

Exhibit

A

BPM MISSION

The mission of the Board of Podiatric Medicine is to ensure protection of consumers under the laws of California through the setting and enforcement of contemporary standards and the provision of accurate and timely information that promotes sound consumer decision-making.

Approved March 3, 2006



DCA Director and Board/Committee
Communication Session
NOTES

Tuesday, September 14,, 2010
9:00 a.m. – 10:00 a.m.
Conference Call



DCA Attendees:

Kimberly Kirchmeyer, Paul Riches, Pam Wortman, Doreathea Johnson, Cindy Kanemoto, Jennifer Willis,
Suzanne Larsen, & Erica Cano

Boards and Committees (Board/Committee President/Chair) attendees:

Robert Brewer, Renne Lonner, Dr. Bruce Witcher, Michelle Hurlbutt, Barbara Yaroslavsky, Dr. David Field,
Mary Evert, Dr. Lee Goldstein, Dr. Geraldine O'Shea, Dr. Sara Takii, Steven Klompus, Dr. Karen Wrubel, Larry
Renner, Lisa O'Connor, John Vertido

Budget Update – Pam Wortman

- As of today there is still no budget in place.
- 30 different BCP's for the 2011-2012 Fiscal Year were submitted to State and Consumer Services Agency. Out of these 30, only 10 were sent forward to the Department of Finance.
- Agency was looking at everyone's fund condition very critically.
- DCA was allowed to continue going forward with Office of Administrative Hearing expenses and Office of Attorney General expenses as stated as stated in the budget bill language
- Licensing & Job Creation Proposal will be submitted as a Spring Finance Letter

Hiring Freeze – Pam Wortman

- Effective August 31, 2010 the Governor implemented a hiring freeze
- Any offers made and accepted on 8/30 or prior were honored.
- The hiring freeze applies to any hires outside of state service, between state departments, temporary help, students, retired annuitants, appointments, etc.
- Lateral transfers within a department are still permitted
- Along with the hiring freeze, the Governor also implemented an overtime freeze.
- In very limited circumstances a hiring freeze exemption and overtime exemption may be submitted to the Governor. Requests must be first submitted to Chief Deputy Director Bill. If approved, the request will then be submitted to Agency for review. If approved by Agency, the request will be submitted through the Cabinet Office to the Governor for an exemption from this directive.

Recognition of Specialty Boards – Kimberly Kirchmeyer

- DCA's Legislative and Policy Review Office drafted a document for recognition of specialty boards.

Public Records Act / Freedom Information Act – Doreathea Johnson

- A policy on access to public records will be sent out.
- It is important to remember the Freedom Information Act does not apply to state records. Only the Public Records Act applies to state records.
- DCA's Legal Affairs Office will be providing training on responding to Public Record Act requests in late October or early November.

Meeting Protocols – Doreathea Johnson

- DCA's Legal Affairs office drafted a Board meeting protocols document and it will be sent out to everyone.

Maximus Drug Testing – Paul Riches

- The drug testing done through Maximus was being done incorrectly. The "cutoff" (detection) levels used were higher than those specified in the contract.
- Seven boards were affected by this. These boards are conducting individual case reviews.
- The vendors have done blanket testing free of charge to the participants and to the boards.
- The Department is encouraging **all** boards that require drug testing of licensees on probation to confirm the use of cutoff levels consistent with their contract. If the board has no contract they should use the cutoff levels specified in the Maximus contract.
- Any board that does not have a contract to conduct drug testing should use the department-wide contract.
- The Department is continuing to gather information on these issues.

Action Items

- DCA will follow up with DPA regarding Board of Vocational Nursing and Psychiatric Technicians' package
- Transfers policy to be sent out to EO's by DCA's Office of Human Resources
- DCA's Legal Affairs Office will provide a Board meeting protocols document
- DCA sent out the Public Records Act Policy to all EO's and Board Presidents / Chairs on 9/14.

HEALTH QUALITY ENFORCEMENT SECTION STATEWIDE ROSTER

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VACANT

Exhibit B



KAREN L. WRUBEL, D.P.M., *President*
ALEIDA GERENA-RIOS, M.B.A.

RAYMOND K. CHENG, A.I.A.
JAMES J. LONGOBARDI, D.P.M.

KRISTINA M. DIXON, M.B.A.
NEIL B. MANSDORF, D. P. M.

