



Rep. Michael J. Zalewski

Filed: 11/18/2014

09800SB0649ham004

LRB098 04424 MGM 62258 a

1 AMENDMENT TO SENATE BILL 649

2 AMENDMENT NO. _____. Amend Senate Bill 649, AS AMENDED, by
3 replacing everything after the enacting clause with the
4 following:

5 "Section 5. The Regulatory Sunset Act is amended by adding
6 Section 4.25a as follows:

7 (5 ILCS 80/4.25a new)

8 Sec. 4.25a. Act repealed on December 31, 2015. The
9 following Act is repealed on December 31, 2015:

10 The Medical Practice Act of 1987.

11 (5 ILCS 80/4.24 rep.)

12 Section 10. The Regulatory Sunset Act is amended by
13 repealing Section 4.24.

14 Section 15. The Medical Practice Act of 1987 is amended by

1 changing Sections 2, 3, 7, 7.5, 8, 9, 9.3, 9.5, 13, 17, 18, 19,
2 21, 22, 24, 33, 36, 37, 38, 40, and 41 as follows:

3 (225 ILCS 60/2) (from Ch. 111, par. 4400-2)

4 (Section scheduled to be repealed on December 31, 2014)

5 Sec. 2. Definitions. For purposes of this Act, the
6 following definitions shall have the following meanings,
7 except where the context requires otherwise:

8 "Act" means the Medical Practice Act of 1987.

9 "Address of record" means the designated address recorded
10 by the Department in the applicant's or licensee's application
11 file or license file as maintained by the Department's
12 licensure maintenance unit. It is the duty of the applicant or
13 licensee to inform the Department of any change of address and
14 those changes must be made either through the Department's
15 website or by contacting the Department.

16 "Chiropractic physician" means a person licensed to treat
17 human ailments without the use of drugs and without operative
18 surgery. Nothing in this Act shall be construed to prohibit a
19 chiropractic physician from providing advice regarding the use
20 of non-prescription products or from administering atmospheric
21 oxygen. Nothing in this Act shall be construed to authorize a
22 chiropractic physician to prescribe drugs.

23 "Department" means the Department of Financial and
24 Professional Regulation.

25 "Disciplinary Action" means revocation, suspension,

1 probation, supervision, practice modification, reprimand,
2 required education, fines or any other action taken by the
3 Department against a person holding a license.

4 "Disciplinary Board" means the Medical Disciplinary Board.

5 "Final Determination" means the governing body's final
6 action taken under the procedure followed by a health care
7 institution, or professional association or society, against
8 any person licensed under the Act in accordance with the bylaws
9 or rules and regulations of such health care institution, or
10 professional association or society.

11 "Fund" means the Medical Disciplinary Fund.

12 "Impaired" means the inability to practice medicine with
13 reasonable skill and safety due to physical or mental
14 disabilities as evidenced by a written determination or written
15 consent based on clinical evidence including deterioration
16 through the aging process or loss of motor skill, or abuse of
17 drugs or alcohol, of sufficient degree to diminish a person's
18 ability to deliver competent patient care.

19 "Licensing Board" means the Medical Licensing Board.

20 "Physician" means a person licensed under the Medical
21 Practice Act to practice medicine in all of its branches or a
22 chiropractic physician.

23 "Professional Association" means an association or society
24 of persons licensed under this Act, and operating within the
25 State of Illinois, including but not limited to, medical
26 societies, osteopathic organizations, and chiropractic

1 organizations, but this term shall not be deemed to include
2 hospital medical staffs.

3 "Program of Care, Counseling, or Treatment" means a written
4 schedule of organized treatment, care, counseling, activities,
5 or education, satisfactory to the Disciplinary Board, designed
6 for the purpose of restoring an impaired person to a condition
7 whereby the impaired person can practice medicine with
8 reasonable skill and safety of a sufficient degree to deliver
9 competent patient care.

10 "Reinstate" means to change the status of a license from
11 inactive or nonrenewed status to active status.

12 "Restore" means to remove an encumbrance from a license due
13 to probation, suspension, or revocation.

14 "Secretary" means the Secretary of the Department of
15 Financial and Professional Regulation.

16 (Source: P.A. 97-462, eff. 8-19-11; 97-622, eff. 11-23-11.)

17 (225 ILCS 60/3) (from Ch. 111, par. 4400-3)

18 (Section scheduled to be repealed on December 31, 2014)

19 Sec. 3. Licensure requirement. No person shall practice
20 medicine, or any of its branches, or treat human ailments
21 without the use of drugs and without operative surgery, without
22 a valid, active ~~existing~~ license to do so, except that a
23 physician who holds an active license in another state or a
24 second year resident enrolled in a residency program accredited
25 by the Liaison Committee on Graduate Medical Education or the

1 Bureau of Professional Education of the American Osteopathic
2 Association may provide medical services to patients in
3 Illinois during a bonafide emergency in immediate preparation
4 for or during interstate transit.

5 (Source: P.A. 89-702, eff. 7-1-97.)

6 (225 ILCS 60/7) (from Ch. 111, par. 4400-7)

7 (Section scheduled to be repealed on December 31, 2014)

8 Sec. 7. Medical Disciplinary Board.

9 (A) There is hereby created the Illinois State Medical
10 Disciplinary Board. The Disciplinary Board shall consist of 11
11 members, to be appointed by the Governor by and with the advice
12 and consent of the Senate. All members shall be residents of
13 the State, not more than 6 of whom shall be members of the same
14 political party. All members shall be voting members. Five
15 members shall be physicians licensed to practice medicine in
16 all of its branches in Illinois possessing the degree of doctor
17 of medicine. One member shall be a physician licensed to
18 practice medicine in all its branches in Illinois possessing
19 the degree of doctor of osteopathy or osteopathic medicine. One
20 member shall be a chiropractic physician licensed to practice
21 in Illinois and possessing the degree of doctor of
22 chiropractic. Four members shall be members of the public, who
23 shall not be engaged in any way, directly or indirectly, as
24 providers of health care.

25 (B) Members of the Disciplinary Board shall be appointed

1 for terms of 4 years. Upon the expiration of the term of any
2 member, their successor shall be appointed for a term of 4
3 years by the Governor by and with the advice and consent of the
4 Senate. The Governor shall fill any vacancy for the remainder
5 of the unexpired term with the advice and consent of the
6 Senate. Upon recommendation of the Board, any member of the
7 Disciplinary Board may be removed by the Governor for
8 misfeasance, malfeasance, or wilful neglect of duty, after
9 notice, and a public hearing, unless such notice and hearing
10 shall be expressly waived in writing. Each member shall serve
11 on the Disciplinary Board until their successor is appointed
12 and qualified. No member of the Disciplinary Board shall serve
13 more than 2 consecutive 4 year terms. No member shall be
14 reappointed if such reappointment would cause that person's
15 service on the Board to be longer than 10 successive years.

16 In making appointments the Governor shall attempt to insure
17 that the various social and geographic regions of the State of
18 Illinois are properly represented.

19 In making the designation of persons to act for the several
20 professions represented on the Disciplinary Board, the
21 Governor shall give due consideration to recommendations by
22 members of the respective professions and by organizations
23 therein.

24 (C) The Disciplinary Board shall annually elect one of its
25 voting members as chairperson and one as vice chairperson. No
26 officer shall be elected more than twice in succession to the

1 same office. Each officer shall serve until their successor has
2 been elected and qualified.

3 (D) (Blank).

4 (E) Six voting members of the Disciplinary Board, at least
5 4 of whom are physicians, shall constitute a quorum. A vacancy
6 in the membership of the Disciplinary Board shall not impair
7 the right of a quorum to exercise all the rights and perform
8 all the duties of the Disciplinary Board. Any action taken by
9 the Disciplinary Board under this Act may be authorized by
10 resolution at any regular or special meeting and each such
11 resolution shall take effect immediately. The Disciplinary
12 Board shall meet at least quarterly. ~~The Disciplinary Board is
13 empowered to adopt all rules and regulations necessary and
14 incident to the powers granted to it under this Act.~~

15 (F) Each member, and member-officer, of the Disciplinary
16 Board shall receive a per diem stipend as the Secretary shall
17 determine. Each member shall be paid their necessary expenses
18 while engaged in the performance of their duties.

19 (G) The Secretary shall select a Chief Medical Coordinator
20 and not less than 2 Deputy Medical Coordinators who shall not
21 be members of the Disciplinary Board. Each medical coordinator
22 shall be a physician licensed to practice medicine in all of
23 its branches, and the Secretary shall set their rates of
24 compensation. The Secretary shall assign at least one medical
25 coordinator to a region composed of Cook County and such other
26 counties as the Secretary may deem appropriate, and such

1 medical coordinator or coordinators shall locate their office
2 in Chicago. The Secretary shall assign at least one medical
3 coordinator to a region composed of the balance of counties in
4 the State, and such medical coordinator or coordinators shall
5 locate their office in Springfield. The Chief Medical
6 Coordinator shall be the chief enforcement officer of this Act.
7 None of the functions, powers, or duties of the Department with
8 respect to policies regarding enforcement or discipline under
9 this Act, including the adoption of such rules as may be
10 necessary for the administration of this Act, shall be
11 exercised by the Department except upon review of the
12 Disciplinary Board. ~~Each medical coordinator shall be the chief~~
13 ~~enforcement officer of this Act in his or her assigned region~~
14 ~~and shall serve at the will of the Disciplinary Board.~~

15 The Secretary shall employ, in conformity with the
16 Personnel Code, investigators who are college graduates with at
17 least 2 years of investigative experience or one year of
18 advanced medical education. Upon the written request of the
19 Disciplinary Board, the Secretary shall employ, in conformity
20 with the Personnel Code, such other professional, technical,
21 investigative, and clerical help, either on a full or part-time
22 basis as the Disciplinary Board deems necessary for the proper
23 performance of its duties.

24 (H) Upon the specific request of the Disciplinary Board,
25 signed by either the chairperson, vice chairperson, or a
26 medical coordinator of the Disciplinary Board, the Department

1 of Human Services, the Department of Healthcare and Family
2 Services, ~~or~~ the Department of State Police, or any other law
3 enforcement agency located in this State shall make available
4 any and all information that they have in their possession
5 regarding a particular case then under investigation by the
6 Disciplinary Board.

