

Exhibit

A



NEIL B. MANSDORF, D.P.M., *President*
KRISTINA M. DIXON, M.B.A., *Vice President*

EDWARD E. BARNES
MELODI MASANIAI
KAREN L. WRUBEL, D.P.M.

JOHN Y. CHA, D.P.M.
MICHAEL A. ZAPF, D.P.M.

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California Board of Podiatric Medicine Public Board Meeting Minutes Los Angeles, California September 13, 2013

A public meeting of the California Board of Podiatric Medicine (BPM) was held September 13, 2013 in room 1050 of Los Angeles City Hall, 200 N. Spring Street, Los Angeles, CA.

Due notice had been sent to all known interested parties.

1. Call to order and roll call

Dr. Mansdorf called the meeting to order at 9:17 AM. A quorum was established with the following Members present:

- Edward E. Barnes
- John Y. Cha, DPM
- Kristina M. Dixon, MBA
- Neil B. Mansdorf, DPM
- Melodi Masaniai
- Karen L. Wrubel, DPM
- Michael A. Zapf, DPM

Dr. Mansdorf welcomed the following attendees to the public meeting:

- John Rittmayer, Liaison Deputy Attorney General
- David Binsacca, Center for Public Interest Law
- Devon Glazer, DPM, California Podiatric Medical Association (CPMA) Board of Directors liaison

Also present were Counsel Claire Yazigi, JD and BPM staff member Jim Rathlesberger.

2. President's Report

Dr. Wrubel moved to accept the May 10, 2013 minutes. Mr. Barnes seconded this motion, which passed 7-0.

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3 **3. Financial Report**

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5 The Board requested staff to draft a letter to the California Podiatric Medical Association on the
6 subject of a BPM renewal fee increase, together with financial data supporting the recommendation.
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9 **4. Legislative Committee**

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11 Ms. Dixon moved and Mr. Barnes seconded a motion passing 7-0 directing the executive officer to
12 bring concerns of BPM licensees regarding the CURES program to the attention of the Department of
13 Consumer Affairs and the Department of Justice and to recommend the Justice Department's
14 involvement of licensees in the development and implementation of its computer systems with which
15 doctors will interface.
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18 **5. Enforcement Committee**

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20 The Board asked staff to send the Board Members information on costs of the Physician Assessment
21 and Clinical Education (PACE) programs [<http://www.paceprogram.ucsd.edu/>] and to include this
22 information as a reference item in the agenda book for the next BPM public meeting.
23
24

25 **6. Executive Officer Recruitment**

26
27 Ms. Dixon moved and Dr. Wrubel seconded approval of the executive officer recruitment
28 announcement as displayed in exhibit R. The motion passed 7-0.
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30

31 **7. Meeting Dates for 2014**

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33 Dr. Zapf moved and Ms. Dixon seconded scheduling meeting dates in 2014 on February 21, May 2
34 and November 7. The motion passed 7-0.
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36

37 **8. Election of Officers for 2014**

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39 Dr, Wrubel moved and Dr. Cha seconded a nomination of Ms. Dixon as President for 2014. The
40 motion passed 7-0.
41

42 Dr. Wrubel nominated and Mr. Barnes seconded Dr. Cha as Vice President. The motion passed 7-0.
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45 **9. Closed Session**

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47 The Board went into closed session at 11:52 AM pursuant to Government Code §11126(c)(3) to
48 consider a proposed decision held for discussion concerning Dr. Michael W. Colburn (E-2942).
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10. Return to Open Session and Adjournment

The Board returned to open session at 12:30 PM, and President Mansdorf announced it had completed its action on the closed session matter.

Having completed its agenda and all action items, and there being no further business, the Board adjourned at 12:31 PM.

APPROVED:

.....
President
Board of Podiatric Medicine

Date

Exhibit B



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

EDWARD E. BARNES
MELODI MASANIAI

JOHN Y. CHA, D.P.M., *Vice President*
KAREN L. WRUBEL, D.P.M. MICHAEL A. ZAPF, D.P.M.

**California Board of Podiatric Medicine
Public Board Meeting Minutes
Sacramento, California
February 21, 2014**

A public meeting of the California Board of Podiatric Medicine (BPM) was held Friday, February 21, 2014 in the Silverwood Lake Room, Suite 1220, 2005 Evergreen Street, Sacramento, California.

Due notice had been sent to all known interested parties.

