

## **100TH GENERAL ASSEMBLY**

# State of Illinois

# 2017 and 2018

#### HB5496

by Rep. Reginald Phillips

## SYNOPSIS AS INTRODUCED:

225 ILCS 60/22

from Ch. 111, par. 4400-22

Amends the Medical Practice Act of 1987. Provides that the Department of Financial and Professional Regulation may not refuse to renew, or take disciplinary action concerning, the license of any physician who continues prescribing previously prescribed medications to existing patients for 90 days after the expiration of his or her license if the physician's license is not timely renewed because of a clerical issue in the physician's renewal application. Effective immediately.

LRB100 20804 XWW 36294 b

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AN ACT concerning regulation.

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

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

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

7 (Section scheduled to be repealed on December 31, 2019)

8 Sec. 22. Disciplinary action.

9 (A) The Department may revoke, suspend, place on probation, 10 reprimand, refuse to issue or renew, or take any other 11 disciplinary or non-disciplinary action as the Department may 12 deem proper with regard to the license or permit of any person 13 issued under this Act, including imposing fines not to exceed 14 \$10,000 for each violation, upon any of the following grounds:

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

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(a) a facility licensed pursuant to the AmbulatorySurgical Treatment Center Act;

(b) an institution licensed under the HospitalLicensing Act;

(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;

5 (d) ambulatory surgical treatment centers, 6 hospitalization or care facilities maintained by the 7 Federal Government; or

8 (e) ambulatory surgical treatment centers, 9 hospitalization or care facilities maintained by any 10 university or college established under the laws of 11 this State and supported principally by public funds 12 raised by taxation.

13 (2) Performance of an abortion procedure in a willful
14 and wanton manner on a woman who was not pregnant at the
15 time the abortion procedure was performed.

(3) A plea of guilty or nolo contendere, finding of
guilt, jury verdict, or entry of judgment or sentencing,
including, but not limited to, convictions, preceding
sentences of supervision, conditional discharge, or first
offender probation, under the laws of any jurisdiction of
the United States of any crime that is a felony.

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(4) Gross negligence in practice under this Act.

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

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(6) Obtaining any fee by fraud, deceit, or

1 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.

6 (8) Practicing under a false or, except as provided by 7 law, an assumed name.

8 (9) Fraud or misrepresentation in applying for, or 9 procuring, a license under this Act or in connection with 10 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.

Adverse action taken by another state 18 (12)or 19 jurisdiction against a license or other authorization to 20 practice as a medical doctor, doctor of osteopathy, doctor 21 of osteopathic medicine or doctor of chiropractic, a 22 certified copy of the record of the action taken by the 23 other state or jurisdiction being prima facie evidence 24 thereof. This includes any adverse action taken by a State 25 or federal agency that prohibits a medical doctor, doctor 26 of osteopathy, doctor of osteopathic medicine, or doctor of

chiropractic from providing services to the agency's
 participants.

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

8 (14) Violation of the prohibition against fee9 splitting in Section 22.2 of this Act.

10 (15) A finding by the Disciplinary Board that the 11 registrant after having his or her license placed on 12 probationary status or subjected to conditions or 13 restrictions violated the terms of the probation or failed 14 to comply with such terms or conditions.

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(16) Abandonment of a patient.

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

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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.

7 (21) Willfully making or filing false records or
8 reports in his or her practice as a physician, including,
9 but not limited to, false records to support claims against
10 the medical assistance program of the Department of
11 Healthcare and Family Services (formerly Department of
12 Public Aid) under the Illinois Public Aid Code.

13 (22) Willful omission to file or record, or willfully 14 impeding the filing or recording, or inducing another 15 person to omit to file or record, medical reports as 16 required by law, or willfully failing to report an instance 17 of suspected abuse or neglect as required by law.

18 (23) Being named as a perpetrator in an indicated 19 report by the Department of Children and Family Services 20 under the Abused and Neglected Child Reporting Act, and 21 upon proof by clear and convincing evidence that the 22 licensee has caused a child to be an abused child or 23 neglected child as defined in the Abused and Neglected 24 Child Reporting Act.

(24) Solicitation of professional patronage by any
 corporation, agents or persons, or profiting from those

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representing themselves to be agents of the licensee.

2 (25) Gross and willful and continued overcharging for 3 professional services, including filing false statements for collection of fees for which services are not rendered, 4 5 including, but not limited to, filing such false statements for collection of monies for services not rendered from the 6 7 medical assistance program of the Department of Healthcare 8 and Family Services (formerly Department of Public Aid) 9 under the Illinois Public Aid Code.

10 (26) A pattern of practice or other behavior which 11 demonstrates incapacity or incompetence to practice under 12 this Act.

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

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

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

(30) Willfully or negligently violating the
 confidentiality between physician and patient except as
 required by law.

(31) The use of any false, fraudulent, or deceptive
 statement in any document connected with practice under

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this Act.

