



**Osteopathic Medical Board of California  
Teleconference Minutes  
May 11, 2023**

**MEMBERS  
PRESENT:**

Cyrus Buhari, D.O., *President*  
Andrew Moreno, *Secretary Treasurer*  
Gor Adamyan  
Claudia Mercado  
Hemesh Patel, D.O.  
Denise Pines, MBA

**MEMBERS  
ABSENT:**

Elizabeth Jensen, D.O., *Vice President*  
Michael Kim, D.O.

**STAFF  
PRESENT:**

Michael Kanotz, Esq., Legal Counsel, DCA  
Kayla Watson, Esq., Legal Counsel, DCA  
Erika Calderon, Executive Director  
Machiko Chong, SSM I, Licensing Program Unit  
Terri Thorfinnson, SSM I, Administrative Program Unit  
Andrea Geremia, Lead Enforcement Analyst  
Robin Matson  
Steve Ly  
David Moran

**MEMBERS OF  
THE AUDIENCE:**

Humayun Chaudhry, D.O., MACP, *Federation of State Medical Board (FSMB)*  
Holly Macriss, *Executive Director, Osteopathic Physician and Surgeons of California (OPSC)*  
Maria Ibarra-Navarrette, *Consumer Watch Dogs*  
Michelle Monserrat-Ramos, *Consumer Watch Dogs*  
Monique Himes, *Consumer Watch Dogs*  
Tracy Dominguez, *Consumer Watch Dogs*  
Xavier De Leon, *Consumer Watch Dogs*  
Renee Milano, DCA Budgets  
Judie Bucciarelli, *DCA Board and Bureau Relations*  
David J. Reynen, DrPH, MA, MPPA, MPH, CPH, *California Department of Public Health (CDPH)*  
Susan Lauren  
Denise Tugade, *SEIU United Healthcare Workers West*

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### Agenda Item 1 Call to Order

The Board Meeting of the Osteopathic Medical Board of California (OMBC) was called to order by President, Cyrus Buhari, D.O. at 10:05 a.m.

### Agenda Item 2 Roll Call/Establishment of a Quorum

Machiko Chong, *SSM I*, called roll and determined a quorum was present. Due notice was provided to all interested parties.

### Agenda Item 3 Reading of the Board's Mission Statement

In Dr. Jensen's absence, Erika Calderon, *Executive Director*, read the Board's mission statement.

### Agenda Item 4 Public Comment for Items not on the Agenda

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

Dr. Buhari requested public comment. No comments were received.

### Agenda Item 5 Review and Possible Approval of Minutes

Dr. Buhari called for a motion for approval of the meeting minutes of the January 2023, Teleconference Board Meetings.

**Motion to approve the January 2023, Teleconference Board Meeting minutes with no corrections.**

**Motion – Dr. Patel Second – Ms. Pines**

Dr. Buhari requested public comment. No comments were received.

- Roll Call Vote was taken
  - **Aye** – Mr. Adamyan, Dr. Buhari, Ms. Mercado, Mr. Moreno, Dr. Patel, Ms. Pines
  - **Nay** – None
  - **Abstention** – None
  - **Absent** – Dr. Jensen, Dr. Kim
  
- Motion carried to approve the January 2023, Teleconference Board Meeting minutes with no corrections.

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### **Agenda Item 6      President's Report – *Cyrus Buhari, D.O.***

Dr. Buhari reported that he recently returned from the Federation of State Medical Board's (FSMB) Annual Meeting. FSMB President, Dr. Chaudhry, will be making a presentation at this meeting today. Erika Calderon, Machiko Chong, and Dr. Buhari went to the Osteopathic Physicians and Surgeons of California (OPSC) meeting in San Diego earlier this year. They did a lot of advertising and work for the Board while at the meeting.

Dr. Buhari requested public comment. No comments were received.