7 (I) Members of the Disciplinary Board shall be immune from
8 suit in any action based upon any disciplinary proceedings or
9 other acts performed in good faith as members of the
10 Disciplinary Board.

11 (J) The Disciplinary Board may compile and establish a
12 statewide roster of physicians and other medical
13 professionals, including the several medical specialties, of
14 such physicians and medical professionals, who have agreed to
15 serve from time to time as advisors to the medical
16 coordinators. Such advisors shall assist the medical
17 coordinators or the Disciplinary Board in their investigations
18 and participation in complaints against physicians. Such
19 advisors shall serve under contract and shall be reimbursed at
20 a reasonable rate for the services provided, plus reasonable
21 expenses incurred. While serving in this capacity, the advisor,
22 for any act undertaken in good faith and in the conduct of his
23 or her duties under this Section, shall be immune from civil
24 suit.

25 (Source: P.A. 97-622, eff. 11-23-11.)

1 (225 ILCS 60/7.5)

2 (Section scheduled to be repealed on December 31, 2014)

3 Sec. 7.5. Complaint Committee.

4 (a) There shall be a Complaint Committee of the
5 Disciplinary Board composed of at least one of the medical
6 coordinators established by subsection (G) of Section 7 of this
7 Act, the Chief of Medical Investigations (person employed by
8 the Department who is in charge of investigating complaints
9 against physicians and physician assistants), the Chief of
10 Medical Prosecutions (the person employed by the Department who
11 is in charge of prosecuting formal complaints against
12 physicians and physician assistants), and at least 3 ~~voting~~
13 members of the Disciplinary Board (at least 2 of whom shall be
14 physicians) designated by the Chairperson of the Disciplinary
15 Board with the approval of the Disciplinary Board. ~~The~~
16 ~~Disciplinary Board members so appointed shall serve one year~~
17 ~~terms and may be eligible for reappointment for subsequent~~
18 ~~terms.~~

19 (b) The Complaint Committee shall meet at least twice a
20 month to exercise its functions and duties set forth in
21 subsection (c) below. At least 2 members of the Disciplinary
22 Board shall be in attendance in order for any business to be
23 transacted by the Complaint Committee. The Complaint Committee
24 shall make every effort to consider expeditiously and take
25 prompt action on each item on its agenda.

26 (c) The Complaint Committee shall have the following duties

1 and functions:

2 (1) To recommend to the Disciplinary Board that a
3 complaint file be closed.

4 (2) To refer a complaint file to the office of the
5 Chief of Medical Prosecutions ~~(person employed by the~~
6 ~~Department who is in charge of prosecuting formal~~
7 ~~complaints against licensees)~~ for review.

8 (3) To make a decision in conjunction with the Chief of
9 Medical Prosecutions regarding action to be taken on a
10 complaint file.

11 (d) In determining what action to take or whether to
12 proceed with prosecution of a complaint, the Complaint
13 Committee shall consider, but not be limited to, the following
14 factors: sufficiency of the evidence presented, prosecutorial
15 merit under Section 22 of this Act, any recommendation made by
16 the Department, and insufficient cooperation from complaining
17 parties.

18 (Source: P.A. 97-622, eff. 11-23-11.)

19 (225 ILCS 60/8) (from Ch. 111, par. 4400-8)

20 (Section scheduled to be repealed on December 31, 2014)

21 Sec. 8. Medical Licensing Board.

22 (A) There is hereby created a Medical Licensing Board. The
23 Licensing Board shall be composed of 7 members, to be appointed
24 by the Governor by and with the advice and consent of the
25 Senate; 5 of whom shall be reputable physicians licensed to

1 practice medicine in all of its branches in Illinois,
2 possessing the degree of doctor of medicine; one member shall
3 be a reputable physician licensed in Illinois to practice
4 medicine in all of its branches, possessing the degree of
5 doctor of osteopathy or osteopathic medicine; and one member
6 shall be a reputable chiropractic physician licensed to
7 practice in Illinois and possessing the degree of doctor of
8 chiropractic. Of the 5 members holding the degree of doctor of
9 medicine, one shall be a full-time or part-time teacher of
10 professorial rank in the clinical department of an Illinois
11 school of medicine.

12 (B) Members of the Licensing Board shall be appointed for
13 terms of 4 years, and until their successors are appointed and
14 qualified. Appointments to fill vacancies shall be made in the
15 same manner as original appointments, for the unexpired portion
16 of the vacated term. No more than 4 members of the Licensing
17 Board shall be members of the same political party and all
18 members shall be residents of this State. No member of the
19 Licensing Board may be appointed to more than 2 successive 4
20 year terms. No member shall be reappointed if such
21 reappointment would cause that person's service on the Board to
22 be longer than 10 successive years.

23 (C) Members of the Licensing Board shall be immune from
24 suit in any action based upon any licensing proceedings or
25 other acts performed in good faith as members of the Licensing
26 Board.

1 (D) (Blank).

2 (E) The Licensing Board shall annually elect one of its
3 members as chairperson and one as vice chairperson. No member
4 shall be elected more than twice in succession to the same
5 office. Each officer shall serve until his or her successor has
6 been elected and qualified.

7 (F) None of the functions, powers or duties of the
8 Department with respect to policies regarding licensure and
9 examination under this Act, including the promulgation of such
10 rules as may be necessary for the administration of this Act,
11 shall be exercised by the Department except upon review of the
12 Licensing Board.

13 (G) The Licensing Board shall receive the same compensation
14 as the members of the Disciplinary Board, which compensation
15 shall be paid out of the Illinois State Medical Disciplinary
16 Fund.

17 (Source: P.A. 97-622, eff. 11-23-11.)

18 (225 ILCS 60/9) (from Ch. 111, par. 4400-9)

19 (Section scheduled to be repealed on December 31, 2014)

20 Sec. 9. Application for license. Each applicant for a
21 license shall:

22 (A) Make application on blank forms prepared and
23 furnished by the Department.

24 (B) Submit evidence satisfactory to the Department
25 that the applicant:

1 (1) is of good moral character. In determining
2 moral character under this Section, the Department may
3 take into consideration whether the applicant has
4 engaged in conduct or activities which would
5 constitute grounds for discipline under this Act. The
6 Department may also request the applicant to submit,
7 and may consider as evidence of moral character,
8 endorsements from 2 or 3 individuals licensed under
9 this Act;

10 (2) has the preliminary and professional education
11 required by this Act;

12 (3) (blank); and

13 (4) is physically, mentally, and professionally
14 capable of practicing medicine with reasonable
15 judgment, skill, and safety. In determining physical
16 and ~~7~~ mental ~~and professional~~ capacity under this
17 Section, the Licensing Board may, upon a showing of a
18 possible incapacity or conduct or activities that
19 would constitute grounds for discipline under this
20 Act, compel any applicant to submit to a mental or
21 physical examination and evaluation, or both, as
22 provided for in Section 22 of this Act. The Licensing
23 Board may condition or restrict any license, subject to
24 the same terms and conditions as are provided for the
25 Disciplinary Board under Section 22 of this Act. Any
26 such condition of a restricted license shall provide

1 that the Chief Medical Coordinator or Deputy Medical
2 Coordinator shall have the authority to review the
3 subject physician's compliance with such conditions or
4 restrictions, including, where appropriate, the
5 physician's record of treatment and counseling
6 regarding the impairment, to the extent permitted by
7 applicable federal statutes and regulations
8 safeguarding the confidentiality of medical records of
9 patients.

10 In determining professional capacity under this
11 Section, an individual may be required to complete such
12 additional testing, training, or remedial education as the
13 Licensing Board may deem necessary in order to establish
14 the applicant's present capacity to practice medicine with
15 reasonable judgment, skill, and safety. The Licensing
16 Board may consider the following criteria, as they relate
17 to an applicant, as part of its determination of
18 professional capacity:

19 (1) Medical research in an established research
20 facility, hospital, college or university, or private
21 corporation.

22 (2) Specialized training or education.

23 (3) Publication of original work in learned,
24 medical, or scientific journals.

25 (4) Participation in federal, State, local, or
26 international public health programs or organizations.

1 (5) Professional service in a federal veterans or
2 military institution.

3 (6) Any other professional activities deemed to
4 maintain and enhance the clinical capabilities of the
5 applicant.

6 Any applicant applying for a license to practice
7 medicine in all of its branches or for a license as a
8 chiropractic physician who has not been engaged in the
9 active practice of medicine or has not been enrolled in a
10 medical program for 2 years prior to application must
11 submit proof of professional capacity to the Licensing
12 Board.

13 Any applicant applying for a temporary license that has
14 not been engaged in the active practice of medicine or has
15 not been enrolled in a medical program for longer than 5
16 years prior to application must submit proof of
17 professional capacity to the Licensing Board.

18 (C) Designate specifically the name, location, and
19 kind of professional school, college, or institution of
20 which the applicant is a graduate and the category under
21 which the applicant seeks, and will undertake, to practice.

22 (D) Pay to the Department at the time of application
23 the required fees.

24 (E) Pursuant to Department rules, as required, pass an
25 examination authorized by the Department to determine the
26 applicant's fitness to receive a license.

1 (F) Complete the application process within 3 years
2 from the date of application. If the process has not been
3 completed within 3 years, the application shall expire,
4 application fees shall be forfeited, and the applicant must
5 reapply and meet the requirements in effect at the time of
6 reapplication.

7 (Source: P.A. 97-622, eff. 11-23-11.)

8 (225 ILCS 60/9.3)

9 (Section scheduled to be repealed on December 31, 2014)

10 Sec. 9.3. Withdrawal of application. Any applicant
11 applying for a license or permit under this Act may withdraw
12 his or her application at any time. If an applicant withdraws
13 his or her application after receipt of a written Notice of
14 Intent to Deny License or Permit, then the withdrawal shall be
15 reported to the Federation of State Medical Boards and the
16 National Practitioner Data Bank.

17 (Source: P.A. 98-601, eff. 12-30-13.)

18 (225 ILCS 60/9.5)

19 (Section scheduled to be repealed on December 31, 2014)

20 Sec. 9.5. Social Security Number on license application. In
21 addition to any other information required to be contained in
22 the application, every application for an original license
23 under this Act shall include the applicant's Social Security
24 Number, which shall be retained in the agency's records

1 pertaining to the license. As soon as practical, the Department
2 shall assign a customer's identification number to each
3 applicant for a license.

4 Every application for a renewal or reinstated ~~restored~~
5 license shall require the applicant's customer identification
6 number.

