applications with receipt date < 1 yr
4	Approved PTAL applications with receipt date >= 1 yr and no update

General statistics need to be gathered on this data including application age, Qualification Method (QM) method and which group the application falls into. For



PTALs, general statistics should include date initial PTAL was issued and any renewal information (for each PTAL renewed).

For applications in group 2 (PTAL and license applications with receipt date ≥ 1 yr awaiting documents to resolve identified deficiencies) and group 4 (Approved PTAL applications with receipt date ≥ 1 yr and no update), the BPR Study interviews indicated an estimated 50% of applicants will update their application or request the application remain open once they receive notification from the Licensing Program indicating the application will be closed if no update is received, resulting in additional workload for Licensing Program staff.

GROUP 1: *PTAL and License applications with receipt date < 1 yr awaiting documents to resolve identified deficiencies* – These applications are appropriate for Applications Reviewed Awaiting Documents Inventory.

GROUP 2: *PTAL and license applications with receipt date ≥ 1 yr awaiting documents to resolve identified deficiencies* – Based on current regulations³⁸, MBC has the authority to close an application when an applicant does not exercise due diligence in the completion of the application. Failure to complete the application within one year constitutes failure to exercise due diligence. MBC may provide the applicant the option to update the application within 30 days or the application will be closed.

To identify application files in this group, extract all ATS records over one year old based on application receipt date that do not have a licensure decision (no license or no PTAL, would be those waiting on documentation). Split by US/CAN, IMG (and PTAL if needed) – sorted by first char of last name (or reviewer group)/ascending, oldest app received date/descending (oldest first). Verify accuracy of the data.

³⁸ CCR, Title 16 §1306



MBC should work with ISB to determine if letters (or emails) can be automatically generated (through ATS or another automated process) and if ATS can be automatically updated.

This work effort should be conducted semi-annually or quarterly and could be considered a "special project" for an identified resource. If possible, timing of this effort should be considered in the planning to avoid the "peak" period for application processing (January – June).

An additional option for this group is to extract all applications over six months old and send a "reminder" letter or email.

GROUP 3: *Approved PTAL applications with receipt date < 1 yr* – As discussed in the additional observations in the Application Review process, these applications will wait in inventory for at least one year and most likely longer. MBC should consider once PTAL applications have been approved, creating a new inventory category called "Approved PTAL Waiting for action" so these are not counted in the Applications Reviewed Awaiting Documents Inventory.

It may be helpful to the Review Staff if these files are removed from their areas and a process created to retrieve the file if/when a license application is received for an applicant that was issued a PTAL or some other action occurs on the file.

To identify application files in this group, extract only IMG and PTAL – sorted by first char of last name (or reviewer group)/ascending, oldest app received date/descending (oldest first). Verify data is accurate before further action.

GROUP 4: *Approved PTAL applications with receipt date >= 1 yr and no update* – The current PTAL is expired. Based on current regulations³⁹, MBC has the authority to close an application when an applicant does not exercise due diligence in the completion of the application. Failure to complete the application

³⁹ CCR, Title 16 §1306



within one year constitutes failure to exercise due diligence. MBC may provide the applicant the option to update the application (requesting a renewal or providing a PGT Registration Form (Form 07M-157A)) within 30 days or the file will be closed.

This work effort should be conducted semi-annually or quarterly and could be considered a “special project” for an identified resource. If possible, timing of this effort should be considered in the planning to avoid the “peak” period for application processing (January – June).

Due to the current focus on initial review of applications, MBC has not processed PGT Registration Forms. Processing those forms is a prerequisite to further MBC action.

To identify application files in this group, extract all ATS records that are considered active, IMG or PTAL, that received a PTAL at least one year ago and have not had a license issued. Sort data by first char of last name (or reviewer group)/ascending, oldest app received date/descending (oldest first). Verify accuracy of the data before further action.

MBC should work with ISB to determine if letters (or emails) can be automatically generated (through ATS or another automated process) and if ATS can be automatically updated.

Application Review Process – PTAL and License decision rendered

1. Regulatory compliance with the 60-working day initial review timeframe – This information is available in ATS and has been provided in adhoc ATS reporting. Metrics are currently available on a summary level and by application type (US/CAN, IMG (and PTAL) applications). Average, minimum and maximum timeframes should also be calculated.



This reporting should be done monthly and included in quarterly and annual reporting to the Board.

2. Regulatory compliance with the 100-calendar day licensure decision timeframe -

Current metrics capture total licenses issued and PTALs issued. There are metrics to identify the timeframe from application receipt to licensure, but that timeframe includes the time waiting for deficiencies to be resolved. The time period between the completion of the initial review and the MBC assessment that the application is complete is dependent on the responsiveness applicant and the external entities and is outside of MBC's control. For the purposes of regulatory compliance, this "wait time" occurs prior to the 100-day timeframe. Currently there are no metrics to identify the timeframe between the MBC assessment that the application is complete and the licensure decision.

Preliminary discussions have occurred between the Licensing Program Management, ISB and the BPR Study Team discussing possible options with current ATS data to capture metrics related to the timeframe between the MBC assessment that the application is complete and the licensure decision. In the current data structure, the date associated with the last document processed may be used to indicate the date the application was assessed as complete. A separate recommendation (See Section 9.3.2) identifies a change in ATS data may be required to easily extract this information. Review Staff will be required to update this field identifying the application has been assessed as complete.

If data in ATS could identify the "wait time", metrics could be created to determine the length of time it takes for applicant to resolve deficiencies.

Once these metrics are established, metrics should be reported on a summary level and by application type (US/CAN, IMG (and PTAL) applications) and by review type (standard, Senior Review). Average, minimum and maximum



timeframes should also be calculated. At a minimum, this reporting should be done quarterly and annually.

Additional Reporting Recommendations

1. Pended Mail Waiting for Review – The Mail Room receives mail separate from the initial application, sent either by the applicant or by an external entity. Pended Mail is defined as received mail, identified as belonging to an existing application, but not yet processed by Review Staff. Pended mail often resolves deficiencies identified during the initial review process and is normally processed in the order it is received. The counterpart to Pended Mail is Miscellaneous mail; Mail received, but there is no existing application file. Pended mail is entered into ATS by the Z-project staff soon after receipt so that an applicant checking application status online would know it has been received, but not yet processed. Pended Mail is a large part of the Review Staff workload and should have similar reporting to applications awaiting initial review to show oldest pended mail.
2. Deficiency Letter generation – Deficiency letters are sent to an applicant when an application is assessed as not complete. The letter identifies the deficiencies within the application. Identifying trends in application deficiency letters could result in updates to the application and instructions, policies and procedures, or the Web site. Discussions between Licensing Program Management and ISB would need to occur to determine if metrics are possible with current ATS data. Possible metrics to capture for analysis:
 - Number of applications that had one deficiency letter generated.
 - The number and type of deficiencies found
 - Number of applications that had multiple deficiency letters generated.
 - Time between deficiency letter generation and applicant response.
2. Straight to licensure – The data and metrics are currently available to identify applications that were considered complete *at time of initial review* and went



straight to licensure. The metrics are grouped by US/CAN and IMG. PTAL applications that go straight to licensure are not currently captured.

3. Expired Test Scores – Applications with expired test scores were identified during BPR Study interviews as a recurring issue and more common on IMG license and IMG PTAL applications. No current metrics are captured on applications with expired test scores, so the magnitude of this issue is not known. In the current data structure, expiration dates for test scores are not captured. A separate recommendation (See Section 9.3.2) identifies a change in ATS data may be required to capture this information.

Once data is available to identify expiration dates for test scores, letters (emails) could be sent to applicants. MBC should work with ISB to determine if letters (or emails) can be automatically generated (through ATS or another automated process) and if ATS can be automatically updated.

This work effort should be conducted semi-annually or quarterly and could be considered a "special project" for an identified resource. If possible, timing of this effort should be considered in the planning to avoid the "peak" period for application processing (January – June).

4. Quality measurements – Quality Assurance (QA) Review metrics are captured outside of ATS for the Z-project and Application Review processes. These metrics are assessed internally by the Licensing Program to identify trends, additional training needs, possible updates to the application and instructions, policies and procedures and Web site. A recommendation to revise the application set-up worksheet (See Section 9.3.2, IF-7) will provide data to create QA metrics for the Administrative Support processes (application set-up and preliminary review). Currently no data and metrics are available; if an error is made in the Administrative Support process, the Review Staff identify and correct the error before the starting the Initial Review process.



5. PTALs – PTAL issuance is currently tracked manually by the Review Staff. In addition, the current process and ATS data structure retains one application file (and one ATS record) for an applicant that receives a PTAL through licensure. This results in a different level of data collection and metrics to track initial application receipt to PTAL issuance, any PTAL renewals, and the application update that is the license application through licensure decision. MBC should work with ISB to determine how PTAL-specific metrics can be derived.
6. Application Outcomes – On an annual basis, reporting on application outcomes may provide value to MBC. This type of reporting would show the outcome of an application – licensed or not licensed by totals and percentages. Information could be provided in summary and by application type (US/CAN, IMG and PTAL). This information is available currently and was provided in ATS adhoc reporting during the BPR Study, but PTAL information included in the Application outcome report was skewed because of the reporting extract criteria. PTALs would require special reporting due to the current process and ATS data structure. This was discussed in the previous reporting recommendation. MBC would need to work with ISB to determine specific reporting requirements, specifically what would be included in the scope of not licensed (denied, withdrawn, closed, waiting for additional documentation).
7. Management Dashboard Reporting – Included in the weekly status to the Board is a “dashboard” view of application processing statistics including current inventory, application review and PTAL and license issuance. This dashboard reporting should continue and be refined as other types of metrics are available.



IT-2 - Track DCA/ISB Requests and Action Items

A DCA/ISB Request and Action Item log would assist in the identification and tracking of Licensing Program requests to both DCA and ISB.

The log should identify any requests or issues from the Licensing Program that require DCA or ISB services. Information in the log should include: Issue/Request description, whether DCA or ISB, date requested, date completed, point of contact (MBC and DCA or OSB), priority, status and comments.

A potential DCA request identified during the BPR study was to determine if it was possible through DCA to obtain phone and email statistics for Review Staff and phone statistics for Executive Office Administrative Staff.

Cost	<ul style="list-style-type: none">• Licensing Staff time to create and maintain action item list• Additional time for DCA/ISB/Licensing Staff to define requirements, test and implement• Licensing Staff time to create process and reporting (if necessary)
Benefit	<ul style="list-style-type: none">• Increased communication• Increased tracking and accountability
Metrics	Not applicable
Additional Information	<ul style="list-style-type: none">• NONE



IT-3 – Evolve ATS to address MBC needs

ATS-related recommendations identified elsewhere in this report and through BPR Study interviews have been compiled in this section.

ATS issues identified during the BPR Study

ISSUE: Currently in ATS, data is erased when pathway is changed.

RECOMMENDATION: Remediation of ATS is needed to retain data when pathway is changed.

ISSUE: Currently, the online payment option does not accommodate separate payments by the applicant.

RECOMMENDATION: Remediation of ATS is needed to allow online initial license fee payment at a different time than application processing fee payment. Allowing initial license fee payment through the Web site if the application fees were paid via the Web site at an earlier time will expedite the receipt of fees and allow applications to go to licensure more rapidly.

Additional ATS-related modifications identified in other recommendations

1. Allow expiration date (or test date) to be entered so that reports (and perhaps letters) can be automatically generated related to expiring exam scores (Refer to Recommendation IT-1 for more information)
2. Allow enhanced PTAL tracking (Refer to Recommendation IF-12 for more information)
3. Define current fields or add fields to allow better tracking from date Review Staff determined the application is complete to date that application is licensed (Refer to Recommendation IT-1 for more information)
4. Define current fields or add fields to allow better deficiency notice reporting (Refer to Recommendation IT-1 for more information)



Cost	<ul style="list-style-type: none">• DCA, ISB and MBC resources to assess, define additional requirements, test and implement
Benefit	<ul style="list-style-type: none">• Varies based on specific ATS recommendation• Increased ability for ATS to meet MBC processing needs
Metrics	<ul style="list-style-type: none">• Quantitative metrics: Varies based on specific ATS recommendation• Qualitative metrics: Varies based on specific ATS recommendation
Additional Information	<ul style="list-style-type: none">• NONE



IT-4 – Explore Ways to Increase Use of E-Communication

There are two areas that use of e-communication should increase: applicant communication and external entity communication.

