

MEETING MINUTES
November 17, 2025
8:30 A.M. – 5:00 P.M.
PHYSICIAN ASSISTANT BOARD
May Lee State Office Complex
Room SE. 158A
Sacramento, CA 95811

1. Call to Order by President

Dr. Kidd called the meeting to order at 8:32 a.m.

2. Roll Call

Staff called the roll. A quorum was present.

Board Members Present:

Vasco Deon Kidd, DHSc, PA-C, President

Juan Armenta, Esq., Vice President

Eric Bergersen, PA-C

Philip DaVisio, DMSc, PA-C

Diego Inzunza, PA-C

Edwin Perez

Bhavana Prakash, DMSc, PA-C

Deborah Snow

Veling Tsai, M.D.

Staff Present:

Julie Caldwell, Lead Licensing Analyst

Jasmine Dhillon, Legislative and Regulatory Specialist

Virginia Gerard, Probation Monitor

Pearl Her, Administrative Analyst

Jennifer Jimenez, Licensing Analyst

Michael Kanotz, Board Counsel, Attorney III

Rozana Khan, Executive Officer

Armando Melendez, Special Investigator

Kristy Schieldge, Regulatory Counsel, Attorney IV

Linda Serrano, Complaint Analyst

Kristy Voong, Assistant Executive Officer (via video conference)

3. Consider Approval of August 15, 2025, Board Meeting Minutes

M/ Philip DaVisio S/ Edwin Perez to:

Approve the August 15, 2025, meeting minutes.

Member	Yes	No	Abstain	Absent	Recusal
Juan Armenta	X				
Eric Bergersen	X				
Philip DaVisio	X				
Diego Inzunza	X				

Vasco Deon Kidd	X				
Edwin Perez	X				
Bhavana Prakash	X				
Deborah Snow	X				

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No public comment.

4. Public Comment on Items Not on the Agenda

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

No public comment.

5. Nomination and Election of Physician Assistant Board Officers

Mr. Kanotz stated the Board shall elect annually a president and a vice president from among its members. He then opened the floor for nominations for the position of Board President.

Mr. Inzunza nominated Dr. Kidd.

Mr. Armenta nominated himself.

Mr. Armenta also nominated Mr. DaVisio, in which he declined.

Mr. Kanotz confirmed that there are two nominations and invited each nominee to state their qualifications.

Nominations for Board President:

Member	Vasco Deon Kidd	Juan Armenta	Abstain
Juan Armenta		X	
Eric Bergersen	X		
Philip DaVisio	X		
Diego Inzunza	X		
Vasco Deon Kidd	X		
Edwin Perez		X	
Bhavana Prakash	X		
Deborah Snow			X

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Dr. Kidd was elected as Board President for 2026.

M/ Deon Vasco Kidd S/ Juan Armenta to:

Motion to nominate Diego Inzunza as Board Vice President.

Member	Yes	No	Abstain	Absent	Recusal
Juan Armenta	X				

Eric Bergersen	X				
Philip DaVisio	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Edwin Perez	X				
Bhavana Prakash	X				
Deborah Snow	X				

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Mr. Inzunza was elected as Vice President for 2026.

6. Board Member and Staff Recognition and Commendations

Dr. Kidd announced that Mr. Armenta was recently reappointed and administered the Oath of Office.

Dr. Kidd presented a resolution to former Board staff Christina Lefort. Board members and staff commended Ms. Lefort on 29 years of state service and thanked her for her service and dedication to the Board.

7. President’s Report

Dr. Kidd expressed his gratitude to the Board, DCA and Board staff, Mr. Armenta, Mr. Kanotz, Ms. Khan and Ms. Schiedge for her expertise in assisting the Board with completing the Senate Bill (SB) 697 regulatory packet, which went into effect on October 1, 2024.

Dr. Kidd reported the successful completion of the Sunset Review and signing of Sunset Bill, Assembly Bill (AB) 1501, into law. He noted the extension of the Board’s authorization through 2030, the increase of the Physician Assistant (PA) supervision ratio from one-to-four to one-to-eight effective January 1, 2026, approval of fee adjustments, and a comprehensive review of practice agreements, pursuant to Business and Professions Code (BPC) section 3502.35(a).

