

**MEETING MINUTES**  
**May 1, 2023**  
**8:30 A.M. – 5:00 P.M.**  
**PHYSICIAN ASSISTANT BOARD**  
**1625 North Market Boulevard**  
**First Floor, Hearing Room # 102**  
**Sacramento, CA 95834**

**1. Call to Order by President**

President Armenta called the meeting to order at 8:30 a.m.

**2. Roll Call**

Staff called the roll. A quorum was present.

Board Members Present: Charles Alexander, PhD  
 Juan Armenta, Esq.  
 Sonya Earley, PA-C  
 Jed Grant, PA-C  
 Randy Hawkins, M.D.  
 Diego Inzunza, PA-C  
 Vasco Deon Kidd, PA-C  
 Deborah Snow

Board Members Absent: Jennifer Carlquist, PA-C

Staff Present: Rozana Khan, Executive Officer  
 Michael Kanotz, Attorney III  
 Kristy Voong, Assistant Executive Officer  
 Jasmine Dhillon, Legislative/Regulatory Specialist  
 Julie Caldwell, Lead Licensing Analyst  
 Christina Haydon, Enforcement Analyst  
 Armando Melendez, Complaint Analyst  
 Virginia Gerard, Probation Monitor  
 Ariel Gompers, Administrative Analyst  
 Jennifer Jimenez, Licensing Analyst

**3. Consider Approval of February 6, 2023, Board Meeting Minutes**

M/       Jed Grant       S/       Sonya Earley       to:

Approve the February 6, 2023, Meeting Minutes.

Member	Yes	No	Abstain	Absent	Recusal
Charles Alexander	X				
Juan Armenta	X				
Jennifer Carlquist				X	
Sonya Earley	X				
Jed Grant	X				
Diego Inzunza	X				

Vasco Deon Kidd	X				
Deborah Snow	X				

No public comment.

#### **4. Public Comment on items not on the Agenda**

(Note: The Board may not discuss or take action on any matter raised during this public comment section that is not included on this agenda, except to decide whether to place the matter on the agenda for a future meeting. [Government Code Sections 11125, 11125.7(a).])

No public comment.

#### **5. Introduction and Swearing in of New Board Member**

Mr. Armenta introduced Deborah Snow as the new member of the Physician Assistant Board (Board). Mr. Armenta stated that Ms. Snow was appointed as a public member to the Board by Toni G. Atkins, Senate President Pro Tempore on February 1, 2023. Ms. Snow previously served two terms as a member of the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board. She received her Bachelor of Arts from California Baptist University in Riverside, majoring in English and Behavioral Science. Ms. Snow is retired from her position as library assistant at the University of California, Riverside and has spent her career working in library professions. Ms. Snow has been involved in consumer advocacy for several years and has authored articles regarding consumer protection issues facing healing arts boards. Ms. Snow is a member of the Humane Society and volunteers with School on Wheels, an organization established to provide tutors to children experiencing homelessness.

Mr. Armenta administered the Oath of Office to Ms. Snow.

#### **6. President's Report**

Mr. Armenta shared that the biweekly meetings have continued to occur with Ms. Khan and Dr. Earley for Board updates. An item that has been of interest is the name change from physician assistant to physician associate. This is receiving a groundswell of support across the country; however, the Board requires legislation action in the form of a bill. This presents the Board with an opportunity as well, as the Board has not seen funding changes since 2005 or 2006 and funding changes are a legislative process. When there is a bill asking only for a name change, it could allow the Board a chance to look at needed funding in other areas that can be added onto the bill. If there is a unified effort between the external stakeholders and Board staff to move forward, the Board could have a good chance at convincing the legislature to approve funding. With increase in costs all around, the Board may see deficits in the future.

No public comment.

#### **7. Executive Officer's Report**

Ms. Khan reported the following information:

## A. Office Operations

The Board is managing ongoing telework for staff while continuing to balance office operations.

## B. Personnel

On April 17, 2023, Jennifer Jimenez was hired to fill the Board's vacant Licensing Analyst position. Ms. Jimenez previously worked with the Board of Barbering and Cosmetology as a Program Technician II in the Licensing Unit. On March 27, 2023, interviews were conducted to fill the vacant Office Technician position which will provide technical and clerical support to the Enforcement and Licensing Programs. Board staff anticipate filling the position soon.

## C. CURES Update

The Controlled Substance Utilization Review and Evaluation System (CURES) fee will decrease from \$11 to \$9 annually for licensees expiring on and after July 1, 2023. The fee covers the reasonable regulatory costs of the Department of Justice for operating and maintaining CURES, a critical element in the state's effort to address the growing danger of opioid addiction stemming from prescription drug abuse.

## D. Outreach

On February 25, 2023, Board staff attended the California Academy of PAs (CAPA) conference in Napa. Additionally, staff is looking forward to attending the annual CAPA conference during Physician Assistant Week-October 5-8, 2023, in Anaheim. The Board is grateful for the opportunity provided to the Board by CAPA to attend these exceptional events.

Lead Licensing Analyst Julie Caldwell conducted two licensing presentations for physician assistant students at the Keck School of Medicine of the University of Southern California (USC) on January 30, 2023, and at the University of the Pacific on February 23, 2023.

Staff will be attending the Administrators in Medicine and Federation of State Medical Boards (FSMB) 111<sup>th</sup> Annual Meeting on May 3-5, 2023, in Minneapolis, MN. The FSMB is a national, non-profit organization that represents the 70-state medical and osteopathic boards, supporting them through education, assessment, research and advocacy while providing services and initiatives that promote patient safety, quality healthcare and regulatory best practices.

## E. Information Technology

On March 8, 2023, PAB published its first licensing video to assist applicants with a step-by-step tutorial through the initial application process: <https://youtu.be/K5EZtRpomLQ>. This video is available on YouTube, posted to the Board's website and shared on the Board's social media accounts. A special thank you to the staff at the Department of Consumer Affairs (DCA) Office of Public Affairs for their assistance, and to Trisha St. Clair for the voiceover.

Mr. Grant informed the Board that an interstate compact allows a license in one state to be used in another state and asked if this will be discussed at the FSMB meeting. Ms. Khan responded that it is on the agenda; however, the interstate compact is not being proposed or discussed by the Board.

No public comment.

## **8. Board Activity Reports**

### A. Licensing

#### Licensing Population by Type Report as of April 18, 2023:

Current Licenses: 16,576  
Current Inactive: 32  
Current Temporary Family Support: 1  
Military Active: 1  
Family Support Suspension: 1  
Delinquent: 2,545  
Cancelled: 4,704  
Retired: 159  
Deceased: 77  
Error: 2  
Deleted: 5

Ms. Caldwell stated the retired population is growing for the Board. When a licensee retires, they must be retiring from the practice all together, not just moving from California to another state.

