94TH GENERAL ASSEMBLY

State of Illinois

2005 and 2006

SB0538

Introduced 2/17/2005, by Sen. Dale A. Righter

SYNOPSIS AS INTRODUCED:

from Ch. 111, par. 4400-22

225 ILCS 60/22 305 ILCS 5/8A-3.5 new 305 ILCS 5/8A-3.6 new 720 ILCS 5/46-1 720 ILCS 5/46-6 new

Amends the Medical Practice Act of 1987, the Illinois Public Aid Code, and the Criminal Code of 1961. Requires the Department of Financial and Professional Regulation to suspend the license of a physician who has not paid restitution for financial loss sustained as a result of insurance fraud or vendor fraud in relation to medical assistance under the Illinois Public Aid Code committed by the physician, including any court costs and attorney fees. Provides that a person convicted of insurance fraud or recipient fraud, unauthorized use of medical assistance, or vendor fraud in relation to the provision of medical assistance under the Illinois Public Aid Code shall be ordered to pay monetary restitution to a person for any financial loss sustained by that person as a result of the violation, including any court costs and attorney fees. Provides that an order of restitution also includes expenses incurred and paid in connection with any medical evaluation or treatment. Provides that State licensing agencies, the Office of the Attorney General, and the Department of Financial and Professional Regulation shall coordinate enforcement efforts relating to acts of insurance fraud or recipient fraud, unauthorized use of medical assistance, or vendor fraud in relation to medical assistance under the Illinois Public Aid Code.

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FISCAL NOTE ACT MAY APPLY

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AN ACT in relation to fraud.

2 Be it enacted by the People of the State of Illinois, 3 represented in the General Assembly:

Section 5. The Medical Practice Act of 1987 is amended by
changing Section 22 as follows:

6 (225 ILCS 60/22) (from Ch. 111, par. 4400-22)

(Section scheduled to be repealed on January 1, 2007)

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Sec. 22. Disciplinary action.

Department may revoke, suspend, 9 (A) The place on probationary status, or take any other disciplinary action as 10 the Department may deem proper with regard to the license or 11 visiting professor permit of any person issued under this Act 12 to practice medicine, or to treat human ailments without the 13 14 use of drugs and without operative surgery upon any of the 15 following grounds:

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

18 (a) a facility licensed pursuant to the Ambulatory
19 Surgical Treatment Center Act;

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

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

29 (d) ambulatory surgical treatment centers,
30 hospitalization or care facilities maintained by the
31 Federal Government; or

(e) ambulatory surgical treatment centers,

hospitalization or care facilities maintained by any university or college established under the laws of this State and supported principally by public funds raised by taxation.

5 (2) Performance of an abortion procedure in a wilful 6 and wanton manner on a woman who was not pregnant at the 7 time the abortion procedure was performed.

8 (3) The conviction of a felony in this or any other 9 jurisdiction, except as otherwise provided in subsection B 10 of this Section, whether or not related to practice under 11 this Act, or the entry of a guilty or nolo contendere plea 12 to a felony charge.

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(4) Gross negligence in practice under this Act.

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

17 (6) Obtaining any fee by fraud, deceit, or18 misrepresentation.

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

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

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

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

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

35 (12) Disciplinary action of another state or
 36 jurisdiction against a license or other authorization to

1 practice as a medical doctor, doctor of osteopathy, doctor 2 of osteopathic medicine or doctor of chiropractic, a 3 certified copy of the record of the action taken by the 4 other state or jurisdiction being prima facie evidence 5 thereof.

6 (13) Violation of any provision of this Act or of the 7 Medical Practice Act prior to the repeal of that Act, or 8 violation of the rules, or a final administrative action of 9 the Director, after consideration of the recommendation of 10 the Disciplinary Board.