Dr. Kidd reported his intent to form a committee to invite stakeholders to testify before the Board regarding how practice agreements are utilized in other states and to assess potential benefits. Stakeholder testimony is anticipated to begin at Board meetings in 2026. Dr. Kidd further stated that the Legislative and Regulatory Affairs Committee and the Physician Education and Workforce Development Committee are seeking volunteers.

Dr. Kidd stated that he has remained actively engaged in public outreach and education as a member of the profession. He reported delivering presentations on the Physician Assistant Practice Act at University of Southern California, Marshall B. Ketchum University, and University of California, Davis. He also stated that he spoke with undergraduate pre-health students at the University of California, Los Angeles regarding the PA profession, including admission requirements, training, and scope of practice.

Dr. Kidd reported that in October he attended the 2025 California Academy of Physician Associates (CAPA) Conference, where he met with licensees and PA

126 students to discuss the profession and continued growth in supporting effective
127 practice for PAs across California.

128
129 Dr. Kidd expressed his gratitude for the commitment to advance the Board's mission
130 and ensuring access to care. He stated his intent to seek reelection as President
131 and asked if there were any questions.

132
133 Mr. Armenta reviewed the code section cited by Dr. Kidd (BPC section 3502.35, AB
134 1501) as the basis for forming Board committees and inquired about the intended
135 purpose of those committees. Dr. Kidd explained that other states have recently
136 explored removing practice agreements as a means of improving access to patient
137 care. He stated his intent was to gain a foundational understanding of developments
138 in other states, which could be informative for a future sunset review or potential
139 sponsored publication. He further stated that the Legislature expressed a clear
140 interest in understanding efficiency and patient care benefits. Mr. Armenta and Dr.
141 Kidd agreed that reviewing this information would involve a significant amount of
142 data for a Board committee.

143
144 Mr. Armenta stated he was troubled by the report announcing the formation of
145 committees related to the bill and expressed concern that this action encroaches on
146 policy matters rather than the Board's role in process and oversight. He noted that at
147 the August 2024 Board meeting, Board Counsel formally advised that the Board
148 should not pursue a motion asserting that the PA/physician supervision ratio was a
149 problem, as that would fall outside the Board's role. Although the motion was
150 defeated, it was nevertheless made against the advice of Counsel.

151
152 Mr. Armenta further pointed out that subdivision (b) of the new code section states
153 the law should not be construed as imposing additional regulatory responsibilities or
154 workload on the Board. He opined that this language was included for specific
155 reasons, noting that Board meetings are observed by DCA and appointing
156 authorities. He asserted that these same observers would have seen the August
157 2024 Board meeting, during which there was significant debate regarding the
158 Board's role in policy versus oversight.

159
160 Mr. Armenta opined that forming committees to review data from other states
161 represents a significant increase in workload and is improper for the Board. He
162 further stated that while Dr. Kidd previously indicated the Board has a legislative
163 mandate to improve access to care, Mr. Armenta disagreed and asserted that such
164 mandates rest with the Legislature, not the Board.

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166 No public comment.

167 168 **8. Executive Officer's Report**

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170 This report was included in the President's report.

171 172 **9. Board Activity Reports**

173 174 A. Licensing

175
176 Ms. Caldwell referred members to Agenda Item 9A and presented the following
177 reports: Licensing Population by Type, Summary of Licensing Activity, Pending

178 Application Workload, and Licensing Performance Measures. Ms. Caldwell noted
179 that Licensing Analyst Jennifer Jimenez continues to meet the internal timeline for
180 reviewing applications within 30 days of receipt.

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182 B. Complaints

183
184 Ms. Serrano referred members to Agenda Item 9B and presented the following
185 reports: Complaint Statistics and Complaints Received by Type and Source.

186
187 Ms. Serrano provided the Board with the redundant cases statistics.