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4 **California Board of Podiatric Medicine**
5 **Public Board Meeting Minutes**
6 **Sacramento, California**
7 **July 26, 2010**
8

9
10 A public meeting of the California Board of Podiatric Medicine (BPM) was held July 26, 2010
11 in the Room 113 of the State Capitol Building, Sacramento, CA.
12

13 Due notice had been sent to all known interested parties.
14

15
16 **1. Call to order/Member roll call**
17

18 President Wrubel called the meeting to order at 1:30 PM.
19

20 A quorum was established with the following Members present:
21

22 Karen L. Wrubel, DPM
23 Raymond K. Cheng, AIA
24 Kristina M. Dixon, MBA
25 James J. Longobardi, DPM
26 Neil B. Mansdorf, DPM
27

28 **2. DCA Director's report**
29

30 The Honorable Brian Stiger, the Governor's Director of the Department of Consumer Affairs,
31 commented on the Board of Podiatric Medicine's leadership with its Continuing Competence
32 program and support of the Department's bill SB 1111, Consumer Health Protection
33 Enforcement Act.
34

35 Mr. Stiger urged that boards remove artificial barriers in an effort towards licesning reform,
36 and that this could include expansions of scope of practice.
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38 He was joined by Ms. April Alameda of his office and Mr. Ryan Arnold from the
39 Department's Legislative Office.
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3. Additional public comment

Rosielyn Pulmano, the Consultant of the Senate Business and Professions Committee, also addressed the Board about SB 1111, sunset legislation, and other matters relating to consumer protection law enforcement.

4. President's report

Dr. Longobardi moved and Dr. Mansdorf seconded a motion approving the February 18 minutes, which passed 5-0.

5. Annual evaluation of the executive officer

Pursuant to Government Code Section 11126(a)(1), the Board went into Closed Session at 3:00 PM and evaluated the executive officer. It returned to Open Session at 3:50 PM and reported on the action taken approving the incumbent's performance.

6. Adjournment

Upon completing its agenda and acting on all action items, the Board adjourned at 4:05 PM.

Submitted to the Board for approval October 15, 2010.

APPROVED:

.....
President
Board of Podiatric Medicine

Exhibit C

STRATEGIC THINKING

BPM STAFF NOTES

1. 2011 will be time to revise BPM Strategic Plan
2. A new Governor will bring change and new directions
3. BPM will enter a Sunset Review cycle
4. BPM's missions set in law
5. Existing BPM Strategic Plan needs update, but is strong
6. Key elements are essential to maintain and enhance, and should be carried forward
7. Collaborate with others providing leadership from State government, schools and associations
8. Maintain focus on statutory roles of licensing and enforcement, for which BPM is staffed
9. Maintain clear vision and purpose

September 30, 2010



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STRATEGIC PLAN

2008-10

Adopted June 6, 2008

OUR MISSION

The mission of the Board of Podiatric Medicine is to ensure protection of consumers under the laws of California through the setting and enforcement of contemporary standards and the provision of accurate and timely information that promotes sound consumer decision-making.

OUR VISION

The Board's public policy leadership will enhance continuing competence standards, informed consumer choice, and open access to high-quality foot and ankle care.

OUR VALUES

BPM values . . .

- representing the public
- responsiveness to consumers and licensees
- public access to information, assistance and service
- integrity and competence in serving the public
- collaboration with other organizations
- proactive approaches that prevent patient harm

GOALS AND OBJECTIVES

GOAL 1. *Maintain excellence of service within current resources.*

Objectives:

1.1 Continue operations without backlogs.

Major activities:

- Manage licensing and enforcement programs to stay current daily without additional staff
- Support licensing and enforcement coordinators as chief program officers of Board
- Keep focused on core functions of licensing and enforcement

1.2 Maintain the issuance of licenses the same day all requirements met.

Major activities:

- Maintain close communication with applicants
- Pursue housekeeping amendments to Regulations for clarity
- Sponsor primary source verification legislation and enforce it

1.3 Keep expediting investigation of consumer complaints and prosecution of open cases.

Major activities:

- Support Enforcement Coordinator
- Achieve Staff Manager promotion recognizing breadth of responsibility
- Continue monitoring enforcement matrix reports on case processing timeframes

1.4 Maintain quality probation monitoring.

Major activities:

- Continue retired annuitant program
- Assess alternatives for cost and effectiveness
- Insure Board's final orders are effectively enforced

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1.5 Maintain national leadership in Continuing Competence program.

Major activities:

- As the only doctor-licensing program in the nation implementing this long-recommended reform in the organized medicine literature, do it well
- Support the Licensing Coordinator, recognizing her critical core contributions
- Monitor the longitudinal decline in consumer complaints and respond appropriately to opportunities to serve as ambassadors for preventing patient harm rather than responding to it once harm has been done

1.6 Continue licensure of all residents and annual review and approval of schools and graduate medical education programs.

