



California Society of Dermatology & Dermatologic Surgery

CalDerm™ UPDATE

NEWS FOR CALIFORNIA DERMATOLOGISTS

WINTER 2006

INSIDE THIS ISSUE:

Cover
2006 Legislative Session Wrap-up

Page 2
President's Message

Page 3
Has Your Local "Medi-Spa"
Gotten Under Your Skin?

Page 5
2006 CalDerm PAC Contributors

Insert
CalDerm Needs Assessment Survey
(We need your feedback!)

SAVE THE DATE!

CalDerm 2007 Annual Meeting

September
7, 8 & 9, 2007

Portola Plaza Hotel &
Monterey Conference Center,
Monterey, CA

For reservations call
(800) 222-5851
Ask for Group Rates
under California Society
of Dermatology.
Standard Rooms \$212
Premium Rooms \$252
Registration materials
available in the
Spring 2007.

2006 Legislative Session Wrap-up

By John Valencia, Esq., CalDerm Legislative Advocate

Defending Dermatology in the "Direct Billing" Debate to Limit Phony Physician Mark-Ups:

SB 1369 (Maldonado) Dropped by Author

Many physicians know that existing California law makes it unlawful for physicians "to charge, bill, or otherwise solicit payment from any patient, client, customer, or third-party payer for any clinical laboratory service if those services were not actually rendered by the person or under his or her direct supervision." The law obliges a physician who plans to bill for services not personally performed or supervised to notify the patient, client, customer or third-party payer and provide information regarding the clinical lab that actually performs the service and the fees that are charged.

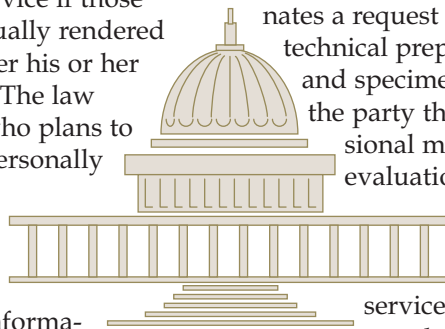
Unfortunately, enough doctors ignore or are unaware of this basic Medical Practice Act requirement and then compound one violation of the law with another by adding cost mark-ups, such that the practice has attracted media scrutiny, as well as attention from state public policymakers.

CalDerm initially supported SB 1369 (Maldonado) to help bring about a stop to these unethical practices. At the same time, CalDerm rigorously defended the practice and business of dermatology. The bill was written to expressly preserve your medical practice right to review, assess and evaluate specimens which you send out for

preparation by a clinical lab, to work with and counsel your patients regarding those results, and bill for payment for those professional medical services.

SB 1369 would have required clinical laboratories providing full anatomic pathology services, including histopathology interpretation, to directly bill either the patient or the responsible third-party payer for those services. SB 1369 was amended to ensure that a physician who originates a request for clinical laboratory technical preparation only of slides and specimens will continue to be the party that performs the professional medical assessment and evaluation of those materials and be able to bill for payment for those professional medical services. Consequently, dermatologists would legally be able to continue sending tissue out for technical slide preparation, receive the microscopic slides, interpret the slides, and be able to bill for their services.

As is always the case with patient protection legislation, some special interest appears on the scene trying to script the outcome to their commercial advantage. Dermatology, and colleagues in medicine supporting the bill, had to fend off the efforts of a national clinical laboratory corporation, Quest Diagnostics, to permit only corporate clinical laboratories to engage in billing for all services. This was proposed under the guise of separating service-originating physicians from the opportunity to inflate charges or bill for services not performed or supervised. Throughout



Continued on page 4

CalDerm™ Officers 2006-2007

Seth Matarasso, M.D.

President, San Francisco

Jack Resneck, Jr., M.D.

Past President, San Francisco

Craig Kraffert, M.D.

President-Elect, Redding

Margaret Parsons, M.D.

Secretary/Treasurer, Sacramento

CalDerm™ Board of Directors 2006-2007

Todd Anhalt, M.D.

Los Altos

Michael Borok, M.D.

Northridge

Jeffrey Carmel, M.D.

Fremont

Robert Carson, Jr., M.D.

Oxnard

Nancy Chen, M.D.

Escondido

Jeffrey Crowley, M.D.

Bakersfield

Daniel Dwyer, M.D.

Costa Mesa

Daniel Gormley, M.D.

Glendora

Ann Haas, M.D.