#### Summary of Licensing Activity Report for January 1, 2023, to March 31, 2023:

Initial Applications received: 456  
Licenses issued: 405  
Licenses renewed: 2,091

#### Pending Application Workload Report as of April 18, 2023:

Ms. Caldwell stated the application age captures when an individual submits an application and payment. The desk age captures when the application is assigned to a staff member. Applications are not considered submitted unless they are paid for. The Board has made changes to the online application and asks if the applicant is submitting the payment the same day that they apply. This will eliminate any confusion on why an applicant did not receive their review within the 30-day window.

This report also breaks down applications that have been awaiting review for 0-30 days, 30-31 days, 60-61 days, and 91 days or more. The 91 days or more section does not reflect how long it is taking the licensing team to review the applications but indicates how long the application has been within the system. There are various reasons that can delay the issuance of a license.

Dr. Earley inquired why the Board has an option for the applicant to not pay the application fee. Ms. Caldwell explained that the applicant is advised in the

application instructions that payment is due at the time they apply; however, the system has allowed for the applicant to apply with or without payment. Therefore, the Board has changed the application to ask the applicant if they are planning to pay the application fee. If the applicant answers “no” to this question, the applicant will receive a message advising them that the application will not be processed and to consider applying when they are able to pay.

Dr. Earley stated that she feels the Board should not have this option and that the applicant should have to pay when they apply. Ms. Caldwell added that Ms. Khan and herself had discussed implementing a 30-day cancellation of the application if payment is not made. This is not currently set up but is being worked on with BreEZe.

Mr. Grant stated that students who are getting ready to graduate may be dealing with the financial strain that often comes with being a student and it may be beneficial to them to have the option to start the application process and pay later.

Dr. Earley inquired how much the application fee is, to which Ms. Caldwell answered that there is an \$200 initial licensing fee and an \$25 application fee.

#### Licensing Performance Measures Report for January 1, 2023, to March 31, 2023:

Ms. Caldwell stated that this report provides information on the Board’s target. This report shows that the licensing team is within the 30-day mark. Since the Board hired Ms. Jimenez, she has provided the Board with relief in processing applications.

Ms. Caldwell also updated the Board that as of April 19, 2023, licensees can now print their own pocket cards when logging into their personal BreEZe account. Also, the Board has not experienced any significant issues since discontinuing the issuance of the plastic pocket card on July 1, 2022. The Board has received some comments, stating that it was nice to receive a plastic card, but nothing that would indicate any undue hardship on the Board’s licensing population.

Mr. Armenta asked to clarify that there have been zero comments from the licensee population stating that not having the plastic pocket card is an impediment in the workplace. Ms. Caldwell responded that the Board has not had any comments that not having the card is causing an impediment but has had some comments from licensees stating that they prefer the plastic card and that it looks more professional; however, these comments are minimal.

Dr. Hawkins suggested the option of laminating the cards to extend the life or make it look more professional. Ms. Caldwell added that the Board has received feedback that licensees are laminating the cards.

Mr. Armenta shared that when the State Bar of California stopped producing the plastic cards, they were missed for one or two years and were not mentioned after that.

#### B. Complaints

Mr. Melendez reported the following complaint activity for the period of January 1, 2023, to March 31, 2023:

- Complaints Volume
  - Complaints received: 132
  - Convictions/Arrests Received: 8
  - Total Received: 140
  - Assigned to desk analyst (\*\*may include cases received in previous quarters): 136
  - Pending at intake: 0
- Complaints and Investigations
  - Complaints referred for investigation: 9
  - Complaints and investigations closed: 124
  - Complaints pending at desk analyst: 320
  - Investigations pending at field: 59
  - Average age of pending investigation: 338 days
  - Investigations over 8 months old: 45

Mr. Armenta stated that there are a few comments from external stakeholders who state that they don't want staff to dedicate so much time investigating complaints based on patients not having optimal outcomes. Mr. Armenta asked Mr. Melendez to share insight on what this might mean. Mr. Melendez stated that there are a series of complaints, but for example in a plastic surgery or dermatology case, where the patient feels that they did not receive the desired outcome; however, the patient signed consent forms that explained the risks.

Mr. Armenta thanked Mr. Melendez for providing insight on what was possibly meant by the external stakeholders' comment and verifying that the Board does see those kinds of complaints.

Dr. Kidd asked if some of the concerns related that the PA is obtaining the informed consent as opposed to the physician who is completing the surgery obtaining the informed consent. There could be an issue where patients could claim that they were informed, or not informed, to the consent process but typically, the individual who is responsible for the surgical outcome is the surgeon. This means the informed consent would need to be obtained by the surgeon as opposed to the PA. If there was a concern that the PA obtained the informed consent, then one can argue whether the patient was fully informed of the outcome.

Dr. Kidd asked if the Board is receiving complaints where the PAs are obtaining informed consent and therefore patients are saying that they were not fully informed of the risks, benefits, and alternatives of the procedure. Mr. Melendez answered that some patients stated that they felt that they might not have been fully informed; however, the Board verifies the medical records, and these cases are also reviewed by a medical consultant (MC).

Mr. Grant asked Mr. Melendez if he could elaborate about what happens during the time when the cases are pending for 320 days. Mr. Melendez stated that the Board receives the cases, the cases are reviewed, information is requested, and sent to an MC for review. The Board is still building the MC Program and currently has a total of nine MCs. As the Board receives more MCs in a variety of fields, the number of days will decrease.

Mr. Grant asked to clarify that the numbers of days pending at the desk analyst does not represent cases that are waiting for an analyst to view but are actively

being worked on. Mr. Melendez confirmed that this is correct. It means that an initial review is being conducted and information is being gathered; however, requesting information can cause a delay.

Dr. Earley noted that there is a decrease in the Board's complaints received and assigned to desk analyst; however, there is an increase in the average age of pending investigation and investigations over eight months. Dr. Earley asked Mr. Melendez to elaborate on these increased numbers. Mr. Melendez shared that some of these cases may be a criminal case and the Board has a pending disposition on the case. The case is left open until the disposition changes, then the Board will determine the next course of action.

Ms. Khan added that the last category is pending at the field, where the case is at the field and Mr. Melendez has referred the case to an investigator.

Mr. Grant thanks Mr. Melendez for his hard work.