11 (14) Dividing with anyone other than physicians with whom the licensee practices in a partnership, Professional 12 Association, limited liability company, or Medical or 13 Professional Corporation any fee, commission, rebate or 14 other form of compensation for any professional services 15 16 not actually and personally rendered. Nothing contained in 17 subsection prohibits persons holding valid and this current licenses under this Act from practicing medicine in 18 partnership under a partnership agreement, including a 19 20 limited liability partnership, in a limited liability company under the Limited Liability Company Act, 21 in a corporation authorized by the Medical Corporation Act, as 22 23 an association authorized by the Professional Association Act, or in a corporation under the Professional Corporation 24 25 Act or from pooling, sharing, dividing or apportioning the fees and monies received by them or by the partnership, 26 27 corporation or association in accordance with the 28 partnership agreement or the policies of the Board of 29 Directors of the corporation or association. Nothing 30 contained in this subsection prohibits 2 or more 31 corporations authorized by the Medical Corporation Act, 32 from forming a partnership or joint venture of such providing medical, surgical 33 corporations, and and scientific research and knowledge by employees of these 34 corporations if such employees are licensed under this Act, 35 or from pooling, sharing, dividing, or apportioning the 36

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1 fees and monies received by the partnership or joint venture in accordance with the partnership or joint venture 2 agreement. Nothing contained in this subsection shall 3 abrogate the right of 2 or more persons, holding valid and 4 5 current licenses under this Act, to each receive adequate 6 compensation for concurrently rendering professional services to a patient and divide a fee; provided, the 7 patient has full knowledge of the division, and, provided, 8 that the division is made in proportion to the services 9 10 performed and responsibility assumed by each.

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

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(16) Abandonment of a patient.

17 (17) Prescribing, selling, administering, 18 distributing, giving or self-administering any drug 19 classified as a controlled substance (designated product) 20 or narcotic for other than medically accepted therapeutic 21 purposes.

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

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

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

34 (21) Wilfully making or filing false records or reports
 35 in his or her practice as a physician, including, but not
 36 limited to, false records to support claims against the

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medical assistance program of the Department of Public Aid under the Illinois Public Aid Code.

3 (22) Wilful omission to file or record, or wilfully 4 impeding the filing or recording, or inducing another 5 person to omit to file or record, medical reports as 6 required by law, or wilfully failing to report an instance 7 of suspected abuse or neglect as required by law.

8 (23) Being named as a perpetrator in an indicated 9 report by the Department of Children and Family Services 10 under the Abused and Neglected Child Reporting Act, and 11 upon proof by clear and convincing evidence that the 12 licensee has caused a child to be an abused child or 13 neglected child as defined in the Abused and Neglected 14 Child Reporting Act.

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

18 (25) Gross and wilful and continued overcharging for 19 professional services, including filing false statements 20 for collection of fees for which services are not rendered, 21 including, but not limited to, filing such false statements 22 for collection of monies for services not rendered from the 23 medical assistance program of the Department of Public Aid 24 under the Illinois Public Aid Code.

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

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

31 (28) Physical illness, including, but not limited to, 32 deterioration through the aging process, or loss of motor 33 skill which results in a physician's inability to practice 34 under this Act with reasonable judgment, skill or safety.

35 (29) Cheating on or attempt to subvert the licensing
 36 examinations administered under this Act.

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

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

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

10 (33) Violating state or federal laws or regulations11 relating to controlled substances.

12 (34) Failure to report to the Department any adverse final action taken against them by another licensing 13 jurisdiction (any other state or any territory of the 14 United States or any foreign state or country), by any peer 15 16 review body, by any health care institution, by any 17 professional society or association related to practice under this Act, by any governmental agency, by any law 18 enforcement agency, or by any court for acts or conduct 19 similar to acts or conduct which would constitute grounds 20 for action as defined in this Section. 21

(35) Failure to report to the Department surrender of a 22 23 license or authorization to practice as a medical doctor, a doctor of osteopathy, a doctor of osteopathic medicine, or 24 25 doctor of chiropractic in another state or jurisdiction, or 26 surrender of membership on any medical staff or in any 27 medical or professional association or society, while 28 disciplinary investigation by under any of those authorities or bodies, for acts or conduct similar to acts 29 30 or conduct which would constitute grounds for action as 31 defined in this Section.