### **Agenda Item 7      Federation of State Medical Board (FSMB) Interstate Licensing Compact – *Humayun Chaudhry, D.O., MACP, FSMB President***

Dr. Humayun Chaudhry provided background on the FSMB and the Interstate Medical Licensing Compact (IMLC). A lot of growth has happened over the past 10 years. IMLC is an expedited pathway to enable qualified physicians to become licensed to practice medicine. Only a few states haven't joined the IMLC, current 37 states. Missouri and Hawaii will likely be the next to join, bringing the total to 39 states. Qualified physicians can be licensed in all 39 states instantly, if wanted, in person or telemedicine. An estimated 83 percent of licensed physicians in the US are eligible for an interstate license. The criteria are very stringent. They do not need to maintain their specialty certification once licensed but must do so at the time of application. The Coalition for Physician Accountability, made up of CEOs and chairs from national licensing organizations, is largely supportive of the compact. The IMLC decided that a fee of \$700 should be charged at time of application. \$300 of that is paid to the state of principal license (SPL) and \$400 is paid to the IMLC. The physician also pays the fee for each state's license. IMLC Commission is the governing body that oversees this compact. They are permitted by law to accept federal and private grants. FSMB has, at the request of the IMLC Commission, applied for these grants and has received money. They gave it to the commission to support their work. As of May 1, 2023, 63,000 licenses have been issued through this expedited pathway. 2,400 licenses are issued each month through this pathway. November 7-8, 2022, IMLC Commission's annual meeting included a rulemaking hearing to change one of its statutes relating to physician discipline. Originally, under this compact, when a complaint is filed on a physician who has multiple licenses through this licensing compact, the information will be shared and if the state of principal licensure takes disciplinary action, all of the other states would automatically take the same action. At the meeting, by vote, the provision was amended to now make it permissive for other states to take the same action. They are not obligated to do so, but they can. Allows for some flexibility for compact member states. There is also a relatively new Physician Assistant (PA) licensing compact, 1 state (Utah) has adopted so far.

Dr. Buhari requested comment from members of the Board.

Comments were made by Board member Mercado.

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Comments were made by Board member Dr. Patel.

Comments were made by Executive Director Calderon.

Dr. Buhari requested public comment. No comments were received.

Before moving to Agenda Item 8, Dr. Buhari acknowledged Board member Mercado will be leaving the Board and presented her with a certificate. Board member Mercado gave comment on her service with the Board. Board members thanked her for service to the Board.

Dr. Buhari requested public comment. No comments were received.

### **Agenda Item 8      Executive Director’s Report – *Erika Calderon, Executive Director***

- A. Administrative Services, including personnel, and technology updates**
- B. Update on The Federation of State Medical Boards (FSMB)**
- C. Update on The Controlled Substances Utilization Review and Evaluation System (CURES)**

Executive Director, Erika Calderon, provided updates on the Board’s facilities, Board’s Administrative Services program, including personnel (see [Agenda Item 8A](#)) and technology, the Federation of State Medical Boards (FSBM) and attendance at the FSMB meeting, attendance at the American Associate of Osteopathic Examiners (AAOE) annual meeting, and The Controlled Substances Utilization Review and Evaluation System (CURES) fee decrease, which was included in the Board meeting material [here](#).

Executive Director Calderon and Dr. Buhari requested comment from members of the Board.

Comments were made by Board member Mercado.

Comment was made by Dr. Buhari.

Dr. Buhari requested public comment. No comments were received.

### **Agenda Item 9      Update on the Osteopathic Physician and Surgeons of California Association (OPSC) – *Holly Macriss, Executive Director***

Holly Macriss, Executive Director of the Osteopathic Physician and Surgeons of California (OPSC) provided updates on the association. She appreciated Erika attending the annual conference in San Diego last February. AB765 is very important to OPSC because the word osteopath has been removed from the bill. It allowed 30 internationally trained osteopaths who are not licensed or overseen in the state of CA or federally to continue to

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practice manipulative medicine again without a license. She wants to work together with OMBC to see what can be done next year. OPSC Board is meeting next Wednesday where they will be addressing a lot of what OMBC is addressing with bills here today. She will keep Erika and Terri updated and informed. She appreciates Erika creating a great working relationship with OPSC.

Dr. Buhari requested comment from the members.

Ms. Mercado asked, what is your thought about the compact?

Ms. Macriss replied that she is a little concerned about the board certification process and how that evaporates after they've had their license for a year (or 18 mo. whatever it was). She reached out to the AOA about this. Still not quite sure but she would like to understand more.

Ms. Mercado asked, what OPSC is doing to promote the profession?

Ms. Macriss replied OPSC works closely with colleges for the recruiting process. Looking to take the CME meetings on the road. OPSC has discussed partnering with the Board on this, Erika is going to start coming out to the college orientations for outreach.

