



MEDICAL BOARD OF CALIFORNIA
Executive Office



Public Education Committee Meeting
Sheraton Suites
Symphony Bay Room
701 A Street
San Diego, CA 92101

November 2, 2006

MINUTES

Agenda Item 1 Call to Order

The Public Education Committee of the Medical Board of California was called to order by Chair Ron Wender, M.D. at 1:04 p.m. A quorum was present, and due notice had been mailed to all interested parties.

Members Present:

Ron Wender, M.D., Chair
Hedy Chang
Laurie Gregg, M.D.
Mary Moran, M.D.
Barbara Yaroslavsky

Staff and Guests Present:

Dave Thornton, Executive Director
Shelton Duruisseau, Ph.D.
Kim Kirchmeyer, Deputy Director
Teresa Schaeffer, Executive Office
Janie Cordray, Executive Office
Candis Cohen, Public Information Officer
Linda Whitney, Chief of Legislation
Gary Qualset, Chief, Division of Licensing
Renee Threadgill, Interim Chief of Enforcement
Anita Scuri, Senior Staff Counsel, DCA Legal Office
Regina Rao, Business Services Office
Scott Johnson, Business Services Office

Dino Pierini, Business Services Office
Steve Hartzell, Physical Therapy Board of California
Julie D'Angelo Fellmeth, Center for Public Interest Law
Zennie Coughlin, Kaiser Permanente
Sandra Bressler, California Medical Association
James Hay, M.D., California Medical Association
Sharon Smith-Crowley, American College of Obstetricians and Gynecologists
Frank Cuny, California Citizens for Health Freedom
Faith Gibson, California College of Midwives
Karen Ehrlich

Agenda Item 2 Approval of the May 10, 2006 Minutes

It was M/S/C (Gregg/Yaroslavsky) to approve the minutes of the May 10, 2006 committee meeting. Dr. Wender deemed the minutes approved by acclamation.

Agenda Item 3 Should the Medical Board Seek to Amend Business and Professions Code Section 2027 to Increase Disclosure of Information in 805 Reports, per the Recommendation of the Board's Enforcement Monitor?

The Medical Board's information officer, Candis Cohen, reminded the committee members that, at present, the law allows the board only to disclose basic information about the most serious 805 reports it receives -- those that result in the revocation or termination of a physician's hospital staff privileges.

The board's research director, Janie Cordray, discussed current law with respect to the conditions under which hospitals must report peer review actions to the Medical Board. She said that if the board wished to make more 805s public, it would require legislation. She said the questions for the committee are: Would consumers be assisted by knowing more about a physician's 805 history; and would making more 805s public have any adverse consequences to consumers?

Ms. Cordray noted that Business and Professions Code section 805.2 requires that the board conduct a comprehensive study of the entire peer review process. The board has been directed to contract with an independent entity, and the study is required to be completed by July 31, 2008. She recommended that the committee wait for the study before taking action on this issue.

James Hay, M.D., California Medical Association, said that the CMA supports the staff recommendation to wait for the study before taking action.

Julie D'Angelo Fellmeth, Center for Public Interest Law, and former Medical Board enforcement monitor, said that she did not disagree with waiting for the study, and noted that another study will be forthcoming in 2008, this one from the California Research Bureau, per SB 231 and SB 1438 (per SB 1438 the California Research Bureau will now conduct the study), that may be helpful, as it will look at the role of public disclosure as part of the board's public protection mandate.

After some discussion by committee members, Dr. Gregg moved to have the PEC re-look at the question being considered by the committee after the two studies are completed. The motion was seconded by Ms. Chang.

There being no other public comment, Dr. Wender asked for a vote on the motion, which passed unanimously.

Agenda Item 4 Should the Medical Board Seek to Require Physicians to Inform Patients About the Board, per the Recommendation of the Board's Enforcement Monitor?

Ms. Cohen read from the section of Ms. D'Angelo Fellmeth's 2004 report in which she recommended that the Medical Board require its licensees to provide their patients with information about its role, along with its toll-free complaint number and Web site address. She noted that the PEC had considered this issue at two consecutive meetings in 2003; but had come to no consensus concerning a plan of action.

Ms. Cordray discussed some of the other state agencies that require signage or dissemination of pamphlets, including laws that require the Medical Board to provide subject-specific brochures under certain circumstances. She suggested the committee might consider the possibility of seeking to add information about the board to patients' insurance and HMO documents.

Committee members agreed that more information for the public about the board is necessary and discussed a few options. Dr. Wender said he favored a positive approach of staff working with the Department of Managed Care and insurance companies to see if disclosure of the Medical Board's contact information could be agreed upon. He directed the staff to examine possibilities that do not require much money or legislation.

Dr. Hay of the CMA said that patient trust is part of the healing process, and that is why he disfavors signs in physicians' offices.

Karen Erlich, California College of Midwives and Birth Network of Santa Cruz County, spoke in

support of requiring physicians to disclose information about the Medical Board. Midwives since 2000 have had to make such a disclosure to their clients, and she believed all healthcare providers should have to make similar disclosures.

Faith Gibson, College of Midwives, said the disclosure of Medical Board contact information used by the midwives is generic and does not single them out as professionals. She disfavored pamphlets and favored public service announcements.

Ms. D'Angelo Fellmeth of CPIL underscored the importance of the public's knowledge of how to contact the Medical Board. She noted that her initial report questioned if the board has ever complied with Business and Professions Code section 138, which requires boards to require their licensees to provide notice to their clients that they are licensed by the state. She believed staff should research that issue, as it is possible the board does not need legislation, only to adopt regulations to implement that code section.

Agenda Item 6 Adjournment

The meeting was adjourned at 2 p.m.