1. Call to order and roll call

Ms. Dixon called the meeting to order at 9:30 AM. A quorum was established with the following Members present:

- Edward E. Barnes
- John Y. Cha, DPM
- Kristina M. Dixon, MBA
- Neil B. Mansdorf, DPM
- Melodi Masaniai
- Karen L. Wrubel, DPM
- Michael A. Zapf, DPM

2. Public Comments

No public comments were offered but Board Members noted that the California Podiatric Medical Association had sponsored a new bill AB 1868 regarding Medi-Cal funding for Doctors of Podiatric Medicine (DPMs). It was stated that the association supports a BPM fee increase but will not sponsor legislation for that purpose.

3. Closed Session

The Board went into closed session at 9:31 AM pursuant to Government Code § 11126(a)(1) to interview candidates and discuss appointment of an Executive Officer.

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4. Return to Open Session

The Board returned to open session at 4:15 PM and Ms. Dixon announced that it had completed the day's work on the closed session matter.

She announced her Presidential committee appointments for 2014:

- Enforcement Committee—Dr. Mansdorf Chair, Dr. Cha Co-chair
- Licensing Committee—Ms. Masaniai Chair, Mr. Barnes Co-chair
- Legislative Committee—Dr. Wrubel Chair, Mr. Barnes Co-Chair
- Public Education Committee—Dr. Zapf Chair, Ms. Masaniai Co-chair

5. Adjournment

Having completed its agenda and all action items, and there being no further business, the Board adjourned at 4:34 PM.

APPROVED

.....
President
Board of Podiatric Medicine

Date

Exhibit C

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

Exhibit D



STRATEGIC PLAN

2011-2014

Updated November 16, 2012

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
- Maintain primary source verification 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
- Ensure Board's final orders are effectively enforced

1.5 Support Continuing Competence initiatives.

Major activities:

- Support the Licensing Coordinator, recognizing the importance of good licensing in Licensing Board effectiveness in consumer protection and efficient use of public resources
- 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
- Urge Federation of Podiatric Medical Boards (FPMB) to encourage other State licensing agencies to implement its *Model Law* Continuing Competence provisions
- Support Department of Consumer Affairs (DCA) and other boards in Continuing Competence as appropriate

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

Major activities:

- Maintain the Residency License requirement
- Seek sunseting of the eight-year cap on graduate medical training
- Consider whether residency approvals should be nationalized now or in the future, or if California's program should be maintained

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

Objectives:

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

Major activities:

- Emphasize the statutory mission
- Support Board development and the Members' importance as a Board
- Promote the goals and objectives of the Board

- 2.2 Remain open, candid and responsive.

Major activities:

- Maintain unspotted positive press coverage
- Build on confidence from profession to enhance consumer outreach
- Support Departmental programs

- 2.3 Represent the public

Major activities:

- Maintain BPM culture that licensee and lay Board Members are equal
- Maintain BPM culture that licensee and lay Board Members have same statutory role
- Maintain BPM culture that licensee and lay Board Members all represent the public at large

- 2.4 Maintain good government values

Major activities:

- Reflect well on California State government
- Focus on the positive aspects and developments
- Take opportunities as they present themselves to advance public policy

GOAL 3. *Work collaboratively with other organizations.*

Objectives:

3.1 Utilize Departmental services and follow its lead.

Major activities:

- Implement BreEZe in 2012-13 for online credit card transactions
- Distribute *You and Your DPM* brochure
- Pursue Spanish language *You and Your DPM*
- Participate in 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 Foot and Ankle Conference

3.3 Continue involvement with Federation of Podiatric Medical Boards.

Major activities:

- Seek election of a California representative on FPMB Board
- Support updates to *Model Law* as indicated, e.g., equivalent exams

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

Objectives:

4.1 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

4.2 Support inclusion in State's publicly-supported health science teaching centers.

Major activities:

- Support complementary CPMA and podiatric medical school initiatives
- 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

E



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



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



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



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



POLICY DECISION: Promotional Reference to the Board of Podiatric Medicine (BPM) by Consultants, Expert Reviewers/Witnesses, Practice Monitors and Examination Commissioners

Licensees acting as medical consultants, expert reviewers/witnesses, practice monitors and/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
October 15, 2010



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

1. Hold a current, valid and unrestricted California license to practice podiatric medicine.
2. Be active in the practice of podiatric medicine in the subject area being reviewed.
3. Have completed a postgraduate medical education program approved by the Council on Podiatric Medical Education.
4. Be certified by the American Board of Podiatric Surgery and must maintain a current certificate.
5. Have surgical staff privileges in at least one general acute care hospital facility.
6. 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.
7. 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.
8. 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.
9. In the event of a conflict of interest, must recuse themselves from the review or examination.
10. Must not misrepresent his or her credentials, qualifications, experience or background.