Based on current processes, there is a heavy dependence on hardcopy correspondence with the applicants. The Licensing and PTAL application provides the applicant an optional field for an email address. Email is sometimes used, but the communication method is primarily based on Review Staff preference. Increasing the use of e-communication with the applicant will streamline correspondence and reduce the time needed to resolve application deficiencies.

The current Licensing process does use email as its primary form of communication to notify applicants that a License application has been approved and to check the website to verify information that will be available to the public.

External entities are responsible for providing supporting documentation in the Licensing and PTAL application process. E-communication with external entities has increased through use of FSMB e-transcript and electronic receipt of fingerprint information. E-communication use with external entities will continue to increase with the implementation of FSMB iPickup for FCVS information and the implementation of a secured portal for Electronic L3A/B (Recommendation IT-5) if deemed feasible.

This recommendation supports further assessment of e-communication uses within the current processes.

Cost	<ul style="list-style-type: none">• Time and resource(s) to assess what types of communication can be shifted to electronic forms• Time and resource(s) to create new processes• Staff training for new processes• Process shift may cause staff resistance
Benefit	<ul style="list-style-type: none">• Streamlined communication• Improved communication with applicants and external



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	<p>entities</p> <ul style="list-style-type: none">• Quicker resolution of application deficiency or issues• Reduced mailing costs
Metrics	<ul style="list-style-type: none">• Quantitative: Reduced mailing, lower costs, increase in e-mail communication, reduction in overall application processing time• Qualitative: Positive feedback from staff, applicants and external entities
Additional Information	<ul style="list-style-type: none">• NONE



IT-5 - Assess Option For DCA/MBC ISB Secured Portal for Electronic L3A/B

Under the current process, the Certificate of Completion of ACGME/RCPSC Postgraduate Training (Form L3A/B) is only accepted in hardcopy with an original signature. ISB had begun research on the feasibility of a secured portal for GME Programs to transmit the L3A/B electronically to MBC. The BPR Study Team does not know the progress or current status of this project, but recommends the research and assessment be completed for further consideration. Electronic transmission of the L3A/B would reduce the current timeframes associated with this form.

Cost	<ul style="list-style-type: none">• Time and resources to assess feasibility• Time and resources to implement the process• Time and resources to maintain the process• Time and resources to do outreach
Benefit	<ul style="list-style-type: none">• Reduction in time associated with obtaining L3A/B from GME programs.
Metrics	<ul style="list-style-type: none">• Quantitative: Reduction in time associated with obtaining L3A/B from GME programs
Additional Information	<ul style="list-style-type: none">• This could be rolled out in stages, starting with select GME programs• Assessment should address need for original signature as electronic transmission will not have original signature



IT-6 – Actively Support DCA’s Development of the BREEZE2 Database System

The California Department of Consumer Affairs (DCA) is in the process of developing an Agency-wide online application system that is expected to meet the application processing needs for MBC. It is anticipated this system will be implemented by December 2012. Additional information was not available during the MBC BPR Study for further assessment.

It is recommended that Licensing Program staff work with MBC Information Systems Branch (ISB) and DCA and actively participate in all phases of this project. Several observations and recommendations within this BPR Study Report identify items that should be considered for a new system; for example, the ability to generate reports (Recommendation IT-1), ATS-related modifications (Recommendation IT-3) and increase use of E-communication (Recommendation IT-4). It is critical that MBC-specific requirements are identified and included in the early phases of the BREEZE2 Database System development. Equally important is the participation of MBC staff in any testing and verification that those requirements have been appropriately addressed.

Cost	<ul style="list-style-type: none">• Time and resource(s) dedicated to the project from requirements through post-implementation• Significant staff training as well as possible cultural shift during testing and implementation phases
Benefit	<ul style="list-style-type: none">• An application processing system that meets MBC requirements
Metrics	<ul style="list-style-type: none">• Status reports should be provided to track overall project progress and progress of MBC-specific items
Additional Information	<ul style="list-style-type: none">• MBC Staff should track requirements provided to BREEZE2 project team and any other MBC-related activities



IT-7 - Evaluate Use of a Document Management System

A Document Management System (DMS) is a system used to track and store electronic documents and/or images of paper. The terms Content Management Systems (CMS), Electronic Document Management Systems (EDMS) are also used to identify document management systems. DMS is a component of an Enterprise Content Management System (ECMS) that integrates document imaging, workflow system and records management.

MBC may benefit from the implementation of a DMS. The BPR Study did not find any reports or other documentation to indicate a DMS has ever been considered. In the past, these types of systems were exclusively for large paper-intensive environments. MBC is relatively small with an annual estimate of 300,000 paper documents.⁴⁰

Implementing an ECMS requires a significant amount of planning and resources and results in major changes to the current paper-intensive processes and workflow, but there are several long term benefits such as:

- Streamlined processes,
- Facilitates workflow
- Improved Tracking
- Reduced processing times

The California Department of Consumer Affairs Agency (DCA) may have an existing Document Management platform available for shared use or there are several other types. Information on California Records and Information Management (CALRIM) is available at <http://www.osp.dgs.ca.gov/CalRIM/default.htm>. The Web site contains several resources and State guidelines associated with Electronic Document Management

⁴⁰ It is estimated each application has an average of 50 documents. Documents include everything sent and received. PTAL and initial license application volume was estimated at 6,200 per year. Renewals were not included because that process is already automated.



Systems. The Request for Information (RFI) process could be leveraged to obtain information from vendors.

A special study to assess the potential use, available options, and impacts of a document management system at MBC should be integrated into a high-level planning efforts. DCA may have an existing Document Management platform available for shared use. Information on California Records and Information Management (CALRIM) is available at <http://www.osp.dgs.ca.gov/CalRIM/default.htm>. The Web site contains several resources and State guidelines associated with Electronic Document Management Systems. The Request for Information (RFI) process could be leveraged to obtain information from vendors.

This effort should be coordinated with the implementation of DCA's BREEZE2 Database discussed in the previous recommendation, IT-6.

Cost	<ul style="list-style-type: none">• Time and resources to create assessment• If DMS is implemented, there will be significant changes to all areas of the Licensing Program
Benefit	<ul style="list-style-type: none">• Improved tracking• Streamlined processes• Facilitated workflow
Metrics	<ul style="list-style-type: none">• Defined within Document Management System
Additional Information	<ul style="list-style-type: none">• NONE



9.3.3 Resources

The section includes recommendations related to:

- Licensing Staff (Administrative Support Staff, Review Staff, CIU Staff, Cashiering Staff, and Renewal Staff)
- Executive Staff (GME Coordinator and Web Master)
- Organizational structure, staff-related reporting and metrics

and includes the following recommendations:

Component	Id	Recommendation	Previously Identified by MBC Licensing Program
Resource	R-1	Advance Staffing Recommendations	✓
	R-2	Reorganize Licensing Program and Reinforce Roles and Responsibilities	
	R-3	Restructure Administrative Support Workflow	
	R-4	Change Name of Consumer Information Unit (CIU)	
	R-5	Shift Clerical Tasks done by Review Staff To Support Staff	✓
	R-6	Continue to Create and Deploy Effective Training Programs	✓
	R-7	Continue to Work Inventory to Achieve Initial Review within 60 Calendar Days	
	R-8	Establish Program-wide Performance Objectives, Staffing Plans, and Metrics	



R-1 – Advance Staffing Recommendations

Several staffing-related challenges have been identified across different areas in the BPR Study:

1. California state government is experiencing its largest wave of retiring state employees in history. The CPR report, published in 2004, estimated between 34 and 49% of the States workforce (70,000 and 100,000) would be eligible for retirement between 2004 and 2009.⁴¹ These retirements also result in a “brain drain” of the most experienced and knowledgeable staff and magnify the impact of the loss of resources. IMG Review staff had 50% attrition due to retirements.
2. Mandated furloughs have reduced the available staff hours.
3. Unreasonable staff to management ratios (20:1) for the Licensing Program Staff responsible for application processing.
4. The need for staffing flexibility to address workload fluctuations, particularly during the January – June timeframe.
5. The high concentration of temporary staff (Student Assistants and Retired Annuitants) on the Z-project.
6. The delay of several non-urgent but important projects (completion of policies and procedures manual, due diligence) due to competing priorities such as application processing and training new staff.
7. Increases in application volume and complexity over the past several years.
8. Annual increase in application volume requiring Senior Reviews.
9. Lack of centralized management for Administrative Support Staff.
10. High turnover rates in the CIU staff.

⁴¹ CPR Study (2004) - Creating a Workforce Plan for California State Employees
http://cpr.ca.gov/CPR_Report/Issues_and_Recommendations/Chapter_7_Statewide_Operations/Personnel_Management/SO43.html



11. "Floaters" are temporary staff. Currently, Student Assistants are used as floaters to conduct initial reviews for US/CAN applications. Two (2) Retired Annuitants are used as floaters for IMG applications most recently when staff retired as new employees were in their training period.

The following recommendations have been developed to address the staffing-related challenges identified above:

1. *Acquire two (2) additional managers under Licensing to reduce current manager to staff ratio (one from BCP) to reduce staff to manager ratio to a more reasonable level for the application processing functions.*
2. *Acquire one (1) additional manager under Licensing for Front-end processing functions to replace temporary manager leaving January 2010.*
3. *Acquire one (1) SSM II manager to oversee the 5 SSML licensing managers.*
4. *Acquire three (3) new AGPA level new staff (2 from BCP) for senior review, quality review and training coordinator to address increase and complexity of Senior Review and to ensure training programs are continually improved to meet current Licensing Program needs.*
5. *Acquire two (2) new SSA positions (in addition to two hired 11/1/09 for IMG reviews) to act as staff "floaters" to address workload fluctuations in US/CAN and IMG applications due to inventory fluctuations through the year, core staff absences and other short-term needs. "Floaters" should be permanent staff, not temporary staff, trained in one or more specific areas with no regular assigned workload. Current "floaters" are temporary staff; use of temporary staff presents a business risk.*
6. *Acquire two (2) additional MST for US review (from BCP) to address identified resource shortage.*



7. *Acquire 2 permanent staff for Z-project (1 from BCP) to reduce the current project risk associated with the staffing this project with non-permanent staff.*
8. *Reclassify 2 front-end staff to MST level due to address changes in duties. This is due to the varied skill sets required in the Administrative Support Staff application processing tasks.*
9. *Continue use of Retired Annuitants, Student Assistants and overtime when workload is heavy to address annual workload fluctuations.*
10. *Reclassify CIU staff to higher level to recruit higher qualified staff to handle more complex licensing calls normally referred to Review Staff and to lower high rate of turnover.*
11. *Acquire one (1) dedicated resource responsible for the alignment of all communication-related components (Such as Web site content, Policies & Procedures, Decision Log, and internal and external application-related communication).*
12. *Acquire one (1) dedicated resource for performance reporting and ISB liaison.*
There are a sufficient number of recommendations in these areas that once implemented, will require a dedicated resource to manage ongoing activities.

It is possible that additional CIU staff will be required, although it could not be determined how many additional CIU staff may be needed at this time. Call statistics for Review Staff and Executive Administrative Staff are not available to estimate the number of calls that could be rerouted to the CIU. Recommendations specific to routing calls to the CIU may be offset by the anticipated decrease in the calls due to the implementation of the WAAS project and upgrading job classification for CIU staff.



The table below provides a summary of the recommended staffing changes. Included in the table is the current staffing and staff added in FY10/11 as a result of the approved BCP.

Table 9 – Licensing Section - Current and Recommended Staffing⁴²

Classification	Current Staff	Staff BCP will add in FY 10/11	Add'l Staff BPR Study Recommends	Notes
Staff Services Manager II (SSM II)	0	+0	+1	BPR Study: For managing 5 SSM I
Staff Services Manager I (SSM I)	2	+1	+2	BPR Study: Additional SSM I (2) to reduce staff to manager ratio and reorganize units to have similar functions.
Associate Government Program Analyst (AGPA)	3	+2	+2	Current: Special Pgms + Senior Review (1), IMG School approval + Senior Review (1), Training + Policies & Procedures + ATS (1) BCP: Senior Review (1), QA (1) BPR Study: Separate Training from Policies + Procedures (1), Reports + ATS and other infrastructure items (1)
Staff Services Analyst (SSA)	11 ⁴³	+2	+2	Current: IMG Application + Caseload BCP: IMG Application + Caseload (2). BPR Study: "floaters" + assigned infrastructure (2)
Management Service Technician (MST)	7	+2	+2	Current: Licensing (1), US Applications + Caseload (6) BCP: US Applications + Caseload (2) BPR Study: Upgrade 2 OT to MST: Z-project (1) and restructure duties for front end staff (1)
Office Technician (OT)	3	+1 ⁴⁴	-2	Current: Licensing and Application Support (3) BCP: Licensing and Application Support (1). BPR Study: Upgrade 2 OT to MST
** Total Permanent Staff **	26	+8	+7	
Retired Annuitant (RA) ⁴⁵	6	+0	+0	Current: IMG Application + Caseload RA-SSA (5).