Ms. Mercado asked, do you guys work with the Governor's office, or what legislative body are you working with to address the need for more D.O.'s in the state of California?

Ms. Macriss replied, we are starting to work with a lobbyist who is connected in the area, and he is bringing us forward. The CA Medical Association is also reaching out a bit more to include us in the process.

Dr. Buhari requested public comment. No comments were received.

### LUNCH BREAK

Upon return from the lunch break Machiko Chong, *SSM I*, called roll and determined a quorum was present.

#### **Agenda Item 10      Licensing Program Summary, including licensing unit updates, and statistics – *Machiko Chong, Licensing Program Manager***

Machiko Chong, Licensing Program Manager, provided licensing program summary, including licensing unit updates and statistics, which can be found in the Board meeting material [here](#).

Dr. Buhari asked for member comment regarding the licensing update.

Dr. Patel asked if physicians could upload their CMEs to the repository.

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Machiko Chong replied that it's currently just for the initial licensing process, however, it can be expanded later on to include CME's.

Ms. Mercado asked, does the system allow the staff to take a look at documents first and verify documents at a later time?

Machiko Chong replied, that is the outcome desired. Right now, anyone can access this database electronically. With the new database, it will require that the entities themselves subscribe to the database, so we know it is coming from the primary source. This saves about 4 weeks' time.

Dr. Buhari requested public comment.

Holly Macriss commented that OPSC is going to start sending a CME spreadsheet from their conferences to OMBC, so they have a bigger database to see who is submitting.

Erika Calderon pointed out that we do have a regulatory packet for CME self-certification in play and that will save a lot of time for license renewals because they do their own certification.

Dr. Buhari requested additional public comment. No comments were received.

### **Agenda Item 11      Administrative Services Program Summary, including licensing unit updates, and statistics – Terri Thorfinnson, Administrative Services Program Manager**

Terri Thorfinnson, Administrative Services Program Manager, provided an update on the Administrative Services Program, including licensing unit updates, and statistics, which were included in the Board Meeting material [here](#), and [here](#).

Terri Thorfinnson requested questions from members of the Board.

A question was asked by Board member Mercado.

Dr. Buhari requested comment from members of the Board. No comments were received.

Dr. Buhari requested public comment. No comments were received.

### **Agenda Item 12      Enforcement Program Summary, including enforcement unit updates, and statistics – Erika Calderon, Executive Director**

Executive Director, Erika Calderon, provided an update on the Board's Enforcement Program, including enforcement unit updates and statistics, which was included in the Board meeting material [here](#), and [here](#).

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Dr. Buhari requested comment from members of the Board.

Ms. Mercado asked which unit sent us their employees to help out. She wants to thank them.

Erika Calderon replied it was the Division of Investigations Health Quality Enforcement Unit (DOI).

Ms. Mercado asked if we have a Spanish translator available.

Erika Calderon replied that we have to go through the DCA translation services with a certified translator for that, but we do have staff that know Spanish. Forms have to be officially translated.

Dr. Buhari requested public comment. No comments were received.

### **Agenda Item 13      Probation Program Summary, including updates, and statistics – *Andrea Geremia, Lead Enforcement Analyst***

Andrea Geremia, Lead Enforcement Analyst, introduced herself to the Board and provided updates and statistics on the Board's probation program, which was included in the Board Meeting material [here](#).

Dr. Buhari requested comment from members of the Board.

Ms. Mercado asked what Maximus does and what committee was attended.

Erika Calderon replied that it is the Maximus Diversion Evaluation Committee. They meet with their applicants on a quarterly basis to monitor their probationary terms to ensure they are compliant with their contract.

Dr. Buhari requested public comment. No comments were received.

### **Agenda Item 14      Discussion and Possible Action on legislative proposals – *Terri Thorfinnson, Administrative Services Program Manager***

#### **A. Licensing Proposals:**

- Extend the Postgraduate Training License to 36 months
- Provide Residents Additional Time to Pass Final Examination
- Extend deadline for Out of State Residents Enrolled in a California Residency Training Program to Obtain their Physician and Surgeon from 90 days to 6 months.

#### **B. Enforcement Proposals:**

- Establish a Fee for Disciplined Licensees Seeking to Modify or Terminate Probation or to Reinstate Their License.