7 (Source: P.A. 97-400, eff. 1-1-12.)

8 (225 ILCS 60/13) (from Ch. 111, par. 4400-13)

9 (Section scheduled to be repealed on December 31, 2014)

10 Sec. 13. Medical students. Candidates for the degree of
11 doctor of medicine, doctor of osteopathy, or doctor of
12 osteopathic medicine enrolled in a medical or osteopathic
13 college, accredited by the Liaison Committee on Medical
14 Education or the Commission on Osteopathic College
15 Accreditation ~~Bureau of Professional Education~~ of the American
16 Osteopathic Association or its successor, may practice under
17 the direct, on-premises supervision of a physician who is
18 licensed to practice medicine in all its branches in Illinois
19 and who is a member of the faculty of an accredited medical or
20 osteopathic college.

21 (Source: P.A. 89-702, eff. 7-1-97.)

22 (225 ILCS 60/17) (from Ch. 111, par. 4400-17)

23 (Section scheduled to be repealed on December 31, 2014)

24 Sec. 17. Temporary license. Persons holding the degree of

1 Doctor of Medicine, persons holding the degree of Doctor of
2 Osteopathy or Doctor of Osteopathic Medicine, and persons
3 holding the degree of Doctor of Chiropractic or persons who
4 have satisfied the requirements therefor and are eligible to
5 receive such degree from a medical, osteopathic, or
6 chiropractic school, who wish to pursue programs of graduate or
7 specialty training in this State, may receive without
8 examination, in the discretion of the Department, a 3-year
9 temporary license. In order to receive a 3-year temporary
10 license hereunder, an applicant shall submit evidence
11 satisfactory to the Department that the applicant:

12 (A) Is of good moral character. In determining moral
13 character under this Section, the Department may take into
14 consideration whether the applicant has engaged in conduct
15 or activities which would constitute grounds for
16 discipline under this Act. The Department may also request
17 the applicant to submit, and may consider as evidence of
18 moral character, endorsements from 2 or 3 individuals
19 licensed under this Act;

20 (B) Has been accepted or appointed for specialty or
21 residency training by a hospital situated in this State or
22 a training program in hospitals or facilities maintained by
23 the State of Illinois or affiliated training facilities
24 which is approved by the Department for the purpose of such
25 training under this Act. The applicant shall indicate the
26 beginning and ending dates of the period for which the

1 applicant has been accepted or appointed;

2 (C) Has or will satisfy the professional education
3 requirements of Section 11 of this Act which are effective
4 at the date of application except for postgraduate clinical
5 training;

6 (D) Is physically, mentally, and professionally
7 capable of practicing medicine or treating human ailments
8 without the use of drugs and without operative surgery with
9 reasonable judgment, skill, and safety. In determining
10 physical, mental and professional capacity under this
11 Section, the Licensing Board may, upon a showing of a
12 possible incapacity, compel an applicant to submit to a
13 mental or physical examination and evaluation, or both, and
14 may condition or restrict any temporary license, subject to
15 the same terms and conditions as are provided for the
16 Disciplinary Board under Section 22 of this Act. Any such
17 condition of restricted temporary license shall provide
18 that the Chief Medical Coordinator or Deputy Medical
19 Coordinator shall have the authority to review the subject
20 physician's compliance with such conditions or
21 restrictions, including, where appropriate, the
22 physician's record of treatment and counseling regarding
23 the impairment, to the extent permitted by applicable
24 federal statutes and regulations safeguarding the
25 confidentiality of medical records of patients.

26 Three-year temporary licenses issued pursuant to this

1 Section shall be valid only for the period of time designated
2 therein, and may be extended or renewed pursuant to the rules
3 of the Department, and if a temporary license is thereafter
4 extended, it shall not extend beyond completion of the
5 residency program. The holder of a valid 3-year temporary
6 license shall be entitled thereby to perform only such acts as
7 may be prescribed by and incidental to his or her program of
8 residency training; he or she shall not be entitled to
9 otherwise engage in the practice of medicine in this State
10 unless fully licensed in this State.

11 A 3-year temporary license may be revoked or suspended by
12 the Department upon proof that the holder thereof has engaged
13 in the practice of medicine in this State outside of the
14 program of his or her residency or specialty training, or if
15 the holder shall fail to supply the Department, within 10 days
16 of its request, with information as to his or her current
17 status and activities in his or her specialty training program.
18 Such a revocation or suspension shall comply with the
19 procedures set forth in subsection (d) of Section 37 of this
20 Act.

21 (Source: P.A. 97-622, eff. 11-23-11.)

22 (225 ILCS 60/18) (from Ch. 111, par. 4400-18)

23 (Section scheduled to be repealed on December 31, 2014)

24 Sec. 18. Visiting professor, physician, or resident
25 permits.

1 (A) Visiting professor permit.

2 (1) A visiting professor permit shall entitle a person
3 to practice medicine in all of its branches or to practice
4 the treatment of human ailments without the use of drugs
5 and without operative surgery provided:

6 (a) the person maintains an equivalent
7 authorization to practice medicine in all of its
8 branches or to practice the treatment of human ailments
9 without the use of drugs and without operative surgery
10 in good standing in his or her native licensing
11 jurisdiction during the period of the visiting
12 professor permit;

13 (b) the person has received a faculty appointment
14 to teach in a medical, osteopathic or chiropractic
15 school in Illinois; and

16 (c) the Department may prescribe the information
17 necessary to establish an applicant's eligibility for
18 a permit. This information shall include without
19 limitation (i) a statement from the dean of the medical
20 school at which the applicant will be employed
21 describing the applicant's qualifications and (ii) a
22 statement from the dean of the medical school listing
23 every affiliated institution in which the applicant
24 will be providing instruction as part of the medical
25 school's education program and justifying any clinical
26 activities at each of the institutions listed by the

1 dean.

2 (2) Application for visiting professor permits shall
3 be made to the Department, in writing, on forms prescribed
4 by the Department and shall be accompanied by the required
5 fee established by rule, which shall not be refundable. Any
6 application shall require the information as, in the
7 judgment of the Department, will enable the Department to
8 pass on the qualifications of the applicant.

9 (3) A visiting professor permit shall be valid for no
10 longer than 2 years from the date of issuance or until the
11 time the faculty appointment is terminated, whichever
12 occurs first, and may be renewed only in accordance with
13 subdivision (A) (6) of this Section.

14 (4) The applicant may be required to appear before the
15 Licensing Board for an interview prior to, and as a
16 requirement for, the issuance of the original permit and
17 the renewal.

18 (5) Persons holding a permit under this Section shall
19 only practice medicine in all of its branches or practice
20 the treatment of human ailments without the use of drugs
21 and without operative surgery in the State of Illinois in
22 their official capacity under their contract within the
23 medical school itself and any affiliated institution in
24 which the permit holder is providing instruction as part of
25 the medical school's educational program and for which the
26 medical school has assumed direct responsibility.

1 (6) After the initial renewal of a visiting professor
2 permit, a visiting professor permit shall be valid until
3 the last day of the next physician license renewal period,
4 as set by rule, and may only be renewed for applicants who
5 meet the following requirements:

6 (i) have obtained the required continuing
7 education hours as set by rule; and

8 (ii) have paid the fee prescribed for a license
9 under Section 21 of this Act.

10 For initial renewal, the visiting professor must
11 successfully pass a general competency examination authorized
12 by the Department by rule, unless he or she was issued an
13 initial visiting professor permit on or after January 1, 2007,
14 but prior to July 1, 2007.

15 (B) Visiting physician permit.

16 (1) The Department may, in its discretion, issue a
17 temporary visiting physician permit, without examination,
18 provided:

19 (a) (blank);

20 (b) that the person maintains an equivalent
21 authorization to practice medicine in all of its
22 branches or to practice the treatment of human ailments
23 without the use of drugs and without operative surgery
24 in good standing in his or her native licensing
25 jurisdiction during the period of the temporary

1 visiting physician permit;

2 (c) that the person has received an invitation or
3 appointment to study, demonstrate, or perform a
4 specific medical, osteopathic, chiropractic or
5 clinical subject or technique in a medical,
6 osteopathic, or chiropractic school, a state or
7 national medical, osteopathic, or chiropractic
8 professional association or society conference or
9 meeting, a hospital licensed under the Hospital
10 Licensing Act, a hospital organized under the
11 University of Illinois Hospital Act, or a facility
12 operated pursuant to the Ambulatory Surgical Treatment
13 Center Act; and

14 (d) that the temporary visiting physician permit
15 shall only permit the holder to practice medicine in
16 all of its branches or practice the treatment of human
17 ailments without the use of drugs and without operative
18 surgery within the scope of the medical, osteopathic,
19 chiropractic, or clinical studies, or in conjunction
20 with the state or national medical, osteopathic, or
21 chiropractic professional association or society
22 conference or meeting, for which the holder was invited
23 or appointed.

24 (2) The application for the temporary visiting
25 physician permit shall be made to the Department, in
26 writing, on forms prescribed by the Department, and shall

1 be accompanied by the required fee established by rule,
2 which shall not be refundable. The application shall
3 require information that, in the judgment of the
4 Department, will enable the Department to pass on the
5 qualification of the applicant, and the necessity for the
6 granting of a temporary visiting physician permit.

7 (3) A temporary visiting physician permit shall be
8 valid for no longer than (i) 180 days from the date of
9 issuance or (ii) until the time the medical, osteopathic,
10 chiropractic, or clinical studies are completed, or the
11 state or national medical, osteopathic, or chiropractic
12 professional association or society conference or meeting
13 has concluded, whichever occurs first. The temporary
14 visiting physician permit may be issued multiple times to a
15 visiting physician under this paragraph (3) as long as the
16 total number of days it is active do not exceed 180 days
17 within a 365-day period.

18 (4) The applicant for a temporary visiting physician
19 permit may be required to appear before the Licensing Board
20 for an interview prior to, and as a requirement for, the
21 issuance of a temporary visiting physician permit.

22 (5) A limited temporary visiting physician permit
23 shall be issued to a physician licensed in another state
24 who has been requested to perform emergency procedures in
25 Illinois if he or she meets the requirements as established
26 by rule.

1 (C) Visiting resident permit.