⁴² No staffing additions or reductions were identified for the Licensing Operations Section.

⁴³ One (1) of the 11 SSA staff is equivalent to 0.6 FTE.

⁴⁴ One (1) OT identified is equivalent to 0.8 FTE.

⁴⁵ One (1) Retired Annuitant (RA) is equivalent to 0.5 FTE. Six (6) RA staff equal 3.0 FTE.



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Classification	Current Staff	Staff BCP will add in FY 10/11	Add'l Staff BPR Study Recommends	Notes
				Z-Project RA-MST (1)
Student Assistant (SA) ⁴⁶	8	+0	-8 ⁴⁷	Current: US Application (5), Z-Project (2), Licensing Imaging (1) BPR Study: Reduction can occur once seven (7) permanent staff has been allocated.
** Total Temporary Staff **	14	+0	-8	
** Total Staff **	40	+8	+7	BPR Study: 3 managers, 4 professional staff (training, reports + infrastructure projects, floaters, Z project, restructured front-end staff)

⁴⁶ One (1) Student Assistant (SA) is equivalent to up to 0.75 FTE. Eight (8) SA staff equal up to 6.0 FTE.

⁴⁷ Reduction can occur once seven (7) permanent staff has been allocated.



The following table describes California civil service classifications and associated typical duties within the Licensing Program.

Table 10- Job Classification and Typical Duties

Classification	Typical Duties
Staff Services Manager I (SSM I)	Supervises and direct the daily activities of professional and technical staff responsible for review of applications; Conducts and directs workload and staffing standards issues; provides program expertise; acts as licensing technical expert
Associate Governmental Program Analyst (AGPA)	Performs the most difficult and complex research and analysis license application files such as Senior Review level 2, assessment of special training programs for physicians; develop and conduct staff training. Act as subject matter expert on Special Training Programs; Conduct analysis on statutes and regulations; Act as Lead analyst and consultant to management and/or appointed Board members; responsible for understanding and creating comprehensive management tools and data reports; Serves as liaison between MBC and ISB and DCA for technical systems; prepares licensing business process documentation; maintains Policy & Procedures manual; functions as lead analyst and performs quality control.
Staff Services Analyst (SSA)	Performs more complex analytical work associated with license application files such as review of International Medical School Graduate (IMG) applications. Receives, evaluates and recommends action on IMG license applications using evaluative, interpretive and constructive analysis; verifies completeness of application and supporting documentation, authenticates documents, examines for possible fraud. Consults with program manager for technical expertise on atypical applications.
Management Services Technician (MST)	Performs technical and analytical work associated with license application files such as review of U.S./CAN applications. Evaluates and recommends action on U.S./CAN license applications using evaluative, interpretive and constructive analysis; verifies completeness of application and supporting documentation, authenticates documents, examines for possible fraud. Consults with SSA and AGPA for technical expertise on atypical applications.
Office Technician (OT)	Provides clerical and administrative support to professional staff. Sorts mail, compiles new application file for subsequent processing, performs cursory review of documents, performs preliminary update of ATS data, and compiles fingerprint information.



Cost	<ul style="list-style-type: none">• Time and resources to create BCP• Acquisition of additional resources• Reclassification of existing staff
Benefit	<ul style="list-style-type: none">• Increased effectiveness of Licensing Program• Stronger infrastructure increases the likelihood of long-term sustainability• Increased capability to plan for and address annual workload fluctuations
Metrics	<ul style="list-style-type: none">• Quantitative metrics: N/A• Qualitative metrics: N/A
Additional Information	<ul style="list-style-type: none">• For additional information, refer to Recommendation R-2, Reorganize Licensing program and reinforce roles and responsibilities



R-2 – Reorganize Licensing Program and Reinforce Roles and Responsibilities

Several observations point to the need for reorganization of the Licensing Program into logical functional groups to better address the needs of the Licensing Program. This recommendation assumes all staffing recommendations identified in the previous recommendation, R-1, are implemented. Organizational changes could be modified if implemented before all staffing recommendations. Proposed organizational changes for the Licensing Program include:

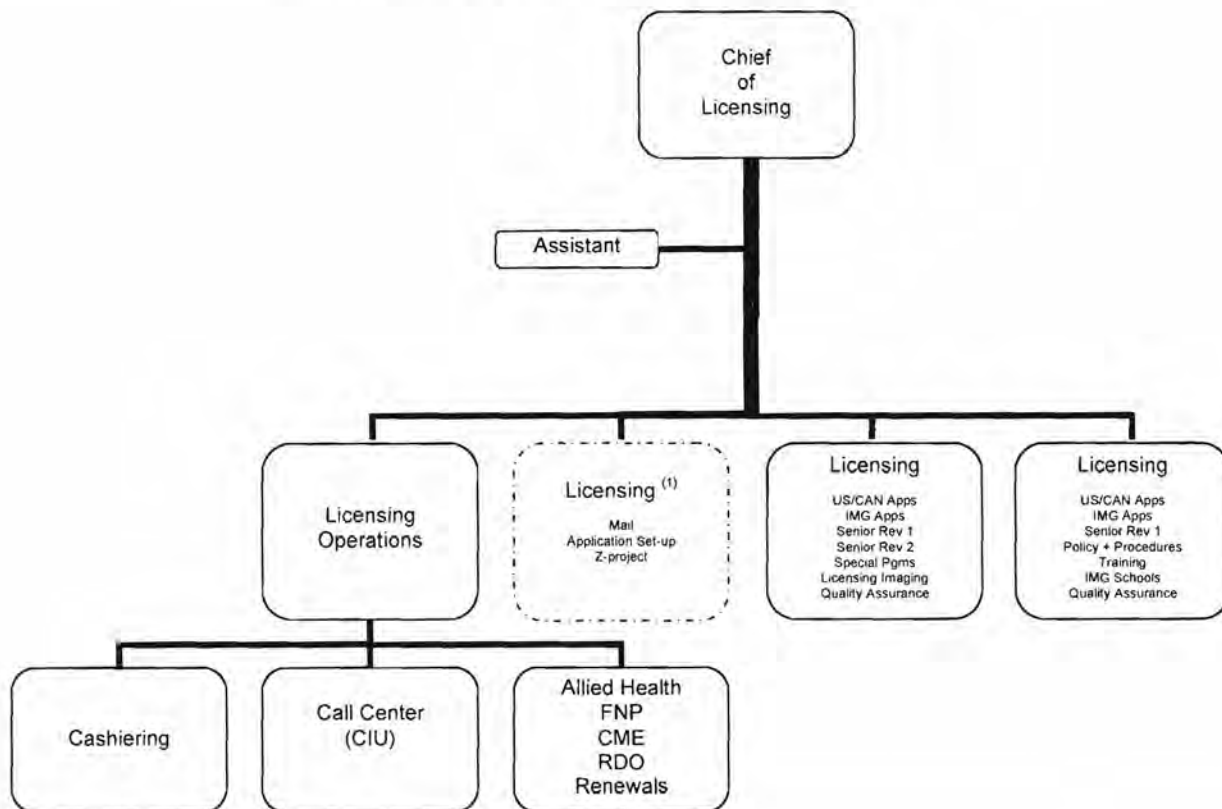
- Creation of a new Front-end/Back-end unit under the Licensing Section with a permanent dedicated manager. This will include the front end-functions: Mail, Application set-up and the Z-project and the back-end functions: Licensing, Imaging and Renewals. Currently:
 - There is no permanent and centralized front-end unit. Under the Licensing Program structure, staff performing front-end tasks are organizationally supervised by multiple managers. A Manager has been temporarily assigned from the Enforcement Program to Front-end Staff, but is scheduled to leave January 2010.
 - The back-end functions are organizationally with Allied Health and Fictitious Name Permits (FNP) under the Licensing Operations.
- Restructure existing Application Processing Units to focus on only US/CAN or IMG. Currently the two units both do US/CAN and IMG application processing.
- Consolidation and realignment of infrastructure-related functions into one unit. Currently, infrastructure-related activities are spread across the Licensing Section. Infrastructure activities will increase with implementation of recommendations identified in this report. This unit will also be responsible for Senior Review 2 and Special Programs.



- Additional level of management to support the increase from two (2) to five (5) units in the Licensing Section. This level of management will report directly to the Licensing Program Chief.

The following figure shows the current Licensing Program Organization:

Figure 27 - Licensing Program – CURRENT



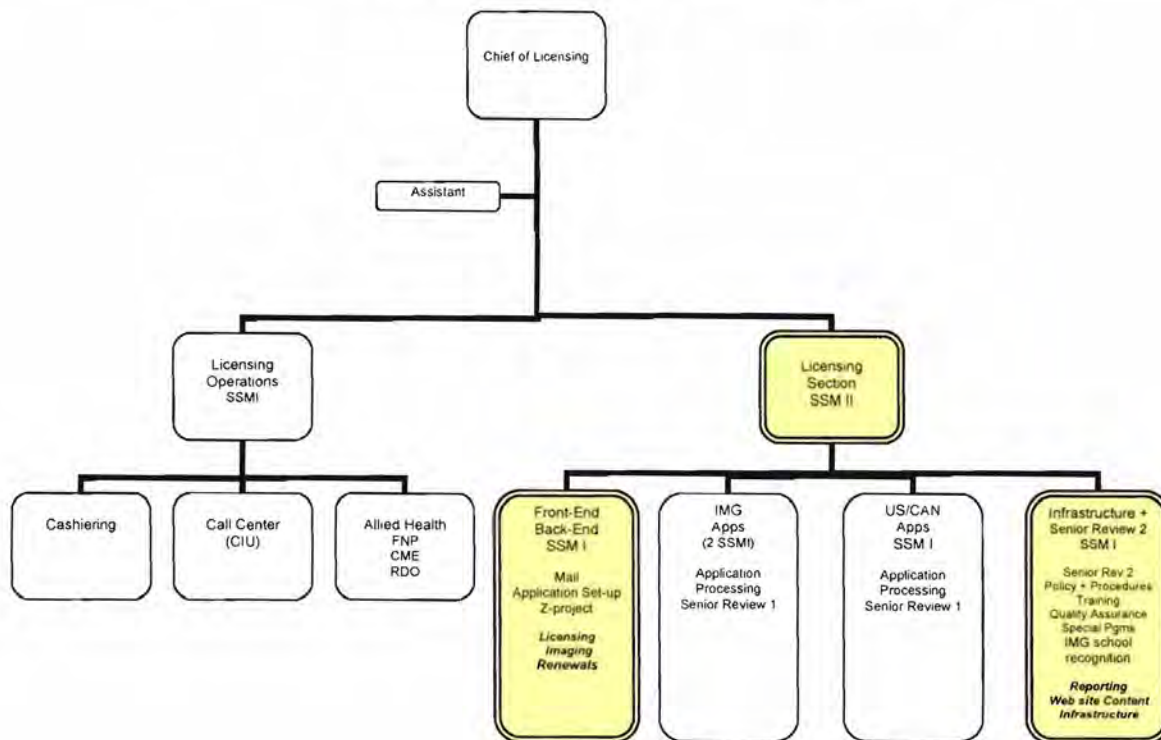
NOTES:

- (1) Temporary reassignment from Enforcement – primary purpose was to establish WAAS program and organize new application file set-up duties for front-end staff.



The following figure shows the proposed Licensing Program Organization and assumes that all staffing recommendations identified in the previous recommendation, R-1, are implemented:

Figure 28 - Licensing Program – PROPOSED





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Cost	<ul style="list-style-type: none">• Change in current staff reporting – this may result in some staff pushback• Possible updates to internal policies and procedures
Benefit	<ul style="list-style-type: none">• More consistent management• Better accountability and reporting• Better organizational alignment into functional groups• More appropriate staff to manager ratios
Metrics	<ul style="list-style-type: none">• Quantitative: Increased reporting• Qualitative: Increased teamwork and staff satisfaction, increased ability to manage staff and workload
Additional Information	<ul style="list-style-type: none">• A Manager has been temporarily assigned from the Enforcement Program to Front-end Staff starting October 1, 2009, but is scheduled to leave January 2010.