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
October 15, 2010
February 11, 2011



POLICY DECISION: Selection, Training and Evaluation of Board of Podiatric Medicine (BPM) Medical Consultants

1. Potential DPM Medical Consultants shall be reviewed and nominated to the Consultant pool by the Board's Enforcement Committee.
2. New candidates must be approved by unanimous vote of the Board Members present at a noticed public meeting.
3. Following approval by the Board, Consultants shall certify in writing prior to beginning work that they have received and read the current *BPM Enforcement Manual*.
4. Likewise, all consultants shall so certify receipt and reading of each revision to the *BPM Enforcement Manual*.
5. Consultants shall be evaluated at least on an annual basis.
6. Staff shall organize training sessions for consultants every two years as practicable, and each working consultant must have participated in a BPM training session before beginning work and within the past four years at all times.
7. Consultants may serve for eight consecutive years, and have at least a two-year break in service before being eligible for re-nomination by the Enforcement Committee.

Method of Adoption: Board Vote

Date of Adoption: February 11, 2011

Exhibit F



Medical Board of California
BOARD OF PODIATRIC MEDICINE
2005 Evergreen Street, Suite 1300 Sacramento, CA 95815-3831
P (916) 263-2647 F (916) 263-2651 www.bpm.ca.gov



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Financial Report
Fiscal Year 12/13
(w/ FY 13/14 projections)

● **Overview**..... **F**

- BPM fund has stabilized somewhat due to a recent decline in enforcement and personnel costs, despite continued increases in fixed costs such as Central Administrative Services and Facilities Operations.
- Statewide *pro rata* and IT system costs will continue to rise. BPM staff will continue closely monitor expenditures.

● **Budget**..... **G**

- Total Expenditures (FY 12/13): \$865,000
Average among preceding eight years: \$938,000.
- Total Revenue (FY 12/13): \$895,000
Average among preceding eight years: \$916,000
- Staff will continue to closely monitor these figures.

FY 2012/13:

- Twenty-one percent (21%) of the Board's total expenditures were for Departmental / Central Administrative Services (maintenance of licensing and enforcement systems, website maintenance, telecommunications, HR services, pc support, internet services, other administrative support services).
- Twenty-five percent (25%) of the Board's total expenditures were for enforcement-related services (Office of the Attorney General, the Office of Administrative Hearings, Medical Board Investigations staff, podiatric medical experts and consultants).

Exhibit G Attachments:

- \$ Expenditure Trends [FY 05/06 through FY 13/14 (projected)]
- \$ Breakdown of Actual General Office Expenses [FY 05/06 through FY 13/14 (projected)]
- \$ Breakdown of Medical Board Shared Services costs [FY 09/10 through FY 13/14]