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- Change the Evidentiary Standard to Preponderance of the Evidence.
- Enhance Medical Record Inspection Authority.
- Pausing the Statute of Limitations for Subpoena Enforcement.
- Mandate Additional Reports to the Board Regarding Physician Misconduct.
- Increase Wait Times for Disciplined Licensees Seeking to Modify or Terminate Probation or to Reinstate their License.
- Addressing Licensees Who Ask Patients to Rescind a Medical Records Release.
- Add Deadline to Participate in an Investigatory Interview.
- Require Earlier Exchange of Expert Testimony Information.
- Timely Access to Pharmacy Records.
- Require Patient Records be Retained a Minimum of Seven Years

Terri Thorfinnson, Administrative Services Program Manager, gave an overview of possible action on licensing legislative proposals, which was included in the Board Meeting material [here](#).

Michael Kanotz, legal counsel, provided the Board with an overview of the options the Board may take regarding legislative action. Noting that the Board cannot support legislation of another board that is not yet in print or before the Board.

Dr. Buhari requested comment from members of the Board.

Ms. Mercado asked, did you find any tools to make sure that no matter what happens (natural disaster, etc.), people have the time to complete these timeline requirements?

Ms. Thorfinnson replied, yes, we can look into extending it to both in-state and out-of-state. That would be an easy change to make it in-state and out.

Dr. Buhari and Michael Kanotz, legal counsel, discussed options as to how the Board may move forward with the legislative proposals at this meeting. Michael Kanotz clarified that the Board may direct staff to draft a legislative proposal for the Board's consideration, with the actual legislative language included. Ms. Thorfinnson clarified that of the proposals the first two are from the Medical Board of California, the third is from staff of this Board. Dr. Buhari, Executive Director Erika Calderon, and Ms. Thorfinnson further discussed options as to how the Board may move forward with the legislative proposals to establish Board positions. Dr. Buhari suggests adding teleconference meeting in June for update on these legislative proposals.

Terri Thorfinnson, Administrative Services Program Manager, gave an overview of possible action on enforcement legislative proposals, which was included in the Board Meeting material [here](#).

Board members Mercado and Pines provided comment. Executive Director Calderon provided comment. Dr. Buhari requested any further comment from Board members. No further comments.



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Dr. Buhari requested public comment.

Maria Ibarra Navarrete: I'm Maria Ibarra Navarrete. I'm from San Jose. I volunteer with consumer watchdog. My brother died tragically from medical negligence his doctor committed a medication error which led to his death. The medical facility nor the doctor never reported the never event to me which means they never reported it to you. They are required to report a never event. I fully support your legislative proposal to change evidentiary standard to preponderance of the evidence. I agree with the board staff that the current burden of proof is too high to protect public safety. I also agree that holding a professional license is not an individual right and that the current standard of proof is too high. 44 states use the preponderance of evidence standard. It is time for the board to change the evidentiary standard to make the processes fair for the families as well as the licensees. I also fully support to add or amend the statute to require an organization that employs licensees to report to the board any employment related discipline imposed due to a medical disciplinary cost or reason and to require any organization that contracts with licenses for physician and surgeon services to report to the board when a license is dismissed for serviced or the contract is terminated, the board must have this information available to protect us. Therefore, you need to take it a step further and post when an 805 report has been received on a license on their physician profile so families have this information as well. Policies should be adopted. We are requesting that you initiate a complaint interview before you dismiss a complaint. You need to make the enforcement process fair for both families and doctors. The processes with only be fair if the complainant or the family member is able to provide input before the complaint is dismissed. One of the problems with the enforcement process is the lack of communication with family member. I understand the medical board is working on a complaint notification system. You need to implement one as well. Thank you so much.