R-3 – Restructure Administrative Support Workflow

Restructuring the application set-up and preliminary review workflow in the Administrative Support process will address the varied skills required to complete the tasks. By compartmentalizing tasks, applications will have one entry and one exit point in the Administrative Support process. This will allow application files to get to Review Staff in receipt date order.

It has been determined that select Administrative Support positions will need to be reclassified due to the varied skillset required in front-end processing; this is discussed in Recommendation R-1, Advance Staffing Recommendations. Once the restructuring is implemented, regular and continued evaluation will ensure staff and workload balance are maintained with required tasks.

Cost	<ul style="list-style-type: none">• Initial assessment of skillsets and required tasks• Continued assessment of staff assigned• Potential staff resistance as shift from completing tasks individually to team
Benefit	<ul style="list-style-type: none">• Ability to address varied skillsets needed in front-end tasks• Promote "team" concept across Administrative Support Staff• Staff will develop expertise quickly in a few areas rather than mastering all Administrative Support Staff tasks, which takes more time• Faster recognition of workload issues and bottlenecks
Metric	<ul style="list-style-type: none">• Currently, no performance metrics are collected for Administrative Support Staff functions. A separate recommendation is included in this document to collect metrics surrounding Administrative Support Staff tasks.• Based on current volume of applications received, three Administrative Support Staff needs to process approximately 130 new applications a week.
Additional Information	<ul style="list-style-type: none">• Recommendation does require significant assessment and planning prior to implementation.



R-4 - Change Name of Consumer Information Unit (CIU)

This recommendation is to update the name of the CIU to more accurately reflect who it serves. Options include "Physicians and Consumers Information Unit" or "MBC Information Unit".

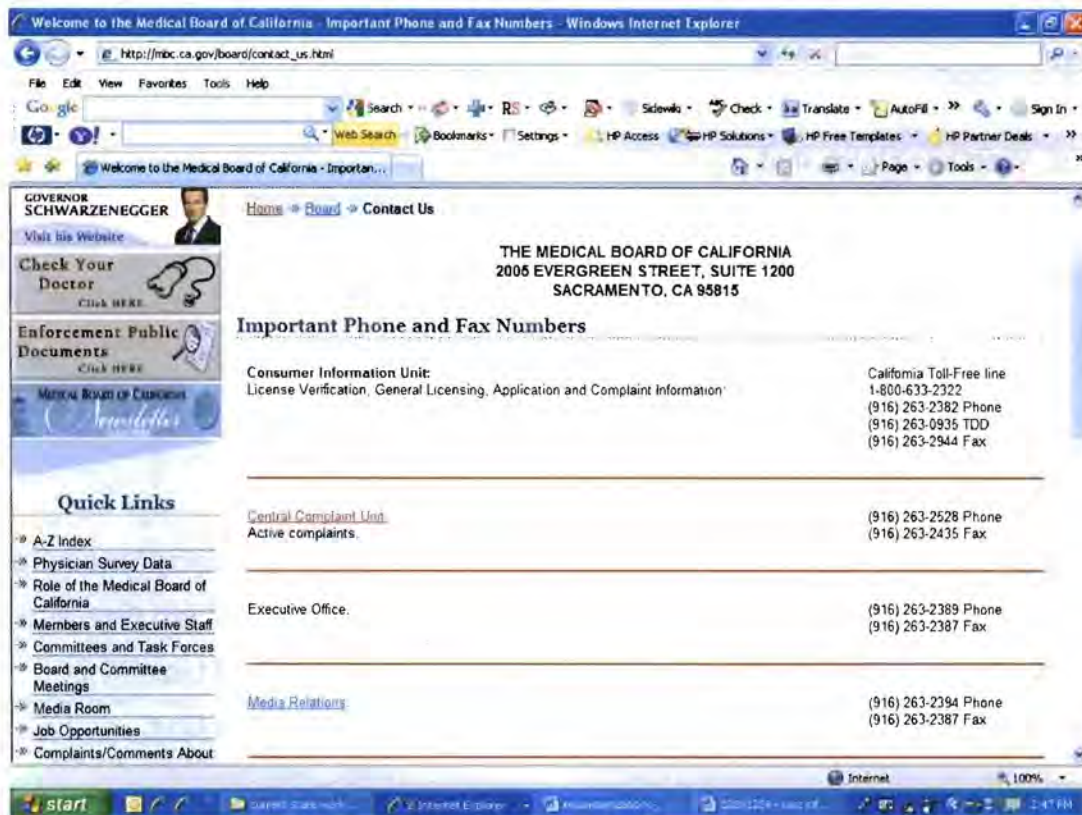
The MBC Web site states that:

"The mission of the Medical Board 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"

The mission statement identifies health care consumers and physicians (and surgeons) as separate entities. On the MBC Web site, Under the "Contact Us" tab (see figure below), the name of the unit to call for License Verification, General Licensing, Application and Complaint Information is the Consumer Information Unit.



Figure 29 - MBC Web Site "Contact Us" Tab



The name "Consumer Information Unit" may unintentionally result in physicians looking for another unit to contact for licensing and renewal questions, since physicians and surgeons may not consider themselves consumers. Following the information on the web page, the next reasonable choice would be the Executive Office. The BPR Study Team was located close to the Executive Office Administrative staff and did notice a significant number of calls to the Executive Office result in a transfer to the CIU. Metrics are not available to assess the number of incoming calls to the Executive Office that result in a transfer to the CIU.

The CIU phone greeting has recently been changed to identify itself to callers as the "Physician and Consumer Information Unit", but the Web site and other correspondence has not been updated to reflect the change.



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Cost	<ul style="list-style-type: none">• Time and resources to update the Web site (incl. appropriate review process)• Time and resources to update the Web Center call tree• Time and resources to update forms (incl. appropriate review process)• Time and resources to update correspondence (incl. appropriate review process)• Staff training
Benefit	<ul style="list-style-type: none">• Probable reduction in calls to Executive Office Administrative Staff• Better call metrics
Metrics	<ul style="list-style-type: none">• Quantitative metrics: NONE• Qualitative metrics: Executive Office Administrative Staff will experience less phone call disruptions
Additional Information	<ul style="list-style-type: none">• NONE



R-5 - Shift Clerical Tasks Done by Review Staff to Support Staff

Interviews with MBC Licensing Program Staff identified that under the current process, there are clerical tasks performed by the Review Staff that may be more appropriate under the Administrative Support Staff functions.

Administrative Support processes should be expanded to include processing "Miscellaneous Mail" described on page 57 and other clerical tasks, such as putting the documents in the mandatory order prescribed in the Policies & Procedures Manual that are currently being done by Review Staff. This change will allow:

- The Administrative Support Staff to provide a more complete application file to the Review Staff
- The Review Staff to have less clerical tasks and focus on analytical tasks related to the Initial Review
- Overall, identification and assessment of clerical tasks performed by Review Staff should continue to determine if it is feasible to shift tasks to Administrative Support Staff.

Cost	<ul style="list-style-type: none">• Realignment of current assigned responsibilities for both Review Staff and Administrative Support Staff• Possible need for additional Administrative Support Staff• Increased workload for Administrative Support Staff• Possible resistance from Staff• Additional Training and Quality Review
Benefit	<ul style="list-style-type: none">• Increased time for Review Staff to perform initial reviews and other analytical tasks. Review Staff will no longer be sorting through Miscellaneous Mail.• Applications will be more complete when Review Staff starts initial review• Clerical tasks are aligned with clerical staff
Metrics	<ul style="list-style-type: none">• Quality Assurance (QA) metrics are recommended to ensure mail is processed correctly. Risk is that "Miscellaneous Mail" is



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	not handled correctly and an inaccurate deficiency notice is sent to an applicant. This risk exists in the current process.
Additional Information	<ul style="list-style-type: none">• Compared with the other recommendations identified in this document, this recommendation is a significant change for Licensing Program Staff. Additional assessment and planning is required if this recommendation is selected for implementation. Special attention is needed to assess available Administrative Support Staff and skillset. Implementation must be carefully planned so that dramatic changes are not being implemented during "peak" periods or while there is a backlog, as often changes show a temporary decline in productivity until Staff is comfortable with the changes.• The BPR Study Team is aware that in the past, processing Miscellaneous Mail was a Administrative Support Staff function. Further planning and remediation will be necessary to ensure the issues that caused Review Staff to take over the Miscellaneous Mail function are addressed appropriately.



R-6 – Continue to Create and Deploy Effective Training Programs

Multi-day training programs were developed and deployed during September and October 2009 to train newly hired Administrative Support, Review Staff and CIU staff. The training included an overview of MBC and topics specific to an individual's role and responsibilities. Efforts must continue with a dedicated resource to maintain and refine existing training programs and develop new training programs based on identified needs; this will create a professionally satisfying work environment for MBC staff.

Cost	<ul style="list-style-type: none">• Dedicated resource allocated to create, refine, maintain and deploy training programs• Staff time for training
Benefit	<ul style="list-style-type: none">• Professionally satisfying work environment for MBC staff
Metrics	<ul style="list-style-type: none">• Quantitative: Staff feedback in the form of surveys can be used to identify quality of training. QA metrics should be used to assess efficacy in training programs.• Qualitative: Staff surveys, increase in Quality measurements
Additional Information	<ul style="list-style-type: none">• NONE



R-7 – Continue to Work Inventory to Achieve Initial Review Within 60 Calendar Days

As described in Section 3 - Licensing and Postgraduate Training Authorization Letter (PTAL) Processes, current regulations require the initial review of an application completed and the applicant informed of any deficiencies within 60 working days (approximately 90 calendar days) from the application receipt date.⁴⁸ At the start of the BPR Study, application inventory was in a backlog status; initial reviews were not being completed within the regulatory timeframe of 90 calendar days. Significant effort and focus was placed on the elimination of the backlog and the backlog was eliminated by December 23, 2009. The reports and work products developed during the BPR Study provide better tools for management to identify aging inventory, staffing needs, and workload fluctuations. Use of these tools will prevent the recurrence of a backlog.

The BPR Study Team recommends that Licensing Program staff continue to work at its current pace until initial review is completed within 60 calendar days. Creating a 30-day “buffer” of time will allow the Licensing Program Management staff sufficient time to identify and address issues, such as multiple staff absences or extended absences, that may cause a recurrence of a backlog situation.

The initial review time should not drop below 60 calendar days. As discussed in Section 3.8.4 - Observations – Application Review page 52, the period of time between application receipt and the start of initial review allows the required supporting documentation to be received and processed. Based on discussion with MBC Licensing Program Staff, it is assumed if initial reviews were completed any sooner than 60 days, there would be an increase in deficiency notices generated due to supporting documentation not yet received.

⁴⁸ CCR, Title 16 §1319.4



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Cost	<ul style="list-style-type: none">• Continue working at the current pace – additional analysis needed to determine estimated duration• Probable continuation of overtime – additional analysis is needed to determine overtime needs
Benefit	<ul style="list-style-type: none">• Creation of appropriate “buffer” of time to identify and address issues that may cause recurrence of backlog
Metrics	<ul style="list-style-type: none">• Quantitative: Downward trend for application age, distribution of older applications• Qualitative: Improved staff morale
Additional Information	<ul style="list-style-type: none">• NONE



R-8 – Establish Program-wide Performance Objectives, Staffing Plans, and Metrics

Performance Objectives

Performance objectives provide goals and are used to develop staffing plans, identify resource issues (shortages and overages) and assess actual performance.

Performance objectives should be established for all areas within the Licensing Program. Performance objectives should also be refined to contain a quality component; when the objectives are tied to only a measurement of output (such as increasing the number of initial reviews completed), often quality can be comprised.

Based on historical data, high-level application processing performance objectives should be based on receiving approximately 130 new applications a week. During “peak times” (January – March), goals should be based on receiving 150 new applications a week. Lower level application processing performance objectives should be based on:

- Staff experience level
- Application type - there is an observed difference in the complexity and volume of supporting documentation between IMG and US/CAN applications
- Case load
- Other staff responsibilities – including reviewing pended mail, responding to phone and email inquiries and meetings

The BPR Study Team worked with MBC Licensing Program staff to create preliminary performance objectives for the Application Review staff. Quality measurements were not integrated into these preliminary performance objectives, but should be in the near future. The BPR Study Team discussed with MBC Staff the feasibility of performance objectives for Administrative Support Staff, but objectives have not yet been developed. The CIU has not established Performance objectives.