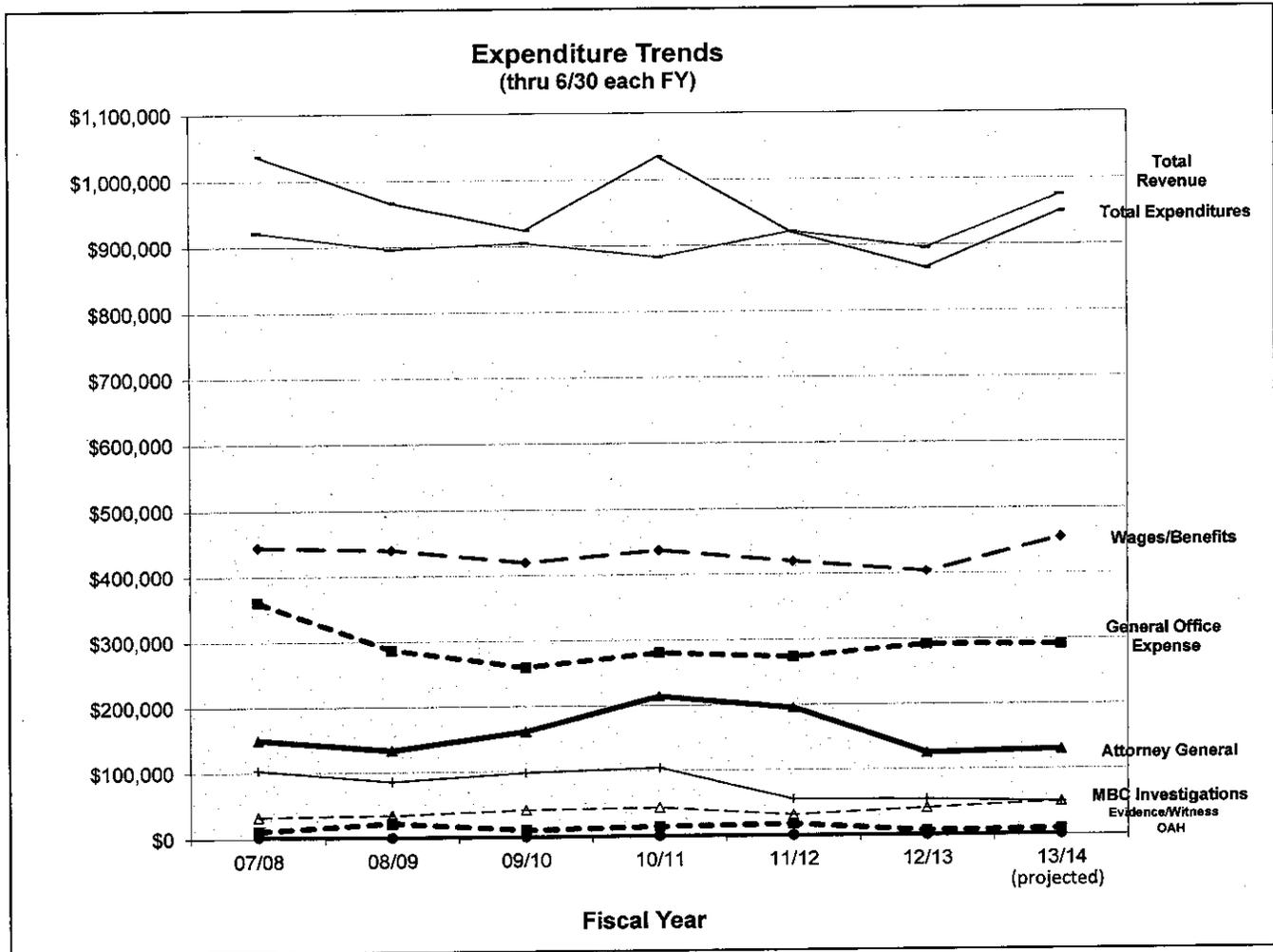
● Fund Condition..... H

- Fund conditions show projections based on:
 - Full budget expenditure (DCA projection)
 - Estimated savings (BPM projection)
- Potentially declining reserve balance indicates a need to continue monitoring revenues and expenditures and identify potential solutions to ensure future fund stability.
- BPM Budget History table and chart reflect budget, revenue, expenditure, and reserve figures for FYs 1997/98 through 2012/13.
 - Revenues have remained stable over the past several years.
 - Expenditures have typically fluctuated in a manner consistent with budget changes, which are largely determined by *pro rata* and other nondiscretionary disbursements.

Exhibit H Attachments:

- § BPM Fund Condition [DCA Projection through 6/30/17 – assumes full budget expenditure]
- § BPM Fund Condition [BPM Projection through 6/30/17 – assumes estimated savings]
- § BPM Budget History [FY 97/98 through FY 12/13]

Exhibit G



	05/06	06/07	07/08	08/09	09/10	10/11	11/12	12/13	13/14 (projected)
EXPENDITURES:									
Wages/Benefits	\$381,377	\$386,159	\$445,043	\$440,442	\$420,695	\$438,123	\$420,720	\$403,916	\$455,000
General Office Expense ¹	\$253,435	\$295,625	\$360,290	\$287,077	\$259,343	\$280,620	\$273,386	\$291,812	\$291,200
Attorney General	\$95,350	\$181,102	\$149,872	\$133,332	\$160,945	\$214,127	\$195,370	\$124,999	\$130,000
Office of Admin Hearings	\$5,631	\$18,575	\$11,242	\$22,116	\$10,692	\$15,030	\$17,674	\$6,404	\$9,000
Evidence/Witness	\$26,137	\$22,312	\$32,660	\$34,298	\$41,236	\$43,191	\$31,211	\$40,686	\$50,000
Court Reporter	\$1,000	\$2,312	\$2,229	\$1,096	\$587	\$1,128	\$670	\$500	\$1,000
MBC Investigations	\$118,849	\$119,738	\$103,747	\$85,576	\$97,886	\$104,400	\$55,078	\$53,912	\$50,000
State Operations (rounded)	\$0	\$0	\$0	\$1,000	\$1,000	\$3,000	\$6,000	\$0	\$0
TOTAL EXPENDITURES²	\$821,000	\$932,000	\$1,038,000	\$966,000	\$924,000	\$1,035,000	\$919,000	\$865,000	\$950,000
TOTAL REVENUE	\$932,000	\$934,000	\$922,000	\$896,000	\$905,000	\$883,000	\$921,000	\$895,000	\$975,000
Δ in Fund Balance (↑ ↓)	\$111,000	\$2,000	(\$116,000)	(\$70,000)	(\$19,000)	(\$152,000)	\$2,000	\$30,000	\$25,000
Renewals (E)	905	875	898	898	917	898	938	903	980

¹ See the following page for a breakdown of General Office Expenses.