2 (1) The Department may, in its discretion, issue a
3 temporary visiting resident permit, without examination,
4 provided:

5 (a) (blank);

6 (b) that the person maintains an equivalent
7 authorization to practice medicine in all of its
8 branches or to practice the treatment of human ailments
9 without the use of drugs and without operative surgery
10 in good standing in his or her native licensing
11 jurisdiction during the period of the temporary
12 visiting resident permit;

13 (c) that the applicant is enrolled in a
14 postgraduate clinical training program outside the
15 State of Illinois that is approved by the Department;

16 (d) that the individual has been invited or
17 appointed for a specific period of time to perform a
18 portion of that post graduate clinical training
19 program under the supervision of an Illinois licensed
20 physician in an Illinois patient care clinic or
21 facility that is affiliated with the out-of-State post
22 graduate training program; and

23 (e) that the temporary visiting resident permit
24 shall only permit the holder to practice medicine in
25 all of its branches or practice the treatment of human

1 ailments without the use of drugs and without operative
2 surgery within the scope of the medical, osteopathic,
3 chiropractic or clinical studies for which the holder
4 was invited or appointed.

5 (2) The application for the temporary visiting
6 resident permit shall be made to the Department, in
7 writing, on forms prescribed by the Department, and shall
8 be accompanied by the required fee established by rule. The
9 application shall require information that, in the
10 judgment of the Department, will enable the Department to
11 pass on the qualifications of the applicant.

12 (3) A temporary visiting resident permit shall be valid
13 for 180 days from the date of issuance or until the time
14 the medical, osteopathic, chiropractic, or clinical
15 studies are completed, whichever occurs first.

16 (4) The applicant for a temporary visiting resident
17 permit may be required to appear before the Licensing Board
18 for an interview prior to, and as a requirement for, the
19 issuance of a temporary visiting resident permit.

20 (Source: P.A. 96-398, eff. 8-13-09; 97-622, eff. 11-23-11.)

21 (225 ILCS 60/19) (from Ch. 111, par. 4400-19)

22 (Section scheduled to be repealed on December 31, 2014)

23 Sec. 19. Licensure by endorsement. The Department may, in
24 its discretion, issue a license by endorsement to any person
25 who is currently licensed to practice medicine in all of its

1 branches, or a chiropractic physician, in any other state,
2 territory, country or province, upon the following conditions
3 and submitting evidence satisfactory to the Department of the
4 following:

5 (A) (Blank);

6 (B) That the applicant is of good moral character. In
7 determining moral character under this Section, the
8 Department may take into consideration whether the
9 applicant has engaged in conduct or activities which would
10 constitute grounds for discipline under this Act. The
11 Department may also request the applicant to submit, and
12 may consider as evidence of moral character, endorsements
13 from 2 or 3 individuals licensed under this Act;

14 (C) That the applicant is physically, mentally and
15 professionally capable of practicing medicine with
16 reasonable judgment, skill and safety. In determining
17 physical, mental and professional capacity under this
18 Section the Licensing Board may, upon a showing of a
19 possible incapacity, compel an applicant to submit to a
20 mental or physical examination and evaluation, or both, in
21 the same manner as provided in Section 22 and may condition
22 or restrict any license, subject to the same terms and
23 conditions as are provided for the Disciplinary Board under
24 Section 22 of this Act.

25 (D) That if the applicant seeks to practice medicine in
26 all of its branches:

1 (1) if the applicant was licensed in another
2 jurisdiction prior to January 1, 1988, that the
3 applicant has satisfied the educational requirements
4 of paragraph (1) of subsection (A) or paragraph (2) of
5 subsection (A) of Section 11 of this Act; or

6 (2) if the applicant was licensed in another
7 jurisdiction after December 31, 1987, that the
8 applicant has satisfied the educational requirements
9 of paragraph (A) (2) of Section 11 of this Act; and

10 (3) the requirements for a license to practice
11 medicine in all of its branches in the particular
12 state, territory, country or province in which the
13 applicant is licensed are deemed by the Department to
14 have been substantially equivalent to the requirements
15 for a license to practice medicine in all of its
16 branches in force in this State at the date of the
17 applicant's license;

18 (E) That if the applicant seeks to treat human ailments
19 without the use of drugs and without operative surgery:

20 (1) the applicant is a graduate of a chiropractic
21 school or college approved by the Department at the
22 time of their graduation;

23 (2) the requirements for the applicant's license
24 to practice the treatment of human ailments without the
25 use of drugs are deemed by the Department to have been
26 substantially equivalent to the requirements for a

1 license to practice in this State at the date of the
2 applicant's license;

3 (F) That the Department may, in its discretion, issue a
4 license by endorsement to any graduate of a medical or
5 osteopathic college, reputable and in good standing in the
6 judgment of the Department, who has passed an examination
7 for admission to the United States Public Health Service,
8 or who has passed any other examination deemed by the
9 Department to have been at least equal in all substantial
10 respects to the examination required for admission to any
11 such medical corps;

12 (G) That applications for licenses by endorsement
13 shall be filed with the Department, under oath, on forms
14 prepared and furnished by the Department, and shall set
15 forth, and applicants therefor shall supply such
16 information respecting the life, education, professional
17 practice, and moral character of applicants as the
18 Department may require to be filed for its use;

19 (H) That the applicant undergo the criminal background
20 check established under Section 9.7 of this Act.

21 In the exercise of its discretion under this Section, the
22 Department is empowered to consider and evaluate each applicant
23 on an individual basis. It may take into account, among other
24 things: the extent to which the applicant will bring unique
25 experience and skills to the State of Illinois or 7 the extent
26 to which there is or is not available to the Department,7

1 authentic and definitive information concerning the quality of
2 medical education and clinical training which the applicant has
3 had. Under no circumstances shall a license be issued under the
4 provisions of this Section to any person who has previously
5 taken and failed the written examination conducted by the
6 Department for such license. In the exercise of its discretion
7 under this Section, the Department may require an applicant to
8 successfully complete an examination as recommended by the
9 Licensing Board. The Department may also request the applicant
10 to submit, and may consider as evidence of moral character,
11 evidence from 2 or 3 individuals licensed under this Act.
12 Applicants have 3 years from the date of application to
13 complete the application process. If the process has not been
14 completed within 3 years, the application shall be denied, the
15 fees shall be forfeited, and the applicant must reapply and
16 meet the requirements in effect at the time of reapplication.

17 (Source: P.A. 97-622, eff. 11-23-11.)

18 (225 ILCS 60/21) (from Ch. 111, par. 4400-21)

19 (Section scheduled to be repealed on December 31, 2014)

20 Sec. 21. License renewal; reinstatement ~~restoration~~;
21 inactive status; disposition and collection of fees.

22 (A) Renewal. The expiration date and renewal period for
23 each license issued under this Act shall be set by rule. The
24 holder of a license may renew the license by paying the
25 required fee. The holder of a license may also renew the

1 license within 90 days after its expiration by complying with
2 the requirements for renewal and payment of an additional fee.
3 A license renewal within 90 days after expiration shall be
4 effective retroactively to the expiration date.

5 The Department shall mail to each licensee under this Act,
6 at his or her address of record, at least 60 days in advance of
7 the expiration date of his or her license, a renewal notice. No
8 such license shall be deemed to have lapsed until 90 days after
9 the expiration date and after such notice has been mailed by
10 the Department as herein provided.

11 (B) Reinstatement ~~Restoration~~. Any licensee who has
12 permitted his or her license to lapse or who has had his or her
13 license on inactive status may have his or her license
14 reinstated ~~restored~~ by making application to the Department and
15 filing proof acceptable to the Department of his or her fitness
16 to have the license reinstated ~~restored~~, including evidence
17 certifying to active practice in another jurisdiction
18 satisfactory to the Department, proof of meeting the continuing
19 education requirements for one renewal period, and by paying
20 the required reinstatement ~~restoration~~ fee.

21 If the licensee has not maintained an active practice in
22 another jurisdiction satisfactory to the Department, the
23 Licensing Board shall determine, by an evaluation program
24 established by rule, the applicant's fitness to resume active
25 status and may require the licensee to complete a period of
26 evaluated clinical experience and may require successful

1 completion of a practical examination specified by the
2 Licensing Board.

3 However, any registrant whose license has expired while he
4 or she has been engaged (a) in Federal Service on active duty
5 with the Army of the United States, the United States Navy, the
6 Marine Corps, the Air Force, the Coast Guard, the Public Health
7 Service or the State Militia called into the service or
8 training of the United States of America, or (b) in training or
9 education under the supervision of the United States
10 preliminary to induction into the military service, may have
11 his or her license reinstated ~~or restored~~ without paying any
12 lapsed renewal fees, if within 2 years after honorable
13 termination of such service, training, or education, he or she
14 furnishes to the Department with satisfactory evidence to the
15 effect that he or she has been so engaged and that his or her
16 service, training, or education has been so terminated.

17 (C) Inactive licenses. Any licensee who notifies the
18 Department, in writing on forms prescribed by the Department,
19 may elect to place his or her license on an inactive status and
20 shall, subject to rules of the Department, be excused from
21 payment of renewal fees until he or she notifies the Department
22 in writing of his or her desire to resume active status.

23 Any licensee requesting reinstatement ~~restoration~~ from
24 inactive status shall be required to pay the current renewal
25 fee, provide proof of meeting the continuing education
26 requirements for the period of time the license is inactive not

1 to exceed one renewal period, and shall be required to
2 reinstate ~~restore~~ his or her license as provided in subsection
3 (B).

4 Any licensee whose license is in an inactive status shall
5 not practice in the State of Illinois.

6 (D) Disposition of monies collected. All monies collected
7 under this Act by the Department shall be deposited in the
8 Illinois State Medical Disciplinary Fund in the State Treasury,
9 and used only for the following purposes: (a) by the
10 Disciplinary Board and Licensing Board in the exercise of its
11 powers and performance of its duties, as such use is made by
12 the Department with full consideration of all recommendations
13 of the Disciplinary Board and Licensing Board, (b) for costs
14 directly related to persons licensed under this Act, and (c)
15 for direct and allocable indirect costs related to the public
16 purposes of the Department.

17 Moneys in the Fund may be transferred to the Professions
18 Indirect Cost Fund as authorized under Section 2105-300 of the
19 Department of Professional Regulation Law (20 ILCS
20 2105/2105-300).