Major activities:

- Maintain the Residency License requirement ever minimizing the occasional incidents of unlicensed residency practice that disserve all involved
- Seek sunseting of the four-year cap on graduate medical training
- Consider whether school and residency approvals should be nationalized now or in the future, or if California’s program should be maintained

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3 GOAL 2. *Maintain credibility and respect of BPM's integrity.*

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5 Objectives:

- 6
7 2.1 Continue the public-service ethic so many have contributed to over succeeding decades, realizing
8 BPM as an institution is of great importance to patients and the profession.
9

10 Major activities:

- 11
12 • Emphasize the statutory mission
13 • Support Board development and the Members' importance as a Board
14 • Promote the goals and objectives of the Board
15

- 16 2.2 Remain open, candid and responsive.
17

18 Major activities:

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20 • Maintain unspotted positive press coverage
21 • Build on confidence from profession to enhance consumer outreach
22 • Support Departmental programs
23

- 24 2.3 Represent the public
25

26 Major activities:

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28 • Maintain BPM culture that licensee and lay Board Members are equal
29 • Maintain BPM culture that licensee and lay Board Members have same statutory role
30 • Maintain BPM culture that licensee and lay Board Members all represent the public at large
31

- 32 2.4 Maintain good government values
33

34 Major activities:

- 35
36 • Reflect well on California State government
37 • Focus on the positive aspects and developments
38 • Take opportunities as they present themselves to advance public policy
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GOAL 3. *Work collaboratively with other organizations.*

Objectives:

3.1 Utilize Departmental services and follow its lead.

Major activities:

- Fine tune Applicant Tracking System (ATS)
- Implement i-Licensing in 2009 for online credit card transactions
- Distribute orthotics brochure and Departmental press release
- Pursue Spanish language brochure on diabetic foot care
- Participate in annual DCA Board and Bureau Conferences

3.2 Maintain liaison with California Podiatric Medical Association.

Major activities:

- Maintain good liaison with CPMA Board
- Continue participation at House of Delegates
- Continue exhibiting at Western Podiatric Medical Congress

3.3 Continue involvement with Federation of Podiatric Medical Boards.

Major activities:

- Seek continuation of a California representative on FPMB Board
- Maintain dues and attendance at FPMB Annual Meeting
- Support updates to Model Law as indicated, e.g., equivalent exams

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GOAL 4. *Remove barriers to podiatric medical care.*

Objectives:

4.1 Consider sponsoring reciprocity statute (facilitating alternative exams).

Major activities:

- Develop options, pros & cons for Board vote
- Liaison with organized podiatric medicine, Department and Legislature
- Facilitate easier movement of California licensees to other States and reciprocity of qualified out-of-State licensees in California

4.2 Support Legislative consideration of full FPMB *Model Law* scope of practice for benefit of Californians.

Major activities:

- Coordinate with CPMA in five-year follow-up to AB 932 of 2004
- Support efficient delivery of high quality care in all California health facilities
- Work with the profession as it develops its evolution, standards and direction for the future

4.3 Support inclusion in State’s publicly-supported health science teaching centers.

Major activities:

- Support Western University initiatives
- Encourage CPMA’s participation in coalitions for UC-Merced and UC-Riverside
- Keep focus on obtaining UC-sponsored podiatric medical residency programs

OUR STAKEHOLDERS -- THEIR NEEDS AND WANTS

BPM's success depends on a clear understanding of our statutory mission and the needs of the public.

Our public stakeholders include:

- Consumers, who seek accurate and timely information about providers.
- Licensees, who seek expeditious and accurate services, fair administration of the law, and timely and accurate communication on issues of interest to them.
- Applicants, who seek expeditious and accurate services, fair administration of the application process, and timely and accurate communication on issues of concern.
- Health facilities, which seek clear licensing information.
- Staff, who seek clear direction, recognition by management, and training programs to better serve our stakeholders and grow professionally.
- Other state agencies, which seek accurate and timely information.
- The Legislature, exercising its lawmaking, authorization, budgeting and oversight roles.

ENVIRONMENTAL SCAN

External environment factors include:

- Fiscal Challenges -- BPM must do the best job possible with the resources available.
- Accountability -- BPM seeks to follow the soundest possible administrative procedures.
- Advancing Technology -- BPM attempts to stay current to the fullest extent practicable.
- Business and the Economy -- As an agency that licenses doctors treating millions of Californians annually, the health care community expects BPM to operate efficiently and partner to protect podiatric medical patients.
- Changing Demographics -- California's population is increasing, aging and growing more diverse every day.