Sacramento

Steven Hodgkin, M.D.

Victorville

Thomas Hoffman, M.D.

Menlo Park

Gary Lask, M.D.

Los Angeles

Matthew Luxenberg, M.D.

Los Alamitos

Comron Maleki, M.D.

Thousand Oaks

Alexander Miller, M.D.

Yorba Linda

Isaac Neuhaus, M.D.

San Francisco

Jerome Potozkin, M.D.

Walnut Creek

Wendy Roberts, M.D.

Rancho Mirage

James Waldman, M.D.

Irvine

David Woodley, M.D.

Los Angeles

Shan Pai, M.D.

Resident, San Francisco

Karmi Ferguson, MBA

Executive Director

John Valencia, Esq.

Legislative Advocate

Wilke, Fleury, Hoffelt, Gould & Birney

President's Message



Seth L. Matarasso, M.D.

Fears, Funds and the Future

This is my inaugural newsletter as President of the society and I would like to share some of my thoughts.

I have been privileged to serve on the Board of Directors for the California Society for Dermatology & Dermatologic Surgery for well over a decade and in fact remember when it was originally called the California Dermatology Society (CDS). To be unabashedly honest, when ultimately asked to assume the role as President, I was both very (very) reluctant and excited! I was hesitant because I had to follow in the footsteps of our immediate Past President, Jack Resneck, Jr., M.D., who truly did extraordinary job, as well as, Drs. Roberts, Miller, Haas, Potozkin, Parsons and Kakita, to name only a few luminaries. Furthermore, as Dermatologists we fortunately chose an ideal profession – an occupation that keeps us both very busy and perhaps more content than many other medical specialties. Therefore I was unsure that I would have the necessary time to commit to the organization while maintaining my clinical and academic responsibilities. However my excitement prevailed and I put aside my reluctance.

What convinced me was our history and where we as an organization and specialty are going. I have personally witnessed an extraordinary revolution not only in the way we practice medicine, but how this Society has matured to represent our expanding interests – both medically and legislatively. I was brought on to this Board in its infancy and immediately faced the “AK” issue. This so galvanized our organization, that for the first time we found the need to require full time legislative advocacy in Sacramento. We gradual-

ly matured and battled the “conscious sedation” question that would have curtailed our basic scope of practice and our ability to safely perform ambulatory surgical procedures in our offices. The most recent success spearheaded by Board members was the resounding defeat of the “Botox Tax” that would have put an undue financial burden on many of our members.

The CalDerm Board is a group of physicians that are truly dedicated and volunteer countless hours to better the medical environment for our peers and have made every effort to be inclusive and cohesive. We reorganized our corporate infrastructure and adopted the trademark acronym CalDerm to further improve our identity and visibility.

It has also been a time that we have been successful in anticipating our funding and budget. Our Annual meeting has grown exponentially from a very small assembly of interested physicians to a scientific educational meeting that attracts many well respected speakers and a large audience from around the country. Our membership continues to grow and is diverse with representation from the entire state and all aspects of dermatology. We communicate with the 1600 dermatologists around the state by our monthly newsletter that has recently received corporate underwriting.

Clearly we have become a source to be reckoned with – a Society that garners national attention.

However, this is not the time for complacency – we must endeavor to be ever watchful and we continue to face major hurdles. Our specialty continues to be challenged with the ever expanding issue of the “Non Physician Practice of Medicine” often by ill trained personnel. Other imminent concerns include the potential recall or curtailed use of medical therapies such as hydroquinones and isotretinoin. If we as Dermatologists are to best preserve our patients’ safety and are to protect the future of our profession-then it is incumbent on each and every one of us to be vigilant.

With the state legislation getting even more tenuous, we will rely more and more on CalDerm as the only organization that advocates and protects the rights of California Dermatologists. We need your support! We need you to join our organization. We need you to help us to secure the future of Dermatology in the state of California.

Do not be hesitant – be excited about this organization!

Seth L. Matarasso, M.D.

Seth L. Matarasso, M.D.
President

Has Your Local "Medi-Spa" Gotten Under Your Skin?