2 (32) Aiding and abetting an individual not licensed
3 under this Act in the practice of a profession licensed
4 under this Act.

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

8 (34) Failure to report to the Department any adverse 9 final action taken against them by another licensing 10 jurisdiction (any other state or any territory of the 11 United States or any foreign state or country), by any peer 12 review body, by any health care institution, by any professional society or association related to practice 13 14 under this Act, by any governmental agency, by any law 15 enforcement agency, or by any court for acts or conduct 16 similar to acts or conduct which would constitute grounds 17 for action as defined in this Section.

18 (35) Failure to report to the Department surrender of a 19 license or authorization to practice as a medical doctor, a 20 doctor of osteopathy, a doctor of osteopathic medicine, or 21 doctor of chiropractic in another state or jurisdiction, or 22 surrender of membership on any medical staff or in any 23 medical or professional association or society, while 24 under disciplinary investigation by any of those 25 authorities or bodies, for acts or conduct similar to acts 26 or conduct which would constitute grounds for action as

defined in this Section.

2 (36) Failure to report to the Department any adverse 3 judgment, settlement, or award arising from a liability 4 claim related to acts or conduct similar to acts or conduct 5 which would constitute grounds for action as defined in 6 this Section.

7 (37) Failure to provide copies of medical records as
8 required by law.

9 (38)Failure furnish the to Department, its 10 investigators or representatives, relevant information, 11 legally requested by the Department after consultation 12 with the Chief Medical Coordinator or the Deputy Medical 13 Coordinator.

14 (39) Violating the Health Care Worker Self-Referral15 Act.

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

18 (41) Failure to establish and maintain records of19 patient care and treatment as required by this law.

(42) Entering into an excessive number of written
 collaborative agreements with licensed advanced practice
 registered nurses resulting in an inability to adequately
 collaborate.

24 (43) Repeated failure to adequately collaborate with a
 25 licensed advanced practice registered nurse.

(44) Violating the Compassionate Use of Medical

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1 Cannabis Pilot Program Act.

2 (45) Entering into an excessive number of written
3 collaborative agreements with licensed prescribing
4 psychologists resulting in an inability to adequately
5 collaborate.

6 (46) Repeated failure to adequately collaborate with a
7 licensed prescribing psychologist.

8 (47) Willfully failing to report an instance of 9 suspected abuse, neglect, financial exploitation, or 10 self-neglect of an eligible adult as defined in and 11 required by the Adult Protective Services Act.

12 (48) Being named as an abuser in a verified report by 13 the Department on Aging under the Adult Protective Services 14 Act, and upon proof by clear and convincing evidence that 15 the licensee abused, neglected, or financially exploited 16 an eligible adult as defined in the Adult Protective 17 Services Act.

Except for actions involving the ground numbered (26), all 18 proceedings to suspend, revoke, place on probationary status, 19 20 or take any other disciplinary action as the Department may deem proper, with regard to a license on any of the foregoing 21 22 grounds, must be commenced within 5 years next after receipt by 23 the Department of a complaint alleging the commission of or notice of the conviction order for any of the acts described 24 25 herein. Except for the grounds numbered (8), (9), (26), and 26 (29), no action shall be commenced more than 10 years after the

date of the incident or act alleged to have violated this 1 2 Section. For actions involving the ground numbered (26), a pattern of practice or other behavior includes all incidents 3 alleged to be part of the pattern of practice or other behavior 4 5 that occurred, or a report pursuant to Section 23 of this Act 6 received, within the 10-year period preceding the filing of the 7 complaint. In the event of the settlement of any claim or cause of action in favor of the claimant or the reduction to final 8 9 judgment of any civil action in favor of the plaintiff, such 10 claim, cause of action or civil action being grounded on the 11 allegation that a person licensed under this Act was negligent 12 in providing care, the Department shall have an additional period of 2 years from the date of notification to the 13 Department under Section 23 of this Act of such settlement or 14 15 final judgment in which to investigate and commence formal 16 disciplinary proceedings under Section 36 of this Act, except 17 as otherwise provided by law. The time during which the holder of the license was outside the State of Illinois shall not be 18 19 included within any period of time limiting the commencement of

20 disciplinary action by the Department.
21 The entry of an order or judgment by any circuit court
22 establishing that any person holding a license under this Act
23 is a person in need of mental treatment operates as a
24 suspension of that license. That person may resume their
25 practice only upon the entry of a Departmental order based upon
26 a finding by the Disciplinary Board that they have been

1 determined to be recovered from mental illness by the court and 2 upon the Disciplinary Board's recommendation that they be 3 permitted to resume their practice.

The Department may refuse to issue or take disciplinary 4 5 action concerning the license of any person who fails to file a return, or to pay the tax, penalty or interest shown in a filed 6 7 return, or to pay any final assessment of tax, penalty or 8 interest, as required by any tax Act administered by the 9 Illinois Department of Revenue, until such time as the 10 requirements of any such tax Act are satisfied as determined by 11 the Illinois Department of Revenue.