² TOTAL EXPENDITURES - Adjusted per Fund Condition (enforcement reimbursements and other year-end adjustments). Rounded.

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	FY 10/11	FY 11/12	FY 12/13	FY 13/14 (projected)
Expenses include amount encumbered.									
Fingerprints	\$3,368	\$4,288	\$3,607	\$3,644	\$4,297	\$3,515	\$3,459	\$3,984	\$4,000
General Expense	\$14,375	\$12,643	\$17,206	\$9,080	\$10,369	\$8,052	\$6,461	\$6,259	\$5,200
Dues & Memberships	\$1,800	\$2,200	\$2,200	\$2,325	\$2,325	\$2,325	\$2,325	\$2,328	
Misc Office Supplies	\$6,257	\$4,777	\$4,553	\$1,646	\$3,773	\$3,240	\$2,350	\$2,553	
Gen Expense - Film/Transcription Services	\$0	\$0	\$1,800	\$0	\$0	\$0	\$515	\$0	
Freight & Drayage	\$1,570	\$1,194	\$3,311	\$1,261	\$1,306	\$582	\$172	\$407	
Admin Overhead - Other	\$2,211	\$2,988	\$1,714	\$2,827	\$2,015	\$1,307	\$881	\$971	
Mtg/Conf/Exhibit/Sho 217.00	\$1,427	\$0	\$1,586	\$754	\$600	\$564	\$0	\$0	
Library Purch/Subscrip	\$1,110	\$1,484	\$1,971	\$200	\$332	\$34	\$218	\$0	
Other	\$0	\$0	\$71	\$67	\$18	\$0	\$0	\$0	
Printing/Copier expense ¹	\$5,241	\$6,566	\$13,708	\$11,308	\$5,575	\$6,452	\$3,191	\$2,886	\$4,000
Communications	\$6,986	\$6,248	\$8,708	\$16,337	\$8,133	\$6,640	\$4,928	\$6,493	\$8,000
Postage	\$4,790	\$5,030	\$3,880	\$3,953	\$8,552	\$3,726	\$4,261	\$4,228	\$4,000
Travel: In-State	\$12,363	\$17,976	\$21,710	\$19,153	\$15,440	\$14,747	\$7,185	\$10,726	\$7,000
Travel: Out-of-State	\$2,342	\$1,792	\$1,111	\$0	\$0	\$0	\$0	\$0	\$0
Training	\$695	\$1,070	\$123	\$23	\$0	\$375	\$50	\$0	\$0
Facilities Operations ²	\$25,104	\$54,062	\$31,189	\$39,395	\$42,685	\$43,888	\$44,253	\$45,988	\$47,000
C/P Services - Interdepartmental	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C/P Services - External ³	\$0	\$0	\$0	\$0	\$500	\$2,000	\$0	\$14,104	\$14,000
Departmental Services ⁴	\$128,085	\$131,952	\$187,640	\$123,684	\$115,367	\$139,005	\$135,128	\$127,316	\$148,000
Office of Information Systems (OIS) - Pro Rata				\$31,640	\$27,962	\$42,678	\$41,010	\$42,877	
Indirect Distrib Cost (DCA Administrative Pro Rata)				\$45,765	\$43,675	\$46,355	\$42,417	\$42,321	
Interagency Svcs				\$0	\$0	\$0	\$0	\$0	
Shared Svcs - MBC Only ⁵	\$48,739	\$37,572	\$36,506	\$40,694	\$37,983	\$43,036	\$44,469	\$35,226	
Division of Investigation (DOI) - Pro Rata				\$1,515	\$1,624	\$1,539	\$1,427	\$1,776	
Public Affairs - Pro Rata				\$1,883	\$1,999	\$3,272	\$2,850	\$2,199	
Consumer Education (CCED) Pro Rata				\$2,187	\$2,124	\$2,125	\$2,955	\$2,917	
Consolidated Data Centers	\$3,000	\$475	\$297	\$300	\$1,465	\$2,547	\$1,397	\$758	\$1,000
Data Processing	\$0	\$3,812	\$1,926	\$410	\$39	\$3,464	\$3,649	\$3,438	\$3,000
Central Administrative Services ⁶	\$36,616	\$35,723	\$47,473	\$54,490	\$42,269	\$45,061	\$54,139	\$63,349	\$46,000
Examinations	\$7,026	\$5,290	\$10,704	\$1,000	\$1,377	\$0	\$0	\$0	\$0
Major Equipment	\$0	\$0	\$2,465	\$0	\$0	\$0	\$0	\$0	\$0
Minor Equipment	\$3,445	\$8,697	\$7,182	\$4,301	\$3,278	\$1,149	\$5,285	\$2,283	\$0
Special Adjustments	\$0	\$0	\$1,362	\$0	\$0	\$0	\$0	\$0	\$0
SUBTOTAL	\$253,436	\$295,624	\$360,291	\$287,078	\$259,346	\$280,621	\$273,386	\$291,812	\$291,200
ADJUSTMENTS	-\$1	+\$1	-\$1	-1	-3	-1	0	0	0