21 The State Comptroller shall order and the State Treasurer
22 shall transfer an amount equal to \$1,100,000 from the Illinois
23 State Medical Disciplinary Fund to the Local Government Tax
24 Fund on each of the following dates: July 1, 2014, October 1,
25 2014, January 1, 2015, July 1, 2017, October 1, 2017, and
26 January 1, 2018. These transfers shall constitute repayment of

1 the \$6,600,000 transfer made under Section 6z-18 of the State
2 Finance Act.

3 All earnings received from investment of monies in the
4 Illinois State Medical Disciplinary Fund shall be deposited in
5 the Illinois State Medical Disciplinary Fund and shall be used
6 for the same purposes as fees deposited in such Fund.

7 (E) Fees. The following fees are nonrefundable.

8 (1) Applicants for any examination shall be required to
9 pay, either to the Department or to the designated testing
10 service, a fee covering the cost of determining the
11 applicant's eligibility and providing the examination.
12 Failure to appear for the examination on the scheduled
13 date, at the time and place specified, after the
14 applicant's application for examination has been received
15 and acknowledged by the Department or the designated
16 testing service, shall result in the forfeiture of the
17 examination fee.

18 (2) Before July 1, 2018, the fee for a license under
19 Section 9 of this Act is \$700. Beginning on July 1, 2018,
20 the fee for a license under Section 9 of this Act is \$500.

21 (3) Before July 1, 2018, the fee for a license under
22 Section 19 of this Act is \$700. Beginning on July 1, 2018,
23 the fee for a license under Section 19 of this Act is \$500.

24 (4) Before July 1, 2018, the fee for the renewal of a
25 license for a resident of Illinois shall be calculated at
26 the rate of \$230 per year, and beginning on July 1, 2018,

1 the fee for the renewal of a license shall be \$167, except
2 for licensees who were issued a license within 12 months of
3 the expiration date of the license, before July 1, 2018,
4 the fee for the renewal shall be \$230, and beginning on
5 July 1, 2018 that fee will be \$167. Before July 1, 2018,
6 the fee for the renewal of a license for a nonresident
7 shall be calculated at the rate of \$460 per year, and
8 beginning on July 1, 2018, the fee for the renewal of a
9 license for a nonresident shall be \$250, except for
10 licensees who were issued a license within 12 months of the
11 expiration date of the license, before July 1, 2018, the
12 fee for the renewal shall be \$460, and beginning on July 1,
13 2018 that fee will be \$250.

14 (5) The fee for the reinstatement ~~restoration~~ of a
15 license other than from inactive status, is \$230. In
16 addition, payment of all lapsed renewal fees not to exceed
17 \$1,400 is required.

18 (6) The fee for a 3-year temporary license under
19 Section 17 is \$230.

20 (7) The fee for the issuance of a duplicate license,
21 for the issuance of a replacement license for a license
22 which has been lost or destroyed, or for the issuance of a
23 license with a change of name or address other than during
24 the renewal period is \$20. No fee is required for name and
25 address changes on Department records when no duplicate
26 license is issued.

1 (8) The fee to be paid for a license record for any
2 purpose is \$20.

3 (9) The fee to be paid to have the scoring of an
4 examination, administered by the Department, reviewed and
5 verified, is \$20 plus any fees charged by the applicable
6 testing service.

7 (10) The fee to be paid by a licensee for a wall
8 certificate showing his or her license shall be the actual
9 cost of producing the certificate as determined by the
10 Department.

11 (11) The fee for a roster of persons licensed as
12 physicians in this State shall be the actual cost of
13 producing such a roster as determined by the Department.

14 (F) Any person who delivers a check or other payment to the
15 Department that is returned to the Department unpaid by the
16 financial institution upon which it is drawn shall pay to the
17 Department, in addition to the amount already owed to the
18 Department, a fine of \$50. The fines imposed by this Section
19 are in addition to any other discipline provided under this Act
20 for unlicensed practice or practice on a nonrenewed license.
21 The Department shall notify the person that payment of fees and
22 fines shall be paid to the Department by certified check or
23 money order within 30 calendar days of the notification. If,
24 after the expiration of 30 days from the date of the
25 notification, the person has failed to submit the necessary
26 remittance, the Department shall automatically terminate the

1 license or permit ~~certificate~~ or deny the application, without
2 hearing. If, after termination or denial, the person seeks a
3 license or permit ~~certificate~~, he or she shall apply to the
4 Department for reinstatement ~~restoration~~ or issuance of the
5 license or permit ~~certificate~~ and pay all fees and fines due to
6 the Department. The Department may establish a fee for the
7 processing of an application for reinstatement ~~restoration~~ of a
8 license or permit ~~certificate~~ to pay all expenses of processing
9 this application. The Secretary may waive the fines due under
10 this Section in individual cases where the Secretary finds that
11 the fines would be unreasonable or unnecessarily burdensome.

12 (Source: P.A. 97-622, eff. 11-23-11; 98-3, eff. 3-8-13.)

13 (225 ILCS 60/22) (from Ch. 111, par. 4400-22)

14 (Section scheduled to be repealed on December 31, 2014)

15 Sec. 22. Disciplinary action.

16 (A) The Department may revoke, suspend, place on probation,
17 reprimand, refuse to issue or renew, or take any other
18 disciplinary or non-disciplinary action as the Department may
19 deem proper with regard to the license or permit of any person
20 issued under this Act ~~to practice medicine, or a chiropractic~~
21 ~~physician~~, including imposing fines not to exceed \$10,000 for
22 each violation, upon any of the following grounds:

23 (1) Performance of an elective abortion in any place,
24 locale, facility, or institution other than:

25 (a) a facility licensed pursuant to the Ambulatory

1 Surgical Treatment Center Act;

2 (b) an institution licensed under the Hospital
3 Licensing Act;

4 (c) an ambulatory surgical treatment center or
5 hospitalization or care facility maintained by the
6 State or any agency thereof, where such department or
7 agency has authority under law to establish and enforce
8 standards for the ambulatory surgical treatment
9 centers, hospitalization, or care facilities under its
10 management and control;

11 (d) ambulatory surgical treatment centers,
12 hospitalization or care facilities maintained by the
13 Federal Government; or

14 (e) ambulatory surgical treatment centers,
15 hospitalization or care facilities maintained by any
16 university or college established under the laws of
17 this State and supported principally by public funds
18 raised by taxation.

19 (2) Performance of an abortion procedure in a wilful
20 and wanton manner on a woman who was not pregnant at the
21 time the abortion procedure was performed.

22 (3) A plea of guilty or nolo contendere, finding of
23 guilt, jury verdict, or entry of judgment or sentencing,
24 including, but not limited to, convictions, preceding
25 sentences of supervision, conditional discharge, or first
26 offender probation, under the laws of any jurisdiction of

1 the United States of any crime that is a felony.

2 (4) Gross negligence in practice under this Act.

3 (5) Engaging in dishonorable, unethical or
4 unprofessional conduct of a character likely to deceive,
5 defraud or harm the public.

6 (6) Obtaining any fee by fraud, deceit, or
7 misrepresentation.

8 (7) Habitual or excessive use or abuse of drugs defined
9 in law as controlled substances, of alcohol, or of any
10 other substances which results in the inability to practice
11 with reasonable judgment, skill or safety.

12 (8) Practicing under a false or, except as provided by
13 law, an assumed name.

14 (9) Fraud or misrepresentation in applying for, or
15 procuring, a license under this Act or in connection with
16 applying for renewal of a license under this Act.

17 (10) Making a false or misleading statement regarding
18 their skill or the efficacy or value of the medicine,
19 treatment, or remedy prescribed by them at their direction
20 in the treatment of any disease or other condition of the
21 body or mind.

22 (11) Allowing another person or organization to use
23 their license, procured under this Act, to practice.

24 (12) Adverse ~~Disciplinary~~ action taken by ~~of~~ another
25 state or jurisdiction against a license or other
26 authorization to practice as a medical doctor, doctor of

1 osteopathy, doctor of osteopathic medicine or doctor of
2 chiropractic, a certified copy of the record of the action
3 taken by the other state or jurisdiction being prima facie
4 evidence thereof. This includes any adverse action taken by
5 a State or federal agency that prohibits a medical doctor,
6 doctor of osteopathy, doctor of osteopathic medicine, or
7 doctor of chiropractic from providing services to the
8 agency's participants.

9 (13) Violation of any provision of this Act or of the
10 Medical Practice Act prior to the repeal of that Act, or
11 violation of the rules, or a final administrative action of
12 the Secretary, after consideration of the recommendation
13 of the Disciplinary Board.

14 (14) Violation of the prohibition against fee
15 splitting in Section 22.2 of this Act.

16 (15) A finding by the Disciplinary Board that the
17 registrant after having his or her license placed on
18 probationary status or subjected to conditions or
19 restrictions violated the terms of the probation or failed
20 to comply with such terms or conditions.

21 (16) Abandonment of a patient.

22 (17) Prescribing, selling, administering,
23 distributing, giving or self-administering any drug
24 classified as a controlled substance (designated product)
25 or narcotic for other than medically accepted therapeutic
26 purposes.

1 (18) Promotion of the sale of drugs, devices,
2 appliances or goods provided for a patient in such manner
3 as to exploit the patient for financial gain of the
4 physician.

5 (19) Offering, undertaking or agreeing to cure or treat
6 disease by a secret method, procedure, treatment or
7 medicine, or the treating, operating or prescribing for any
8 human condition by a method, means or procedure which the
9 licensee refuses to divulge upon demand of the Department.

10 (20) Immoral conduct in the commission of any act
11 including, but not limited to, commission of an act of
12 sexual misconduct related to the licensee's practice.

13 (21) Wilfully making or filing false records or reports
14 in his or her practice as a physician, including, but not
15 limited to, false records to support claims against the
16 medical assistance program of the Department of Healthcare
17 and Family Services (formerly Department of Public Aid)
18 under the Illinois Public Aid Code.

19 (22) Wilful omission to file or record, or wilfully
20 impeding the filing or recording, or inducing another
21 person to omit to file or record, medical reports as
22 required by law, or wilfully failing to report an instance
23 of suspected abuse or neglect as required by law.

24 (23) Being named as a perpetrator in an indicated
25 report by the Department of Children and Family Services
26 under the Abused and Neglected Child Reporting Act, and

1 upon proof by clear and convincing evidence that the
2 licensee has caused a child to be an abused child or
3 neglected child as defined in the Abused and Neglected
4 Child Reporting Act.