### C. Discipline

Ms. Haydon reported the following discipline activity for the period of January 1, 2023, to March 31, 2023:

- Suspensions
  - Penal Code Section 23: 1
- Office of the Attorney General Transmittal
  - Cases initiated: 12
  - Cases pending: 45
  - Average age of pending cases: 357 days
- Formal Actions Filed/Withdrawn/Dismissed
  - Accusation and/or Petition to Revoke Probation Filed: 1
- Administrative Outcomes/Final Order
  - Probation: 4
  - Surrender: 2
  - Petition for Termination of Probation Granted: 1
- Citation and Fine
  - Issued: 2
  - Resolved/Closed: 2
  - Fines Issued: \$1,000
  - Fines Received: \$1,000

### D. Probation

Ms. Gerard reported the following probation activity for the period of January 1, 2023, to March 31, 2023:

Ms. Gerard stated in January, two licensees entered probation and one completed probation. In February, another licensee completed probation. For March, two licensees entered probation, one completed probation, and a licensee who was tolling began their PA practice again. March closed with 34 active probationers and 42 total probationers.

### E. Diversion

Ms. Gerard reported the following activity for the Diversion Program for the period of January 1, 2023, to March 31, 2023:

- Total Active Participants: 2

Mr. Armenta asked for confirmation that the Board has not had any new licensees enter the diversion program this year, Ms. Gerard responded that is correct. Ms. Gerard stated that she attends the monthly meetings of the diversion program with all the participating DCA boards. The diversion vendor is reporting low numbers with all the programs.

Dr. Earley asked if the vendor could explain why their numbers are low, and if this is because of COVID-19. Ms. Gerard stated that she believes the numbers were starting to decline before COVID-19 and the exact reason for the low numbers cannot be identified.

No public comment.

## **9. Department of Consumer Affairs – Director’s Update**

Judie Bucciarelli, Staff Services Manager from Board and Bureau Relations (BBR) at DCA thanked the Board for its time and provided the following department updates.

### A. DEI Update

Established last fall, DCA’s Diversity, Equity, and Inclusion (DEI) Steering Committee is composed of 12 executive leaders from the boards, bureaus, and department. The committee has been working on many items including updating the strategic planning process, training, and development of an informational DEI fact sheet.

Strategic Planning has been updated to embed DEI into the process, which includes a survey, a DEI section in the environmental scan, video messages, and a brief training video. DCA’s SOLID team will work with the board’s executive officer to develop or update the board’s strategic plan.

In addition, all DCA SOLID trainers will complete a 50-hour DEI training certification program through the University of Massachusetts. Training will also be available to all DCA staff and employees can access and register now for three DEI courses that will be available in June 2023.

DCA’s first DEI fact sheet has been released. It was developed as an informational tool and includes the Department’s three DEI initiatives, memorializes DCA services that support DEI efforts, and includes DEI terminology, as it applies to DCA.

### B. Board Member Training

There are two DCA-wide mandatory trainings for 2023, the Sexual Harassment Prevention training and the Information Security Awareness Fundamentals training. Both trainings are available in the Department’s Learning Management System (LMS). All DCA employees and appointees will need to complete the Sexual Harassment Prevention training this year. This training is required every odd-



numbered year and is online, self-paced and takes approximately two hours.

Board members with an assigned DCA email are required to complete Information Security Awareness Fundamentals training. This training addresses everyone's role in protecting DCA data and information. The training is online and required every year.

For more information, a mandatory training page has been created to help members identify, access, and track specified training. The page includes direct links to mandatory training as well as pertinent information and policies specific to these training courses. To access the training page, members can go to [www.dca.ca.gov](http://www.dca.ca.gov) and click on the DCA Board Member Resource Center page under Required Board Member Training.

Ms. Bucciarelli announced that the next Board Member Orientation Training (BMOT), will be held on June 20, 2023, in person in Sacramento, and again on October 10, 2023, at a location to be determined. Members can register for this training via LMS. As a reminder, Board members must complete BMOT within one year of their appointment or re-appointment

The Department and BBR would like to thank all of DCA's board members, executive officers and staff who helped the Department achieve compliance with filing this year's annual Form 700.

#### C. Bagley-Keene Open Meeting Act

Legislation passed last year amending provisions of the Bagley-Keene Open Meeting Act to extend the ability of state bodies, such as DCA's boards and bureaus, to conduct public meetings virtually through July 1, 2023. Absent the passing of new legislation to extend these provisions, DCA's boards and bureaus will not be allowed to conduct meetings virtually after July 1, 2023. DCA is aware of legislation recently introduced – SB 544 (Laird) – which removes certain teleconference requirements from the Open Meeting Act. However, this bill does not include an urgency clause and would not take effect until January 1, 2024. Therefore, boards and bureaus should be prepared to conduct public meetings in person in the interim, beginning July 1, 2023.

#### D. Federal Military License Portability Law

The new law took effect on January 5, 2023, and enables servicemembers and their spouses, who hold professional licenses in a different state to practice in California within the same professional discipline and at a similar scope of practice, if they are required to relocate to California due to their military orders. Since becoming aware of the new law, DCA has been collaborating with Agency on how best to implement it. DCA will share information as it becomes available. In the meantime, should boards receive an inquiry from a servicemember or spouse regarding this new law, please contact DCA Legal Affairs.

#### E. Annual Report

DCA submitted its 2021-22 Annual Report to the Legislature and the report is now available on the DCA website. The Annual Report includes a new design and

additional reporting metrics, such as military licensing data now required for all DCA boards and bureaus. DCA hopes that boards and bureaus will take time to review this impressive compilation of the valuable work of the boards and bureaus.

Dr. Earley inquired if all mandatory trainings have the same due dates, Ms. Bucciarelli responded that the training dates are scheduled by BBR and the two mentioned BMOT dates have been provided by DCA to share with the Board.

Dr. Earley followed up by asking if the mandatory trainings have expiration dates, Ms. Bucciarelli stated that she does not have that information, but she will find out and share it with Ms. Khan.

Dr. Kidd asked if he took a Sexual Harassment Prevention training at another institution would it count towards the mandatory training, Ms. Bucciarelli answered that it must be a DCA training.

Dr. Hawkins asked why Board members are required to take the defensive driver training, Ms. Bucciarelli answered that the purpose of this is for when employees are traveling, claiming mileage, and submitting travel claims.

No public comment.

## **10. Budget Update**

Suzanne Balkis, DCA Budget Analyst, reported the Board's fiscal year (FY) 2022-23 Fiscal Month (FM) 8 projection memo, fund condition and expenditure.

Ms. Balkis reported in FY 2022-23 the Board has a budget of \$3 million, \$59,000. The Board is projected to use 37% of its expenditure on Personal Services (PS) which includes salaries and benefits; 39.22% for Operating Expenses & Equipment (OE&E) which includes contracts, purchases, and travel; and 23% for Enforcement which is for the Office of Administration Hearings (OAH) and Attorney General (AG). The Board is estimated to have 0.78% in Reversion.