Exhibit D



POSITION DESCRIPTION FOR EXECUTIVE OFFICER

The chief executive officer reports and is accountable to the full Board. He/she accepts responsibility for the success or failure of all Board operations.

Specific Contributions

1. Lead staff planning to achieve Board goals and ensure that implementation adheres to Board policies, and is effective, prudent, ethical, and timely.
2. Ensure that the Board is properly informed on the condition of the agency and major factors influencing it, without bogging it down in detailed staff work or with unorganized information.
3. Annually evaluate the agency's performance.
4. Make certain there is adequate funding to achieve the Board's policies.
5. Manage agency's enforcement program so as to ensure both (a) vigorous prosecution of Medical Practice Act violations and (b) fairness, due process, and proper administrative procedures as required under the Administrative Procedure Act.
6. See that there is adequate, effective staffing. Motivate staff. Develop training, professional development, and career ladder opportunities. Build teamwork. Delegate responsibilities without abdicating accountability.
7. Develop an office climate and organizational culture that attracts and keeps quality people.
8. Provide for management succession.
9. Develop annual goals and objectives and other appropriate staff policies.
10. Serve as the agency's chief spokesperson and see that the Board is properly presented to its various publics.

Adopted by the Board of Podiatric Medicine 12/6/91



POSITION DESCRIPTION FOR BOARD PRESIDENT

The President is responsible for the effective functioning of the Board, the integrity of Board process, and assuring that the Board fulfills its responsibilities for governance. The President instills vision, values, and strategic thinking in Board policy making. She/he sets an example reflecting the Board's mission as a state licensing and law enforcement agency. She/he optimizes the Board's relationship with its executive officer and the public.

Specific Contributions

1. Chair meetings to ensure fairness, public input, and due process.
2. Appoint Board committees.
3. Support the development and assist performance of Board colleagues.
4. Obtain the best thinking and involvement of each Board member. Stimulate each one to give their best.
5. Coordinate evaluation of the executive officer.
6. Continually focus the Board's attention on policy making, governance, and monitoring of staff adherence to and implementation of written Board policies.
7. Facilitate the Board's development and monitoring of sound policies that are sufficiently discussed and considered and that have majority Board support.
8. Serve as a spokesperson.
9. Be open and available to all, remaining careful to support and uphold proper management and administrative procedure.

Adopted by the Board of Podiatric Medicine 12/6/91



POSTION DESCRIPTION FOR BOARD MEMBERS

As a **Board of Directors**, the Board is responsible for good governance of the agency. Appointed as representatives of the **public**, the Board presses for realization of opportunities for service and fulfillment of its obligations to all constituencies. The Board meets fiduciary responsibility, guards against the taking of undue risks, determines priorities, and generally directs organizational activity. It delegates administration to its executive officer, but remains involved through oversight and policy making. The board members are ultimately accountable for all agency actions.

As a **judicial body**, the Board serves as a jury. The members must be careful to avoid *ex parte* communications with licensees, attorneys, and staff regarding upcoming proposed decisions from administrative law judges that the Board must review based only on the legal record.

Specific Contributions

1. Articulate agency mission, values, and policies.
2. Review and assure executive officer's performance in faithfully managing implementation of Board policies through achievement of staff goals and objectives.
3. Ensure that staff implementation is prudent, ethical, effective, and timely.
4. Assure that management succession is properly being provided.
5. Punctuate ongoing review of executive officer performance with annual evaluation against written Board policies at a noticed public meeting.
6. Ascertain that management effectively administers appropriate staff policies including a code of ethics and conflict of interest statements.
7. Ensure staff compliance with all laws applicable to the Board.
8. Maximize accountability to the public.

Adopted by the Board of Podiatric Medicine 12/6/91



Medical Board of California

BOARD OF PODIATRIC MEDICINE

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POLICY DECISION: Promotional Reference to the Board of Podiatric Medicine (BPM) by Expert Witnesses and/or Examination Commissioners

Licenses acting as expert witnesses or examination commissioners shall not reference their affiliation with the BPM in any promotional activity or advertisement.

Method of Adoption: Board Vote

Date of Adoption: February 28, 1986

Revision Date: May 3, 2002



POLICY DECISION: Minimum Requirements for New Medical Consultants, Experts, and Examiners

1. Hold a current and valid California license to practice podiatric medicine.
2. Have completed at least one year of postgraduate medical education with two years preferred up until 2010, at which time it will be mandatory.
3. Be certified by the American Board of Podiatric Surgery.
4. Have surgical staff privileges in at least one general acute care hospital facility.
5. Must not have been subject to disciplinary action by the BPM, i.e., the filing of an Accusation or Statement of Issues that was not withdrawn or dismissed.
6. Must not be under BPM investigation for a violation of any laws relating to the practice of medicine at the time of appointment or be the subject of such a case pending in the Attorney General's office.
7. Must not have been the subject of a field investigation by the BPM within the last five (5) years that was not closed and deleted from Medical Board records.
8. In the event of a conflict of interest, must recuse themselves from the review or examination.