32 (36) Failure to report to the Department any adverse 33 judgment, settlement, or award arising from a liability 34 claim related to acts or conduct similar to acts or conduct 35 which would constitute grounds for action as defined in 36 this Section. - 7 - LRB094 09496 RLC 39747 b

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(37) Failure to transfer copies of medical records as
 required by law.

3 (38) Failure to furnish the Department, its investigators or representatives, relevant information, 4 5 legally requested by the Department after consultation with the Chief Medical Coordinator or the Deputy Medical 6 Coordinator. 7

8 (39) Violating the Health Care Worker Self-Referral
9 Act.

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

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

14 (42) Entering into an excessive number of written 15 collaborative agreements with licensed advanced practice 16 nurses resulting in an inability to adequately collaborate 17 and provide medical direction.

18 (43) Repeated failure to adequately collaborate with
19 or provide medical direction to a licensed advanced
20 practice nurse.

All proceedings to suspend, revoke, place on probationary 21 status, or take any other disciplinary action as the Department 22 23 may deem proper, with regard to a license on any of the foregoing grounds, must be commenced within 3 years next after 24 25 receipt by the Department of a complaint alleging the 26 commission of or notice of the conviction order for any of the 27 acts described herein. Except for the grounds numbered (8), (9) 28 and (29), no action shall be commenced more than 5 years after 29 the date of the incident or act alleged to have violated this 30 Section. In the event of the settlement of any claim or cause of action in favor of the claimant or the reduction to final 31 32 judgment of any civil action in favor of the plaintiff, such claim, cause of action or civil action being grounded on the 33 allegation that a person licensed under this Act was negligent 34 35 in providing care, the Department shall have an additional period of one year from the date of notification to the 36

Department under Section 23 of this Act of such settlement or final judgment in which to investigate and commence formal disciplinary proceedings under Section 36 of this Act, except as otherwise provided by law. The time during which the holder of the license was outside the State of Illinois shall not be included within any period of time limiting the commencement of disciplinary action by the Department.

The entry of an order or judgment by any circuit court 8 9 establishing that any person holding a license under this Act 10 is a person in need of mental treatment operates as а 11 suspension of that license. That person may resume their 12 practice only upon the entry of a Departmental order based upon 13 a finding by the Medical Disciplinary Board that they have been determined to be recovered from mental illness by the court and 14 15 upon the Disciplinary Board's recommendation that they be 16 permitted to resume their practice.

17 The Department may refuse to issue or take disciplinary action concerning the license of any person who fails to file a 18 19 return, or to pay the tax, penalty or interest shown in a filed 20 return, or to pay any final assessment of tax, penalty or interest, as required by any tax Act administered by the 21 22 Illinois Department of Revenue, until such time as the 23 requirements of any such tax Act are satisfied as determined by the Illinois Department of Revenue. 24

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

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

30 (b) what constitutes dishonorable, unethical or
31 unprofessional conduct of a character likely to deceive,
32 defraud, or harm the public;

33 (c) what constitutes immoral conduct in the commission 34 of any act, including, but not limited to, commission of an 35 act of sexual misconduct related to the licensee's 36 practice; and - 9 - LRB094 09496 RLC 39747 b

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

3 However, no such rule shall be admissible into evidence in 4 any civil action except for review of a licensing or other 5 disciplinary action under this Act.