### Fund Condition Report

The fund condition report gives the Board a full year view of the post fund. For the 2021-22 actuals, the Board has a beginning balance of \$4.8 million, with the prior year (PY) adjustment of about \$197,000, giving the Board beginning balance of about \$5 million. The Board collected approximately \$2.5 million in revenue and transferred to the general fund (AB 84) of negative \$88,000, giving the Board a total expenditure of about \$3 million. This gives the Board a fund balance of about \$4.5 million which is about 17 months in reserve.

For the Board's current year (CY) 2022-23, which includes the FM8 projections, the Board has a beginning balance of about \$4.5 million, estimated revenue of \$2.7 million, and estimated expenditure of \$3.2 million. This gives the Board a fund balance of about \$4 million, which is about 14.8 months in reserve.

### Expenditure Projection Report

The Board has \$1.1 million in PS and about \$1.9 million in OE&E expenses, for a total of about \$3 million. This has created a savings of about \$24,000 or about

0.78%. Ms. Balkis stated that she has no concern for the fund for the current FY.

Dr. Earley asked since the Board was not meeting in person during the pandemic, is there a rough estimate on how much the Board saved during that time. Renee Milano, Budget Manager, stated the immediate numbers are not available currently, but it is something that can be provided to Ms. Khan later.

Mr. Armenta asked if other boards are completing a similar analysis to provide data on savings with virtual meetings, Ms. Milano answered that the budget team has had two boards request this information.

Mr. Armenta asked if DCA will be providing a report in the future that covers how much saving is to be had by holding virtual meetings. Ms. Milano responded that this is possible, and how the Bagley-Keene legislation goes through will impact when the budget team provide the report or when it would be more pertinent to start collecting and organizing the data.

Mr. Armenta stated that he encourages the budget team to provide the data, as it would seem to be beneficial to take advantage of leveraging the virtual technology to save money. Ms. Milano agrees and adds that having virtual meetings is a large benefit to all the programs.

No public comment.

## **11. Report on Medical Board of California Activities**

Dr. Hawkins, Vice President of the Medical Board of California (MBC), reported the MBC met virtually on February 9 and 10, 2023. Significant board activities include the following:

William Prasifka resigned from the Executive Director position effective at the end of December 2022. Deputy Director Reji Varghese led the staff leadership team after Mr. Prasifka's departure and was appointed as the interim executive director on February 17, 2023. The recruitment for the vacant executive director position is ongoing.

MBC leadership had its Sunset Hearing before the Business and Professions Committee on March 16, 2023 and is awaiting the outcome of the Legislature. MBC requested physician fee increase to improve its fiscal status.

The MBC's 2023 first quarter edition newsletter is now online at [www.mbc.ca.gov](http://www.mbc.ca.gov).

The Enforcement Monitor for MBC requested by DCA is pending.

MBC had an interim board meeting on March 23, 2023. This meeting went over the evaluation of MBC's position on bills. The next board quarterly meeting will be in person in Sacramento on May 18 and 19, 2023, the agenda has been finalized and is viewable on the website.

Dr. Earley asked Dr. Hawkins if he will be running for President of the MBC, Dr. Hawkins responded that the Board would have to wait and see.

No public comment.

## **12. Regulations – Update on Pending Regulatory Packages**

Ms. Dhillon provided the updates for the regulatory packages.

### 1. 16 CCR 1399.514, 1399.615 – SB 697: Renewal of License and Continuing Medical Education Required

The revised proposed regulatory language was approved and adopted by the Board at its November 8, 2021, meeting. Staff is currently working on initial documents to submit for initial review this calendar year.

### 2. 16 CCR 1399.502, 1399.540, 1399.541, 1399.545 – SB 697: SB 697 Implementation

Staff has currently finalized initial documents with regulations counsel and the Budget Office and has submitted for initial review to the Director's Office.

### 3. 16 CCR 1399.506, 1399.507, 1399.511, 1399.546 – SB 697: Application, Exam Scores, Addresses, & Recordkeeping

Agency approved this package on December 12, 2022, and it was filed with the Office of Administrative Law (OAL) on December 20, 2022. Regulations Counsel Karen Halbo and Ms. Dhillon are working with OAL staff to make any requested changes and to finalize this package.

### 4. 16 CCR 1399.515 – AB 2461: Retired Status to Include Fingerprint Requirement

This regulatory proposal is on hold for 2023 until the above packages are completed.

### 5. 16 CCR 1399.523 – SB 1441: Implement Uniform Standards Related to Substance Abusing Licensees and Update of Disciplinary Guidelines

This regulatory proposal is also on hold for 2023 until the above packages are completed.

### 6. 16 CCR 1399.XX – AB 107: Military Applicant Temporary Licensure

Staff is currently working on initial documents with regulations counsel and the Budget Office to submit for initial review in the next month.

No public comment.

## **13. Education/Workforce Development Advisory Committee: Update on Physician Assistant Education Programs and Applicants in California**

Mr. Grant reported that there is an increase in the number of PA programs nationwide to 303. California currently has 20 accredited programs, with three programs in development. With the current accredited programs, there are 941 PA graduates within California if all the seats in every program are full. When the three developing programs are running, the Board should have about 1,056 graduates per

year. It is important to note that individuals typically go into practice either where they are originally from, where they have family or where they train. If the Board can get more PAs to train in California, it will help the Board meet the workforce goal. There is an average of 47 students per program, which is right on par with the national average.

Mr. Grant addressed a question regarding diversity within the PA workforce that was asked at the prior Board meeting by Dr. Kidd. Mr. Grant stated that his research showed that diversity is an issue that the PA profession has struggled with. In 2022, researchers at the University of Texas Southwest published a study looking at diversity and students admitted to 139 PA programs between 2014 and 2018 using a system called IPEDS (Integrated Postsecondary Education Data System). They found that amongst PA programs within the United States, there is a big disparity in the number and proportion of racial and ethnic graduates. Of the 34,625 PA graduates, 2,207 were Hispanic and 1,220 or 3.5% were underrepresented minorities.

The conclusion was that many diverse graduates only came from a small number of top performing programs. When looking at the data, weakness in the study is shown. For example, some of the programs that were chosen as top performers, have a very low number of diverse graduates. The study broke the programs up into divisions and the whole division had low diversity. To use one example, in division six there were three programs identified as top performers and Hispanic graduates, however they graduated five Hispanic students in five years.

Division four, the second top performers for underrepresented minority graduates, only had five underrepresented minority graduates within five years. The Pacific division scored third best; however, they only included eight programs and this division generally has a higher-than-average diversity compared to other divisions in their study, making the Pacific division not score as well.