Method of Adoption: Board Vote
Date of Adoption: June 5, 1987
Revision Date(s): December 7, 1990
January 25, 1994
November 6, 1998
May 5, 2000
November 3, 2000
June 6, 2003



Medical Board of California

BOARD OF PODIATRIC MEDICINE

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POLICY DECISION: Delegation of Authority Concerning Stay Orders

The authority to approve or deny a Petition for Stay Order is delegated to the board's executive officer.

Method of Adoption: Board Vote

Date of Adoption: May 5, 1995

Exhibit E



KAREN L. WRUBEL, D.P.M., *President*
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RAYMOND K. CHENG, A.I.A.
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NEIL B. MANSDORF, D. P. M.

Financial Report Fiscal Year 09/10 (Through 6/30/10)

• Overview E

The Board of Podiatric Medicine's expenditures through 6/30/10 (FY 09/10) remained under control and in-line with annual revenues. While the Board's stable licensee base has continued to produce steady revenues, future increases in departmental pro rata and personnel expenditures will require the Board to closely monitor its revenue and expenditure figures in order to maintain reserve solvency.

• Budget - Fiscal Year 2009/10

Twenty (20%) of the Board's total expenditures (through 6/30/10) were for Departmental/Central Administrative Services and Facilities Operations, which include: maintenance of licensing and enforcement systems, telecommunications, personnel support, pc support, internet services, building rent and maintenance, and other administrative support services.

Thirty-one percent (31%) of the Board's total expenditures (through 6/30/10) were for enforcement-related costs associated with services provided by the Office of the Attorney General, the Office of Administrative Hearings, Medical Board Investigations staff, and podiatric medical experts and consultants.

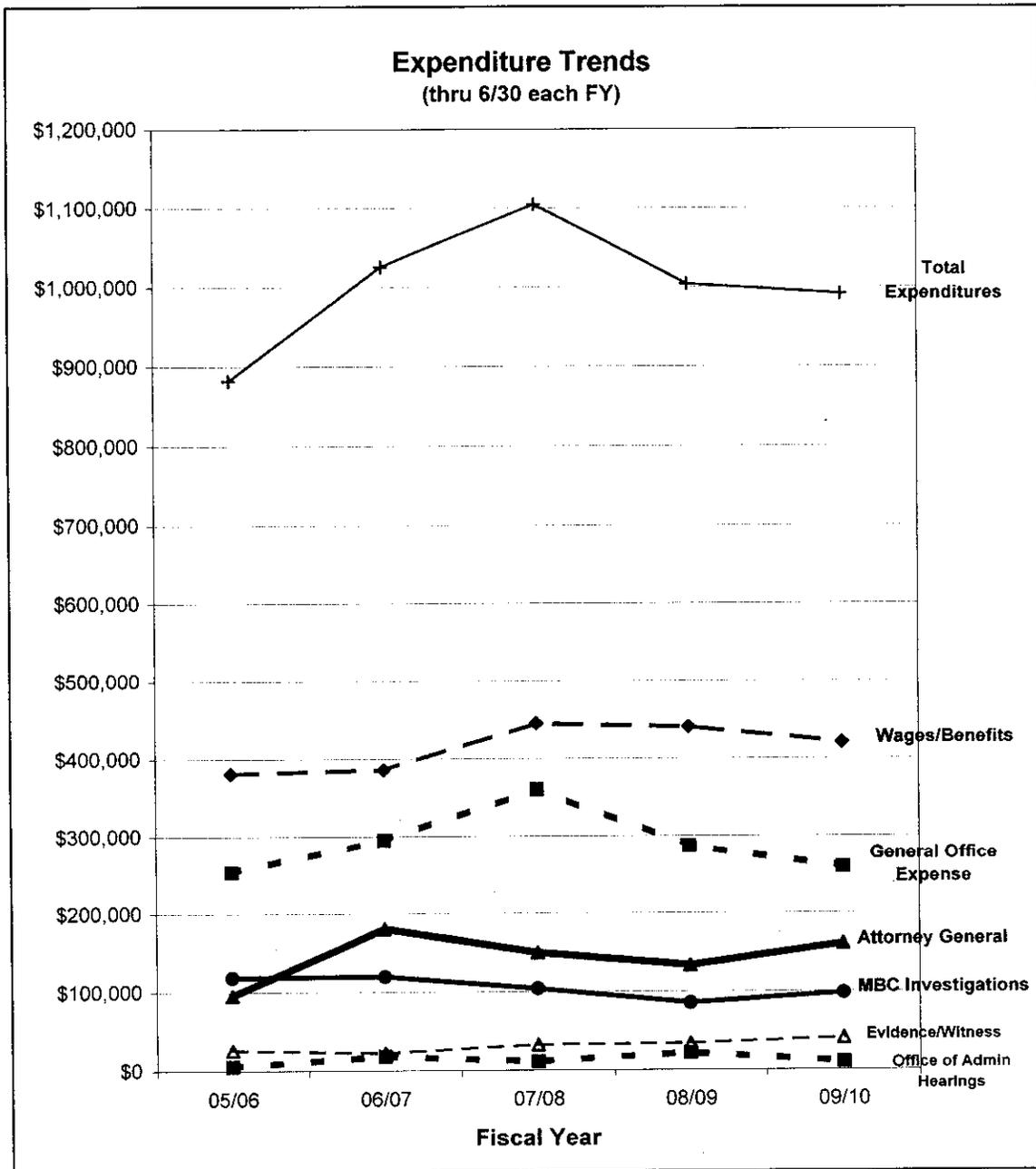
- § Expenditure Trends (FY 05/06 through FY 09/10) (Chart)
- § Breakdown of Actual General Office Expenses (FY 05/06 through FY 09/10)
- § Breakdown of Medical Board Shared Services costs (FY 06/07 through FY 09/10)