In enforcing this Section, the Medical Disciplinary Board, 6 7 upon a showing of a possible violation, may compel any 8 individual licensed to practice under this Act, or who has 9 applied for licensure or a permit pursuant to this Act, to submit to a mental or physical examination, or both, 10 as 11 required by and at the expense of the Department. The examining 12 physician or physicians shall be those specifically designated 13 by the Disciplinary Board. The Medical Disciplinary Board or the Department may order the examining physician to present 14 15 testimony concerning this mental or physical examination of the 16 licensee or applicant. No information shall be excluded by 17 reason of any common law or statutory privilege relating to communication between the licensee or applicant and the 18 19 examining physician. The individual to be examined may have, at 20 his or her own expense, another physician of his or her choice present during all aspects of the examination. Failure of any 21 22 individual to submit to mental or physical examination, when 23 directed, shall be grounds for suspension of his or her license until such time as the individual submits to the examination if 24 the Disciplinary Board finds, after notice and hearing, that 25 26 the refusal to submit to the examination was without reasonable 27 cause. If the Disciplinary Board finds a physician unable to 28 practice because of the reasons set forth in this Section, the 29 Disciplinary Board shall require such physician to submit to 30 care, counseling, or treatment by physicians approved or 31 designated by the Disciplinary Board, as a condition for 32 continued, reinstated, or renewed licensure to practice. Any physician, whose license was granted pursuant to Sections 9, 33 17, or 19 of this Act, or, continued, reinstated, renewed, 34 35 disciplined or supervised, subject to such terms, conditions or restrictions who shall fail to comply with such terms, 36

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1 conditions or restrictions, or to complete a required program 2 of care, counseling, or treatment, as determined by the Chief Medical Coordinator or Deputy Medical Coordinators, shall be 3 referred to the Director for a determination as to whether the 4 5 licensee shall have their license suspended immediately, 6 pending a hearing by the Disciplinary Board. In instances in which the Director immediately suspends a license under this 7 Section, a hearing upon such person's license must be convened 8 9 by the Disciplinary Board within 15 days after such suspension and completed without appreciable delay. The Disciplinary 10 11 Board shall have the authority to review the subject 12 physician's record of treatment and counseling regarding the impairment, to the extent permitted by applicable federal 13 statutes and regulations safeguarding the confidentiality of 14 15 medical records.

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

The Department may promulgate rules for the imposition of 21 fines in disciplinary cases, not to exceed \$5,000 for each 22 23 violation of this Act. Fines may be imposed in conjunction with other forms of disciplinary action, but shall not be the 24 25 exclusive disposition of any disciplinary action arising out of 26 conduct resulting in death or injury to a patient. Any funds 27 collected from such fines shall be deposited in the Medical 28 Disciplinary Fund.

29 (B) The Department shall revoke the license or visiting 30 permit of any person issued under this Act to practice medicine 31 or to treat human ailments without the use of drugs and without 32 operative surgery, who has been convicted a second time of committing any felony under the Illinois Controlled Substances 33 34 Act, or who has been convicted a second time of committing a 35 Class 1 felony under Sections 8A-3 and 8A-6 of the Illinois 36 Public Aid Code. A person whose license or visiting permit is

1 revoked under this subsection B of Section 22 of this Act shall 2 be prohibited from practicing medicine or treating human 3 ailments without the use of drugs and without operative 4 surgery.

5 (C) The Medical Disciplinary Board shall recommend to the 6 Department civil penalties and any other appropriate discipline in disciplinary cases when the Board finds that a 7 physician willfully performed an abortion with actual 8 knowledge that the person upon whom the abortion has been 9 10 performed is a minor or an incompetent person without notice as 11 required under the Parental Notice of Abortion Act of 1995. 12 Upon the Board's recommendation, the Department shall impose, 13 for the first violation, a civil penalty of \$1,000 and for a second or subsequent violation, a civil penalty of \$5,000. 14