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189 C. Discipline

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191 Ms. Serrano referred members to Agenda Item 9C and presented the following
192 report: Discipline Statistics.

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194 D. Probation

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196 Ms. Gerard referred members to Agenda Item 9D and presented the following
197 report: Probation Activity.

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199 E. Diversion

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201 Ms. Gerard referred members to Agenda Item 9E and presented the following report:
202 Diversion Program Activity.

203
204 No public comment.

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206 **10. Department of Consumer Affairs – Director’s Update (DCA Staff) – May**
207 **Include Updates Pertaining to the Department’s Administrative Services,**
208 **Human Resources, Enforcement, Information Technology,**
209 **Communications and Outreach, as well as Legislative, Regulatory and**
210 **Policy Matters**

211
212 Judie Bucciarelli, Board and Bureau Relations, congratulated Mr. Armenta on his
213 reappointment.

214
215 Ms. Bucciarelli reported that Governor Newsom appointed Lucia Saldivar as Deputy
216 Director of Board and Bureau Relations, and Shelly Jones as Assistant Deputy
217 Director of Board and Bureau Relations.

218
219 Ms. Bucciarelli reported that DCA Director Kimberly Kirchmeyer will be retiring at the
220 end of 2025. She extended a special message of appreciation from Ms. Kirchmeyer,
221 thanking Board members for their continued hard work and dedication to the
222 Department, the State of California, and consumers. She stated that the Board’s
223 work is invaluable, impactful, and integral to DCA’s mission of consumer protection.

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225 Ms. Bucciarelli reminded members of upcoming required trainings, including sexual
226 harassment prevention and unconscious bias.

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228 No public comment.

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11. Budget Committee Update

Andrew Trute, DCA Budget Analyst, referred members to Agenda Item 11 and presented the fund condition statement.

For current fiscal year 2025-26, the Board has a beginning balance of \$3.5 million, with projected revenue of \$3.4 million, and projected expenditure of \$3.3 million, resulting in a projected fund balance of \$3.5 million, or approximately 12.5 months in reserve.

Mr. Trute emphasized that the fund condition represents a snapshot in time and thus only a reflection of the data available at the time of preparation. He noted that the main factors driving increased expenditures are the rising personal services adjustments, including general salary increases, employee compensation, and retirement rate adjustments. The Budget Office assumes an ongoing 3% annual increase in expenditure to account for these incremental adjustments. However, this estimate does not include potential increases in enforcement-related costs, which could place additional pressure on the fund in future years.

Mr. Trute noted that months in reserve will decrease overtime if expenditure continues to increase at 3%. He further stated that future legislation or unanticipated events could require additional resources, further impacting the fund.

Dr. Kidd expressed that it was positive to see the Board maintaining reserves in the double digits.

Mr. Armenta asked about the projections for fiscal year 2028-29 and what expenditures were included. Mr. Trute responded that the projections primarily reflect the assumed 3% annual salary increases.

Mr. DaVisio asked about the target for months in reserves. Mr. Trute stated that the Budget Office generally aims for 6-12 months, with a maximum of 24 months.

No public comment.

12. Report on Medical Board of California Activities

Dr. Tsai provided an update from the Medical Board of California (MBC), which met on August 21, 2025. He reported that the meeting included presentation on the Physician Assessment and Clinical Education (PACE) Program and a presentation by the Federation of State Medical Boards on workforce shortages and alternative licensing pathways.

Dr. Tsai reported that, effective July 1, 2025, Canadian medical graduates will be required to obtain certification through the Educational Commission for Foreign Medical Graduates to obtain licensure in the United States. He further noted that the MBC discussed petitions for penalty relief and the associated costs of processing and adjudicating the petitions.

Dr. Tsai reported MBC President Kristina Lawson will continue her term, with Felix Yip serving as Vice President and Veling Tsai as Secretary.

