Classification Title	**Board/Bureau/Division**
Management Services Technician	Medical Board of California
Working Title	**Office/Unit/Section / Geographic Location**
Mandatory Report and Malpractice Reviewer	Enforcement/CCU Physician Conduct/Complaint Intake - Sacramento
Position Number	**Name and Effective Date**
629-170-5278-907	

GENERAL STATEMENT

Under the supervision of the Supervisor I, Physician Conduct/Complaint Intake Section, the Management Services Technician (MST) performs the less technical review and analysis of mandatory reports submitted pursuant to the Business and Professions Code. The MST is responsible for managing the initial intake of the mandatory reports and review of the malpractice reporting caseload, requesting and reviewing supporting legal, medical records, and other materials relative to the malpractice reporting caseload. The MST also performs the initial intake of complaints submitted to the Medical Board of California (MBC) via mail, email, the online complaint system, etc.

Specific duties include, but are not limited to, the following:

A. Specific Assignments [Essential (E) / Marginal (M) Functions]

50% Mandatory report and Malpractice Case Management (E)

Receives and initiates complaints based on receipt of mandatory reports, including but not limited to, reports submitted pursuant to Business and Professions Code sections 805.01, 805, 805.8, and 801.01 (malpractice cases). Upon completion of the complaint initiation of the mandatory reports submitted pursuant to Business and Professions Code sections 805.01, 805 and 805.8, routes the complaint file to the Analyst II. Analyzes malpractice cases reported to MBC, pursuant to Business & Professions Code Section 801.01, to confirm the case meets the criteria for further review by MBC. Determines the case priority whether urgent (patient death, serious bodily injury, sexual misconduct or physician impairment) or high (all other complaint types, i.e., quality of care not involving patient death or serious bodily injury). Reads, analyzes, summarizes and enters case information by inputting standardized codes that coincide with the case information into the Enforcement Tracking System. **(30%)**

Identifies the required, supporting materials to support the malpractice report. Requests sensitive and confidential documentation (medical records, depositions, etc.) from all parties (licensee, licensee's legal counsel, liability insurance company, etc.) to complete the malpractice reporting case file and performs follow-up when documentation is not received.

Reviews the medical records provided and the physician's summary or explanation of the care to ensure that all relevant medical records have been received; ensures urgent cases are expedited and all required documentation is received timely.

Reviews the information received from licensee, licensee's legal counsel, liability insurance companies to determine whether to secure a medical expert's review, recommend a field investigation, or close without further review, and makes a recommendation to the manager on the disposition of the complaint.

Reviews the medical expert's report and either refers the case to the appropriate geographic field office for further investigation, requests additional information requested by the medical expert, or closes the case. **(20%)**

40% Administrative Support (E)

Scans and uploads pertinent case information into a cloud-based system (Box) for review by a medical expert for 801.01 cases and Central Complaint Unit (CCU) staff. Enters information into MBC's Consultant Medical Expert Management Application (CEMA) database to document referral of a case for review by a medical expert for 801.01 cases and CCU staff.

Assembles and prepares complaint files for upload to the appropriate geographic field office for further investigation for 801.01 cases and CCU staff.

Prepares correspondence to complainants relaying status and final disposition for 801.01 cases and CCU staff.

10% Public Information (M)

Provides consumers and licensees information regarding the MBC's complaint process, including time frames for complaint processing, conducting investigations, and finalizing dispositions of complaints through the administrative process, and determining whether issues are with the MBC's jurisdiction.

B. Supervision Received

The MST is under the direction of and receives the majority of assignments from the Supervisor I, however, direction and assignments may also come from the Supervisor II.

C. Supervision Exercised

None

D. Administrative Responsibility

None

E. Personal Contacts

The MST will have occasional direct contact with consumers regarding the progression of their case. The incumbent will also have frequent direct contact with medical insurance carriers, physicians, or hospitals requesting information for the case files. The incumbent will have daily direct contact with Enforcement Management regarding case status and frequent contact with Health Quality Investigation Unit investigators, MBC special investigators, and medical experts.

F. Actions and Consequences

The MSTs failure to perform the duties adequately may result in the improper evaluation of incidents of malpractice by practitioners whose care may have contributed to a patient's death or serious bodily injury. Failing to timely and appropriately identify physicians whose competence may be questionable potentially places California's health care consumers in a harmful situation and raises concern that the MBC is not carrying out its mission to protect the public.

G. Functional Requirements

No specific physical requirements are required. The MST works 40 hours per week in an office setting, with artificial light and temperature control. Daily access to and use of a personal computer and telephone is essential. Sitting and standing requirements are consistent with office work.

H. Other Information

The MST must possess good written and verbal communication skills, use good judgment in decision-making, exercise creativity and flexibility in problem identification and resolution, manage time and resources effectively, and be responsive to MBC Staff, MBC Board and Committee Members and DCA management needs.

In all job functions, employees are responsible for creating an inclusive, safe, and secure work environment that values diverse cultures, perspectives, and experiences, and is free from discrimination. Employees are expected to provide all members of the public equitable services and treatment, collaborate with underserved communities and tribal governments, and work toward improving outcomes for all Californians.

Title 11, section 703 (d) of the California Code of Regulations requires criminal record checks of all personnel who have access to Criminal Offender Record Information (CORI). Pursuant to this requirement, applicants for this position will be required to submit fingerprints to the Department of Justice and be cleared before hiring. In accordance with DCA's (CORI) procedures, clearance shall be maintained while employed in a CORI-designated position. Additionally, the position routinely works with sensitive and confidential issues and/or materials and is expected to maintain the privacy and confidentiality of documents and topics pertaining to individuals or to sensitive program matters at all times.

I have read and understand the duties listed above and I can perform these duties with or without reasonable accommodation. (If you believe reasonable accommodation is necessary, discuss your concerns with the hiring supervisor. If unsure of a need for reasonable accommodation, inform the hiring supervisor, who will discuss your concerns with the Health & Safety analyst.)

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Employee Signature Date

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Printed Name

I have discussed the duties of this position with and have provided a copy of this duty statement to the employee named above.

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Supervisor Signature Date

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Printed Name

Revised: 03/2026