

Memorandum

To: Renée Threadgill, Chief of Enforcement
Medical Board of California

Date: October 1, 2007

Agenda Item 6-A

From: Susan Goetzinger
Expert Reviewer Program

Subject: Results of the Expert Survey Questionnaires

Questionnaires Sent this quarter (July 1-Sep 30, 2007)	42
Feedback Received from the questionnaires sent this quarter	27 (64%)
Total Feedback Received for this quarter's report	31

Questions 1-8, *positive response*: Yes
Question 9, *positive response*: No
Questions 10-13, *positive response*: Yes

1	Were you provided sufficient information/evidence to allow you to render a medical opinion?	100 percent YES
2	Were you encouraged to render an unbiased opinion?	96 percent responded YES 4 percent responded N/A
3	Was the case directly related to your field of expertise?	96 percent YES 4 percent responded NO
4	Were you given sufficient time to review the case?	100 percent YES
5	Did the training material provided to you (the Expert Reviewer Guidelines and videotape/DVD) give you adequate information to perform your case review?	90 percent YES 10 percent N/A
6	Were you given clear, concise, and easy to follow instructions throughout the process?	100 percent YES
7	Was the investigator and/or MBC staff readily available to answer questions or concerns about the case?	96 percent YES 4 percent responded N/A
8	Is the required written report adequate to cover all aspects of your opinion?	100 percent YES
9	Do you feel the MBC has requested your services more frequently than you would prefer?	100 percent NO
10	Would you be willing to accept more MBC cases for review?	100 percent YES
11	If you were required to testify, was the Deputy Attorney General readily available to answer questions and provide direction?	20 percent YES 80 percent N/A

12	Do you feel the reimbursement amount for case review is appropriate for the work you are required to perform?	45 percent YES 51 percent NO 4 percent did not respond
13	Do you think that more physicians would be willing to become experts if the Board offered CME in addition to monetary compensation?	64 percent YES 28 percent NO 4 percent responded N/A 4 percent did not respond
<i>Level of satisfaction with overall experience performing case reviews for MBC</i>		83 percent HIGH 17 percent AVERAGE

SUGGESTIONS FOR IMPROVEMENT TO THE PROGRAM

<p>The MBC staff has been excellent. My only concern is some of these cases are very intense. The process of reviewing peers is intense especially when below the standard of practice. I have always felt one should be rewarded for difficulty. \$100/hr is below that level.</p>
<p>Better reimbursement rates in keeping with community standards.</p>
<p>Increase review time from 4 weeks to 6 weeks.</p>
<p>Follow-up regarding any actions taken by the Board against the practitioner being investigated.</p>
<p>A hard copy of CD Rom of Laws relating to the Medical Board of California, most recent edition would be helpful as a reference for review.</p>

COMMENTS REGARDING REIMBURSEMENTS/CME

<p>I think the compensation is low for what we are required to review and write up. It is less than 1/2 of what defense and plaintiff attorneys pay for similar services.</p>
<p>\$100 per hour - on the low side of compensation.</p>
<p>Reimbursement for med legal consultations is in the \$300-350/hr range.</p>
<p>Increased compensation. The reviews and opinions take much time and effort. The compensation is not commensurate with this.</p>
<p>CME (for me) is so widely available, useful and cheap- it is no incentive (hospital based & a pathologist - pathologists constantly read, etc.)</p>
<p>The reimbursement of \$100 per hour is too low. I do the reviews as a civic duty! Please increase the reimbursement for physicians especially the specialists!</p>
<p>Defense experts generally obtain \$300-500/hr of review. Most experts have sufficient CMEs.</p>
<p>The level of compensation has been flat for many years.</p>
<p>Reimbursement could be improved a bit if possible.</p>

Additional reimbursement would be nice but I am more than willing to review more cases and would be willing to testify if necessary. Thank you for all your efforts to improve the quality of medicine.
Pay is low, but not that important to me. I'm willing to do more. I enjoy this kind of work.

GENERAL COMMENTS

I would like to continue to serve if requested.
It is still difficult to distinguish between simple and gross negligence. Do repeated instance of simple negligence = gross negligence?
It is a good program. MBC has <u>not</u> requested my services more than I would prefer. I now only work as a part-time volunteer ob-gyn for the So. Bay free clinics, thus I have time to review cases as needed or requested.
I told a couple of doctors to call you if interested (to participate in the program).
I was pleasantly surprised by the professionalism of Ms. Veverka so I'd be happy to work with her.
Only 1 case ever in a few years.
Available for more referrals.
Request for review are appropriate. I would be willing to accept more.
The fees are low compared to private practice but it is both an honor and a duty to serve.
I take my responsibilities very seriously and feel it is important to provide the best consultations and opinions for my physician colleagues. My interaction with the staff and investigators have always been superlative, helpful, cordial and professional.
The Board does an excellent job overall with this program.
I have not been used more than decided. Reimbursement is a little lower than it should be. I doubt CME would attract more physician reviewers. The investigators with whom I have worked are Terrific!
I would be more than happy to review more cases for the MBC. I have been very impressed by the quality of work and integrity of every investigator I have worked with so far.