5 (24) Solicitation of professional patronage by any
6 corporation, agents or persons, or profiting from those
7 representing themselves to be agents of the licensee.

8 (25) Gross and wilful and continued overcharging for
9 professional services, including filing false statements
10 for collection of fees for which services are not rendered,
11 including, but not limited to, filing such false statements
12 for collection of monies for services not rendered from the
13 medical assistance program of the Department of Healthcare
14 and Family Services (formerly Department of Public Aid)
15 under the Illinois Public Aid Code.

16 (26) A pattern of practice or other behavior which
17 demonstrates incapacity or incompetence to practice under
18 this Act.

19 (27) Mental illness or disability which results in the
20 inability to practice under this Act with reasonable
21 judgment, skill or safety.

22 (28) Physical illness, including, but not limited to,
23 deterioration through the aging process, or loss of motor
24 skill which results in a physician's inability to practice
25 under this Act with reasonable judgment, skill or safety.

26 (29) Cheating on or attempt to subvert the licensing

1 examinations administered under this Act.

2 (30) Wilfully or negligently violating the
3 confidentiality between physician and patient except as
4 required by law.

5 (31) The use of any false, fraudulent, or deceptive
6 statement in any document connected with practice under
7 this Act.

8 (32) Aiding and abetting an individual not licensed
9 under this Act in the practice of a profession licensed
10 under this Act.

11 (33) Violating state or federal laws or regulations
12 relating to controlled substances, legend drugs, or
13 ephedra as defined in the Ephedra Prohibition Act.

14 (34) Failure to report to the Department any adverse
15 final action taken against them by another licensing
16 jurisdiction (any other state or any territory of the
17 United States or any foreign state or country), by any peer
18 review body, by any health care institution, by any
19 professional society or association related to practice
20 under this Act, by any governmental agency, by any law
21 enforcement agency, or by any court for acts or conduct
22 similar to acts or conduct which would constitute grounds
23 for action as defined in this Section.

24 (35) Failure to report to the Department surrender of a
25 license or authorization to practice as a medical doctor, a
26 doctor of osteopathy, a doctor of osteopathic medicine, or

1 doctor of chiropractic in another state or jurisdiction, or
2 surrender of membership on any medical staff or in any
3 medical or professional association or society, while
4 under disciplinary investigation by any of those
5 authorities or bodies, for acts or conduct similar to acts
6 or conduct which would constitute grounds for action as
7 defined in this Section.

8 (36) Failure to report to the Department any adverse
9 judgment, settlement, or award arising from a liability
10 claim related to acts or conduct similar to acts or conduct
11 which would constitute grounds for action as defined in
12 this Section.

13 (37) Failure to provide copies of medical records as
14 required by law.

15 (38) Failure to furnish the Department, its
16 investigators or representatives, relevant information,
17 legally requested by the Department after consultation
18 with the Chief Medical Coordinator or the Deputy Medical
19 Coordinator.

20 (39) Violating the Health Care Worker Self-Referral
21 Act.

22 (40) Willful failure to provide notice when notice is
23 required under the Parental Notice of Abortion Act of 1995.

24 (41) Failure to establish and maintain records of
25 patient care and treatment as required by this law.

26 (42) Entering into an excessive number of written

1 collaborative agreements with licensed advanced practice
2 nurses resulting in an inability to adequately
3 collaborate.

4 (43) Repeated failure to adequately collaborate with a
5 licensed advanced practice nurse.

6 (44) Violating the Compassionate Use of Medical
7 Cannabis Pilot Program Act.

8 (45) Entering into an excessive number of written
9 collaborative agreements with licensed prescribing
10 psychologists resulting in an inability to adequately
11 collaborate.

12 (46) Repeated failure to adequately collaborate with a
13 licensed prescribing psychologist.

14 Except for actions involving the ground numbered (26), all
15 proceedings to suspend, revoke, place on probationary status,
16 or take any other disciplinary action as the Department may
17 deem proper, with regard to a license on any of the foregoing
18 grounds, must be commenced within 5 years next after receipt by
19 the Department of a complaint alleging the commission of or
20 notice of the conviction order for any of the acts described
21 herein. Except for the grounds numbered (8), (9), (26), and
22 (29), no action shall be commenced more than 10 years after the
23 date of the incident or act alleged to have violated this
24 Section. For actions involving the ground numbered (26), a
25 pattern of practice or other behavior includes all incidents
26 alleged to be part of the pattern of practice or other behavior

1 that occurred, or a report pursuant to Section 23 of this Act
2 received, within the 10-year period preceding the filing of the
3 complaint. In the event of the settlement of any claim or cause
4 of action in favor of the claimant or the reduction to final
5 judgment of any civil action in favor of the plaintiff, such
6 claim, cause of action or civil action being grounded on the
7 allegation that a person licensed under this Act was negligent
8 in providing care, the Department shall have an additional
9 period of 2 years from the date of notification to the
10 Department under Section 23 of this Act of such settlement or
11 final judgment in which to investigate and commence formal
12 disciplinary proceedings under Section 36 of this Act, except
13 as otherwise provided by law. The time during which the holder
14 of the license was outside the State of Illinois shall not be
15 included within any period of time limiting the commencement of
16 disciplinary action by the Department.

17 The entry of an order or judgment by any circuit court
18 establishing that any person holding a license under this Act
19 is a person in need of mental treatment operates as a
20 suspension of that license. That person may resume their
21 practice only upon the entry of a Departmental order based upon
22 a finding by the Disciplinary Board that they have been
23 determined to be recovered from mental illness by the court and
24 upon the Disciplinary Board's recommendation that they be
25 permitted to resume their practice.

26 The Department may refuse to issue or take disciplinary

1 action concerning the license of any person who fails to file a
2 return, or to pay the tax, penalty or interest shown in a filed
3 return, or to pay any final assessment of tax, penalty or
4 interest, as required by any tax Act administered by the
5 Illinois Department of Revenue, until such time as the
6 requirements of any such tax Act are satisfied as determined by
7 the Illinois Department of Revenue.

8 The Department, upon the recommendation of the
9 Disciplinary Board, shall adopt rules which set forth standards
10 to be used in determining:

11 (a) when a person will be deemed sufficiently
12 rehabilitated to warrant the public trust;

13 (b) what constitutes dishonorable, unethical or
14 unprofessional conduct of a character likely to deceive,
15 defraud, or harm the public;

16 (c) what constitutes immoral conduct in the commission
17 of any act, including, but not limited to, commission of an
18 act of sexual misconduct related to the licensee's
19 practice; and

20 (d) what constitutes gross negligence in the practice
21 of medicine.

22 However, no such rule shall be admissible into evidence in
23 any civil action except for review of a licensing or other
24 disciplinary action under this Act.

25 In enforcing this Section, the Disciplinary Board or the
26 Licensing Board, upon a showing of a possible violation, may

1 compel, in the case of the Disciplinary Board, any individual
2 who is licensed to practice under this Act or holds a permit to
3 practice under this Act, or, in the case of the Licensing
4 Board, any individual who has applied for licensure or a permit
5 pursuant to this Act, to submit to a mental or physical
6 examination and evaluation, or both, which may include a
7 substance abuse or sexual offender evaluation, as required by
8 the Licensing Board or Disciplinary Board and at the expense of
9 the Department. The Disciplinary Board or Licensing Board shall
10 specifically designate the examining physician licensed to
11 practice medicine in all of its branches or, if applicable, the
12 multidisciplinary team involved in providing the mental or
13 physical examination and evaluation, or both. The
14 multidisciplinary team shall be led by a physician licensed to
15 practice medicine in all of its branches and may consist of one
16 or more or a combination of physicians licensed to practice
17 medicine in all of its branches, licensed chiropractic
18 physicians, licensed clinical psychologists, licensed clinical
19 social workers, licensed clinical professional counselors, and
20 other professional and administrative staff. Any examining
21 physician or member of the multidisciplinary team may require
22 any person ordered to submit to an examination and evaluation
23 pursuant to this Section to submit to any additional
24 supplemental testing deemed necessary to complete any
25 examination or evaluation process, including, but not limited
26 to, blood testing, urinalysis, psychological testing, or

1 neuropsychological testing. The Disciplinary Board, the
2 Licensing Board, or the Department may order the examining
3 physician or any member of the multidisciplinary team to
4 provide to the Department, the Disciplinary Board, or the
5 Licensing Board any and all records, including business
6 records, that relate to the examination and evaluation,
7 including any supplemental testing performed. The Disciplinary
8 Board, the Licensing Board, or the Department may order the
9 examining physician or any member of the multidisciplinary team
10 to present testimony concerning this examination and
11 evaluation of the licensee, permit holder, or applicant,
12 including testimony concerning any supplemental testing or
13 documents relating to the examination and evaluation. No
14 information, report, record, or other documents in any way
15 related to the examination and evaluation shall be excluded by
16 reason of any common law or statutory privilege relating to
17 communication between the licensee, permit holder, or
18 applicant and the examining physician or any member of the
19 multidisciplinary team. No authorization is necessary from the
20 licensee, permit holder, or applicant ordered to undergo an
21 evaluation and examination for the examining physician or any
22 member of the multidisciplinary team to provide information,
23 reports, records, or other documents or to provide any
24 testimony regarding the examination and evaluation. The
25 individual to be examined may have, at his or her own expense,
26 another physician of his or her choice present during all

1 aspects of the examination. Failure of any individual to submit
2 to mental or physical examination and evaluation, or both, when
3 directed, shall result in an automatic suspension, without
4 hearing, until such time as the individual submits to the
5 examination. If the Disciplinary Board or Licensing Board finds
6 a physician unable to practice following an examination and
7 evaluation because of the reasons set forth in this Section,
8 the Disciplinary Board or Licensing Board shall require such
9 physician to submit to care, counseling, or treatment by
10 physicians, or other health care professionals, approved or
11 designated by the Disciplinary Board, as a condition for
12 issued, continued, reinstated, or renewed licensure to
13 practice. Any physician, whose license was granted pursuant to
14 Sections 9, 17, or 19 of this Act, or, continued, reinstated,
15 renewed, disciplined or supervised, subject to such terms,
16 conditions or restrictions who shall fail to comply with such
17 terms, conditions or restrictions, or to complete a required
18 program of care, counseling, or treatment, as determined by the
19 Chief Medical Coordinator or Deputy Medical Coordinators,
20 shall be referred to the Secretary for a determination as to
21 whether the licensee shall have their license suspended
22 immediately, pending a hearing by the Disciplinary Board. In
23 instances in which the Secretary immediately suspends a license
24 under this Section, a hearing upon such person's license must
25 be convened by the Disciplinary Board within 15 days after such
26 suspension and completed without appreciable delay. The

1 Disciplinary Board shall have the authority to review the
2 subject physician's record of treatment and counseling
3 regarding the impairment, to the extent permitted by applicable
4 federal statutes and regulations safeguarding the
5 confidentiality of medical records.