Staffing Plans

Staffing plans use performance objectives and available staff to identify how current workload will be completed. A staffing plan includes:

- Existing staff and planned new hires
- Furlough days, holidays, vacation, and personal time off
- Reasonable and estimated unanticipated time off for illness and other emergencies
- Performance objectives for each individual staff based on assignment and experience

Staffing Plans should be reviewed and assessed weekly with adjustments made to address current workload. This review and assessment is also used to identify staffing shortages or overages and help determine if it is a short-term or long-term issue; this information is necessary to identify the appropriate corrective action. Information from the plans and performance tracking should be made available to staff to show plan and progress; it is important everyone is made aware of the work to be done and energized toward the same goal.

The BPR Study Team worked with MBC Licensing Program staff to create preliminary staffing plans for the Application Review staff. The Staffing Plan template developed for the Application Review staff can be leveraged for other areas in the Licensing Program. For Application Processing, staffing plans can be created up to three months in advance now that the Licensing Program has better workload (inventory) reporting and historical data on application receipts.

Performance Metrics

Metrics provide information on the actual work completed. Performance metrics should be compared with the performance objectives. The comparison may result in or



Adjustments to the performance objectives or in some cases, individual staff performance metrics that consistently fall below performance objectives can indicate additional training or other remediation is needed. Performance objectives and metrics should be continually monitored and refined.

The Licensing Program established Review Staff performance metrics prior to the start of the BPR Study. These metrics required Review Staff to perform manual counts because automated reporting of ATS data was not yet available. An adhoc reporting tool was procured in August 2009, shortly before the start of the BPR Study. The BPR Study Team worked with MBC Licensing staff and ISB to identify the metrics that could be derived from the available data. ISB and the MBC Licensing staff are working towards automation of these reports in addition to other metric-related reports. The process to develop performance metrics for application review can be leveraged in other areas of application processing. Other types of performance metric reporting is discussed in Recommendation IT-1.

The Consumer Information Unit (CIU) currently has performance metrics produced automatically through Web Center. .

It is also recommended to assign dedicated staff to update and maintain performance objectives, staffing plans and performance metrics. Currently, some of the work is done by individuals assigned other duties including application review. Often when resources are not dedicated to this effort, competing and higher priorities can prevent ongoing use of these management tools.

Cost	<ul style="list-style-type: none">• Staff time to create and maintain performance objectives, staffing plan and metrics• Staff time to review and analyze performance metrics and then recommend and implement corrective action• New concept may cause initial staff resistance
Benefit	<ul style="list-style-type: none">• Better management tools• Increased ability to plan for workload fluctuations, identify issues in advance, prevent recurrence of backlog



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	<ul style="list-style-type: none">Increased communication between management and staff related to objectives and workload
Metrics	<ul style="list-style-type: none">Quantitative metrics will be created as part of this recommendation
Additional Information	<ul style="list-style-type: none">All objectives should be consistent with timeframes communicated in external communication (Web site content, correspondence, reporting)Initial goal for Administrative Support Staff is to complete application set-up and preliminary review within 5 workdays, with a long-term goal of 2-3 workdays. Z-project goals should be consistent with processing timeframes communicated outward related to the Web Applicant Access System (WAAS) project. Currently the processing timeframe identified on the Web site is ten days.



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9.4 Sample Forms and Web Pages



9.4.1 Postgraduate Training Registration Form (Form 07M-175a)

NOTE: This form required no updates and is included as reference

STATE OF CALIFORNIA – STATE AND CONSUMER SERVICES AGENCY

ARNOLD SCHWARZENEGGER, Governor



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www.mbc.ca.gov



POSTGRADUATE TRAINING REGISTRATION FORM

To be completed by every medical graduate who is not licensed in California and who will commence an ACGME/RCPSC accredited postgraduate training program in California. Please complete the information below and return this form to the Licensing Program of the Medical Board of California at the above address. The filing of this form with the Board will fulfill the registration requirements specified by law.

1. NAME: Last		First	Middle
2. Date of Birth: ____/____/____		3. U.S. Social Security Number: ____/____/____	
4. Home/Mailing Address:			
5. Telephone Numbers: (include area code)	Home	Work	Cell
6. Name and Address of Medical School of Graduation:			7. Date Medical Degree Issued ____/____/____
8. Is this your first postgraduate training year in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		9. If no, list all other ACGME/RCPSC accredited postgraduate training programs in which you participated, whether or not the program was completed or credit was granted.	
10. Name and address of facility where training is to be completed:			ACGME 10 digit program number _____
11. Name of the program director:		12. Program director's telephone number: ()	
13. List categorical specialty area of training to be completed:			
14. Beginning & Ending Dates of this program: From ____/____/____ To ____/____/____			
15. I HEREBY DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT I HAVE READ THE LAWS, AND THAT THE FOREGOING INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND CORRECT. Signature _____ Date _____			
COMPLETION OF THIS FORM IS REQUIRED BY SECTIONS 2065 AND 2066 OF THE CALIFORNIA BUSINESS AND PROFESSIONS CODE.			

07M-175A (Rev. 12/05)



*** DRAFT ***

*Medical Board of California
Business Process Reengineering Study
Creating a Sustainable Licensing Program*



9.4.2 Revised Licensing Fee Schedule

Applicant Last Name *** DRAFT ***	Applicant First Name *** DRAFT ***	Date of Birth MM/DD/YYYY
---	--	-----------------------------

FEE SCHEDULE Application for Physician's and Surgeon's License

- or -
 Post Graduate Training Authorization Letter (PTAL)

Pay online at <http://www.dca.ca.gov/proflic/medicalbd.shtml>

-or-

Make certified check, cashier's check, money order or personal check payable to:
MEDICAL BOARD OF CALIFORNIA

(Fees are subject to change)

**Amt
Enclosed**

Part 1: Application Fee

Total Non-Refundable Application Fee

The application fee includes a Non-Refundable Fingerprint Processing Fee of \$51.00. DOJ Fingerprint processing is required.

Fingerprint fees do "not" include any additional fees that may be incurred through the party that rolls or electronically scans your fingerprints.

Required

\$ 493.00

Part 2: License Fee (only applicable for those applying for a Physician & Surgeon's License)

Initial License Fees are required, but may be deferred until application has been approved.

To reduce delays in issuing a license, remit the initial license fee at the time you submit this license application. If license fees are deferred, you will be invoiced for the initial license fee once the license application has been approved and this may cause a delay in issuing the license.

Initial License Fee (\$808.00) or Reduced Initial License Fee (\$416.50) - If you are actively participating in an ACGME/RCPSC accredited training program at the time of licensure you may be eligible for the reduced initial licensing fee. To verify your current enrollment and participation, you will need to submit Form L4 (Certificate of Current Postgraduate Training Enrollment) along with your payment.

Initial License Fee Refund - If you are not issued a license but have paid the initial license fees, the license fees will be refunded to you.

Initial License Expiration - Upon final approval of your initial license application, your California Physician and Surgeon license will be issued and valid for up to two years. The license expiration date is based on your birth month. If you wait until your birth month for licensure, your license will be valid for the full 24-month period. Should you choose to be licensed as soon as possible, this time will be shortened to as few as 13 months - dependent upon your birth month.

Initial License Fee

Required

\$ 808.00

-or-

Reduced Initial License Fee

\$416.50

Part 3: Voluntary Fee

You may voluntarily contribute \$25.00 to provide training for family physicians and other primary care providers who will serve medically underserved rural and inner city Californians, refugees, the frail elderly and people with AIDS.

This voluntary program was established as a result of legislation authored by the late Dr. William Filante and is supported by the California Medical Association, the California Academy of Family Physicians and other leading health care organizations. Dr. Filante's bill authorized the State's Office of Statewide Health Planning and Development (OSHPD) to accept contributions from certain foundations, health maintenance organizations, health insurers, and other entities to augment this primary care training programs, which are located in hospitals throughout California.

Family Physician Training Fee

Voluntary

\$ 25.00

TOTAL FEES ENCLOSED



Original:

STATE AND CONSUMER SERVICES AGENCY- Department of Consumer Affairs

ARNOLD SCHWARZENEGGER, Governor



MEDICAL BOARD OF CALIFORNIA
Licensing Program



FEE SCHEDULE: APPLICATION FOR PHYSICIAN'S & SURGEON'S LICENSE OR POSTGRADUATE
TRAINING AUTHORIZATION LETTER (PTAL)

APPLICATION FEES

1. Required Non-refundable Application Fee: \$442.00
2. Required Non-refundable Fingerprint Processing Fee: \$ 51.00
Fingerprint processing fee is required by the DOJ. Additional fees may be incurred through the party which rolls or electronically scans your fingerprints.
3. TOTAL REQUIRED NON-REFUNDABLE APPLICATION FEES: \$ 493.00

LICENSE FEES

4. Initial License Fee: \$808.00

You may wish to remit the initial license fee with your application and fingerprint fees to reduce processing time. The initial license fee is \$808.00. However, if you are currently enrolled in an approved ACGME or RCPSC accredited training program, you are eligible for the reduced initial licensing fee of \$416.50. To verify your current enrollment in a training program, you will need to submit a *Certificate of Current Postgraduate Training Enrollment (Form L4)* along with the \$416.50 reduced initial licensing fee.

PLEASE NOTE: Both the initial license fee and the reduced license fee specified above include a mandatory payment of \$25 to the Physician Corps Loan Repayment Program per section 2436.5 of the Business and Professions Code. The payment must be made at the time of application for initial licensure. Applicants for a PTAL are not required to pay the licensing fee at the time the application is submitted but the applicable fees must be paid prior to the issuance of a medical license.

Upon final approval, your California Physician and Surgeon license will be issued and will be valid for up to two years; the expiration date is based on your birth month. If you wait until your birth month for licensure, your license will be valid for a full 24-month period. Should you choose to be licensed as soon as possible, this time will be shortened to as few as 13 months - dependent upon your birth month. It is only necessary to wait until the birth month, not the exact date of birth.

5. VOLUNTARY \$25 FAMILY PHYSICIAN TRAINING FEE (*please see below for information*)

- ☐ Please check here if you wish to contribute to the Physician Training Fund
and ADD \$25.00 to your payment \$ 25.00

You may voluntarily contribute \$25 to provide training for family physicians and other primary care providers who will serve medically underserved rural and inner city Californians, refugees, the frail elderly, and people with AIDS.

This voluntary program was established as a result of legislation authored by the late Dr. William Filante and is supported by the California Medical Association, the California Academy of Family Physicians and other leading health care organizations. Dr. Filante's bill authorized the State's Office of Statewide Health Planning and Development (OSHPD) to accept contributions from certain foundations, health maintenance organizations, health insurers, and other entities to augment these primary care training programs, which are located in hospitals throughout California.

\$.00

TOTAL (APPLICATION PLUS LICENSING) FEES ENCLOSED

MAKE CERTIFIED CHECKS, CASHIER'S CHECKS, MONEY ORDERS, OR PERSONAL CHECKS PAYABLE TO:
MEDICAL BOARD OF CALIFORNIA

(Fees subject to change)

07A-03 (Revised 07/01/00)

2005 Evergreen Street, Suite 1200, Sacramento, CA 95815-3831 (800) 633-2322 (916) 263-2382 FAX: (916) 263-2567 www.mbc.ca.gov