282 Dr. Kidd congratulated Dr. Tsai on his nomination.

283
284 Dr. Kidd asked whether the MBC is considering compact legislation to allow
285 additional physicians to practice in California. Dr. Tsai responded that licensure is
286 governed by the Medical Practice Act and that each application must be reviewed to
287 protect the consumers of California. He noted that one of the keyways to recruit
288 physicians to California is through incentives encouraging practice in underserved
289 areas, such as the Steven M. Thompson Physician Corps Loan Repayment
290 Program. Dr. Kidd asked how this impacts access to primary care, and Dr. Tsai
291 stated the greatest impact would be in rural underserved areas.

292
293 Mr. Armenta asked whether the MBC is exploring alternative medical school models
294 to address physician shortages. Dr. Tsai responded that the MBC has a Mexico Pilot
295 Program in which physicians serve underserved communities in the Central Valley.

296
297 No public comment.

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299 **13. Discussion and Possible Action on Proposed 2026 Board Meeting Dates**

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301 Ms. Khan referred members to Agenda Item 13 for the proposed meeting dates.

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303 The members agreed on the proposed dates of February 23, 2026, May 18, 2026,
304 August 14, 2026, and November 16, 2026.

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306 M/ Juan Armenta S/ Bhavana Prakash to:

307
308 Motion to adopt the proposed meeting dates for 2026.

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Member	Yes	No	Abstain	Absent	Recusal
Juan Armenta	X				
Eric Bergersen	X				
Philip DaVisio	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Edwin Perez	X				
Bhavana Prakash	X				
Deborah Snow	X				

310
311 No public comment.

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313 **14. Discussion and Possible Action to Reconsider Previously Approved Text,**
314 **and to Consider the Initiation of a Rulemaking to Amend Title 16, California**
315 **Code of Regulations Sections 1399.507 and 1399.515 Regarding Retired**
316 **Status Updates and Returned Fingerprint Requirement**

317
318 Ms. Dhillon referred members to Agenda item 14 and summarized the proposed
319 changes:

- 320
- 321 • Updating 16 CCR 1399.507 to clarify the initial licensure examination required
- 322 is the Physician Assistant National Certifying Examination (PANCE);
- 323 amending to remove gendered language to use gender neutral pronouns and

- 324 avoid the use of gendered pronouns in drafting regulations; and add the exam
325 requirement for an individual seeking an active status after being in a retired
326 status for more than five years.
- 327 • Updating 16 CCR 1399.515(a)(3) to reflect the delinquency fee increase from
328 \$25 to \$75.
 - 329 • Updating 16 CCR 1399.515(d) to clarify that the passage of the PANCE for
330 initial licensure is not a requirement for an individual seeking an active status
331 after being in retired status for more than five years, but the passage of the
332 Physician Assistant National Recertifying Examination (PANRE) within the
333 past ten (10) years immediately preceding the submission of their application
334 is a requirement to prove competency and knowledge.
 - 335 • Adding 16 CCR 1399.515(d)(2) to define the type of “proof” a licensee in
336 retired status must provide to the Board to be eligible for active status.
- 337

338 Ms. Schieldge reported that the proposal would require individuals retired for more
339 than five years to be treated the same as individuals with a canceled license seeking
340 re-licensure pursuant to BPC section 3526. She noted that subdivision (b) requires
341 applicants to “take and pass the examination, if any, that would be required of them
342 if application for licensure was being made for the first time”. She explained that the
343 National Commission on Certification of Physician Assistant (NCCPA) does not
344 permit retaking the PANCE once it has been passed but allows PAs to demonstrate
345 competence through the PANRE.

346

347 Mr. Bergensen asked how literally the examination requirement is interpreted, noting
348 that there are two versions of the PANRE: the traditional PANRE and the PANRE-LA
349 (longitudinal assessment). Ms. Schieldge explained that the traditional PANRE is
350 completed in one session with an independent proctor, while the PANRE-LA is
351 completed over a three-year period without a proctor. She recommended that the
352 Board recognize only the PANRE and not the PANRE-LA for purposes of
353 determining competence.