Jerome Potozkin, M.D., CalDerm Board of Directors & Chair, Allied Health Committee

It seems like every other day, a so-called "Medi-Spa" is opening in a town near you. While many such operations are physician-owned and operate within the law, many others violate basic provisions of California's Medical Practice Act ranging from violating the ban on the corporate practice of medicine to the offering of medical services by non-physicians. Many "Medi-Spas" employ a physician "medical director" who often simply allows the facility use of his/her license in exchange for financial compensation (itself a violation of California law). Most of these physician "rent-a-docs" are not Dermatologists or Plastic Surgeons. A small sampling in Northern California uncovered Rectal Surgeons, Psychiatrists, Obstetricians and Emergency Room physicians acting as medical directors.

The following types of medical practice ownership and operating structures are prohibited in California:

- Non-physicians operating in a business for which physician ownership and operation are required: any business advertising, offering, and/or providing patient evaluation, diagnosis, care and/or treatment. These are services which can only be offered or provided by physicians.
- Physician(s) operating a medical practice as a limited liability company, a limited liability partnership, or a general corporation.
- Management Service Organizations arranging for, advertising, or providing medical services rather than only providing administrative staff and services for a physician's medical practice (non-physician exercising controls over a physician's medical practice, even where physicians own and operate the business).
- A physician acting as "medical director" when the physician does not own the practice. For example, a business offering spa treatments that include medical procedures such as Botox injections, laser hair removal, and medical microdermabrasion, that contracts with or hires a physician as its "medical director." Source: Medical Board of California.

Recently, I successfully reported to the Medical Board of California, an operation in which a nurse operated a "Medi-Spa" illegally with a physician medical director. The physician was unaware of the corporate bar on the practice of medicine. The facility has since closed. These facilities

will continue to operate unless you report them to the Medical Board. First find out who owns the business. You can call the business or go online by "Googling" the fictitious business name and the county where it is operating. You can then find out the owner by typing in the name of the business. If it is not an M.D., report this to the Medical Board (see "how to file a complaint" below). For more information go to:
http://www.medbd.ca.gov/Corporate_Practice.htm.

Physician-operated businesses operating under a fictitious name must have the fictitious name registered with the Medical Board, except (1) when only the physician's name is used, followed by Medical Doctor, M.D., Medical Corporation, Medical Corp., Professional Corporation, Prof. Corp., Corporation, Corp., Incorporated or Inc., such as "John Doe Medical Corporation" or "John Doe, M.D. Inc.," and (2) when the physician contracts with, is employed by, or is on the staff of, an outpatient surgery settings accredited by IMQ, AAAHC, AAAASF or JCAHO. Failure to register is a violation reportable to the Medical Board of California. The purpose of a fictitious name permit (FNP) is to allow a licensed physician and surgeon or podiatrist to practice under a name other than his or her own, and to assure California patients that the medical services they're being offered are, in fact, offered by a physician and surgeon eligible to do so.

California Business and Professions Code section 2285 states: "The use of any fictitious, false, or assumed name, or any name other than his or her own by a licensee either alone, in conjunction with a partnership or group, or as the name of a professional corporation, in any public communication, advertisement, sign, or announcement of his or her practice without a fictitious-name permit...constitutes unprofessional conduct." Source: Medical Board of CA.

There are other common violations of the Medical Practice Act that can, and should, be reported. Most of these have to do with truth in advertising. To avoid a reportable violation, a physician using "before and after" photographs in an advertisement must use photographs of an actual patient, must clearly label what was done, and must clearly indicate that results may vary. The use of photographs of models that do not clearly state they are

models is also a violation. The above applies to all print and electronic advertisements. Using due diligence, you might want to review your own advertising to ensure that is in compliance.

If California Dermatologists choose to do nothing, then nothing will happen! ☺

It is up to you to report these facilities when they violate California Law.

Send the complaint to:

Medical Board of California
Central Complaint Unit
1426 Howe Avenue, Suite 54
Sacramento, CA 95825-3236
(916) 263-2382 Phone
(916) 263-2944 Fax
www.medbd.ca.gov

WORKER'S COMP RATES LOWERED AGAIN!

If your office qualifies, a new program sponsored by CalDerm may help you save nearly 40% over the prevailing rate. CalDerm now sponsors a special worker's compensation insurance program for employers with fewer than 50 employees and a good track record of controlling losses. In partnership with InterWest Insurance Services, rates currently offered are: **Group Rate at 1.74** and **Non-Group Rate at 1.83**. Rates are expected to lower effective January 1, 2007 - please call for updated quotes.

To get a competitive quote, contact **Dianne Wall, Program Specialist**, at (916) 609-8354 or email her at DWall@iwins.com

the legislative session, the bill's author, Senator Abel Maldonado, saw through the thinly-veiled business-grab by Quest, and resisted giving them a corner on the market.