9.4.3 Sample Application Checklist

APPLICATION CHECKLIST

Please include with the application package

Applicant Last Name:		Applicant First Name:		Applicant Date of Birth: MM / DD / YYYY	
Applicant Other Last Name:		Applicant Other First Name:		For MBC Use Only (ATS #)	
Medical School (check one) <input type="checkbox"/> US/CAN <input type="checkbox"/> IMG		Type of Form (check one) <input type="checkbox"/> LICENSE <input type="checkbox"/> PTAL		For MBC Use Only (QM (Pathway))	
If you are using the assistance of a Licensing Service Provider, please indicate name (e.g., FCVS):			For Applicant Use	Additional Comments	For MBC Use
Fees for ALL Applicants					
• Completed Application Fee Schedule.....			<input type="checkbox"/>		<input type="checkbox"/>
• Check or Money order.....			<input type="checkbox"/>		<input type="checkbox"/>
OR					
• Copy of online payment receipt.....			<input type="checkbox"/>		<input type="checkbox"/>
Forms L1A-L1E : Application for Physician's & Surgeon's License OR Postgraduate Training Authorization Letter					
Current Version of Forms					
• L1A - 4/2008 version.....			<input type="checkbox"/>		<input type="checkbox"/>
• L1B - 12/05 version.....			<input type="checkbox"/>		<input type="checkbox"/>
• L1C - 12/05 version.....			<input type="checkbox"/>		<input type="checkbox"/>
• L1D - 12/05 version.....			<input type="checkbox"/>		<input type="checkbox"/>
• L1E - 11/4/08 version.....			<input type="checkbox"/>		<input type="checkbox"/>
• No blank fields.....			<input type="checkbox"/>		<input type="checkbox"/>
• Public address used, not personal address.....			<input type="checkbox"/>		<input type="checkbox"/>
• Each page has Name and Date of Birth.....			<input type="checkbox"/>		<input type="checkbox"/>
• Applicant's name is printed on the "By" line in notary box on L1E.....			<input type="checkbox"/>		<input type="checkbox"/>
• Notarized.....			<input type="checkbox"/>		<input type="checkbox"/>
Fingerprints					
• Copy of Livescan Receipt (CA only).....			<input type="checkbox"/>		<input type="checkbox"/>
OR					
• Two (2) completed fingerprint cards.....			<input type="checkbox"/>		<input type="checkbox"/>
Supporting documentation (as applicable):					
• Official medical school transcript.....			<input type="checkbox"/>		<input type="checkbox"/>
• Official examination scores.....			<input type="checkbox"/>		<input type="checkbox"/>
• Certified copy of medical degree.....			<input type="checkbox"/>		<input type="checkbox"/>
• Official Letters of Good Standing.....			<input type="checkbox"/>		<input type="checkbox"/>
• Detailed narrative to support a 'Yes' response to questions 14 -38.....			<input type="checkbox"/>		<input type="checkbox"/>
Form L2: Certificate of Medical Education					
• Current L2 - 12/05 version.....			<input type="checkbox"/>		<input type="checkbox"/>
• Mailed to each medical school attended.....			<input type="checkbox"/>		<input type="checkbox"/>
• Date(s) mailed (put in additional comments box).....					
Forms L3A - L3B: Certificate of Completion of ACGME/RCPSC Postgraduate Training *** Not Required for PTA L***					
• Current L3A/B - 12/05 version.....			<input type="checkbox"/>		<input type="checkbox"/>
• Part 1 completed by applicant.....			<input type="checkbox"/>		<input type="checkbox"/>
• Mailed to each postgraduate training program attended...			<input type="checkbox"/>		<input type="checkbox"/>
• Date(s) mailed (put in additional comments box).....					



APPLICATION CHECKLIST

Please include with the application package

	For Applicant Use	Additional Comments	For MBC Use
Form L4: Certificate of Current Postgraduate Training Enrollment *** If Applicable *** *** Not Required for PTAL ***			
• Current L4 – 12/05 version.....	<input type="checkbox"/>		<input type="checkbox"/>
• Part 1 completed by applicant.....	<input type="checkbox"/>		<input type="checkbox"/>
• Mailed to current postgraduate training program.....	<input type="checkbox"/>		<input type="checkbox"/>
• Date(s) mailed (put in additional comments box).....			
IMG ONLY FORMS			
Form L5: Certificate of Clinical Clerkships			
• Current L5 – 12/05 version.....	<input type="checkbox"/>		<input type="checkbox"/>
• Part 1 completed by applicant.....	<input type="checkbox"/>		<input type="checkbox"/>
• Mailed to each medical school attended.....	<input type="checkbox"/>		<input type="checkbox"/>
• Date(s) mailed (put in additional comments box).....			
Form L6: Certificate of Clinical Training *** If applicable ***			
• Current L6 – 12/05 version.....	<input type="checkbox"/>		<input type="checkbox"/>
• Part 1 completed by applicant.....	<input type="checkbox"/>		<input type="checkbox"/>
• Mailed to each clinical clerkship completed.....	<input type="checkbox"/>		<input type="checkbox"/>
• Date(s) mailed (put in additional comments box).....			

Applicant Last Name:	Applicant First Name:	Date of Birth: MM DD, YYYY
----------------------	-----------------------	-------------------------------



9.4.4 Revised Application Set-Up Worksheet

NEW APPLICATION SET UP WORKSHEET

Application Received Date:		AT& Number:	
Applicant Last Name:		Applicant First Name:	
Applicant Other Last Name:		Applicant Other First Name:	
Medical School (check one) <input type="checkbox"/> US/CAN <input type="checkbox"/> IMG		Qualification Method (Pathway):	

Task	Task Completion Date	Support Staff Initials	For QA Use
1 ATS Update	<input type="checkbox"/> Qualification method (Pathway) <input type="checkbox"/> License class <input type="checkbox"/> File location <input type="checkbox"/> Received Date <input type="checkbox"/> Personal detail screen		
2 Fingerprints	<input type="checkbox"/> (1) Card included in file <input type="checkbox"/> (1) Card sent for processing <input type="checkbox"/> Livescan results in file <input type="checkbox"/> Fingerprint deficiency letter sent		
3 L1A – L1E Forms	<input type="checkbox"/> Application Checklist verified <input type="checkbox"/> Requested Addendum – Form(s) <input type="checkbox"/> Requested new L1E		
4 Application Received Letter	<input type="checkbox"/> Mailed		
5 AMA Profile	<input type="checkbox"/> Printed, in file <input type="checkbox"/> No match		
6 FSMB – Physician Data Center	<input type="checkbox"/> Checked <input type="checkbox"/> Board Action in File		
7 Original Documents (e.g., Diploma)	<input type="checkbox"/> Photocopy in file <input type="checkbox"/> Returned to applicant		
8 Other Documents in File	<input type="checkbox"/> L2 <input type="checkbox"/> L3A/B <input type="checkbox"/> L4 <input type="checkbox"/> L5 <input type="checkbox"/> L6 <input type="checkbox"/> Examination scores <input type="checkbox"/> Certified copy of medical degree <input type="checkbox"/> Official Letters of Good Standing <input type="checkbox"/> Medical school transcript <input type="checkbox"/> ECFMG certificate/status letter		
9 'Z' Project' ATS Update	<input type="checkbox"/> Application Requirement Status Field complete		



*** DRAFT ***

Medical Board of California
Business Process Reengineering Study
Creating a Sustainable Licensing Program

Original:

Application Worksheet

ATS# _____

APPLICANT'S NAME: _____

_____ Rcvd Application with \$ _____ Rcvd Web Payment of \$ _____

_____ Rcvd Web Application

FINGERPRINTS: _____ Rcvd FP Cards _____ Rcvd copy of Live Scan Form
_____ Rcvd Neither with Application (Checked FP Basket & L/S Folder)

_____ Processed One Fingerprint Card _____ Extra Fingerprint Card In File

_____ Received Live Scan Clearance _____ Live Scan Clearance Not in Folder

_____ Mailed Fingerprint Letter Requesting: _____ Live Scan _____ Two FP cards
_____ Returned FP cards for completion

_____ Requested new L1A-E ("by" line error on Form L1E)

_____ Requested Addendum (Form(s) L1 _____, Question(s) # _____ left blank)

_____ Printed AMA Profile _____ AMA No Match

_____ Mailed Postcard _____ No Postcard Received

_____ FSMB Checked

_____ FSMB Board Action In File

_____ Returned Original Documents

_____ REVIEWED APPLICATION _____ PATHWAY

_____ Check/Update Person Detail Screen

_____ Log in All Items Received on ATS Notes

_____ Fulfill Items on Application Requirement Screen

_____ Mailed Status Letter



9.4.5 Revised Licensing Invoice

STATE AND CONSUMER SERVICES AGENCY - Department of Consumer Affairs
Governor

ARNOLD SCHWARZENEGGER,



MEDICAL BOARD OF CALIFORNIA Licensing Program



<Date>

<Applicant Name>

<Applicant Address>

<Applicant City, State, ZIP>

RE: ATS#:

Dear Applicant:

This is to inform you that your Physician's and Surgeon's application for medical licensure in California has been approved. In order to issue the license, payment of the initial licensing fee in the amount of \$ 000.00 is required. Please complete the bottom portion of this letter and return to the Board with your payment. Failure to submit the bottom portion will cause a delay in the issuance of your license.

Upon receipt of your initial license fee, your application will be submitted for licensing immediately, unless otherwise requested. The Board licenses at least once a week and licensure documents are mailed approximately two to four weeks thereafter. All license numbers, once issued, are available on our website at <http://mbc.ca.gov/lookup.html>

If you have any questions please contact the Customer Information Unit at: (800) 633-2322 or in writing at the address noted below.

Sincerely,

Medical Board of California

LICENSING FEE INVOICE			
ATS Number:		<input type="text" value="<FILL IN>"/>	
Name:	<input type="text" value="<FILL IN>"/>	<input type="text" value="<FILL IN>"/>	<input type="text" value="<OPT>"/>
	(Last)	(First)	(MI)
Birth Date:	<input type="text" value="MM / DD / YYYY"/>	Amount Due:	<input type="text" value="\$ 0.00"/>
ABOVE FEE(\$): <input type="checkbox"/> 76T (\$763) <input type="checkbox"/> 76V (\$391.50) <input type="checkbox"/> APP (\$442) <input type="checkbox"/> FP (\$51) VL3 (\$25)			
(Please make your certified check, cashier's check, or money order payable to Medical Board of California)			
NOTE: PAYMENTS RECEIVED WITHOUT THIS INVOICE MAY DELAY PROCESSING			
CASHIERING OFFICE USE ONLY:			
Receipt #:	Date Received:	Amount:	Initials:



Original:

STATE AND CONSUMER SERVICES AGENCY - Department of Consumer Affairs

ARNOLD SCHWARZENEGGER, Governor



MEDICAL BOARD OF CALIFORNIA
Licensing Program



LICENSING FEE INVOICE

ATS NUMBER

Name: _____
(Last) (First) (MI)

Birth Date: _____ Amount Due: \$ _____

Please make your certified check, cashier's check, or money order payable to
Medical Board of California

Note: PAYMENTS RECEIVED WITHOUT THIS INVOICE MAY DELAY PROCESSING
OF YOUR APPLICATION.

LICENSING OFFICE USE ONLY:

US or IMG
(Circle One)

ABOVE FEE(S): 76T (\$783) 76V (\$391.50) APP (\$442) FP (\$51) VL3 (\$25) Staff Initials _____
(Circle the applicable account code)

TRANSFER FEES

Transfer fees
From Account: _____ ATS #: _____ Receipt #: _____ Date Received: _____

Transfer fees
To Account: _____ ATS #: _____ Include payment above? Yes or No
(Circle One)

Note to cashier staff:

CASHIERING OFFICE USE ONLY:

Receipt #: _____ Date Received: _____ Amount: _____ Initials: _____



9.4.6 Reformatted Policies and Procedures Manual Sample

	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL		Policy Number	
			Effective Date	MM/DD/YY
	Subject: GENERAL APPLICATION INSTRUCTIONS		Page	1 of 6
			Supersedes	07/01/06

I. PURPOSE

To define policy and procedures of the Licensing Program with respect to processing of an application for Physicians and Surgeons or Postgraduate Training Authorization.