Monique Heinz: I'm Monique Heinz. I'm from Arvin and a volunteer with consumer watchdog. My grandson Malachi died tragically from medical negligence. His doctor ignored his mother's pleas for help. She didn't just seek his help once, she went to him multiple times and he was the last doctor that could have saved her life after hospitalization. He didn't causing my grandson Malachi to die 18 hours following a postmortem c section. I fully support some of your legislative proposals, but I have to state some facts here. Before you can think of adopting legislative priorities you really need to talk about following your own rules and guidelines. One, exception to the statute of limitations for minor children. You're denying my grandson Malachi his complaint the right to the exception to the statute. You closed his complaint. Actually, two complaints. If you don't know your own rules, let me explain them to you. If an alleged act or omission involves a minor, the second year SOL period or the 10 year statue does not begin until they reach the age of majority. My grandson will never reach the age of majority. He died at 18 hours old. So, follow your own guidelines and reopen my grandson's compliant and grant him the right to have his death investigated. Do not deny babies rights. I also fully support to add or amend the statue to require the licensees that receive employment related discipline due to a medical disciplinary cause that the disciplinary action must be reported to the board but must also be reported on the physician profile. Just like we are

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asking MBC to post 805 reports of the loss of hospital privileges on the physician's profile, we are asking you to do the same. Policies you should be adopting, we are requesting that you initiate a complaint interview before you dismiss the complaint. You need to make the enforcement process fair for both families and doctor. The process will only be fair if the family member is able to provide input before the complaint is dismissed. Thank you.

Tracy Dominguez: Hi I'm Tracy Dominguez and I am from Bakersfield and I am a volunteer with consumer watchdog also. My daughter and her infant son both died from medical negligence. You have no idea what it takes to file complaints and fight every step of the way with your enforcement staff. To do this job, to review these complaints, and to move them in investigation, it's a nightmare. It is emotionally and physically exhausting. It is like experiencing their death all over again because it is a death of their rights. Although I fully support your legislation proposal relating to the 805 reports, and the need to require the hospitals and institutions must report the disciplinary actions against a doctor. You must also post disciplinary actions on the physician's profile when it comes to the loss of hospital privileges. Although these issues are important to me for personal reasons, I completely agree with my fellow advocates that you are not following your own guidelines and proceeding that you must do this first. You know and I know that this board is required to prioritize your complaints so that all death complaints are referred to an investigation. You know and I know you are not doing this and it's not happening. I know this because your prior executive director told me personally that he would accept my grandson's complaint if I would write to him stating that I wanted all new staff, a new DAG, a new set of eyes on his complaint in his case. He made this promise to me without telling me that my grandson's complaint did not move for three years. Had you followed your own complaint guidelines my grandson's complaint would have gone to an investigation, but it didn't. How many babies did you denied an investigation? Thank you.

Xavier de Leon: My name is Xavier from Bakersfield. I'm a volunteer with consumer watchdog. I would just like to emphasize again that you guys aren't following your own guidelines and procedures. You guys are denying babies rights. Adults have the 7-year SOL, but minor children have an exception where the SOL does not go into effect until they reach the age of 18 years old. You guys have denied by son this, and he was only here for 18 hours so he won't even be able to make it to 18 years of age. You also denied an 8-year-old little girl for the same reason. Can you please reopen my sons complaint and grant him the investigation that he deserves. Secondly, the DCA complaint prioritization guidelines that you're require to follow. Death complaints need to have an investigation, which you guys aren't doing, my son's case sat in your guys' lap for 3 years. That's 3 years just of nothing. No justice for my son. We are here on these meetings fighting for their voice. My son was a human being. He wasn't a fetus even though he only lived 18 hours. His life matters just like everyone else's on this phone call so please reopen his complaint and move his complaint forward with the investigation as it is required by the board. Thank you.

Michelle Monserrate Ramos: I'm Michelle Monserrate Ramos and I am with consumer watchdog. Some of the proposals you have listed in your report are the same proposals

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that we advocated for and supported in MBC meetings. We fully support changing the burden of proof to preponderance of evidence, as 44 other states already have in place. In many of the MBC complaint closure letters, it states that the case was closed because the burden of proof was too high to meet. As you mentioned in your meeting materials, we have to place a focus on public safety. There is at least one physician who has multiple open complaints in your enforcement process right now that at one time had 6, possibly 7, open complaints against his license. If you have 6-7 open complaints against a license at one time, that should signal a problem to you. If changes the burden of proof will move these complaints along and save some lives in the process, then you need to make this legislative policy a priority. We also support additional reports to the board regarding physician misconduct. This is truly a concern if we do not know physician if misconduct is being reported to you. There have been licensees who have lost hospital privileges at multiple hospitals and their patients had no right to know this. We support the addition of any organization that employs a doctor to report to the board any related discipline due to medical related issues. We also call on the board to post when an 805 report has been received linked to patient care on the physician profile to provide this information to the public as well. Such as loss of hospital privileges. If a hospital or medical institution has lost faith in a physician to a point where they do not trust them to care for their patients, then that is information the public should have the right to know. Lastly, I completely agree with my team that this board is currently not following its own guidelines and procedures. Under the laws relating to the practice of osteopathic medicine, you are required to follow the DCA complaint prioritization system that would require you to forward all death complaints and serious bodily injury complaints to investigation and you are not doing so. Also, we know that you are denying babies and minor children the exception to the statute of limitations for minor children. We are putting this on the record that this board is not following Business & Professions code 2230.5(d). If you as a board does not know this, you do now. Now we need you to take action and call for a review of why your board staff is not does follow this prioritization and why this board is also not adhering to Business & Professions code 2230.5(d). Thank you.