Another important factor to take into context, is that the study did not include the University of Pacific Physician Assistant Program where the average is a 43% graduation rate of underrepresented minority students in the last four years.

The last piece to look at within this study is that the statistics were compared to the population; however, there are a lot of confounding variables. This issue of diversity within the PA practice is a big focus of the professional association for PA programs, as well as the accrediting body who has added their standards that for a PA program to be accredited, the program must address DEI and admission throughout the program. The Board should expect to see much more changes on this issue moving forward.

Dr. Kidd asked if there are diversity standards for faculty, Mr. Grant stated that there are, and this was not included in the current report but can be included in the next board meeting.

Ms. Caldwell asked for guidance on individuals who are entering a program and they received knowledge that the program is going to be on probation. Ms. Caldwell asked what the best way would be to guide these individuals on their resources, the different accreditation statuses and when should students worry about them. Mr. Grant stated that the accreditation statuses are on the report. Ones reporting as

developing means the program is still coming together and not accredited. When there's provisional, there are three statuses of accreditation: provisional, continuing, and probation. Provisional programs are programs that are within the first five years of its operation. Continuing means that they've met all the accreditation standards and the program is beyond the first five years. Lastly, probation are programs that have fallen short on meeting some of the accreditation standards and the program is given a short time to correct. Probational programs are required to notify students who are applying. A key takeaway is that sometimes PA applicants will confuse provisional with probation. The school would be the best resource; however, if the student has any questions, they are welcome to reach out to the accrediting body as well.

Dr. Earley commented that the PA numbers have been increasing exponentially and these numbers show that the PA practice is outpacing the medical schools. Dr. Earley asked whether there is a cap on how many PA programs that the United States is looking to have or is it infinite. Mr. Grant answered that as far as he knows there is no limit; however, these conversations are ongoing all the time. There is no shortage of work in the PA field. The limitation on PA programs is clinical training sites and making sure that the programs are meeting the standards.

No public comment.

#### **14. Report by the Legislative Committee; Legislative Update**

Ms. Dhillon reported the following:

##### A. AB 883 (Mathis) Business licenses: United States Department of Defense SkillBridge Program

This bill requires a board to expedite, and authorize a board to assist in the initial licensure process for an applicant who is an active-duty member of a regular component of the Armed Forces of the United States enrolled in the United States Department of Defense (DOD) SkillBridge program or has served as an active-duty member of the Armed Forces of the United States and was honorably discharged. SkillBridge allows Service Members to gain civilian experience through specific industry training, apprenticeships or internships during the last 180 days of service.

This bill would require staff to update the Board's licensing process to ensure applicants who meet the DOD SkillBridge program criteria can get their license application expedited. Staff projects there will not be an increase in licensing workload related to the new provisions of this bill.

Mr. Grant stated that the only way for applicants to receive a license not only in California but in all states, is to take the Physician Assistant National Certifying Examination (PANCE) and attend an accredited PA program, making the SkillBridge program not applicable to the Board.

Ms. Dhillon stated that she believes that this bill does not bypass the PANCE exam requirement, but would be a way to expedite the application process. Mr. Grant stated that he agrees; however, because the only way to be licensed is to pass the Board exam, and the only way to pass the Board exam is to pass a 27-month long accredited PA program, which cannot be completed as part of the SkillBridge

program.

Dr. Hawkins asked to define expedite. Ms. Dhillon stated that the Board's licensing program averages 30 to 35 days to issue a license. Expedite means within that time frame, as it takes much longer to license for other boards and bureaus depending on the size of the entity. The Board would be able to fulfill the requirements if the bill is passed.

Dr. Hawkins stated that 30 days seems very fast; Ms. Dhillon added the Board has a great licensing team.

Ms. Khan added that the Board expedites applicants who state that they are an asylee or a refugee, as well as applicants who were honorably discharged. This bill would add to this list of applicants the Board could expedite.

Mr. Armenta asked for clarification that SkillBridge includes more disciplines than just PAs; it would be a wide approach to thousands of potential disciplines to get them licensure. Mr. Grant answered that this is correct.

Mr. Grant added that by the time an applicant applied for licensure they would have been well beyond the SkillBridge active-duty time.

The Board did not take a position on this bill.

#### B. AB 996 (Low) Department of Consumer Affairs: continuing education: conflict-of-interest policy.

This bill proposes that boards under DCA develop and maintain a conflict-of-interest policy that would discourage the qualification of any continuing education course if the provider of that course has an economic interest in a commercial product or enterprise directly or indirectly promoted in that course.

If this bill is passed staff may need to implement regulations in accordance with this bill.

Mr. Grant inquired if this bill applies to Board members, Ms. Dhillon stated that this bill applies to continuing education course providers. Any of the providers that the Board has that is deemed approved would be impacted by the bill. The Board would have to enforce some regulations regarding promotion or advertisement of one's personal business.

Mr. Grant stated that he is curious to see what will happen as the controlled substance education course, part of the Board's license renewal process, is delivered by a professional organization in the state; however, if there are other businesses offering this course, it makes one wonder how that works. As this is a continuing medical education (CME) requirement it can cause some issues.

Mr. Armenta clarified that when a continuing education provider is developing and maintaining a policy, it must do two things; the conflict-of-interest policy requires discouraging qualification of any course if the provider of the course has an economic interest in a commercial product directly or indirectly promoted within that course, and the conflict to be disclosed at the beginning of that course. If there is

disclosure, that is what matters.

Mr. Kanotz added an example for the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board, the CME courses that are put on by a specific manufacturer of a specific hearing aid. The idea being that courses should provide course content and not be along the lines of infomercials or providing specific information that just relates to one product. This bill isn't about who can and cannot teach a course but is specifically related to a product or enterprise that's being promoted.

Dr. Earley stated often when lectures are given, they will disclose who they are working with. Dr. Earley asked if this bill is asking for something more than that and whether the Board should put a survey together asking if there is any interest upfront or continue to disclose when starting the lecture. Mr. Kanotz answered that he does not think that this falls under the bill as it only applies if one is going to get up during a continuing education class and state that one is endorsing the service, or a business service that has to do with PA practice or this product and promote it.

Mr. Armenta stated that this bill places the onus on the provider to develop the conflict-of-interest policy and not on the Board. Mr. Kanotz responded by stating that the Board is the entity that is mentioned in Business and Professions Code section 101, to the extent that the Board approves courses or providers; there are some boards that do and some that do not. The Board would not be looking at individual courses but the approved providers.

Mr. Grant shared that the Board approves course providers for the controlled substance education course.