In addition to CalDerm's months-long work on this bill, it's noteworthy that the California Attorney General has subpoenaed information related to Quest Diagnostic Medi-Cal Program billings for time periods ranging from three to 10 years!

Responding to a late-session, joint effort by Quest and Pathology to try to end Dermatology billing for specimen evaluation, CalDerm was forced to oppose and help defeat SB 1369 over the strong support by California Society of Pathologists. CSP supported SB 1369 as part of the national pathology campaign to impose direct billing requirements by clinical labs as a purported antidote to physician markup and billing for work not personally performed or supervised.

Faced with the possible defeat of the bill at its first hearing, CSP make the tactical choice to accept amendments from Quest lobbyists who promised to work for the bill if pathology would agree to the insertion of language to allow clinical laboratories to direct bill so-called "referring" laboratories, other than referring physician operated laboratories, creating a gigantic loophole for commercial, corporate laboratories to bill for work not done or supervised by them. Ironically, this would have encouraged the very inflation or mark-up of charges to payers that was the supposed target of the bill. The specific, and rather lame, rationale was that some labs simply could not perform the complexity of work referred to them so they, in turn, would need to refer out for further lab work by another lab, but needed the capacity to bill for work not performed or supervised!

Bill Triggers Process to Close Rent-a-Doc "Supervision" of Laser Cosmetic Procedures - SB 1423 (Figueroa) Signed by Governor

After months of hard work to keep a good bill designed to close a gaping loophole in the law that permits unsupervised physician delegation of cosmetic laser medical procedures on track, SB 1423 has been signed into law by Governor Schwarzenegger.

SB 1423 initiates a process to close a loophole in California law regulating physician supervision of allied health professionals when delegating high

"CalDerm has resolved that there is no place in California health care for allowing high risk, laser medical procedures to be managed by anyone other than a licensed California physician and surgeon."

risk cosmetic medical procedures - a loophole regularly exploited to subject patients to undue risk. CalDerm physician members throughout California are treating the terrible health care outcomes resulting from non-physicians using lasers to provide cosmetic medical treatment.

CalDerm has resolved that there is no place in California health care for allowing high risk, laser medical procedures to be managed by anyone other than a licensed California physician and surgeon.

To that end, CalDerm, in concert with its colleagues in California medicine, supported SB 1423 amendments to:

1. Require the Medical Board of California, and the Board of Registered Nursing, to jointly evaluate issues surrounding the use of laser or intense pulsed light device for elective cosmetic procedures by health care practitioners.

2. Determine the appropriate level of physician supervision needed in elective cosmetic laser procedures.

3. Resolve who should be able to purchase and own laser equipment in California.

The bill charges these regulatory Boards to promulgate regulations to implement changes pursuant to their findings and recommendations. CalDerm will work on the implementation phase of this new law every step of the way, and will keep you posted.

Oral and Maxillofacial Dentists to Perform Elective Cosmetic Surgery Due to SB 438 (Migden)

After paving the way with about \$2 million in bipartisan contributions over the last three years, the California Dental Association has scored a win in the latest chapter of the relentless State Capitol saga of "who wants to be a doctor without having to bother with medical school." Fronting for single-degree oral/maxillofacial dentists, a new state law resulted from CDA's campaign to snag a part of the all-cash elective cosmetic medical procedure realm in California for dentistry.

As part of the Governor's veto of SB 1336 (Burton) in 2004 (in which CalDerm played a key role in partnership with the "house of medicine" in California, including CMA, and state societies for plastic surgery and ophthalmology), Governor Schwarzenegger's veto message called for an "occupational study" to "examine the existing training and education requirements and make an assessment as to whether the additional permit standards proposed in the bill would enable the OMS to practice safely and competently in the expanded situations allowed for by the bill." The study was released by the State Department of Consumer Affairs (which houses both the Medical Board of California and the Dental Board of California) just after

Memorial Day, though it was actually completed and submitted to the state by a retained outside consulting firm in February 2006.

The report's central conclusions claimed:

"Our findings indicate that the additional permitted standards and credentialing process proposed in Senate Bill 438 would enable the OMSs to practice safely and competently. Our conclusion is based on a thorough review of OMS education, training, experience, required credentials to be submitted; and, a review of current practice that includes the procedures cited in the bill."