### **Agenda Item 15      Legislation Report – Terri Thorfinnson, Administrative Services Program Manager**

#### **A. Discussion and Possible Action on proposed legislation**

- a. **SB 544** (Laird) Open Meetings
- b. **AB 1707** (Pacheco) Reproductive Health Adverse Actions Out of State
- c. **AB 1369** (Bauer-Kahan) Telemedicine Out of State License Exemption
- d. **AB 765** (Wood) Physicians and Surgeons Title

#### **B. 2023 Informational Bill “Watch” List**

- a. **AB 242** (wood) Critical Access Hospital Physicians
- b. **AB 834** (Irwin) Physicians and Surgeons Partnerships
- c. **AB 1028** (McKinnor) Mandatory Reporting for Abuse
- d. **AB 1130** (Berman) Substance Abuse
- e. **AB 1741** (Waldron) Clinical Lab Personnel
- f. **SB 345** (Skinner) Revise “Unborn” Statutory Reference

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- g. **SB 357** (Portantino) DMV: Physician Reporting Patient Impairment
- h. **SB 481** (Niello) Physician and Surgeon Specialty Reporting
- i. **AB 1751** (Gipson) Opioid Prescriptions Patient Discussion and Alternatives
- j. **AB 1731**(Santiago)CURES database: buprenorphine Reporting Exemption E.R.
- k. **AB 1094** (Wicks) Drug Testing Pregnant Women: Consent
- l. **AB 1021**(Wicks) Controlled Substances Federal Rescheduling (Cannabis)
- m. **AB 816** (Haney) Minor’s Consent to Buprenorphine Treatment
- n. **AB 269** (Berman) COVID Testing and Dispensing Sites
- o. **AB 883** (Mathis) Expedite Military License Application: Defense SkillBridge program
- p. **AB 1055** (Bains)Create Allied Behavior Health Board and Licensed Alcohol Drug Counselor License
- q. **SB 372** (Menjivar) Former Names and Gender Removal
- r. **SB 373** (Menjivar) Address of Record Publishing
- s. **SB 802** (Roth) Criminal Convictions Denial of Application 30-day Notice

Ms. Thorfinnson briefly went through the legislative bills that pertained to the osteopathic profession and noted the bills that could have a possible fiscal impact on the Board.

### **SB 544 (Laird) Open Meetings**

Ms. Thorfinnson noted that this bill serves Board members because of the convenience of not having to post your virtual location, and the public because it better facilitates public participation; it’s easier for the public to attend virtually than in person. She also notes that this bill does not have a sunset. She recommends supporting this bill.

Dr. Buhari called for a motion to support **SB 544** (Laird) Open Meetings.

### **Motion to support SB 544 (Laird) Open Meetings.**

**Motion – Dr. Buhari Second – Ms. Pines**

Dr. Buhari requested comments from Board members.

Board member Mercado made a comment.

Dr. Buhari requested public comment. No comments were received.

- Roll Call Vote was taken
  - **Aye** – Mr. Adamyan, Dr. Buhari, Ms. Mercado, Mr. Moreno, Dr. Patel, Ms. Pines
  - **Nay** – None

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- **Abstention** – None
  - **Absent** – Dr. Jensen, Dr. Kim
- Motion carried to support SB 544 (Laird) Open Meetings.

### AB 1707 (Pacheco) Reproductive Health Adverse Actions Out of State

Ms. Thorfinnson noted that this is in response to the Supreme Court overturning Roe v Wade in the Dobbs case. She recommends supporting this bill.

