



**LEGISLATIVE COMMITTEE
AUGUST 19, 2015**

SUBJECT: BOARD OF PODIATRIC MEDICINE (“BPM”) 2015/16 SUNSET REVIEW REPORT

ACTION: CONSIDER AND DISCUSS DRAFT SUNSET REVIEW REPORT COVERING SECTION 11

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RECOMMENDATION

Discuss and consider the draft sections of the 2015/2016 Sunset Review Report.

ISSUE

The BPM Sunset Review Report for 2015/2016 must be completed and submitted to the Joint Legislative Sunset Review Committee (“JLSRC”) by December 1, 2015.

DISCUSSION

BPM is scheduled for automatic repeal on January 1, 2017, unless the Legislature extends the date for repeal before conclusion of the 2016 calendar year through the “Sunset Review” process.

The Sunset Review process was created in 1994. The process was an effort by both chambers of the State Legislature (Joint Committee) with oversight responsibilities over licensing entities with regulatory responsibilities over specific professions and occupations to ensure the proper execution, efficiency, effectiveness and protection against incompetent practice or illegal activities of state licensed professionals. The Joint Committee prepared and forwarded a series of inquiries the committee specifically seeks addressed in a Sunset Review Report. There are a total of 62 questions to be addressed by the Board. In addition, BPM must respond to sections querying Board action and response to prior sunset issues and any new issues facing the Board.

Draft responses to sections of the report falling under Legislative Committee jurisdiction have been prepared and are included for review and consideration by committee. The present report contains sections that remain to be address but represents a preliminary draft response to the followings sections:

1. Section 11

Guidance and recommendations for sections yet to be completed in addition to revisions and/or further suggestions by committee will be incorporated appropriately and forwarded for final BPM Board review at its regularly scheduled meeting. Once approved by the Board, the Sunset Review Report will be finalized and submitted to the Joint Committee on or before the requested December 1st due date.

NEXT STEPS

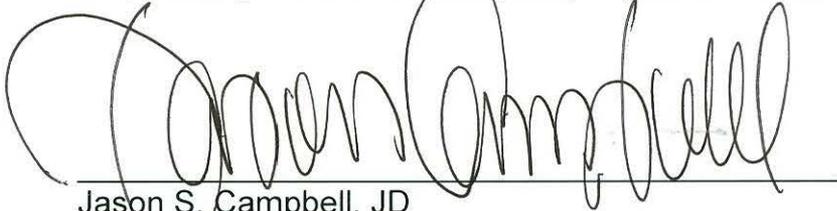
Staff will continue refining and drafting responses to questions as directed which are segregated into appropriate sections and reviewed by the respective BPM committees with subject matter jurisdiction over the particular subject areas.

Committee recommendations will in turn continue to be incorporated and submitted to the full board for consideration, discussion, input and/or approval at its regularly scheduled meeting in September.

ATTACHMENTS

A. Draft Sunset Review Report Section: 11

Prepared by: Jason S. Campbell, JD, Executive Officer

A large, stylized handwritten signature in black ink, appearing to read 'Jason S. Campbell', is written over a horizontal line.

Jason S. Campbell, JD
Executive Officer

**Board of Podiatric Medicine
Legislative Committee
BACKGROUND INFORMATION AND OVERVIEW OF THE CURRENT
REGULATORY PROGRAM
As of July 31, 2015**

**Section 11
New Issues**

This is the opportunity for the board to inform the Committees of solutions to issues identified by the board and by the Committees. Provide a short discussion of each of the outstanding issues, and the board's recommendation for action that could be taken by the board, by DCA or by the Legislature to resolve these issues (i.e., policy direction, budget changes, legislative changes) for each of the following:

- 1. Issues that were raised under prior Sunset Review that have not been addressed.**
- 2. New issues that are identified by the board in this report.**
- 3. New issues not previously discussed in this report.**
- 4. New issues raised by the Committees.**

Elimination of Reference to Ankle Certification

"Data analysis in progress"

[...]

Removal of Limitation on Post-Graduate Medical Education

All post-graduates in California residencies must obtain full podiatric medical licensure within three years of starting their residency programs in California else all privileges and exemptions pertaining to their resident's licenses will cease. Medical education is the very foundation upon which high-quality health care is built. Medical educational limitations of any duration are detrimental and preclude advancement of evolving knowledge and science in the state. This is particularly true in California in two important respects.

First, BPM requires all licensed DPMs to demonstrate compliance with Board-mandated continuing competency requirements. The current California restriction on post-graduate podiatric medical education can possibly remove one of the available pathways for podiatric physicians to demonstrate continuing competency. BPM is the only doctor-licensing board in the country to implement such a program. However, once a physician's mandated post-graduate educational limit is reached, a pathway for demonstrating continuing competency through successful completion of an

approved residency program would be essentially eliminated as an option. The educational limitation is the only statutory educational prohibition known to exist in the country.

Second, the state's leading practitioners are ostensibly precluded from advancing in their field through limitations on participation in formal programmatic options available for the acquisition of advanced medical knowledge. [...]

[...]

Increase to BPM Schedule of User Service Fees

"Fee Audit in progress"

[...]