The full 85-page report is accessible on the CalDerm website at www.calderm.org. The occupational study's remarkable conclusions can be found in full on pages 65-69 of the document.

This was just the sort of "objective" report needed to bolster the dentists multi-million dollar campaign. Ultimately, however, political juice led to the revival of the once-defeated SB 438, and its eventual enactment into law. CalDerm, together with its colleagues at CMA and in other specialty societies, will participate in the rulemaking process that begins in 2007 to establish the mechanics for

elective cosmetic surgery by dentists. Over time, as you encounter the inevitable cases of malpractice anticipated to result, CalDerm will need your actual-practice data to counter the projections of safety advanced by the proponents.

BOE Ends Sales and Use Tax Claims on Physician Administration of All Prescription Medicines - The End of the "Botax"

CalDerm has won the "Battle on Botax" - you can review the final Regulation 1591 on the CalDerm web site at www.calderm.org.

Continued on page 6

CalDerm would like to thank the following physician members for their support of CalDerm PAC during the 2006 Membership Year.

GEORGIA ABRAMS, SARATOGA
JAY APPLEBAUM, ORANGE
LAWRENCE BASS, SACRAMENTO
MICHAEL BASTIEN, THOUSAND OAKS
JAMES BECKETT, SANTA CRUZ
ROBERT BEER, BRENTWOOD
FRANK BERRY, MERCED
JEFFERY BINSTOCK, SAN FRANCISCO
CATHERINE BIREN, MODESTO
ALISON BOUDREAUX, SACRAMENTO
R. SCOTT BOUGHTON, LA JOLLA
NORMAN BROOKS, ENCINO
LISA BUKATY, IRVINE
ROBERT BUSHMAN, LA MESA
JEFFREY CARMEL, FREMONT
ANDREW CATTANO, OXNARD
NANCY CHEN, ESCONDIDO
VERA CHOTZEN, SACRAMENTO
JOSEPH COLLEGE, ESCONDIDO
MARCUS CONANT, SAN FRANCISCO
JEFFREY CROWLEY, BAKERSFIELD
JANICE DAVOLITO, PASADENA
SUNIL DHAWAN, FREMONT
LAWRENCE EICHENFIELD, SAN DIEGO
MARVIN ENGEL, WALNUT CREEK
ORVAL ESHELMAN, LOS GATOS
MICHAEL FAZIO, SACRAMENTO
CARY FEIBLEMAN, LONG BEACH
PETER FORD, SANTA BARBARA
DAVID FRIEDMAN, ANAHEIM
JOHN GEISSE, VALLEJO
RICK GLOGAU, SAN FRANCISCO

PETER GOLDMAN, LOS ANGELES
JEAN GORDON, MOUNTAIN VIEW
DANIEL GORMLEY, GLENDORA
ROBERT G. GREENBERG, SAN RAMON
KENNETH GROSS, SAN DIEGO
JOHN GUAGENTI, GLENDALE
DAVID GUILLEN, SACRAMENTO
ROLAND HART, STOCKTON
MARY HARTMAN, SAN RAMON
ROBERT HARTMAN, VAN NUYS
LAYNE HERSH, SACRAMENTO
JULIE HODGE, FULLERTON
STEVEN HODGKIN, VICTORVILLE
JOHN HONCH, LA CANADA
T. GWEN IWASAKI, TORRANCE
TIMOTHY JOCHEN, PALM SPRINGS
WERNER JU, SAN MATEO
LENORE KAKITA, GLENDALE
DIANNE KAMENETSKY, TRUCKEE
ANDREW KAUFMAN, THOUSAND OAKS
A. PAUL KELLY, OAKLAND
LORRIE KLEIN, LAGUNA NIGUEL
DALE KOOISTRA, POWAY
CRAIG KRAFFERT, REDDING
GARY LASK, ENCINO
ROBERT LEIBOWITZ, LOS ANGELES
CHARLES LINDEN, TARZANA
JAMES LONGABAUGH, SAN LUIS OBISPO
MATTHEW LUXENBERG, LOS ALAMITOS
COMRON MALEKI, THOUSAND OAKS
BRUCE MALTZ, SAN MATEO
LESLIE MARK, SAN DIEGO
HARRISON MCDONALD, ENCINITAS
ANN MCNAY, FREMONT
MARILYN MEHLMAUER, LOS ANGELES
ALEXANDER MILLER, YORBA LINDA
ROBERT MILLER, LONG BEACH
MICHAEL MOATS, SANTA MARIA