II. POLICY STATEMENT

- A. Every applicant for a physician's and surgeon's license shall comply with the requirements of Article 4 of the Business and Professional Code, known as the Medical Practices Act.
- B. Each application shall be made upon the L1A – L1E provided by the Licensing Program, and each application form must contain the applicant's signature verifying under penalty of perjury that the information provided by the applicant is true and correct and that any information in supporting documents provided by the applicant is true and correct.¹
- C. Each application shall include the following:
 - 1. A diploma issued by an approved medical school
 - 2. An official transcript
 - 3. Other information concerning the professional instruction and preliminary education of the applicant, if applicable
 - 4. Either fingerprint cards or a copy of a completed Live Scan form.²
- D. Every application shall be accompanied by the application fee effective at the time the application is received.³
- E. Within 60 working days of receipt of an application pursuant to B&P Code sections 2102, 2103, 2135, or 2151, the Licensing Program shall inform the applicant in writing whether the application for licensure or PTAL is complete and accepted for filing or deficient and what specific information or documentation is required to complete the application.⁴
- F. Within 100 calendar days from the date of filing of a complete application, the Licensing Program shall inform the applicant in writing of the Program's decision regarding the application for licensure.⁵

III. DEFINITIONS

- A. Not applicable for this section

IV. APPLICATION OF POLICY

¹ Medical Practices Act § 2081


² Medical Practices Act § 2082

³ Medical Practices Act § 2083

⁴ Title 16, Division 13, Chapter 1, Article 5, § 1319.4(a)

⁵ Title 16, Division 13, Chapter 1, Article 5, § 1319.4(b)



	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL	Policy Number	
		Effective Date	MMD/DD/YY
	<u>Subject</u> GENERAL APPLICATION INSTRUCTIONS	Page	2 of 6
		Supersedes	07/01/06

B. Set up a new application file:


1. **Application Type** – Determine if the application is for a License, a PTAL, or is an update to an application for License or PTAL.
2. **Application Version** – Confirm the applicant has completed the current application form. Check the lower left corner of the application form.
 - a. If the incorrect version, mail the applicant ATS notice #40 to request that the correct version of the application be completed (Forms L1A – L1E).
3. **School Code** – Locate Form L1A Box 11 to identify from which medical school the applicant graduated.
 - a. Look up school code on the School Code List (<g://licensing/schoolcode/schoolcodemasterlist.xls>) OR on your hardcopy list.
 - b. Write the school code in the shaded "School Code" box at the bottom of Form L1A.
 - c. If the medical school is not on the school code list:
 - i. Check with staff person responsible for updating codes to confirm whether the school is an approved or recognized medical school.
 - ii. If approved submit a written request to the responsible staff person to have new school code assigned. Once assigned see Step (b) above.
 - iii. If the school is not approved or recognized by the Board, send the applicant ATS Notice #15 and close the file on ATS. See Chapter 21 for instructions.
4. **License Pathway** – Determine the applicant's qualification method by checking:
 - a. Whether or not a previous CA license is reported on Form L1A Box 10
 - b. Written examinations noted on Form L1A Box 13
 - c. Whether or not any postgraduate training is noted on Form L1B Box 14
 - d. Whether or not any licenses are noted on Form L1B Box 15
5. **License Pathway Sticker** – Put the appropriate colored sticker reflecting the applicant's qualification method on the file folder tab.
6. **Miscellaneous Mail** – Check you miscellaneous mail and merge any items found with the application file. If the applicant has noted an "Other Name" on Form L1A.



*** DRAFT ***

*Medical Board of California
Business Process Reengineering Study
Creating a Sustainable Licensing Program*



	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL		Policy Number	
			Effective Date	MMD/DD/YY
	<u>Subject</u> GENERAL APPLICATION INSTRUCTIONS		Page	3 of 6
			Supersedes	07/01/06


7. **Fingerprints** – Applicant must submit either two (2) fingerprint cards **OR** a Live Scan receipt.
 - a. **Fingerprint Cards:**
 - i. **Missing cards:** Check miscellaneous fingerprint basket and imminent fingerprint basket. If still not found, mail applicant ATS Notice #40 with two(2) blank fingerprint cards.
 - ii. **Cards Included:** Staple one (1) card to the left hand side of the file. Send the second for processing.
 - b. **Live Scan Receipt (California Residents ONLY):**
 - i. **Missing receipt:** Check miscellaneous fingerprint folders and imminent fingerprint basket. If still not located, mail applicant ATS Notice #40 with a blank Live Scan Form.
 - ii. **Receipt Included:** Retain in file.
8. **Update Applicant Tracking System (ATS)**
 - a. See Chapter 21 for ATS instructions
- C. **Initial review of application:**
 1. **Mandatory order of files:**
 - a. ATS notes, address change, Fee invoices
 - b. Application update, latest to earliest:
 - i. Name change documents
 - ii. National Practitioner Data Bank (NPDB) Reports
 - iii. Federation of State Medical Boards (FSMB) Reports
 - iv. Hospital privileges documentation
 - v. Malpractice documents and explanations
 - vi. Background checks, criminal conviction documentation, and explanations
 - vii. Traffic convictions documentation and explanations
 - c. Educational Commission for Foreign Medical Graduates (ECFMG) Certificate Status Report (Form 282B) – **IMG ONLY**



	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL	<i>Policy Number</i>	
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		<i>Supersedes</i>	07/01/06


- d. Examination scores:
 - i. State Board Examinations
 - ii. Licentiate of the Medical Council of Canada (LMCC)
 - iii. Federation Licensing Examination (FLEX)
 - iv. Special Purpose Examination (SPEX)
 - v. National Board of Medical Examiners (NBME)
 - vi. United States Medical License Examination (USMLE)
 - vii. Medical Board of California Oral Examination (earliest to latest)
- e. Good Faith Effort documentation – **IMG ONLY**
- f. Dental and Osteopathic curriculums and letters
- g. Certificate of Medical Education (Form L2) earliest to latest
 - i. Explanations for leaves of absence
 - ii. Extended curriculums
 - iii. Disciplinary actions
 - iv. Probationary actions
- h. Medical School Transcripts, earliest to latest
 - i. **IMG ONLY:**
 - A. Certification of translator
 - B. Translation
 - C. Transcript
- i. Medical School Diploma:
 - i. **IMG ONLY:**
 - A. Diploma
 - B. Certification of translator
 - C. Translation



	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL	Policy Number	
		Effective Date	MMD/DD/YY
	<u>Subject</u> GENERAL APPLICATION INSTRUCTIONS	Page	5 of 6
		Supersedes	07/01/06

- D. ACTA (required of some Mexico graduates)
- E. Certification so translator
- F. Translation
- G. Social Service (required of Mexico graduates)
- H. Certification so translator
- I. Translation
- b. Letter from Fifth Pathway Program – **IMG ONLY**
- c. Original California Wall Certificate, if applicable
 - i. Notarized letter regarding the status of the original certificate (lost, stolen, destroyed), if applicable
- d. Letters of Good Standing
- e. Postgraduate Training Authorization Letter(s), latest to earliest – **IMG ONLY**
- f. Certification of Completion of ACGME/RCPSG Postgraduate Training (Form L3A/B), earliest to latest
 - i. Specialty Board Certifications
 - ii. Explanations and documentation of withdrawals, transfers
 - iii. Description of four (4) months general medicine
 - iv. Documentation and explanations of program discipline
 - v. Documentation and explanations of program failures
- g. Certificate of Current Postgraduate Training Enrollment (Form L4), if applicable
 - i. Documentation of cease and desist training
 - ii. Professional activities
- h. Clinical Worksheet (Form L5) – **IMG ONLY**
 - i. Documentation in other formats of undergraduate clinical clerkships
 - ii. Fifth Pathway breakdowns



	MEDICAL BOARD OF CALIFORNIA PHYSICIANS AND SURGEONS LICENSING PROGRAM POLICY and PROCEDURE MANUAL		<i>Policy Number</i>	
			<i>Effective Date</i>	MMD/DD/YY
	<i>Subject</i> GENERAL APPLICATION INSTRUCTIONS		<i>Page</i>	6 of 6
			<i>Supersedes</i>	07/01/06

- iii. Proposal and confirmation of remedial training
 - iv. Internships
 - v. Internado (Mexico graduates)
 - i. Certificate of Clinical Training (Form L6), earliest to latest – IMG ONLY
 - j. Returned originals form (earliest to latest)
 - k. American Medical Association (AMA) Physician Profile
 - l. Staple Fingerprint Clearances and Arrest Reports to left side of file
2. Forward application file to the appropriate Application Reviewer for processing

VI. **RESPONSIBILITY**

- A. Supervisors/Managers are responsible for implementing the program in a consistent and equitable manner.

SPONSOR

Chief of Licensing

REVIEW CYCLE

Circular

APPROVAL

Chief of Licensing

Date



Original:

Licensing Policies and Procedures Manual
Chapter 2 – Typical processing of U.S./Canadian Application
General Application Instructions

PROCEDURE -

Every applicant must submit an Initial and Update Application for Physician's and Surgeon's License OR Postgraduate Training Authorization Letter (Forms L1A through L1E). The application allows the applicant to indicate for which of the following he or she is apply:

1. **Licensure** – requesting issuance of a physician's and surgeon's license
2. **Postgraduate Training Authorization Letter (PTAL)** – for international medical school graduates applying for an authorization letter to participate in an ACGME-accredited postgraduate training program within California.
3. **Update** - person has a pending application on file and wants to keep the file open/active.

Listed below are the minimum required application and supporting materials for medical licensure for a domestic medical school graduate (US or Canada):

- ! Application Forms L1A-L1E
- ! Two fingerprint cards or copy of Live Scan form
- ! Fees of \$493.00 or copy of online payment receipt
- ! Official examination scores received directly from the reporting agency
- ! Form L2
- ! Official medical school transcript
- ! Certified copy of medical degree
- ! Official Letters of Good Standing (if applicable)
- ! Form L3A-L3B
- ! Form L4 (if applicable)
- ! License fees

Please follow the below steps to set up an application file, and conduct a preliminary review to ensure all required documents have been submitted:

<u>Set up a new application file:</u>	
Step:	Action
A.	Type of Application Submitted - Ensure that the application being reviewed is the application for Initial and Update Application for Physician's and Surgeon's License or Postgraduate Training Authorization Letter. Look at the top of L1A to see which type of application the applicant has submitted (License/PTAL/Update). It is not uncommon for the applicant to mark the wrong box or leave the boxes blank. A new application is not required if either instance occurs.
B.	Application Revision Date - Has the applicant completed the current application form provided by the Board? Check the revision date in the lower left corner of the application form. The current accepted version has a revision date of 4/2008 on Form L1A, a revision date of 12/06 on Forms L1B, L1C, and L1D, and a revision date of 11/4/08 on Form L1E.
IF:	THEN:
The applicant used an old version of the Board's application:	Mail the applicant ATS notice # 40 and request a new completed application (Forms L1A-E)

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C.	School Code – Review question # 11 to see from which medical school the applicant graduated. Look up the school code on the Excel School Code list (g:\licensing/school code/schoolcodemasterlist.xls) OR on your hard copy list. Write the school code in the shaded "School Code" box at the bottom of Form L1A.				
	<table border="1"> <thead> <tr> <th data-bbox="480 611 857 632">IF:</th><th data-bbox="857 611 1230 632">THEN:</th></tr> </thead> <tbody> <tr> <td data-bbox="480 632 857 1066">The medical school is not on the school code list</td><td data-bbox="857 632 1230 1066"> <p>Immediately check with the staff person in charge of updating the codes and confirm the school is an approved or recognized medical school.</p> <p>If it is, submit a written request to the staff person for a new school code to be assigned. Once you have the new code, update the "School Code" field on the L1A.</p> <p>If the school is not approved or recognized by the Board, mail the applicant ATS notice # 15 to advise the applicant that the medical school is not approved/recognized and that the unexpended portion of the applicant's processing fee will be refunded along with any licensing fee submitted.</p> <p>Close the file on ATS – see Chapter 21 for instructions.</p> </td></tr> </tbody> </table>	IF:	THEN:	The medical school is not on the school code list	<p>Immediately check with the staff person in charge of updating the codes and confirm the school is an approved or recognized medical school.</p> <p>If it is, submit a written request to the staff person for a new school code to be assigned. Once you have the new code, update the "School Code" field on the L1A.</p> <p>If the school is not approved or recognized by the Board, mail the applicant ATS notice # 15 to advise the applicant that the medical school is not approved/recognized and that the unexpended portion of the applicant's processing fee will be refunded along with any licensing fee submitted.</p> <p>Close the file on ATS – see Chapter 21 for instructions.</p>
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The medical school is not on the school code list	<p>Immediately check with the staff person in charge of updating the codes and confirm the school is an approved or recognized medical school.</p> <p>If it is, submit a written request to the staff person for a new school code to be assigned. Once you have the new code, update the "School Code" field on the L1A.</p> <p>If the school is not approved or recognized by the Board, mail the applicant ATS notice # 15 to advise the applicant that the medical school is not approved/recognized and that the unexpended portion of the applicant's processing fee will be refunded along with any licensing fee submitted.</p> <p>Close the file on ATS – see Chapter 21 for instructions.</p>				
D.	Licensing Pathway - Determine the applicant's qualification method (pathway to licensure, Chapter 1, Pages 4 and 5) by checking: <ul style="list-style-type: none"> • The medical school issuing the medical degree on L1A • Written examinations noted on L1A • Whether or not any postgraduate training is noted on L1B • Whether or not any licenses are noted on L1B. • Whether or not a previous CA license is reported on question # 10 on L1A 				
E.	License Pathway Sticker - Put the appropriate colored sticker reflecting the applicant's qualification method on the file folder tab.				
F.	Miscellaneous Mail – Check your miscellaneous mail and merge any items found with the application file. If the applicant has noted an "Other Name" on Form L1A, check the miscellaneous mail folders under this name also.				
G.	Fingerprints - Check file for fingerprint card, live scan receipt, or letter mailed to the applicant from support staff, requesting either fingerprint cards or live scan.				
	<table border="1"> <thead> <tr> <th data-bbox="480 1577 857 1598">IF:</th><th data-bbox="857 1577 1230 1598">THEN:</th></tr> </thead> <tbody> <tr> <td data-bbox="480 1598 857 1617"></td><td data-bbox="857 1598 1230 1617"></td></tr> </tbody> </table>	IF:	THEN:		
IF:	THEN:				