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

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

³ 12/13 - BreZE costs

⁴ 07/08 - \$65,000 Added for Applicant Tracking System (ATS).

⁵ Costs associated with Licensing, Enforcement and Consumer services provided by the Medical Board.

(see next page for breakdown of MBC svcs)

⁶ 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	\$280,620	\$273,386	\$291,812	\$291,200
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Breakdown of Medical Board Shared Services

		FY 09/10	FY 10/11	FY 11/12	FY 12/13	FY 13/14
Medical Board Shared Services	Description	Cost	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.	\$9,370	\$9,319	\$10,383	\$9,088	\$7,907
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.	\$26,518	\$30,476	\$32,224	\$23,748	\$28,635
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.	\$0	\$680	\$0	\$98	\$124
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.	\$2,095	\$2,561	\$1,862	\$2,292	\$2,014
TOTAL		\$37,983	\$43,036	\$44,469	\$35,226	\$38,680

Exhibit H

0295 - Podiatric Medicine Analysis of Fund Condition

Prepared 12/4/2013

(Dollars in Thousands)

FY 2014-15 Governor's Budget

	Governor's Budget				
	ACTUAL 2012-13	CY 2013-14	BY 2014-15	BY+1 2015-16	BY+2 2016-17
BEGINNING BALANCE	\$ 859	\$ 893	\$ 664	\$ 121	\$ -450
Prior Year Adjustment	\$ 4	\$ -	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 863	\$ 893	\$ 664	\$ 121	\$ -450
REVENUES AND TRANSFERS					
Revenues:					
125600 Other regulatory fees	\$ 5	\$ 5	\$ 5	\$ 5	\$ 5
125700 Other regulatory licenses and permits	\$ 61	\$ 57	\$ 57	\$ 57	\$ 57
125800 Renewal fees	\$ 819	\$ 829	\$ 829	\$ 829	\$ 829
125900 Delinquent fees	\$ 5	\$ 3	\$ 3	\$ 3	\$ 3
141200 Sales of documents	\$ -	\$ -	\$ -	\$ -	\$ -
142500 Miscellaneous services to the public	\$ -	\$ -	\$ -	\$ -	\$ -
150300 Income from surplus money investments	\$ 3	\$ 1	\$ -	\$ -	\$ -
160400 Sale of fixed assets	\$ -	\$ -	\$ -	\$ -	\$ -
161000 Escheat of unclaimed checks and warrants	\$ 2	\$ 1	\$ 1	\$ 1	\$ 1
161400 Miscellaneous revenues	\$ -	\$ -	\$ -	\$ -	\$ -
Totals, Revenues	\$ 895	\$ 896	\$ 895	\$ 895	\$ 895
Totals, Resources	\$ 1,758	\$ 1,789	\$ 1,559	\$ 1,016	\$ 445
EXPENDITURES					
Disbursements:					
8880 FSCU (State Operations)	\$ 6	\$ 6	\$ 1	\$ -	\$ -
0840 State Controller (State Operations)	\$ -	\$ -	\$ -	\$ -	\$ -
1110 Program Expenditures (State Operations)	\$ 859	\$ 1,438	\$ 1,437	\$ 1,466	\$ 1,495
CY Estimated Savings		\$ -319			
Total Disbursements	\$ 865	\$ 1,125	\$ 1,438	\$ 1,466	\$ 1,495
FUND BALANCE					
Reserve for economic uncertainties	\$ 893	\$ 664	\$ 121	\$ -450	\$ -1,050
Months in Reserve	9.5	5.5	1.0	-3.6	-8.3

NOTES:

- A. ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED FOR BY+1 AND ON-GOING.
- B. EXPENDITURE GROWTH PROJECTED AT 2% BEGINNING BY+1 AND ONGOING.
- C. ASSUMES INTEREST RATE AT 0.3%.