Dr. Buhari requested comments from Board members.

Board member Mercado made a comment. Legal counsel Michael Kanotz made a comment.

Dr. Buhari called for a motion to support **AB 1707** (Pacheco) Reproductive Health Adverse Actions Out of State.

#### **Motion to support AB 1707 (Pacheco) Reproductive Health Adverse Actions Out of State.**

**Motion** – Dr. Buhari **Second** – Ms. Pines

Dr. Buhari requested public comment. No comments were received.

- Roll Call Vote was taken
  - **Aye** – Mr. Adamyan, Dr. Buhari, Ms. Mercado, Mr. Moreno, Dr. Patel, Ms. Pines
  - **Nay** – None
  - **Abstention** – None
  - **Absent** – Dr. Jensen, Dr. Kim
- Motion carried to support AB 1707 (Pacheco) Reproductive Health Adverse Actions Out of State.

### SB 345 (Skinner) Revise “Unborn” Statutory Reference

Ms. Thorfinnson stated that this is a companion bill built for the Board. This will try to provide a shield if the executive director is subpoenaed (for records, etc.) for something that is illegal in another state but is otherwise legal in California. She recommends supporting this bill.

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Executive Director Caldron noted that this bill was initially listed under the bills provided as informational only “watch list” as there was some confusion regarding the Board’s ability to take action on the item.

Dr. Buhari requested comments from Board members. No comments were received.

Dr. Buhari called for a motion to support **SB 345** (Skinner) Revise “Unborn” Statutory Reference.

### **Motion to support SB 345 (Skinner) Revise “Unborn” Statutory Reference.**

**Motion** – Dr. Buhari **Second** – Ms. Mercado

Dr. Buhari requested public comment. No comments were received.

- Roll Call Vote was taken
  - **Aye** – Mr. Adamyan, Dr. Buhari, Ms. Mercado, Mr. Moreno, Dr. Patel, Ms. Pines
  - **Nay** – None
  - **Abstention** – None
  - **Absent** – Dr. Jensen, Dr. Kim
- Motion carried to support SB 345 (Skinner) Revise “Unborn” Statutory Reference.

### **AB 1369 (Bauer-Kahan) Telemedicine Out of State License Exemption**

Ms. Thorfinnson noted that this bill amends BPC 2052 by adding a section to the scope of practice. The new section, BPC 2252.5, is adding a scope exemption and an exemption from the requirement that, to practice medicine in California, one must be licensed in California. Californian patients are left unprotected by this bill, and she recommends opposing.

Dr. Buhari called for a motion to oppose **AB 1369** (Bauer-Kahan) Telemedicine Out of State License Exemption.

### **Motion to oppose AB 1369 (Bauer-Kahan) Telemedicine Out of State License Exemption.**

**Motion** – Ms. Mercado **Second** – Ms. Pines

Dr. Buhari requested public comment. No comments were received.

- Roll Call Vote was taken
  - **Aye** – Mr. Adamyan, Dr. Buhari, Ms. Mercado, Mr. Moreno, Dr. Patel, Ms. Pines

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- **Nay** – None
  - **Abstention** – None
  - **Absent** – Dr. Jensen, Dr. Kim
- Motion carried to oppose AB 1369 (Bauer-Kahan) Telemedicine Out of State License Exemption.

### AB 765 (Wood) Physicians and Surgeons Title

Ms. Thorfinnson noted that this bill started out with the intent to clarify that osteopath is a real title and should be title-protected. Removing the word osteopath would create confusion. She recommends opposing the bill unless amended.

Questions were asked by Board member Mercado. Executive Director Calderon made comment. Dr. Buhari made comment.

Dr. Buhari called for a motion to oppose **AB 765 (Wood) Physicians and Surgeons Title** unless amended.

**Motion to oppose AB 765 (Wood) Physicians and Surgeons Title unless amended.**

**Motion** – Dr. Buhari **Second** – Mr. Adamyan

Dr. Buhari requested public comment. No comments were received.

- Roll Call Vote was taken
  - **Aye** – Mr. Adamyan, Dr. Buhari, Ms. Mercado, Mr. Moreno, Dr. Patel, Ms. Pines
  - **Nay** – None
  - **Abstention** – None
  - **Absent** – Dr. Jensen, Dr. Kim
- Motion carried to oppose AB 765 (Wood) Physicians and Surgeons Title unless amended.