6 An individual licensed under this Act, affected under this
7 Section, shall be afforded an opportunity to demonstrate to the
8 Disciplinary Board that they can resume practice in compliance
9 with acceptable and prevailing standards under the provisions
10 of their license.

11 The Department may promulgate rules for the imposition of
12 fines in disciplinary cases, not to exceed \$10,000 for each
13 violation of this Act. Fines may be imposed in conjunction with
14 other forms of disciplinary action, but shall not be the
15 exclusive disposition of any disciplinary action arising out of
16 conduct resulting in death or injury to a patient. Any funds
17 collected from such fines shall be deposited in the Medical
18 Disciplinary Fund.

19 All fines imposed under this Section shall be paid within
20 60 days after the effective date of the order imposing the fine
21 or in accordance with the terms set forth in the order imposing
22 the fine.

23 (B) The Department shall revoke the license or permit
24 issued under this Act to practice medicine or a chiropractic
25 physician who has been convicted a second time of committing
26 any felony under the Illinois Controlled Substances Act or the

1 Methamphetamine Control and Community Protection Act, or who
2 has been convicted a second time of committing a Class 1 felony
3 under Sections 8A-3 and 8A-6 of the Illinois Public Aid Code. A
4 person whose license or permit is revoked under this subsection
5 B shall be prohibited from practicing medicine or treating
6 human ailments without the use of drugs and without operative
7 surgery.

8 (C) The Disciplinary Board shall recommend to the
9 Department civil penalties and any other appropriate
10 discipline in disciplinary cases when the Board finds that a
11 physician willfully performed an abortion with actual
12 knowledge that the person upon whom the abortion has been
13 performed is a minor or an incompetent person without notice as
14 required under the Parental Notice of Abortion Act of 1995.
15 Upon the Board's recommendation, the Department shall impose,
16 for the first violation, a civil penalty of \$1,000 and for a
17 second or subsequent violation, a civil penalty of \$5,000.

18 (Source: P.A. 97-622, eff. 11-23-11; 98-601, eff. 12-30-13;
19 98-668, eff. 6-25-14.)

20 (225 ILCS 60/24) (from Ch. 111, par. 4400-24)

21 (Section scheduled to be repealed on December 31, 2014)

22 Sec. 24. Report of violations; medical associations.

23 (a) Any physician licensed under this Act, the Illinois
24 State Medical Society, the Illinois Association of Osteopathic
25 Physicians and Surgeons, the Illinois Chiropractic Society,

1 the Illinois Prairie State Chiropractic Association, or any
2 component societies of any of these 4 groups, and any other
3 person, may report to the Disciplinary Board any information
4 the physician, association, society, or person may have that
5 appears to show that a physician is or may be in violation of
6 any of the provisions of Section 22 of this Act.

7 (b) The Department may enter into agreements with the
8 Illinois State Medical Society, the Illinois Association of
9 Osteopathic Physicians and Surgeons, the Illinois Prairie
10 State Chiropractic Association, or the Illinois Chiropractic
11 Society to allow these organizations to assist the Disciplinary
12 Board in the review of alleged violations of this Act. Subject
13 to the approval of the Department, any organization party to
14 such an agreement may subcontract with other individuals or
15 organizations to assist in review.

16 (c) Any physician, association, society, or person
17 participating in good faith in the making of a report under
18 this Act or participating in or assisting with an investigation
19 or review under this Act shall have immunity from any civil,
20 criminal, or other liability that might result by reason of
21 those actions.

22 (d) The medical information in the custody of an entity
23 under contract with the Department participating in an
24 investigation or review shall be privileged and confidential to
25 the same extent as are information and reports under the
26 provisions of Part 21 of Article VIII of the Code of Civil

1 Procedure.

2 (e) Upon request by the Department after a mandatory report
3 has been filed with the Department, an attorney for any party
4 seeking to recover damages for injuries or death by reason of
5 medical, hospital, or other healing art malpractice shall
6 provide patient records related to the physician involved in
7 the disciplinary proceeding to the Department within 30 days of
8 the Department's request for use by the Department in any
9 disciplinary matter under this Act. An attorney who provides
10 patient records to the Department in accordance with this
11 requirement shall not be deemed to have violated any
12 attorney-client privilege. Notwithstanding any other provision
13 of law, consent by a patient shall not be required for the
14 provision of patient records in accordance with this
15 requirement.

16 (f) For the purpose of any civil or criminal proceedings,
17 the good faith of any physician, association, society or person
18 shall be presumed.

19 (Source: P.A. 97-622, eff. 11-23-11.)

20 (225 ILCS 60/33) (from Ch. 111, par. 4400-33)

21 (Section scheduled to be repealed on December 31, 2014)

22 Sec. 33. Legend drugs.

23 (a) Any person licensed under this Act to practice medicine
24 in all of its branches shall be authorized to purchase legend
25 drugs requiring an order of a person authorized to prescribe

1 drugs, and to dispense such legend drugs in the regular course
2 of practicing medicine. The dispensing of such legend drugs
3 shall be the personal act of the person licensed under this Act
4 and may not be delegated to any other person not licensed under
5 this Act or the Pharmacy Practice Act unless such delegated
6 dispensing functions are under the direct supervision of the
7 physician authorized to dispense legend drugs. Except when
8 dispensing manufacturers' samples or other legend drugs in a
9 maximum 72 hour supply, persons licensed under this Act shall
10 maintain a book or file of prescriptions as required in the
11 Pharmacy Practice Act. Any person licensed under this Act who
12 dispenses any drug or medicine shall dispense such drug or
13 medicine in good faith and shall affix to the box, bottle,
14 vessel or package containing the same a label indicating (1)
15 ~~(a)~~ the date on which such drug or medicine is dispensed; (2)
16 ~~(b)~~ the name of the patient; (3) ~~(c)~~ the last name of the
17 person dispensing such drug or medicine; (4) ~~(d)~~ the directions
18 for use thereof; and (5) ~~(e)~~ the proprietary name or names or,
19 if there are none, the established name or names of the drug or
20 medicine, the dosage and quantity, except as otherwise
21 authorized by regulation of the Department.

22 (b) The ~~foregoing~~ labeling requirements set forth in
23 subsection (a) shall not apply to drugs or medicines in a
24 package which bears a label of the manufacturer containing
25 information describing its contents which is in compliance with
26 requirements of the Federal Food, Drug, and Cosmetic Act and

1 the Illinois Food, Drug, and Cosmetic Act. "Drug" and
2 "medicine" have the meanings ~~meaning~~ ascribed to them in the
3 Pharmacy Practice Act, as now or hereafter amended; "good
4 faith" has the meaning ascribed to it in subsection (u) ~~(v)~~ of
5 Section 102 of the Illinois Controlled Substances Act.
6 ~~"Illinois Controlled Substances Act", approved August 16,~~
7 ~~1971, as amended.~~

8 (c) Prior to dispensing a prescription to a patient, the
9 physician shall offer a written prescription to the patient
10 which the patient may elect to have filled by the physician or
11 any licensed pharmacy.

12 (d) A violation of any provision of this Section shall
13 constitute a violation of this Act and shall be grounds for
14 disciplinary action provided for in this Act.

15 (e) Nothing in this Section shall be construed to authorize
16 a chiropractic physician to prescribe drugs.

17 (Source: P.A. 97-622, eff. 11-23-11.)

18 (225 ILCS 60/36) (from Ch. 111, par. 4400-36)

19 (Section scheduled to be repealed on December 31, 2014)

20 Sec. 36. Investigation; notice.

21 (a) Upon the motion of either the Department or the
22 Disciplinary Board or upon the verified complaint in writing of
23 any person setting forth facts which, if proven, would
24 constitute grounds for suspension or revocation under Section
25 22 of this Act, the Department shall investigate the actions of

1 any person, so accused, who holds or represents that they hold
2 a license. Such person is hereinafter called the accused.

3 (b) The Department shall, before suspending, revoking,
4 placing on probationary status, or taking any other
5 disciplinary action as the Department may deem proper with
6 regard to any license at least 30 days prior to the date set
7 for the hearing, notify the accused in writing of any charges
8 made and the time and place for a hearing of the charges before
9 the Disciplinary Board, direct them to file their written
10 answer thereto to the Disciplinary Board under oath within 20
11 days after the service on them of such notice and inform them
12 that if they fail to file such answer default will be taken
13 against them and their license may be suspended, revoked,
14 placed on probationary status, or have other disciplinary
15 action, including limiting the scope, nature or extent of their
16 practice, as the Department may deem proper taken with regard
17 thereto. The Department shall, at least 14 days prior to the
18 date set for the hearing, notify in writing any person who
19 filed a complaint against the accused of the time and place for
20 the hearing of the charges against the accused before the
21 Disciplinary Board and inform such person whether he or she may
22 provide testimony at the hearing.

23 (c) Where a physician has been found, upon complaint and
24 investigation of the Department, and after hearing, to have
25 performed an abortion procedure in a wilful and wanton manner
26 upon a woman who was not pregnant at the time such abortion

1 procedure was performed, the Department shall automatically
2 revoke the license of such physician to practice medicine in
3 Illinois.

4 (d) Such written notice and any notice in such proceedings
5 thereafter may be served by delivery of the same, personally,
6 to the accused person, or by mailing the same by registered or
7 certified mail to the accused person's address of record.