354

355 Dr. Kidd commented that competence is determined at the practice level and that
356 checks and balances exist to ensure competency. He stated that both exams are
357 recognized and that there is no data showing that an in-person exam demonstrates
358 greater competence than an online exam.

359

360 Ms. Schieldge stated that the legislative intent was for individuals to independently
361 demonstrate competence in the same manner as applicants seeking licensure
362 through a closed-book, proctored exam. She explained that the framework for retired
363 status was modeled after the requirements for canceled licenses.

364

365 Dr. Kidd reiterated that accrediting bodies have flexibility in administering exams and
366 that both virtual and in-person examinations should be recognized, as there is no
367 data showing incompetence associated with either method.

368

369 Mr. Armenta stated that allowing both exams for retired status could create equal
370 protection concerns due to differing pathways compared to canceled license status.
371 He further stated that public protection is best served through an in-person exam
372 rather than an open book format.

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376 Dr. Kidd stated that PAs who take the PANRE-LA may continue to practice and that
377 certification cycles are valid for 10 years, even if the PA is not actively practicing.
378

379 Ms. Prakash commented that for PAs seeking to return to practice, taking the in-
380 person exam rather than the longitudinal assessment may be more ideal.
381

382 Ms. Caldwell clarified that PAs who retire but maintain certification would not face a
383 barrier to returning to practice. However, if a PA did not maintain certification or was
384 never certified, reinstatement from retired status after five years would require
385 passage of the PANRE.
386

387 Mr. Armenta stated that from a public protection standpoint, it is reasonable to
388 require a PA who has been out of practice for more than five years to take the
389 PANRE.
390

391 Mr. DaVisio stated that the PANRE and PANRE-LA are considered interchangeable
392 by the NCCPA for assessing competency and that separating them raises concerns,
393 given the extensive vetting of the PANRE-LA.
394

395 Dr. Tsai asked if this proposal is going to be similar and would apply the same
396 process for retired and canceled licenses to ensure equal treatment. Ms. Schieldge
397 confirmed that this was the intent.
398

399 M/ Juan Armenta S/ Ed Perez to:
400

401 Move to approve the proposed regulatory text for 16 CCR sections 1399.507 and
402 1399.515 as set forth in Attachments 1 and 2 and direct staff to submit the text to the
403 Director of the Department of Consumer Affairs and the Business, Consumer
404 Services, and Housing Agency for review. If the Board does not receive any
405 objections or adverse recommendations specifically directed at the proposed action
406 or to the procedures followed by the Board in proposing or adopting this action,
407 authorize the Executive Officer to take all steps necessary to initiate the rulemaking
408 process, make any non-substantive changes to the package, and set the matter for
409 a hearing if requested. If no objections or adverse recommendations are received
410 during the 45-day comment period and no hearing is requested, authorize the
411 Executive Officer to take all steps necessary to complete the rulemaking and adopt
412 the proposed regulations at 16 CCR sections 1399.507 and 1399.515 as noticed.
413

Member	Yes	No	Abstain	Absent	Recusal
Juan Armenta	X				
Eric Bergersen	X				
Philip DaVisio	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Edwin Perez	X				
Bhavana Prakash	X				
Deborah Snow	X				

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415 **15. Discussion and Possible Action to Make Non-Substantive Rule Changes**
416 **Per CCR, Title 1, Section 100, to Amend CCR, Title 16, Sections 1399.501,**
417 **1399.503, 1399.514, 1399.515, 1399.520, 1399.536, 1399.546, 1399.547,**

1399.550, 1399.612 and 1399.616, Regarding Technical Clean-Up and Statutory Fee Changes

Ms. Dhillon referred members to Agenda item 15 and reported the following: a Section 100 rulemaking package is intended to address changes without regulatory effect and permits updating of existing regulations through a shorter procedure than what is required for a regular rulemaking. Because these nonsubstantive changes include amending the Board’s office address, amending the Board’s web address, removing gendered language, and amending fees to reflect recent statutory changes, Regulations Counsel and Board staff believe proposed changes would qualify for this abbreviated 1 CCR Section 100 rulemaking process.