Ms. Khan added that there are two ways that licensees can comply with the Board; by maintaining 100 CME hours with the National Commission on Certification of PAs (NCCPA), or by completing 50 hours of CME requirements which must be approved by one of the Board's five course providers.

Mr. Armenta asked what happens if a PA violates the CME requirement, Mr. Kanotz responded that the Board has authority to disapprove a provider.

Dr. Earley asked if the Board needs a team to look more in depth at this process to make sure that the Board is providing the appropriate oversight. Ms. Dhillon responded that this is something that the Board can investigate; however, if the Board has the regulations in place, it might be sufficient.

Dr. Hawkins shared that he attended a meeting at USC and universally the speaker lists their conflict of interests.

M/ Jed Grant S/ Randy Hawkins to:

Watch AB 996.

Member	Yes	No	Abstain	Absent	Recusal
Charles Alexander	X				
Juan Armenta	X				
Jennifer Carlquist				X	



Sonya Earley	X				
Jed Grant	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Deborah Snow	X				

No public comment.

C. AB (McKinnor) 1028 Reporting of crimes: mandated reporters

The bill would require a health practitioner who suspects that a patient has suffered physical injury that is caused by domestic violence, to provide brief counseling, education, or other support, and a warm handoff, or referral to local and national domestic violence or sexual violence advocacy services. The bill would, on and after January 1, 2025, specify that a health practitioner is not civilly or criminally liable for any report made in good faith and in compliance with these provisions.

The Board would need to provide an update of mandated reporting information included on the Board’s website for licensees. This is something that can be done by staff and is supported by the Board’s current pro rata costs through DCA.

Mr. Grant expressed his concern regarding this bill, stating that having the protection of the Penal Code 11166 that states, mandated reporters must report abuse witnessed. This bill would remove that protection, making the care provider responsible to find someone who can assist the patient. As of now this all falls squarely on law enforcement allowing the care provider to assist other patients. Though law enforcement may have some issues, generally they are trustworthy and provide the care and assistance that is needed. Mr. Grant suggested that the Board oppose this bill as it will remove some of the protections and adds an additional burden for the healthcare provider.

Ms. Snow asked what the intent was behind the proposal of the bill. Ms. Dhillon responded that the concern was possibly removing the criminal or civil liability. Ms. Dhillon stated there was a similar bill that was brought up last year as well and this bill is consistent with that previous bill. As Ms. Dhillon recalls, she does not believe the previous bill was passed. Ms. Dhillon stated that she will investigate the intent of the bill and get back to the Board.

Mr. Armenta stated that according to the author of the legislative website, this bill’s intent is to promote health care. An example is, if one thinks that perhaps their spouse is going to get a call from law enforcement because of a head injury, individuals may be more reluctant to go get health care. Mr. Armenta stated that he opposes the bill for the reasons listed by Mr. Grant, but also because by giving discretion to the health care members, the bill places them in a trap. One could say after a survivor of spousal abuse is murdered, the health care provider did not exercise proper discretion and report the abuse and had one done so, the patient might still be alive. This bill places too much responsibility on the health care providers; the Board must protect the health care providers as well.

Dr. Hawkins stated that he feels that the author’s noted argument is a weak one and he agrees with what has been stated by Mr. Grant and Mr. Armenta.

Dr. Earley stated that she agrees as well.

M/ Jed Grant S/ Juan Armenta to:

Oppose AB 1028.

Member	Yes	No	Abstain	Absent	Recusal
Charles Alexander	X				
Juan Armenta	X				
Jennifer Carlquist				X	
Sonya Earley	X				
Jed Grant	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Deborah Snow	X				

No public comment.

D. AB 1070 (Low) Physician assistants: physician supervision: exceptions

Existing law prohibits a physician and surgeon from supervising more than four physician assistants at any one time. This bill would except from that prohibition the supervision of physician assistants performing home health evaluations to gather patient information and perform annual wellness visits, advanced assessments, or health evaluations.

Staff does not anticipate any fiscal impact as a result of this bill.

Mr. Grant stated that he personally does not see any issues in this bill; however, he understands the argument, that in an acute care setting and with ratios there, but in a home health setting where they're providing wellness visits and screening for problems. Though there are some home health settings where they adjust medications or change medications to keep patients out of the emergency departments. It is concerning if the bill excludes that capability, then the bill might be unintentionally limiting the capabilities of the PAs who are practicing in home health visits.

Mr. Armenta stated that the text of the bill states that the four-physician supervision does not apply if the PA is focused solely on performing in-home health evaluations to gather patient information and performing annual wellness visits or health evaluations that do not involve direct patient treatment or prescribing medication.

Dr. Hawkins stated that he does not have any issues with this bill.

Mr. Armenta suggested that the Board keep a neutral position.

E. AB 1707 (Pacheco) Health professionals and facilities: adverse actions based on another state's law

This bill would prohibit a healing arts board under DCA from denying an application for a license or imposing discipline upon a licensee on the basis of a civil judgment, criminal conviction, or disciplinary action in another state that is based on the

application of another state’s law that interferes with a person’s right to receive sensitive services, that would be lawful in this state. The bill would similarly prohibit a health facility from denying staff privileges to, removing from medical staff, or restricting the staff privileges of a licensed health professional on the basis of such a civil judgment, criminal conviction, or disciplinary action imposed by another state.

Staff does not anticipate any fiscal impact.

Mr. Armenta stated that he feels that the Board should support this bill. The Board should not be imposing any type of discipline or retribution on any health care professional that is providing services that are legal in California.

Dr. Hawkins stated that he agrees.

M/ Juan Armenta S/ Sonya Earley to:

Support AB 1707.

Member	Yes	No	Abstain	Absent	Recusal
Charles Alexander	X				
Juan Armenta	X				
Jennifer Carlquist				X	
Sonya Earley	X				
Jed Grant	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Deborah Snow	X				

No public comment.

F. SB 345 (Skinner) Health care services: legally protected health care activities

The bill would prohibit a board from denying an application for licensure or suspending, revoking, or otherwise imposing discipline on a licensed person because they were disciplined or convicted of an offense in another state if that disciplinary action was for providing a legally protected health care activity. The bill would further provide that the performance, recommendation, or provision of a legally protected health care activity by a health care practitioner acting within their scope of practice for a patient who resides in a state in which the performance, recommendation, or provision of that legally protected health care activity is illegal, does not, by itself, constitute professional misconduct, upon which discipline or other penalty may be taken.

The bill defines legally protected health care activity to mean specified acts including exercising rights related to reproductive health care services or gender affirming health care services.

Staff does not anticipate any fiscal impact as a result of this bill.

Mr. Armenta stated that this bill contains similar reasoning to the prior Assembly bill; however, this bill contains the Senate counterpart.