15 (D) The Department shall temporarily suspend the license or 16 visiting permit of any person issued under this Act to practice 17 medicine or to treat human ailments without the use of drugs and without operative surgery, who has not paid restitution to 18 a person under Section 8A-3.5 of the Illinois Public Aid Code 19 20 or under Section 46-1 of the Criminal Code of 1961. A person whose license or visiting permit is revoked under this 21 subsection (D) is prohibited from practicing medicine or 22 23 treating human ailments until the restitution is made in full. (Source: P.A. 89-18, eff. 6-1-95; 89-201, eff. 1-1-96; 89-626, 24 eff. 8-9-96; 89-702, eff. 7-1-97; 90-742, eff. 8-13-98.) 25

26 Section 10. The Illinois Public Aid Code is amended by 27 adding Sections 8A-3.5 and 8A-3.6 as follows:

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(305 ILCS 5/8A-3.5 new)

Sec. 8A-3.5. Vendor fraud and recipient fraud in medical assistance; restitution. A person convicted of recipient fraud, unauthorized use of medical assistance, or vendor fraud in relation to the provision of medical assistance under Article V of this Code shall be ordered to pay monetary restitution to a person for any financial loss sustained by

that person as a result of a violation of Section 8A-2, 8A-2.5, or 8A-3 of this Code, including any court costs and attorney fees. An order of restitution also includes expenses incurred and paid in connection with any medical evaluation or treatment.

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(305 ILCS 5/8A-3.6 new)

Sec. 8A-3.6. Actions by State licensing agencies.

8 <u>(a) All State licensing agencies, the Office of the</u> 9 <u>Attorney General, and the Department of Financial and</u> 10 <u>Professional Regulation shall coordinate enforcement efforts</u> 11 <u>relating to acts of recipient fraud, unauthorized use of</u> 12 <u>medical assistance, or vendor fraud in relation to the</u> 13 <u>provision of medical assistance under Article V of this Code.</u>

(b) If a person who is licensed or registered under the 14 15 laws of the State of Illinois to engage in a business or 16 profession is convicted of or pleads guilty to engaging in an act of recipient fraud, unauthorized use of medical assistance, 17 or vendor fraud in relation to the provision of medical 18 19 assistance under Article V of this Code, the Office of the Attorney General must forward to each State agency by which the 20 person is licensed or registered a copy of the conviction or 21 22 plea and all supporting evidence.

(c) Any agency that receives information under this Section 23 shall, not later than 6 months after the date on which it 24 receives the information, report the action taken against the 25 26 convicted person, including but not limited to, the revocation 27 or suspension of the license or any other disciplinary action taken. The report must be submitted to the Secretary of 28 29 Financial and Professional Regulation and the Attorney General 30 for publication under the Open Meetings Act.

31 Section 15. The Criminal Code of 1961 is amended by 32 changing Section 46-1 and adding Section 46-6 as follows:

33 (720 ILCS 5/46-1)

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Sec. 46-1. Insurance fraud.

2 (a) A person commits the offense of insurance fraud when he or she knowingly obtains, attempts to obtain, or causes to be 3 obtained, by deception, control over the property of an 4 5 insurance company or self-insured entity by the making of a 6 false claim or by causing a false claim to be made on any policy of insurance issued by an insurance company or by the 7 making of a false claim to a self-insured entity, intending to 8 deprive an insurance company or self-insured entity 9 10 permanently of the use and benefit of that property.

11 (b) Sentence.

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(1) A violation of this Section in which the value of
the property obtained or attempted to be obtained is \$300
or less is a Class A misdemeanor.

(2) A violation of the Section in which the value of the property obtained or attempted to be obtained is more than \$300 but not more than \$10,000 is a Class 3 felony.

18 (3) A violation of this Section in which the value of 19 the property obtained or attempted to be obtained is more 20 than \$10,000 but not more than \$100,000 is a Class 2 21 felony.

(4) A violation of this Section in which the value of
the property obtained or attempted to be obtained is more
than \$100,000 is a Class 1 felony.