• Fund Condition

The enclosed fund conditions show projections using BPM's actual and future planned expenditures and DCA's plan, which assumes full budget expenditure. Note that while BPM's projection provides a more accurate and positive outlook, a potentially declining reserve balance indicates a need to continue monitoring revenues and expenditures.

- § BPM Fund Condition **[BPM]** Projection through 6/30/13
- § BPM Fund Condition **[DCA]** Projection through 6/30/13

Exhibit F



	05/06	06/07	07/08	08/09	09/10
Wages/Benefits	\$381,377	\$386,159	\$445,043	\$440,442	\$420,695
General Office Expense	\$253,435	\$295,625	\$360,290	\$287,077	\$259,343
Attorney General	\$95,350	\$181,102	\$149,872	\$133,332	\$160,945
MBC Investigations	\$5,631	\$18,575	\$11,242	\$22,116	\$10,692
Evidence/Witness Office of Admin Hearings	\$26,137	\$22,312	\$32,660	\$34,298	\$41,236
Other	\$1,000	\$2,312	\$2,229	\$1,096	\$587
MBC Other	\$118,849	\$119,738	\$103,747	\$85,576	\$97,886
Total	\$881,779	\$1,025,823	\$1,105,083	\$1,003,937	\$991,384

*See the following page for a breakdown of General Office Expenses.