M/ Jed Grant S/ Diego Inzunza to:

Support SB 345.

Member	Yes	No	Abstain	Absent	Recusal
Charles Alexander	X				
Juan Armenta	X				
Jennifer Carlquist				X	
Sonya Earley	X				
Jed Grant	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Deborah Snow	X				

No public comment.

G. SB 372 (Menjuvar) Department of Consumer Affairs: licensee and registrant records: name and gender changes

This bill would require boards to update a licensee's records to include the licensee's updated legal name or gender upon receipt of government-issued documentation, that demonstrates a legal name or gender change for the licensee. The bill would also require the Board to remove the licensee's former name or gender from its online license verification system and treat this information as confidential. The bill also requires the Board to establish a process for providing a licensee's current name or enforcement action record linked to a former name upon receipt of a request that is related to an enforcement action against a licensee, and the request must be completed within 10 business days.

Staff does not expect a significant fiscal impact effectuated by this bill.

Dr. Hawkins asked if this bill allows a workaround for an individual who has been disciplined to change their name and therefore not be identified as a person who was previously disciplined by the Board. Ms. Dhillon responded that this bill allows a licensee to change their name or gender with the Board if they have done so legally. This bill also provides a way for a licensee to be looked up for enforcement purposes by the public even though they changed their legal name or gender.

Dr. Hawkins asked how the public would know which name to check, Ms. Dhillon responded the public can do so with the Board's online verification system or contact the Board.

Mr. Armenta stated that the process to request this information is an extra step, but it can be completed.

Ms. Snow asked when the public searches a PA's name on the Board's website, what would indicate that the PA had a previous name. Ms. Khan responded that currently if a PA has changed their name, the previous name will be listed underneath their updated name.

Mr. Armenta stated that from a website perspective, the writing should be simple enough. This may cross the line of confidentiality, but it should be simple enough to

say, "click here to see if the licensee had a former name," then the website can instruct the viewer to submit a Public Records Act request. Mr. Armenta suggests that the Board watches the bill.

Dr. Earley asked if this name change is similar to an individual changing their name due to marriage or if this is different. Ms. Dhillon stated that it is part of it but that she thinks the issue of concern is victims of domestic violence, for example, who would not want their former names to be listed on the website for their personal protection.

Mr. Armenta stated that's why there is a 10-day period in which the compliance shall be implemented in compliance with Public Records Act. Then Board has the discretion under the Public Records Act to respond if that information is protected.

Mr. Kanotz stated that the Department is looking at this bill and there is a requirement that enforcement documents be placed on the internet. In terms of public protection, how would members of the public find out about discipline and other matters from when the licensee had a different name.

Mr. Grant expressed concern with the bill from a public protection standpoint. Currently, the public has the ability to find out whether their provider has had action taken against their license; however, if the licensee changes their name and the public does not have a way to know that, during that time some serious action could have been taken against their license. Mr. Grant suggested one way to change this is to redact the name entirely and just have the public search by license number.

Dr. Hawkins asked Mr. Armenta if he still feels that the Board should take a neutral stance. Mr. Armenta responded that he is persuaded by Mr. Grant's concerns and agrees that the public needs to know if there is discipline history on an individual's license.

Mr. Armenta inquired if this bill would apply to every DCA entities, Ms. Dhillon responded yes.

Dr. Earley stated that it would be helpful if there could be a medium where the Board can give that information because the public should be able to go into the system and check and see if somebody has had any discipline. Perhaps the website can state "no discipline" and if there is any additional information that the public would want, they must fill out a form.

Mr. Armenta stated that being licensed is also a privilege, and one of those privileges of responsibility is to make one's record available to the public.

M/ Jed Grant S/ Juan Armenta to:

Oppose SB 372.

Member	Yes	No	Abstain	Absent	Recusal
Charles Alexander	X				
Juan Armenta	X				
Jennifer Carlquist				X	
Sonya Earley	X				
Jed Grant	X				

Diego Inzunza	X				
Vasco Deon Kidd	X				
Deborah Snow	X				

No public comment.

H. SB 385 (Atkins) Physician Assistant Practice Act: abortion by aspiration: training

This bill specifies that the required training, necessary for a PA to receive authority from their supervising physician and surgeon to perform abortion by aspiration techniques, must include a clinical and didactic component. This bill also clarifies that a PA who completes requisite training and achieves clinical competency is authorized to perform abortions by aspirations techniques without the personal presence of a supervising physician and surgeon, unless specified by their practice agreement, and that the procedure must be practiced consistent with applicable standards of care, within the PA’s clinical and professional educational and training, and pursuant to their practice agreement. This bill specifies that nothing in these provisions is to be interpreted as authorizing a PA to perform abortion by aspiration techniques after the first trimester of pregnancy.

Staff does not anticipate any fiscal impact as a result of this bill.

Mr. Grant stated that, in principle he is opposed to the bill because it’s completely backwards from everything the Board completed with SB 697. The Board removed itself from mandating what PAs can and can’t do and said that is a decision that the Board wants a PA and the supervising physician to decide.

Dr. Earley stated that this may be the wrong forum because when one is thinking about clinical and didactic, that gets into the educational process and the Board does not mandate that students deliver babies, let alone provide abortions.

Dr. Kidd stated that he agrees with Mr. Grant's statement that this should be an issue the PA and their supervising physician determine at the practice level.

Mr. Armenta quoted Senator Atkins who introduced this bill, “this year as we watch other states continue to erode access to abortion, it is clear that we need to do everything that we can to increase the number of trained providers available to California, for those who need to come here for reproductive health care.” However, along the lines of what has been said, the Board has already done this, with the supervisorial.

Dr. Earley added another point that the Board had previously discussed is how difficult it can be to get clinical sites. Obstetrician is one of those sites that is heavily coveted because there are not enough of them, then to also require that the PAs must mandate to go through this type of training would be a difficult goal to achieve.

Ms. Khan added that after she had a conversation with the DCA Legislative Affairs unit, where she concluded that this seems like a cleanup bill. SB 1375 updated the training for nurse practitioners but not PAs, and this bill was introduced to make sure that the standards matched.

Mr. Armenta responded that the Board already cleaned up SB 1375 with the regulation package.

M/ Jed Grant S/ Sonya Earley to:

Oppose SB 385.

Member	Yes	No	Abstain	Absent	Recusal
Charles Alexander	X				
Juan Armenta	X				
Jennifer Carlquist				X	
Sonya Earley	X				
Jed Grant	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Deborah Snow	X				

No public comment.