25 (5) A person convicted of insurance fraud shall be ordered to pay monetary restitution to the insurer or 26 27 self-insured entity, or any other person for any financial loss sustained as a result of a violation of this Section, 28 including any court costs and attorney fees. An order of 29 30 restitution also includes expenses incurred and paid by an 31 insurer in connection with any medical evaluation or treatment services. 32

33 (c) For the purposes of this Article, where the exact value 34 of property obtained or attempted to be obtained is either not 35 alleged by the accused or not specifically set by the terms of 36 a policy of insurance, the value of the property shall be the - 14 - LRB094 09496 RLC 39747 b

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1 fair market replacement value of the property claimed to be 2 lost, the reasonable costs of reimbursing a vendor or other 3 claimant for services to be rendered, or both.

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(d) Definitions. For the purposes of this Article:

5 6 (1) "Insurance company" means "company" as defined under Section 2 of the Illinois Insurance Code.

7 (2) "Self-insured entity" means any person, business,
8 partnership, corporation, or organization that sets aside
9 funds to meet his, her, or its losses or to absorb
10 fluctuations in the amount of loss, the losses being
11 charged against the funds set aside or accumulated.

(3) "Obtain", "obtains control", "deception",
"property" and "permanent deprivation" have the meanings
ascribed to those terms in Article 15 of this Code.

(4) "Governmental entity" means each officer, board, 15 16 commission, and agency created by the constitution, 17 whether in the executive, legislative, or judicial branch of State government; each officer, department, board, 18 commission, agency, institution, authority, university, 19 20 body politic and corporate of the State; and each 21 administrative unit or corporate outgrowth of State government that is created by or pursuant to statute, 22 23 including units of local government and their officers, school districts, and boards of election commissioners; 24 25 and each administrative unit or corporate outgrowth of the above and as may be created by executive order of the 26 27 Governor.

28 (5) "False claim" means any statement made to any 29 insurer, purported insurer, servicing corporation, insurance broker, or insurance agent, or any agent or 30 31 employee of the entities, and made as part of, or in 32 support of, a claim for payment or other benefit under a policy of insurance, or as part of, or in support of, an 33 application for the issuance of, or the rating of, any 34 insurance policy, when the statement contains any false, 35 36 incomplete, or misleading information concerning any fact

or thing material to the claim, or conceals the occurrence of an event that is material to any person's initial or continued right or entitlement to any insurance benefit or payment, or the amount of any benefit or payment to which the person is entitled.

6 (6) "Statement" means any assertion, oral, written, or 7 otherwise, and includes, but is not limited to, any notice, letter, or memorandum; proof of loss; bill of lading; 8 9 receipt for payment; invoice, account, or other financial 10 statement; estimate of property damage; bill for services; 11 diagnosis or prognosis; prescription; hospital, medical or 12 dental chart or other record, x-ray, photograph, videotape, or movie film; test result; other evidence of 13 loss, injury, or expense; computer-generated document; and 14 data in any form. 15

16 (Source: P.A. 90-333, eff. 1-1-98; 91-232, eff. 1-1-00.)

17 (720 ILCS 5/46-6 new)

18 Sec. 46-6. Actions by State licensing agencies.

19 <u>(a) All State licensing agencies, the Office of the</u> 20 Attorney General, and the Department of Financial and 21 Professional Regulation shall coordinate enforcement efforts 22 relating to acts of insurance fraud.

(b) If a person who is licensed or registered under the laws of the State of Illinois to engage in a business or profession is convicted of or pleads guilty to engaging in an act of insurance fraud, the Office of the Attorney General must forward to each State agency by which the person is licensed or registered a copy of the conviction or plea and all supporting evidence.

30 <u>(c) Any agency that receives information under this Section</u> 31 <u>shall, not later than 6 months after the date on which it</u> 32 <u>receives the information, report the action taken against the</u> 33 <u>convicted person, including but not limited to, the revocation</u> 34 <u>or suspension of the license or any other disciplinary action</u> 35 <u>taken. The report must be submitted to the Secretary of</u>

- 1 Financial and Professional Regulation and the Attorney General
- 2 for publication under the Open Meetings Act.