M/ Juan Armenta S/ Vasco Deon Kidd to:

Move to approve the proposed regulatory text described in Attachment 1 and authorize the Executive Officer to take all steps necessary to pursue the rulemaking through the Title 1, CCR section 100 rulemaking process, make any non-substantive changes to the text and/or rulemaking package as needed throughout the process and to amend CCR, Title 16, Sections 1399.501, 1399.503, 1399.514, 1399.515, 1399.520, 1399.536, 1399.546, 1399.547, 1399.550, 1399.612 and 1399.616 as described in the proposed text.

Member	Yes	No	Abstain	Absent	Recusal
Juan Armenta	X				
Eric Bergersen	X				
Philip DaVisio	X				
Diego Inzunza	X				
Vasco Deon Kidd	X				
Edwin Perez	X				
Bhavana Prakash	X				
Deborah Snow	X				

No public comment.

16. Regulations – Update on Pending Regulatory Packages

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

The Legislature has included amendments to BPC section 3523 in AB 1501 and the bill has been chaptered, with an effective date of January 1, 2026. Staff will be working on the proposed text for Board approval at the next Board meeting.

2. 16 CCR 1399.506, 1399.507, 1399.511, 1399.530, 1399.535, 1399.536, 1399.538, 1399.539, 1399.546 and 1399.556 – SB 697: Application, Exam Scores, Addresses, and Records

The Board reviewed and adopted proposed revised regulatory language to continue the rulemaking process at the August 15, 2025 Board meeting. Staff is working on finalizing the initial documents with Regulations Counsel and will be filing the Notice with Office of Administrative Law (OAL) in the coming months.

460 3. 16 CCR 1399.515 – AB 2461: Retired Status Updates and Returned Fingerprint
461 Requirement

462
463 The Board voted to adopt the proposed regulatory language to initiate the
464 rulemaking process at the April 21, 2025 Board meeting. The Board is being asked
465 to review and adopt proposed revised regulatory language to continue the
466 rulemaking process.

467
468 4. 16 CCR 1399.523 – SB 1441: Implement Uniform Standards Related to
469 Substance Abusing Licensees and Update of Disciplinary Guidelines

470 Staff is working on the proposed language for Board approval next calendar year.

471
472
473 5. 16 CCR 1399.550 – Initial License Fee

474
475 This regulatory proposal would increase the initial license fee to \$250.00 to cover
476 operational costs, including processing applications, maintaining licensing systems,
477 and ensuring compliance with regulatory standards. This package was filed with the
478 Secretary of State on August 4, 2025 and became effective October 1, 2025.

479
480 6. 16 CCR 1399.501, 1399.503, 1399.514, 1399.515, 1399.520, 1399.536,
481 1399.546, 1399.547, 1399.550, 1399.612 and 1399.616 - Section 100 Technical
482 Clean-Up and Statutory Fee

483
484 This package would clean up regulatory language for consistency. These changes
485 would not be substantive and can be done through a Section 100 rulemaking
486 process. These changes would include updating the Board's address to reflect the
487 correct suite number, removing reference to the MBC, removing gendered language,
488 updating the Board's website to reflect its current website, and updating fees that
489 were increased through the passage of the Board's sunset bill (AB 1501, Chapter
490 194, Statutes of 2025)

491 No public comment.

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494 **17. Physician Assistant Education/Workforce Development Review**
495 **Committee: Update on Education Programs and Applicants in California**

496
497 Dr. Kidd referred members to Agenda Item 17 and presented the
498 Education/Workforce Development Review Committee Report and provided an
499 update on the geographic distribution of PA education programs.

500
501 Dr. Kidd reported that there are currently 321 nationally accredited PA training
502 programs in the United States, with 20 located in California. He noted that none of
503 the California programs are on probation. Six additional California programs hold
504 provisional accreditation, and three additional programs are in development. Of the
505 existing programs, 15 are in Southern California, four are in the Bay Area, and one
506 in Sacramento. There are currently no programs located in the Central Coast.