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	<p>If none of the required fingerprint documents are located:</p> <p>Check the miscellaneous fingerprint folders and imminent fingerprint basket. Place clearances found in the miscellaneous folder in your file. Process cards found in the imminent fingerprint basket. See Chapter 11 for instructions on fingerprint processing.</p> <p>If still not found, check with support staff and if necessary request that support staff mail a Live Scan form or fingerprint card to the applicant.</p> <p>Update ATS notes to indicate the date Live Scan or fingerprint cards were mailed to the applicant.</p>
H.	<p>Update the Applicant Tracking System (ATS) – (see Chapter 21 for ATS instructions)</p> <p>Enter the following:</p> <ul style="list-style-type: none"> • Qualification method (pathway) • License class (A, C, or G) • File location is US or IMG (until file is reviewed) • For applicants who paid online (web applicants) make sure the received date (Rec Dt in middle of License Application screen on ATS) is the date when both the fees and application were received in the office. Web applicants often pay first then mail the application later – in this instance the received date would be the date the application was received. Use the date of receipt of the last item (application or application processing fee). • Update the person detail screen with the applicant's first, middle (if any), last name, date of birth, social security number, gender, address of record, telephone numbers, and e-mail address (optional).
I.	File application folder into the designated "pending review" file drawer in your cubicle
Initial Review of the application (within 60 business days of receipt per CCR 1319.4):	
Step:	Action
J.	Put file into order per the Mandatory Order of Files document (see Chapter 2, page x for instructions)
K.	Remove all staples from the documents; keep them in the mandatory order.
L.	Staple the Fingerprint documents to left side of file folder.
M.	Review application and note needed items.

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N.	For any missing information, refer to the correct section in this manual relative to the particular question and/or form and applicable deficiency letter.
O.	<p>Review application for missing information. All questions must be answered and all supporting documents must have been submitted to the Board unless otherwise noted. <u>If one or more questions on the application have been left blank, the applicant is required to complete a new application (L1A-E).</u> The Board's legal counsel has determined that once an application has been signed and notarized additional information may not be added. As such, a new application is required.</p> <p>When reviewing the application forms, use the "MBC Use Only" squares in the gray margin, to check off when a question has been answered AND when the supporting documentation has been provided and approved.</p> <p>Review the L1E to ensure the appropriate photograph has been provided and that the form is signed and notarized correctly.</p>
IF:	
The applicant left one or more questions blank:	<p>THEN:</p> <p>Using the gray "MBC Use Only" section of the application, use a red pen to indicate the areas where the applicant was missing information.</p> <p>Also, photocopy the page containing the missing information/blank answer, and return it to the applicant as evidence of the incomplete application.</p> <p>Mail applicant ATS notice # 40 to request a new completed application (L1A-E)</p>
P.	If the application is determined to be complete, see Chapter 7 for instructions on submitting a completed application for licensing.

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Licensing Policies and Procedures Manual
Chapter 2 – Typical processing of U.S./Canadian Applications
Mandatory Order of Files

The Mandatory Order of Files for U.S. and Canadian medical school graduates is as follows:

1.	ATS Notes Address Change Fee Invoices
2	Application Update (Initial AND Update Application For Physician's and Surgeon's License OR Postgraduate Training Authorization Letter - Forms L1A-L1E) latest to earliest
3	Initial AND Update Application For Physician's and Surgeon's License OR Postgraduate Training Authorization Letter - Forms L1A-L1E <ul style="list-style-type: none"> Name change documents National Practitioner Data Bank (NPDB) Reports Federation of State Medical Boards (FSMB) Reports Hospital privileges documentation Malpractice documents and explanations Rap sheets, criminal conviction documentation, and explanations Traffic convictions documentation and explanations
4	Examination Scores: <ul style="list-style-type: none"> State Board Examinations Licentiate of the Medical Council of Canada (LMCC) Federation Licensing Examination (FLEX) Special Purpose Examination (SPEX) National Board of Medical Examiners (NBME) United States Medical License Examination (USMLE) Medical Board of California Oral Examination (earliest to latest)
5	Dental and Osteopathic curriculums and letters
6	Certificate of Medical Education (Form L2; earliest to latest) <ul style="list-style-type: none"> Explanations for leaves of absence, extended curriculums, disciplinary, and probationary actions
7	Medical School Transcripts (earliest to latest)
8	Medical School Diploma
9	Original California Wall Certificate – (applicant re-applying for licensure per CA B&P Code section 2428) OR Notarized Letter regarding the status of the original certificate (lost, stolen, destroyed)
10	Letters of Good Standing <ul style="list-style-type: none"> State/province/country license discipline documentation and explanations CAS 610 screen printout for applicants re-applying for licensure per CA B&P Code section 2428

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Mandatory Order of Files

11	Certification of Completion of ACGME/RCPSC Postgraduate Training (Form L3A/B; earliest to latest) <ul style="list-style-type: none">• Specialty Board Certifications• Explanations and documentation of withdrawals, transfers• Description of four months general medicine• Documentation and explanations of program discipline• Documentation and explanations of program failures
12	Certificate of Current Postgraduate Training Enrollment (Form L4 - eligibility for reduced initial license fee) <ul style="list-style-type: none">• Documentation of cease and desist training• Professional Activities
13	Returned Originals form (earliest to latest)
14	American Medical Association (AMA) Physician Profile
15	Fingerprint Clearances and Arrest Reports (RAP sheets) – stapled to the left side of the file until the applicant is ready to be licensed. Once the file is approved for licensure, the Licensing Technician (Cindy Rogalski) will remove and shred the DOJ and FBI fingerprint responses.



9.4.7 MBC Web Site – Revised Applicant Tab

Page 1 Revised

[Home](#) → [applicant](#)

Licensing Process

Attention: Osteopathic Physicians and Surgeons - If you are applying for licensure as an osteopathic physician and surgeon, please contact the **Osteopathic Medical Board of California** at (916) 928-8390 for an application and further information.

Attention: International Medical School Graduates - If you are an International Medical School Graduate seeking the Postgraduate Training Authorization Letter (PTAL) allowing you to apply to a California Postgraduate Training Program <click here>

Attention: If you have already submitted an application and want to check the status of your application online <click here> or email info@mbc.ca.gov

General Information on the Licensing Process

Submit the application, fees and documentation at least six (6) to nine (9) months before licensure is needed - Applicants are strongly encouraged to submit the license application, fees and supporting documentation at least **six to nine months before licensure is needed**. Documentation is required from several different entities in order to complete the application file. Due to the complexity of each application file, MBC cannot identify all variables that may cause additional review and subsequent delays. Therefore, it is not possible to provide assurances that any applicant will be licensed by a specific date.

MBC is a law enforcement agency - <insert narrative from GME outreach materials>

Licensure Requirements

- For graduates of U.S. or Canadian Medical Schools and in Postgraduate Training, Business requires licensure
- For graduates of International Medical Schools and in Postgraduate Training <cite statute> requires licensure
- For all others <cite statutes> requires licensure

Licensure Application, Forms and Documentation – The Applicant is required to complete the license application, provide fingerprints and other documentation. The applicant is also responsible for requesting additional information from other entities such as Medical School and Postgraduate Training Program(s). Read the application instructions carefully. Unnecessary delays can be avoided if application is completed correctly and accurately. The list of forms and documentation are listed on the next page.

Fees – **The Licensing application fee is \$493. The initial licensing fee is \$808.** If eligible for reduced initial licensing fee, the amount is \$416.50. See application for Application Instructions and Fee Schedule for more information. **Do not send cash**



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- Make your cashier's check, personal check or money order payable to the Medical Board of California
- Mail your application and fee to:
Medical Board of California
2005 Evergreen Street, Suite 1200
Sacramento, CA 95815



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Licensing Process

Application Process

The application process cannot begin without payment of application fee and receipt of the application. Once the application and fees have been received, applications are reviewed in the order received. Pursuant to §1319.4, MBC staff must complete the initial review within 60 *working days*. After the initial review is complete, the applicant is notified in writing of the application status and given an itemized list of documents needed to complete the file. These subsequent documents also will be reviewed in order of receipt. Once all documentation is received, reviewed and accepted, MBC has 100 calendar days to determine its licensure decision.

Application, Forms and Payment

- Application Instructions and Checklist [<click here>](#)
- Fingerprinting for California residents: [Livescan Form](#) and [Livescan locations](#)
- Fingerprinting for non-California residents: [<insert requirements or link>](#)
- Online Licensing Application Payment [<click here>](#)
- U.S./Canadian Medical School Graduate Application, and Fee Schedule (fill-in) - [<click here>](#)
- International Medical School Graduate Application and Fee Schedule (fill-in) - [<click here>](#)

Additional Information related to the Application, Forms and Payment

- [NEW MANDATORY FEE EFFECTIVE JANUARY 1, 2009](#) [<can this line be removed?>](#)
- [Examination Scores](#)
- [Federation Credentials Verification Service Application](#)
- [Convictions - How it Might Affect a License / PTAL Application](#)

Need additional info? [<link to send an email to info@mbc.ca.gov>](#) or call CIU 1-800-633-2322



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Licensing Application Information



Please click [here](#) to view the status of your licensing application:

The Medical Board's Licensing Section protects the consumer through the proper licensing of physicians and surgeons. The comprehensive review of an application provides that licensees have the requisite qualifications and educational credentials for medical practice.

California's licensing requirements remain among the more stringent in the nation; nevertheless, an ever-increasing number of applicants seek licensure in California. During the 2008-2009 fiscal year, over 6,000 applications were received by the Board and over 4,600 licenses were granted. Applicants should recognize that the application review process can be lengthy, and are encouraged to start the application process at least **six to nine months** before they need licensure. While the sense of urgency experienced by each applicant is understood, the licensing staff is responsible for reviewing many files, and cannot complete the review of a file if required documents are missing. Oftentimes, the missing documents must be obtained from distant medical schools or programs, resulting in more delays. It is imperative for applicants to understand that the review process is guided by the requirements set forth in State law, which does not provide for any waivers to be granted by staff or by the Board.

- The Board is only accepting applications with the following revision dates: 12/05 and 04/08.
- Applications are reviewed in the order of receipt.
- Applicants should submit all required documentation as soon as possible; however, without both the application and fees, staff cannot begin the initial review process.
- Fingerprint cards should be submitted early in the process, preferably with the application and fees, because this security clearance is lengthy.
- Do *not* wait to submit an application until all documentation is complete, because that will significantly delay the fingerprint card processing.

Once an application has been received, staff must complete the initial review within 60 working days, although this often occurs in less time. The applicant is then notified in writing of the application status and given an itemized list of documents needed to complete the file. These subsequent documents also will be reviewed in order of receipt.

The review of applications filed by US/Canadian medical graduates is fairly routine. When delays occur, they generally result from the required FBI fingerprint clearance, which may take a few months.

While the review of applications filed by international graduates is more complex, delays usually are the result of education and training which does not meet the standard required in law and which therefore must be



remediated. Other extensive delays occur as applicants try to obtain documents from foreign institutions or when certified translations are needed.

Lastly, when all documents have been submitted and an application is complete, regulations allow an additional 100 days for processing. This time frame may include a senior management review of complex files and a request for clarification of some documented information.

The Board cannot predict the variables that may cause delays as each application is reviewed. Therefore, it is not possible to provide assurances that any applicant will be licensed by a specific date.

Continue



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Licensing Process

[Online Licensing Application Payment](#)

NEW MANDATORY FEE EFFECTIVE JANUARY 1, 2009

- [U.S./Canadian Medical School Graduate Application - Fill-In](#)
- [International Medical School Graduate Application - Fill-In](#)
- [California ACGME Approved Postgraduate Training Program: Postgraduate Training Registration Form](#)
- [Live Scan Form](#)
- [Live Scan Locations](#)
- [Examination Scores](#)
- [Federation Credentials Verification Service Application](#)
- [Convictions - How it Might Affect a License / PTAL Application](#)

Attention: Osteopathic Physicians and Surgeons

Do not complete this application packet if you are applying for licensure as an osteopathic physician and surgeon. Please contact the [Osteopathic Medical Board of California](#) at (916) 928-8390 for an application and further information.