Breakdown of Actual General Office Expenses

Through 6/30 each Fiscal Year

	FY 05/06	FY 06/07	FY 07/08	FY 08/09	FY 09/10
Expenses include amount encumbered.					
Fingerprints	\$3,368	\$4,288	\$3,607	\$3,644	\$4,297
General Expense	\$14,375	\$12,643	\$17,206	\$9,080	\$10,369
Dues & Memberships	\$1,800	\$2,200	\$2,200	\$2,325	\$2,325
Misc Office Supplies	\$6,257	\$4,777	\$4,553	\$1,646	\$3,773
Gen Expense - Film/Transcription Services	\$0	\$0	\$1,800	\$0	\$0
Freight & Drayage	\$1,570	\$1,194	\$3,311	\$1,261	\$1,306
Admin Overhead - Other	\$2,211	\$2,988	\$1,714	\$2,827	\$2,015
Mtg/Conf/Exhibit/Sho 217.00	\$1,427	\$0	\$1,586	\$754	\$600
Library Purch/Subscrip	\$1,110	\$1,484	\$1,971	\$200	\$332
Other	\$0	\$0	\$71	\$67	\$18
Printing/Copier expense ¹	\$5,241	\$6,566	\$13,708	\$11,308	\$5,575
Communications	\$6,986	\$6,248	\$8,708	\$16,337	\$8,133
Postage	\$4,790	\$5,030	\$3,880	\$3,953	\$8,552
Travel: In-State	\$12,363	\$17,976	\$21,710	\$19,153	\$15,440
Travel: Out-of-State	\$2,342	\$1,792	\$1,111	\$0	\$0
Training	\$695	\$1,070	\$123	\$23	\$0
Facilities Operations ²	\$25,104	\$54,062	\$31,189	\$39,395	\$42,685
C/P Services - Interdepartmental	\$0	\$0	\$0	\$0	\$0
C/P Services - External	\$0	\$0	\$0	\$0	\$500
Departmental Services ³	\$128,085	\$131,952	\$187,640	\$123,684	\$115,367
Office of Information Systems (OIS) - Pro Rata				\$31,640	\$27,962
Indirect Distrib Cost (DCA Administrative Pro Rata)				\$45,765	\$43,675
Interagency Svcs				\$0	\$0
Shared Svcs - MBC Only ⁴		\$37,572	\$36,506	\$40,694	\$37,983
Division of Investigation (DOI) - Pro Rata				\$1,515	\$1,624
Public Affairs - Pro Rata				\$1,883	\$1,999
Consumer Education (CCED) Pro Rata				\$2,187	\$2,124
Consolidated Data Centers	\$3,000	\$475	\$297	\$300	\$1,465
Data Processing	\$0	\$3,812	\$1,926	\$410	\$39
Central Administrative Services ⁵	\$36,616	\$35,723	\$47,473	\$54,490	\$42,269
Examinations	\$7,026	\$5,290	\$10,704	\$1,000	\$1,377
Major Equipment	\$0	\$0	\$2,465	\$0	\$0
Minor Equipment	\$3,445	\$8,697	\$7,182	\$4,301	\$3,278
Special Adjustments	\$0	\$0	\$1,362	\$0	\$0
SUBTOTAL	\$253,436	\$295,624	\$360,291	\$287,078	\$259,346
ADJUSTMENTS	-\$1	+\$1	-\$1	-1	-3

¹ 07/08 - phone system for Evergreen Street location.

² 06/07 - \$30,000 added for move to Evergreen Street .

³ 07/08 - \$65,000 Added for Applicant Tracking System (ATS).

⁴ Costs associated with Licensing, Enforcement and Consumer services provided by the Medical Board.
 (see next page for breakdown of MBC svcs)

⁵ Charges for support of Personnel Board, Dept. of Finance, State Controller, State Treasurer, Legislature, Governor's Office, etc.

TOTAL	\$253,435	\$295,625	\$360,290	\$287,077	\$259,343
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Breakdown of Medical Board Shared Services

FY	FY	FY	FY
06/07	07/08	08/09	09/10

Medical Board Shared Services	Description	Cost	Cost	Cost	Cost
Discipline Coordination Unit (DCU)	Charges are prorated based on the total number of cases tracked during the prior fiscal year in relation to the cost of maintaining staff for the purposes of performing a wide range of duties associated with the coordination of disciplinary actions.	\$13,283	\$11,551	\$15,404	\$9,370
Consumer Services: Central Complaint Unit (CCU)	Charges are prorated based on the actual number of complaints received during the prior fiscal year in relation to the cost of maintaining staff for the purposes of performing a wide range of duties associated with the management of complaints.	\$33,555	\$22,846	\$23,187	\$26,518
Consumer Information Unit (CIU)	Charges are prorated based on actual verification activity in relation to the cost of maintaining staff support to verify licensure of DPMs for interested parties.	\$1,098	\$398	\$206	\$0
Podiatric Fictitious Name Permit Registrations	Charges are based on the actual number of permits processed during the prior fiscal year in relation to the cost of maintaining clerical support to perform duties associated with the issuance and maintenance of FNPs.	\$2,161	\$1,711	\$1,897	\$2,095

TOTAL \$50,097 \$36,506 \$40,694 \$37,983

Exhibit G

**0295 - Podiatric Medicine
Analysis of Fund Condition
(BPM PROJECTION)**

(Dollars in Thousands)