507
508 Dr. Kidd also reported that the annual enrollment capacity across California's 20 PA
509 programs is approximately 1,029 students, with an average of 51 students per
510 cohort.

511

512 No public comment.

513

514 **18. Report by the Legislative and Regulatory Affairs Committee**

515

516 Ms. Dhillon referred members to Agenda Items 18 for the detailed report on the
517 following bills.

518

519 A. AB 447 (González) Emergency room patient prescriptions.

520

521 This bill allows a prescriber to dispense an unused quantity of a dangerous drug
522 acquired by a hospital pharmacy to an emergency room patient when they are
523 discharged, if the drug was administered from single patient use multi-dose
524 packaging and can be self-administered by the patient.

525

526 This bill was approved by the Governor and will be effective January 1, 2026.

527

528 B. AB 489 (Bonta) Health care professions: deceptive terms or letters: artificial
529 intelligence.

530

531 The bill prohibits the use of the specific terms, letters, or phrases that are reserved
532 for licensees in the healing arts practice acts in the advertising or functionality of
533 artificial intelligence systems. Healing arts boards within the DCA may pursue an
534 injunction, restraining order, or other remedy, such as an administrative citation,
535 against a person or entity who develops or deploys such a system.

536

537 At its April 21, 2025 meeting, the Board took a “watch” position.

538 This bill also passed and will be effective January 1, 2026.

539

540 C. AB 742 (Elhawary) Department of Consumer Affairs: licensing: applicants who
541 are descendants of slaves.

542

543 This bill would require those boards to expedite applications for applicants seeking
544 licensure who are descendants of American slaves once a process to certify
545 descendants of American slaves is implemented, as specified.

546

547 This bill was vetoed by the Governor.

548

549 D. AB 1501 (Committee on Business and Professions) Physician assistants and
550 podiatrists.

551

552 This bill includes various necessary updates to reflect that Board does not approve
553 PA training programs. This bill increases the number of physician assistants whom a
554 physician and surgeon may supervise at any one time to 8. This bill establishes a
555 \$60 application fee, a \$250 initial license fee, and a \$300 biennial license renewal
556 fee. The bill authorizes the Board to increase the application fee to not more than
557 \$80, the initial license fee to not more than \$500, and the biennial license renewal
558 fee to not more than \$500. The bill expresses the Legislature’s intent to review how
559 practice agreements are utilized in other states, evaluating their potential benefits or
560 detriments to patient care, workforce efficiency, and regulatory oversight. The bill
561 also makes several other technical changes identified in the Board’s sunset report.

562

563 This bill was approved by the Governor and will be effective January 1, 2026.

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E. SB 470 (Laird) Bagley-Keene Open Meeting Act: teleconferencing.

This bill extends, until January 1, 2030, the sunset date for certain provisions relating to teleconferencing under the Bagley Keene Open Meeting Act. This allows boards and bureaus to continue to hold teleconferenced board and advisory committee meetings, provided that specified physical location requirements are met.

This bill also passed and will be effective January 1, 2026.

F. SB 641 (Ashby) Department of Consumer Affairs and Department of Real Estate: states of emergency: waivers and exemptions.

This bill would authorize the Department of Real Estate and boards under the jurisdiction of DCA to waive the application of certain provisions of the licensure requirements for licensees and applicants impacted by a declared federal, state, or local emergency or whose home or business is located in a declared disaster area, including certain examination, fee, and continuing education requirements.

This bill was vetoed by the Governor.

No public comment.

19. Agenda Items for Next Meeting

No public comments.

20. CLOSED SESSION

A. Pursuant to Government Code section 11126(a)(1), the Board will Conduct the Annual Evaluation of Performance of the Executive Officer

B. Pursuant to Government Code section 11126(c)(3), the Board will Convene to Deliberate on Disciplinary Actions and Decisions to be Reached in Administrative Procedure Act Proceedings

21. Adjournment

With no further business, the opening meeting was adjourned at 11:19 a.m.

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