DEAN MURPHY, PLACENTIA
FRANK NOODLEMAN, CAMPBELL
MARGARET OLSEN, LOS ANGELES
KEVIN OSBURN, SANTA BARBARA
MARGARET PARSONS, SACRAMENTO
EARL PEARSON, PORTERVILLE
KURT PICKUS, TORRANCE
LEAH PRESS, FRESNO
NORMAN PRICE, WALNUT CREEK
MARION QUINN, PASADENA
CURTIS RASKIN, CONCORD
LAUREN REAGER, SANTA MONICA
TIM RICHARDSON, RANCHO MIRAGE
LAWRENCE RIVKIN, BEVERLY HILLS
WENDY ROBERTS, RANCHO MIRAGE
HAROLD RODGERS, SAN JOSE
ROBERT ROTH, FREMONT
MARTIN SALM, STATELINE
HARRY SAPERSTEIN, BEVERLY HILLS
ELIZABETH SHIM, SANTA MONICA
DAVID SIRE, FULLERTON
DOUGLAS SMITH, LONG BEACH
DAVID SOUTH, FREEDOM
PATRICIA SPEELMAN, CARLSBAD
STEVEN STANOWICZ, ORANGE
JON STARR, PALO ALTO
ROBERT DE STEFANO, CALABASAS
DOUG SWINEHART, FRESNO
THOMAS VAN METER, SANTA BARBARA
CHRISTOPHER VILLARD, VISALIA
JANE WADA, MONTROSE
GARY WAGNER, MODESTO
KATHLEEN M. WELSH, SAN FRANCISCO
J. ROBERT WEST, REDLANDS
GAYLE WIDYOLAR, LAGUNA HILLS
DAVID WOLF, VISTA
SUSAN WOLF, SAN MATEO



CalDerm™ UPDATE

NEWS FOR CALIFORNIA
DERMATOLOGISTS

**California Society of
Dermatology & Dermatologic
Surgery (CalDerm)**

**980 Ninth Street, PMB #1600
Sacramento, CA 95814**

**(916) 498-1712 Phone
(916) 244-0330 Fax
membership@calderm.org Email
www.calderm.org Web Site**

**Karmi Ferguson, MBA
Executive Director**

New ID for State Society

CalDerm will become the new identifying acronym for the California Society of Dermatology & Dermatologic Surgery, replacing the former acronym, CDS. In effort to establish a more easily identifiable brand and organizational consistency, CalDerm has been trademarked to now represent the society on all forms of communication.



This issue of CalDerm Update is underwritten by a grant from Allergan. On behalf of the California Society of Dermatology & Dermatologic Surgery, we wish to thank Allergan for this support and in helping to inform readers of issues that protect the business interests of all dermatologists in California.

PRESORTED
FIRST CLASS
US POSTAGE
PAID
PITTSBURG, CA
PERMIT NO. 130

Continued from page 5

In a major policy win, the state Board of Equalization has reaffirmed the tax-exempt status of all FDA-approved prescription medicines used by physicians in the treatment of their patients. This action ends BOE tax auditor reviews of physician and patient files to determine whether the "use" of prescription medicines like Botox® and Botox Cosmetic® are "medical" or "cosmetic" in nature.

Responding to the plight of a number of CalDerm members (and non-member physicians around the state), CalDerm led a coalition of medical specialties and the CMA to secure this key change in state regulatory law.

Estimates were that CalDerm members, and other physicians, were facing tens and hundreds of thousands of dollars in retroactive tax assessments. The prospective tax impact on all physicians was projected in excess of \$6 million with potential liability arising out of everyday uses of prescription medicines by California physicians.

This CalDerm win, in concert with others in the house of medicine, pro-

vides extraordinary financial relief for practitioners' everyday use of Botox® and Botox Cosmetic® (singled out during this process), and all medications.

2007-2008 Issues Projection for CalDerm

1. Pathology will be back with legislation on physician mark-up for work not personally performed or personally supervised. We expect a pathology-generated bill for direct billing only by clinical laboratories.

2. Rulemaking work begins in earnest on the question of physician supervision of allied health professionals when delegating aspects of the practice of medicine.

3. Closing any legal loophole presently being exploited leading to ownership of medical grade lasers in California by unqualified allied health professionals and non physician personnel.

4. Anticipating, and preparing to respond to, the next group of allied health practitioners who will want to become physicians without bothering to go to medical school. ●