#### I. SB 544 (Laird) Bagley-Keene Open Meeting Act: teleconferencing

The bill would require a state body to provide a means by which the public may remotely hear audio of the meeting, remotely observe the meeting, or attend the meeting by providing on the posted agenda a teleconference telephone number, an internet website or other online platform, and a physical address for at least one site, including, if available, access equivalent to the access for a member of the state body participating remotely. This bill would essentially implement a procedure for receiving and swiftly resolving requests for a reasonable modification or accommodation from individuals with disabilities. This bill was brought to codify the Governor's Executive Order allowing state boards and commissions the opportunity to continue holding virtual meetings without being required to list the private addresses of each remote member or providing public access to private locations. This bill promotes equity and public participation by removing barriers to Californians that experience challenges attending physical meetings.

Staff does not anticipate any fiscal impact as a result of this bill.

Dr. Hawkins asked if the main item that this bill asks is that the Board provide a site for individuals to attend the meetings, Ms. Dhillon stated that is correct, and the Board would have to have a single staff member available at that location.

Mr. Armenta inquired if the Board is holding the meetings remotely, how would that not have a fiscal impact. Ms. Dhillon responded that the Board would allocate one staff member be available if it is requested that accommodations must be provided.

Mr. Armenta asked about travel costs. Ms. Khan stated that this bill states that Board staff can meet virtually and would eliminate travel. Previously, the Board was required to make the meeting address accessible to the public and this requirement would no longer be needed through this bill.

Mr. Armenta asked if this bill is only removing the address component, Ms. Dhillon responded yes, this bill removes the address requirement as well as providing

accessibility for people who cannot access the meeting.

Mr. Kanotz added that the Board can do virtual meetings now; however, each location of every Board member would have to be made public and at a public location in which any member of the public can arrive and attend. This bill would remove that requirement, which is really the same effect as the statute that is currently in place from the pandemic.

Dr. Hawkins stated that he thought that the Board would be required to meet in person when instead the Board would need to make accommodations and make sure that individuals who want to view and hear the meeting are provided a place where they can do so. Mr. Kanotz confirmed that it is both, if staff would like to have a virtual meeting it can be done under the bill; however, there must be one physical location where the public can attend if they wish to.

Dr. Hawkins stated it is hard to believe that there would not be a fiscal impact if the Board must have a physical location to the public for viewing and hearing the meeting that happens to be virtual or in person elsewhere. Ms. Khan responded that the Board would set up a place for the public to meet at the DCA's hearing room and this is part of the pro rata that the Board is paying DCA.

Dr. Earley asked to confirm that the Bagley-Keene Open Meeting Act mentioned that the Board must have a physical location identified for the meeting. With the pandemic, the Board moved away from this with new provisions and now that the pandemic is over, the Board must go back to the original Bagley-Keene Open Meeting Act. This bill would modify the Bagley-Keene Open Meeting Act that the Board does not have to provide the meeting location but if it does, only one member of staff is present. Ms. Dhillon confirmed this.

Mr. Kanotz added that if the bill becomes law, no Board member would be required to be present at the physical location, but the public does need a location to participate if the Board has a board meeting and is not going to give notice of all the locations.

Mr. Armenta stated that on July 1, 2023, the authorization to do teleconference expired. Mr. Kanotz stated as of this date, the Board no longer has the authorization to waive the requirement to provide the Board members' physical locations where the public can attend.

Mr. Armenta inquired if the Board is still permitted to have virtual meetings after July 1, 2023, Mr. Kanotz responded yes, as the Board always has. However, as the Board gets larger it becomes more difficult to hold a teleconference. Another issue that can occur is, if there are nine teleconference locations and one location becomes unavailable, the meeting would then need to be canceled. Mr. Armenta asked if this bill would fix that issue, Mr. Kanotz responds that it does.

Dr. Earley stated that before the pandemic the Board did not have Zoom and took part in traditional teleconferencing, but now the Board has Zoom the Board has more flexibility.

M/ Jed Grant S/ Sonya Earley to:



Support SB 544.

Member	Yes	No	Abstain	Absent	Recusal
Charles Alexander	X				
Juan Armenta	X				
Jennifer Carlquist				X	
Sonya Earley	X				
Jed Grant	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Deborah Snow	X				

No public comment.

J. SB 802 (Roth) Licensing boards: disqualifications from licensure: criminal conviction

Existing law requires a board to notify an applicant in writing if a board decides to deny an application for licensure based solely or in part on the applicant's conviction history. SB 802 would require that such written notification be carried out within 30 days of that decision.

Staff does not anticipate any fiscal impact as a result of this bill.

Dr. Hawkins asked what is new about this bill, Ms. Dhillon responded the requirement that the notification be made within 30 days.

Mr. Armenta asked if this was unreasonable, Ms. Dhillon stated no.

Dr. Earley asked what the requirement was before, Ms. Dhillon stated that she does not believe that there was a requirement for a timeline of when the Board needed to notify the applicant.

Dr. Hawkins asked where in the process may this occur, as for the MBC it is a high priority to let an applicant know that they've been denied. Ms. Khan stated that when an applicant is denied it is done through the licensing process.

Mr. Armenta asked if previously there was notification when an applicant was denied due to conviction history. Ms. Khan stated that the Board would notify the applicant immediately and inform them of their rights for a hearing, there just wasn't a timeline set.

Mr. Armenta confirmed that the only item this bill is adding is the basis for the 30-days' notice.

Dr. Kidd added that he does not see any risk to this bill, placing a timestamp on when the Board has to notify the applicant makes sense.

M/ Vasco Deon Kidd S/ Juan Armenta to:

Support SB 802.

Member	Yes	No	Abstain	Absent	Recusal
Charles Alexander	X				
Juan Armenta	X				
Jennifer Carlquist				X	
Sonya Earley	X				
Jed Grant	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Deborah Snow	X				

Mr. Grant asked Ms. Dhillon when the Board takes a position on a bill whether she sends a letter to the authors, Ms. Dhillon confirmed that she does. Mr. Grant followed up by asking when she sends the letter does she include the reasons for each position, Ms. Dhillon responded in the affirmative.

No public comment.

### **15. Agenda Items for Next Meeting**

1) Discussion on the change in title of the profession from physician assistant to physician associate.

No public comment.

### **16. CLOSED SESSION**

Pursuant to Section 11126(c)(3) of the Government Code, the Board will deliberate and take action on disciplinary matters.

### **RETURN TO OPEN SESSION**

### **17. STRATEGIC PLANNING SESSION**

The Board met with members of the DCA's SOLID team to develop the Board's strategic plan for 2024-2028.

No public comment.

### **18. Adjournment**

With no further business the meeting was adjourned at 2:56 p.m.

Minutes do not reflect the order in which agenda items were presented at the Board meeting.