0295 - Podiatric Medicine

Analysis of Fund Condition

Prepared 4/14/14

(Dollars in Thousands)

BPM Projection

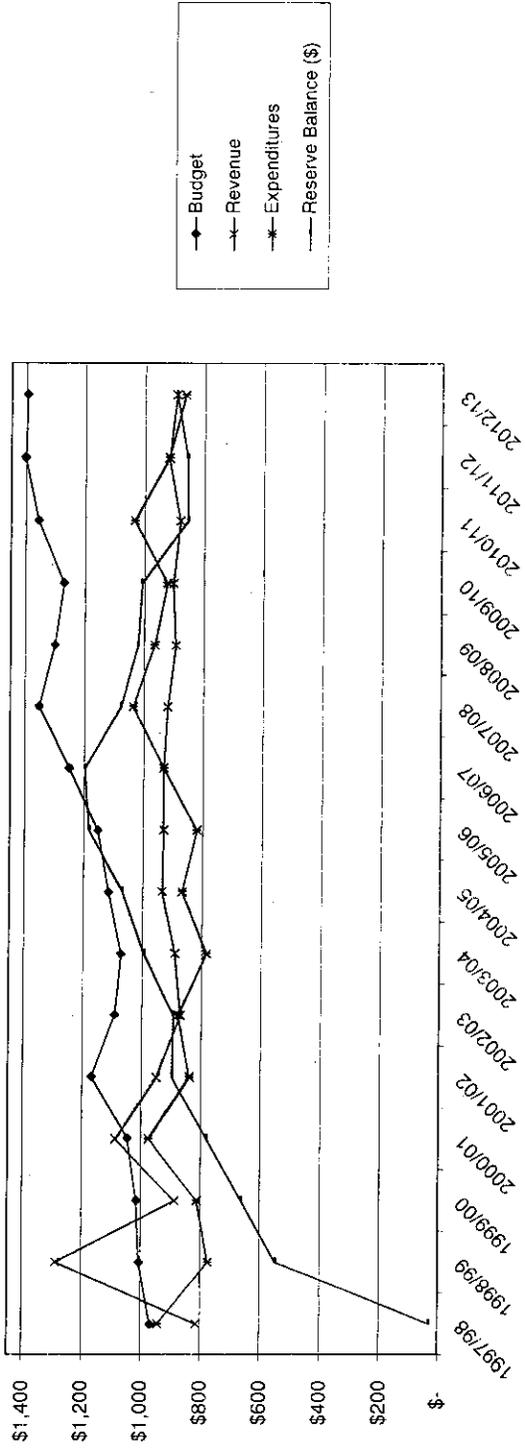
(assumes estimated savings in CY and future FYs)

	Governor's Budget				
	ACTUAL	CY	BY	BY+1	BY+2
	2012-13	2013-14	2014-15	2015-16	2016-17
BEGINNING BALANCE	\$ 859	\$ 893	\$ 918	\$ 855	\$ 833
Prior Year Adjustment	\$ 4	\$ -	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 863	\$ 893	\$ 918	\$ 855	\$ 833
 REVENUES AND TRANSFERS					
Revenues:					
125600 Other regulatory fees	\$ 5	\$ 5	\$ 5	\$ 5	\$ 5
125700 Other regulatory licenses and permits	\$ 61	\$ 75	\$ 65	\$ 65	\$ 65
125800 Renewal fees	\$ 819	\$ 890	\$ 830	\$ 890	\$ 830
125900 Delinquent fees	\$ 5	\$ 3	\$ 3	\$ 3	\$ 3
141200 Sales of documents	\$ -	\$ -	\$ -	\$ -	\$ -
142500 Miscellaneous services to the public	\$ -	\$ -	\$ -	\$ -	\$ -
150300 Income from surplus money investments	\$ 3	\$ 1	\$ 3	\$ 2	\$ 2
160400 Sale of fixed assets	\$ -	\$ -	\$ -	\$ -	\$ -
161000 Escheat of unclaimed checks and warrants	\$ 2	\$ 1	\$ 1	\$ 1	\$ 1
161400 Miscellaneous revenues	\$ -	\$ -	\$ -	\$ -	\$ -
Totals, Revenues	\$ 895	\$ 975	\$ 907	\$ 966	\$ 906
Totals, Resources	\$ 1,758	\$ 1,868	\$ 1,825	\$ 1,821	\$ 1,739
 EXPENDITURES					
Disbursements:					
8880 FSCU (State Operations)	\$ 6	\$ 6	\$ 1	\$ -	\$ -
0840 State Controller (State Operations)	\$ -	\$ -	\$ -	\$ -	\$ -
1110 Program Expenditures (State Operations)	\$ 859	\$ 1,438	\$ 969	\$ 988	\$ 1,008
CY Estimated Savings	\$ -	\$ -494	\$ -	\$ -	\$ -
Total Disbursements	\$ 865	\$ 950	\$ 970	\$ 988	\$ 1,008
 FUND BALANCE					
Reserve for economic uncertainties	\$ 893	\$ 918	\$ 855	\$ 833	\$ 731
 Months in Reserve	11.3	11.4	10.4	9.9	8.5