Ms. Thorfinnson directed Board members to informational bills list in meeting materials that may impact Board.

Dr. Buhari requested comment from Board members.

Dr. Buhari requested public comment. No comments were received.

**Agenda Item 16      Intergovernmental Relations Reports and Administrative Services Update**

## Board Meeting Minutes – May 11, 2023

### **A. DCA Update – Judie Bucciarelli, SSM I, Board and Bureau Relations, DCA**

### **B. Budget Update – Renee Milano, Budget Office, DCA**

#### **a. Budget Update**

Judie Bucciarelli, Staff Services Manager I with Board and Bureau Relations, provided a DCA update to the Board, including: DCA's printing services, which has been experiencing delays due to technical difficulties. The Diversion Equity and Inclusion (DEI) steering committee, which is comprised of twelve executive leaders from DCA Boards, Bureaus, and departments, were chosen to develop the Board's strategic plan. Access to Solid training courses has been increased. There are two DCA-wide mandatory trainings for 2023 on sexual harassment prevention and information security awareness. The next board member orientation training will be held on June 20th. Remind to submit travel reimbursements for this fiscal year no later than 5 pm June 8th. DCA will not be able to hold teleconference meetings after July 1, 2023, under the current Bagley Keene act. On January 1, 2023, a new federal portability law took effect that enables service members and their spouses who hold professional licenses in a different state to practice medicine in California if they are required to relocate due to their military order. Contact legal affairs with questions. DCA submitted its annual report to the legislature.

Dr. Buhari requested comment from members of the Board.

Claudia Mercado requested more information on the new federal law regarding service members.

Ms. Bucciarelli advised that if the executive director were to receive any questions, she advises to reach out to legal affairs.

Ms. Calderon stated that DCA is looking at how to keep track of these individuals. Discussion is in the preliminary stages.

Dr. Buhari requested public comment. No comments were received.

### **BREAK**

Upon return from the lunch break Machiko Chong, SSM I, called roll and determined a quorum was present.

Renee Milano, Manager with DCA's Budget Office whom oversees the Osteopathic Medical Board, provided an update on the Board's budget, which was included in the Board meeting material [here](#).

Dr. Buhari requested comment from the members.

Comments were made by Board members Mercado and Pines.

Dr. Buhari requested public comment. No comments were received.



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### **Agenda Item 17 Discussion on Black Maternal Health in California – Denise Pines, MBA, OMBC Board Member & David J. Reynen, DrPH, MA, MPPA, MPH, CPH, CDPH**

Board member Pines presented a short clip from a 90-minute film she produced entitled Birthing Justice, which aired across the country on PBS. Ms. Pines gave background on her reason for creating social justice films. She is trying to make this film mandatory for medical students.

David J. Reynen, DrPH, gave a presentation on Maternal Mortality and Morbidity, which can be found [here](#), as it relates to California.

Mr. Reynen and Board member Pines answered questions from Board members Mercado and Dr. Buhari and Executive Director Calderon.

Dr. Buhari requested public comment.

Public comments were made by Denise Tugade with SEIU United Healthcare Workers West, Monique Himes with Consumer Watch Dogs, Maria Ibarra-Navarrette with Consumer Watch Dogs, Tracy Dominguez with Consumer Watch Dogs, Michelle Monserrat-Ramos with Consumer Watch Dogs, and Xavier De Leon with Consumer Watch Dogs.

### **Agenda Item 18 Future Meeting Dates**

Board members and staff discussed future meeting dates.

- June 2023 – *Teleconference (TBD)*
- Thursday, August 17, 2023 @ 10:00 am – *Pomona, CA*
- Thursday, December 7, 2023 @ 10:00 am – *Teleconference*
- Thursday, January 18, 2024 @ 10:00 am – *Sacramento, CA*
- Thursday, May 16, 2024 @ 10:00 am – *Tentative location*

Dr. Buhari requested comment from the members.

Comments were made by Board members Pines and Mercado, Executive Director Calderon, and Ms. Thorfinnson.

Dr. Buhari requested public comment. No comments were received.

### **Agenda Item 19 Adjournment**

There being no further business or public comment, Dr. Buhari adjourned the meeting at 5:19 p.m.