8 (e) All information gathered by the Department during its
9 investigation including information subpoenaed under Section
10 23 or 38 of this Act and the investigative file shall be kept
11 for the confidential use of the Secretary, Disciplinary Board,
12 the Medical Coordinators, persons employed by contract to
13 advise the Medical Coordinator or the Department, the
14 Disciplinary Board's attorneys, the medical investigative
15 staff, and authorized clerical staff, as provided in this Act
16 and shall be afforded the same status as is provided
17 information concerning medical studies in Part 21 of Article
18 VIII of the Code of Civil Procedure, except that the Department
19 may disclose information and documents to a federal, State, or
20 local law enforcement agency pursuant to a subpoena in an
21 ongoing criminal investigation to a health care licensing body
22 of this State or another state or jurisdiction pursuant to an
23 official request made by that licensing body. Furthermore,
24 information and documents disclosed to a federal, State, or
25 local law enforcement agency may be used by that agency only
26 for the investigation and prosecution of a criminal offense or,

1 in the case of disclosure to a health care licensing body, only
2 for investigations and disciplinary action proceedings with
3 regard to a license issued by that licensing body.

4 (Source: P.A. 96-1372, eff. 7-29-10; 97-449, eff. 1-1-12;
5 97-622, eff. 11-23-11.)

6 (225 ILCS 60/37) (from Ch. 111, par. 4400-37)

7 (Section scheduled to be repealed on December 31, 2014)

8 Sec. 37. Disciplinary actions.

9 (a) At the time and place fixed in the notice, the
10 Disciplinary Board provided for in this Act shall proceed to
11 hear the charges, and the accused person shall be accorded
12 ample opportunity to present in person, or by counsel, such
13 statements, testimony, evidence and argument as may be
14 pertinent to the charges or to any defense thereto. The
15 Disciplinary Board may continue such hearing from time to time.
16 If the Disciplinary Board is not sitting at the time and place
17 fixed in the notice or at the time and place to which the
18 hearing has been continued, the Department shall continue such
19 hearing for a period not to exceed 30 days.

20 (b) In case the accused person, after receiving notice,
21 fails to file an answer, their license may, in the discretion
22 of the Secretary, having received first the recommendation of
23 the Disciplinary Board, be suspended, revoked or placed on
24 probationary status, or the Secretary may take whatever
25 disciplinary action as he or she may deem proper, including

1 limiting the scope, nature, or extent of said person's
2 practice, without a hearing, if the act or acts charged
3 constitute sufficient grounds for such action under this Act.

4 (c) The Disciplinary Board has the authority to recommend
5 to the Secretary that probation be granted or that other
6 disciplinary or non-disciplinary action, including the
7 limitation of the scope, nature or extent of a person's
8 practice, be taken as it deems proper. If disciplinary or
9 non-disciplinary action, other than suspension or revocation,
10 is taken the Disciplinary Board may recommend that the
11 Secretary impose reasonable limitations and requirements upon
12 the accused registrant to insure compliance with the terms of
13 the probation or other disciplinary action including, but not
14 limited to, regular reporting by the accused to the Department
15 of their actions, placing themselves under the care of a
16 qualified physician for treatment, or limiting their practice
17 in such manner as the Secretary may require.

18 (d) The Secretary, after consultation with the Chief
19 Medical Coordinator or Deputy Medical Coordinator, may
20 temporarily suspend the license of a physician without a
21 hearing, simultaneously with the institution of proceedings
22 for a hearing provided under this Section if the Secretary
23 finds that evidence in his or her possession indicates that a
24 physician's continuation in practice would constitute an
25 immediate danger to the public. In the event that the Secretary
26 suspends, temporarily, the license of a physician without a

1 hearing, a hearing by the Disciplinary Board shall be held
2 within 15 days after such suspension has occurred and shall be
3 concluded without appreciable delay.

4 (Source: P.A. 97-622, eff. 11-23-11.)

5 (225 ILCS 60/38) (from Ch. 111, par. 4400-38)

6 (Section scheduled to be repealed on December 31, 2014)

7 Sec. 38. Subpoena; oaths.

8 (a) The Disciplinary Board or Department has power to
9 subpoena and bring before it any person in this State and to
10 take testimony either orally or by deposition, or both, with
11 the same fees and mileage and in the same manner as is
12 prescribed by law for judicial procedure in civil cases.

13 (b) The Disciplinary Board, upon a determination that
14 probable cause exists that a violation of one or more of the
15 grounds for discipline listed in Section 22 has occurred or is
16 occurring, may subpoena the medical and hospital records of
17 individual patients of physicians licensed under this Act,
18 provided, that prior to the submission of such records to the
19 Disciplinary Board, all information indicating the identity of
20 the patient shall be removed and deleted. Notwithstanding the
21 foregoing, the Disciplinary Board and Department shall possess
22 the power to subpoena copies of hospital or medical records in
23 mandatory report cases under Section 23 alleging death or
24 permanent bodily injury when consent to obtain records is not
25 provided by a patient or legal representative. Prior to

1 submission of the records to the Disciplinary Board, all
2 information indicating the identity of the patient shall be
3 removed and deleted. All medical records and other information
4 received pursuant to subpoena shall be confidential and shall
5 be afforded the same status as is provided information concerning
6 medical studies in Part 21 of Article VIII of the Code of Civil
7 Procedure. The use of such records shall be restricted to
8 members of the Disciplinary Board, the medical coordinators,
9 and appropriate staff of the Department designated by the
10 Disciplinary Board for the purpose of determining the existence
11 of one or more grounds for discipline of the physician as
12 provided for by Section 22 of this Act. Any such review of
13 individual patients' records shall be conducted by the
14 Disciplinary Board in strict confidentiality, provided that
15 such patient records shall be admissible in a disciplinary
16 hearing, before the Disciplinary Board, when necessary to
17 substantiate the grounds for discipline alleged against the
18 physician licensed under this Act, and provided further, that
19 nothing herein shall be deemed to supersede the provisions of
20 Part 21 of Article VIII of the "Code of Civil Procedure", as
21 now or hereafter amended, to the extent applicable.

22 (c) The Secretary, and any member of the Disciplinary Board
23 each have power to administer oaths at any hearing which the
24 Disciplinary Board or Department is authorized by law to
25 conduct.

26 (d) The Disciplinary Board, upon a determination that

1 probable cause exists that a violation of one or more of the
2 grounds for discipline listed in Section 22 has occurred or is
3 occurring on the business premises of a physician licensed
4 under this Act, may issue an order authorizing an appropriately
5 qualified investigator employed by the Department to enter upon
6 the business premises with due consideration for patient care
7 of the subject of the investigation so as to inspect the
8 physical premises and equipment and furnishings therein. No
9 such order shall include the right of inspection of business,
10 medical, or personnel records located on the premises. For
11 purposes of this Section, "business premises" is defined as the
12 office or offices where the physician conducts the practice of
13 medicine. Any such order shall expire and become void five
14 business days after its issuance by the Disciplinary Board. The
15 execution of any such order shall be valid only during the
16 normal business hours of the facility or office to be
17 inspected.

18 (Source: P.A. 97-622, eff. 11-23-11.)

19 (225 ILCS 60/40) (from Ch. 111, par. 4400-40)

20 (Section scheduled to be repealed on December 31, 2014)

21 Sec. 40. Findings and recommendations; rehearing.

22 (a) The Disciplinary Board shall present to the Secretary a
23 written report of its findings and recommendations. A copy of
24 such report shall be served upon the accused person, either
25 personally or by registered or certified mail. Within 20 days

1 after such service, the accused person may present to the
2 Department their motion, in writing, for a rehearing, which
3 written motion shall specify the particular ground therefor. If
4 the accused person orders and pays for a transcript of the
5 record as provided in Section 39, the time elapsing thereafter
6 and before such transcript is ready for delivery to them shall
7 not be counted as part of such 20 days.

8 (b) At the expiration of the time allowed for filing a
9 motion for rehearing, the Secretary may take the action
10 recommended by the Disciplinary Board. Upon the suspension,
11 revocation, placement on probationary status, or the taking of
12 any other disciplinary action, including the limiting of the
13 scope, nature, or extent of one's practice, deemed proper by
14 the Department, with regard to the license or ~~, certificate or~~
15 ~~visiting professor~~ permit, the accused shall surrender their
16 license or permit to the Department, if ordered to do so by the
17 Department, and upon their failure or refusal so to do, the
18 Department may seize the same.

19 (c) Each ~~certificate of~~ order of revocation, suspension, or
20 other disciplinary action shall contain a brief, concise
21 statement of the ground or grounds upon which the Department's
22 action is based, as well as the specific terms and conditions
23 of such action. This document shall be retained as a permanent
24 record by the Disciplinary Board and the Secretary.

25 (d) The Department shall at least annually publish a list
26 of the names of all persons disciplined under this Act in the

1 preceding 12 months. Such lists shall be available by the
2 Department on its website.

3 (e) In those instances where an order of revocation,
4 suspension, or other disciplinary action has been rendered by
5 virtue of a physician's physical illness, including, but not
6 limited to, deterioration through the aging process, or loss of
7 motor skill which results in a physician's inability to
8 practice medicine with reasonable judgment, skill, or safety,
9 the Department shall only permit this document, and the record
10 of the hearing incident thereto, to be observed, inspected,
11 viewed, or copied pursuant to court order.

12 (Source: P.A. 97-622, eff. 11-23-11.)

13 (225 ILCS 60/41) (from Ch. 111, par. 4400-41)

14 (Section scheduled to be repealed on December 31, 2014)

15 Sec. 41. Administrative review; certification of record.

16 (a) All final administrative decisions of the Department
17 are subject to judicial review pursuant to the Administrative
18 Review Law and its rules. The term "administrative decision" is
19 defined as in Section 3-101 of the Code of Civil Procedure.

20 (b) Proceedings for judicial review shall be commenced in
21 the circuit court of the county in which the party applying for
22 review resides; but if the party is not a resident of this
23 State, the venue shall be in Sangamon County.

24 (c) The Department shall not be required to certify any
25 record to the court, to file an answer in court, or to

1 otherwise appear in any court in a judicial review proceeding
2 unless and until the Department has received from the plaintiff
3 payment of the costs of furnishing and certifying the record,
4 which costs shall be determined by the Department. Exhibits
5 shall be certified without cost. Failure on the part of the
6 plaintiff to file a receipt in court shall be grounds for
7 dismissal of the action. During the pendency and hearing of any
8 and all judicial proceedings incident to the disciplinary
9 action the sanctions imposed upon the accused by the Department
10 because of acts or omissions related to the delivery of direct
11 patient care as specified in the Department's final
12 administrative decision, shall as a matter of public policy
13 remain in full force and effect in order to protect the public
14 pending final resolution of any of the proceedings.

15 (Source: P.A. 97-622, eff. 11-23-11.)

16 Section 99. Effective date. This Act takes effect upon
17 becoming law."