NOTES:

- A. ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED FOR BY+1 AND ON-GOING.
- B. EXPENDITURE GROWTH PROJECTED AT 2% BEGINNING BY+1 AND ONGOING.
- C. ASSUMES INTEREST RATE AT 0.3%.

Board of Podiatric Medicine Budget History 1997 - Current



Fiscal Year

(dollars in thousands)

Budget	\$ 969	\$ 1,007	\$ 1,017	\$ 1,048	\$ 1,170	\$ 1,093	\$ 1,073	\$ 1,115	\$ 1,153	\$ 1,252	\$ 1,355	\$ 1,303	\$ 1,272	\$ 1,359	\$ 1,403	\$ 1,397
% Change from Previous FY	0.0%	3.9%	1.0%	3.0%	11.6%	-6.6%	-1.8%	3.9%	3.4%	8.6%	8.2%	-3.8%	-2.4%	6.8%	3.2%	-0.4%
Revenue	\$ 816	\$ 1,290	\$ 889	\$ 1,089	\$ 953	\$ 873	\$ 892	\$ 936	\$ 932	\$ 934	\$ 922	\$ 898	\$ 905	\$ 883	\$ 921	\$ 895
% Change from Previous FY	0.0%	90.8%	-65.1%	142.0%	-25.3%	7.4%	2.2%	4.9%	-0.4%	0.2%	-1.3%	-2.8%	1.0%	-2.4%	4.3%	-2.8%
Expenditures	\$ 944	\$ 776	\$ 814	\$ 977	\$ 841	\$ 879	\$ 786	\$ 868	\$ 821	\$ 932	\$ 1,038	\$ 966	\$ 924	\$ 1,035	\$ 919	\$ 865
% Change from Previous FY	0.0%	-17.8%	4.9%	20.0%	-13.9%	4.5%	-10.6%	10.4%	-5.4%	13.5%	11.4%	-6.9%	-4.3%	12.0%	-11.2%	-5.9%
Budget Reversion ¹	\$ 25	\$ 231	\$ 203	\$ 71	\$ 329	\$ 214	\$ 287	\$ 247	\$ 332	\$ 320	\$ 317	\$ 337	\$ 348	\$ 324	\$ 484	\$ 532
Fund Reversion (+/- reserve) ²	\$ (128)	\$ 514	\$ 75	\$ 112	\$ (6)	\$ 106	\$ 68	\$ 111	\$ 2	\$ (116)	\$ (70)	\$ (19)	\$ (152)	\$ 2	\$ 30	\$ 30
Adjustments	\$ 15	\$ 6	\$ 39	\$ 7	\$ 5	\$ 3	\$ (7)	\$ 6	\$ 2	\$ 14	\$ (4)	\$ 14	\$ 7	\$ (3)	\$ 1	\$ 4
Reserve Balance (\$)	\$ 30	\$ 550	\$ 664	\$ 783	\$ 900	\$ 897	\$ 996	\$ 1,070	\$ 1,183	\$ 1,199	\$ 1,079	\$ 1,023	\$ 1,011	\$ 856	\$ 859	\$ 893
Reserve Balance (mos)	0.5	8.1	8.2	11.2	12.3	13.7	13.8	15.6	15.2	13.9	13.4	11.7	11.2	11.9	11.3	11.3

NOTES:

- ¹ Budget reversion = (total budget authority) - (total expenditures)
- ² Fund reversion = (total revenues) - (total expenditures)

Revenue

- Malibu Transfer from General Fund (funds previously loaned to GF)
- 1996/97 - \$139,564
- 1998/99 - \$438,550
- 2000/01 - \$140,115

Expenditures

- Office move (Howe Ave to Evergreen St)
- 2006/07 - Facility moving services - \$30,000
- 2007/08 - Applicant Tracking System - \$65,000