Prepared 9/29/10

Month 13

	Actual 2009-10	CY 2010-11	Governor's Budget BY 2011-12	BY+1 2012-13
BEGINNING BALANCE	\$ 1,022	\$ 1,011	\$ 962	\$ 894
Prior Year Adjustment	\$ 15	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 1,037	\$ 1,011	\$ 962	\$ 894
REVENUES AND TRANSFERS				
Revenues:				
125600 Other regulatory fees	\$ 6	\$ 5	\$ 5	\$ 5
125700 Other regulatory licenses and permits	\$ 56	\$ 52	\$ 52	\$ 52
125800 Renewal fees	\$ 832	\$ 814	\$ 814	\$ 814
125900 Delinquent fees	\$ 2	\$ 3	\$ 3	\$ 3
141200 Sales of documents	\$ -	\$ -	\$ -	\$ -
142500 Miscellaneous services to the public	\$ 3	\$ -	\$ -	\$ -
150300 Income from surplus money investments	\$ 6	\$ 19	\$ 18	\$ 16
160400 Sale of fixed assets	\$ -	\$ -	\$ -	\$ -
161000 Escheat of unclaimed checks and warrants	\$ -	\$ -	\$ -	\$ -
161400 Miscellaneous revenues	\$ -	\$ -	\$ -	\$ -
Totals, Revenues	\$ 905	\$ 893	\$ 892	\$ 890
Transfers from Other Funds				
F00683 Teale Data Center (CS 15.00, Bud Act 2005)	\$ -	\$ -	\$ -	\$ -
Transfers to Other Funds				
	\$ -	\$ -	\$ -	\$ -
Totals, Revenues and Transfers	\$ 905	\$ 893	\$ 892	\$ 890
Totals, Resources	\$ 1,942	\$ 1,904	\$ 1,854	\$ 1,783
EXPENDITURES				
Disbursements:				
8860 FSCU (State Operations)	\$ 1	\$ -	\$ -	\$ -
8880 State Controller (State Operations)	\$ 7	\$ -	\$ -	\$ -
<u>Budget Act of 2010</u>				
1110 Program Expenditures (State Operations)	\$ 923	\$ 941	\$ 960	\$ 979
2010-11 BCPs - Program				
1110-1B Cal Licensing Systems BCP				
Total Disbursements	\$ 931	\$ 941	\$ 960	\$ 979
FUND BALANCE				
Reserve for economic uncertainties	\$ 1,011	\$ 962	\$ 894	\$ 804
Months in Reserve	12.9	12.0	10.9	9.7

NOTES:

- A. ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED
- B. EXPENDITURE GROWTH PROJECTED AT 2% BEGINNING FY 2011-12

0295 - Podiatric Medicine
Analysis of Fund Condition

Prepared 9/30/2010

(Dollars in Thousands)

MONTH 13

	Actual 2009-10	CY 2010-11	BY 2011-12	BY+1 2012-13
BEGINNING BALANCE	\$ 1,022	\$ 1,011	\$ 512	\$ -18
Prior Year Adjustment	\$ 15	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 1,037	\$ 1,011	\$ 512	\$ -18
REVENUES AND TRANSFERS				
Revenues:				
125600 Other regulatory fees	\$ 6	\$ 6	\$ 6	\$ 6
125700 Other regulatory licenses and permits	\$ 56	\$ 56	\$ 56	\$ 56
125800 Renewal fees	\$ 832	\$ 832	\$ 832	\$ 832
125900 Delinquent fees	\$ 2	\$ 2	\$ 2	\$ 2
141200 Sales of documents	\$ -	\$ -	\$ -	\$ -
142500 Miscellaneous services to the public	\$ 3	\$ -	\$ -	\$ -
150300 Income from surplus money investments	\$ 6	\$ 6	\$ -	\$ -
160400 Sale of fixed assets	\$ -	\$ -	\$ -	\$ -
161000 Escheat of unclaimed checks and warrants	\$ -	\$ -	\$ -	\$ -
161400 Miscellaneous revenues	\$ -	\$ -	\$ -	\$ -
Totals, Revenues	\$ 905	\$ 902	\$ 896	\$ 896
Transfers from Other Funds				
F00683 Teale Data Center (CS 15.00, Bud Act 2005)	\$ -	\$ -	\$ -	\$ -
Transfers to Other Funds				
	\$ -	\$ -	\$ -	\$ -
Totals, Revenues and Transfers	\$ 905	\$ 902	\$ 896	\$ 896
Totals, Resources	\$ 1,942	\$ 1,913	\$ 1,408	\$ 878
EXPENDITURES				
Disbursements:				
8860 FSCU (State Operations)	\$ 1	\$ 1	\$ -	\$ -
8880 State Controller (State Operations)	\$ 7	\$ 2	\$ -	\$ -
<u>Budget Act of 2010</u>				
1110 Program Expenditures (State Operations) - G	\$ 923	\$ 1,398	\$ 1,426	\$ 1,455
<u>2010-11 BCPs - Program</u>				
1110-1B Cal Licensing Systems BCP	\$ -	\$ -	\$ -	\$ 1
Total Disbursements	\$ 931	\$ 1,401	\$ 1,426	\$ 1,456
FUND BALANCE				
Reserve for economic uncertainties	\$ 1,011	\$ 512	\$ -18	\$ -578
Months in Reserve	8.7	4.3	-0.1	-4.7

NOTES:

- A. ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED
- B. EXPENDITURE GROWTH PROJECTED AT 2% BEGINNING FY 2011-12