12 The Department, upon the recommendation of the 13 Disciplinary Board, shall adopt rules which set forth standards 14 to be used in determining:

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

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

20 (c) what constitutes immoral conduct in the commission 21 of any act, including, but not limited to, commission of an 22 act of sexual misconduct related to the licensee's 23 practice; and

24 (d) what constitutes gross negligence in the practice25 of medicine.

26 However, no such rule shall be admissible into evidence in

any civil action except for review of a licensing or other
 disciplinary action under this Act.

3 In enforcing this Section, the Disciplinary Board or the Licensing Board, upon a showing of a possible violation, may 4 5 compel, in the case of the Disciplinary Board, any individual who is licensed to practice under this Act or holds a permit to 6 7 practice under this Act, or, in the case of the Licensing 8 Board, any individual who has applied for licensure or a permit 9 pursuant to this Act, to submit to a mental or physical 10 examination and evaluation, or both, which may include a 11 substance abuse or sexual offender evaluation, as required by 12 the Licensing Board or Disciplinary Board and at the expense of 13 the Department. The Disciplinary Board or Licensing Board shall specifically designate the examining physician licensed to 14 15 practice medicine in all of its branches or, if applicable, the 16 multidisciplinary team involved in providing the mental or 17 examination and evaluation, physical or both. The multidisciplinary team shall be led by a physician licensed to 18 practice medicine in all of its branches and may consist of one 19 20 or more or a combination of physicians licensed to practice medicine in all of its branches, licensed chiropractic 21 22 physicians, licensed clinical psychologists, licensed clinical 23 social workers, licensed clinical professional counselors, and other professional and administrative staff. Any examining 24 25 physician or member of the multidisciplinary team may require any person ordered to submit to an examination and evaluation 26

pursuant to this Section to submit to anv additional 1 2 supplemental testing deemed necessary to complete anv examination or evaluation process, including, but not limited 3 to, blood testing, urinalysis, psychological testing, or 4 5 neuropsychological testing. The Disciplinary Board, the 6 Licensing Board, or the Department may order the examining 7 physician or any member of the multidisciplinary team to provide to the Department, the Disciplinary Board, or the 8 9 Licensing Board any and all records, including business 10 records, that relate to the examination and evaluation, 11 including any supplemental testing performed. The Disciplinary 12 Board, the Licensing Board, or the Department may order the 13 examining physician or any member of the multidisciplinary team present testimony concerning this examination 14 and to evaluation of the licensee, permit holder, or applicant, 15 16 including testimony concerning any supplemental testing or documents relating to the examination and evaluation. No 17 information, report, record, or other documents in any way 18 related to the examination and evaluation shall be excluded by 19 reason of any common law or statutory privilege relating to 20 21 communication between the licensee, permit holder, or 22 applicant and the examining physician or any member of the 23 multidisciplinary team. No authorization is necessary from the 24 licensee, permit holder, or applicant ordered to undergo an 25 evaluation and examination for the examining physician or any 26 member of the multidisciplinary team to provide information,

reports, records, or other documents or to provide 1 any 2 testimony regarding the examination and evaluation. The 3 individual to be examined may have, at his or her own expense, another physician of his or her choice present during all 4 5 aspects of the examination. Failure of any individual to submit to mental or physical examination and evaluation, or both, when 6 7 directed, shall result in an automatic suspension, without hearing, until such time as the individual submits to the 8 9 examination. If the Disciplinary Board or Licensing Board finds 10 a physician unable to practice following an examination and 11 evaluation because of the reasons set forth in this Section, 12 the Disciplinary Board or Licensing Board shall require such 13 physician to submit to care, counseling, or treatment by physicians, or other health care professionals, approved or 14 15 designated by the Disciplinary Board, as a condition for 16 issued, continued, reinstated, or renewed licensure to 17 practice. Any physician, whose license was granted pursuant to Sections 9, 17, or 19 of this Act, or, continued, reinstated, 18 renewed, disciplined or supervised, subject to such terms, 19 20 conditions or restrictions who shall fail to comply with such terms, conditions or restrictions, or to complete a required 21 22 program of care, counseling, or treatment, as determined by the 23 Chief Medical Coordinator or Deputy Medical Coordinators, shall be referred to the Secretary for a determination as to 24 whether the licensee shall have their license suspended 25 26 immediately, pending a hearing by the Disciplinary Board. In

instances in which the Secretary immediately suspends a license 1 2 under this Section, a hearing upon such person's license must 3 be convened by the Disciplinary Board within 15 days after such suspension and completed without appreciable delay. 4 The Disciplinary Board shall have the authority to review the 5 subject physician's record of treatment and counseling 6 7 regarding the impairment, to the extent permitted by applicable 8 federal statutes and regulations safeguarding the 9 confidentiality of medical records.

10 An individual licensed under this Act, affected under this 11 Section, shall be afforded an opportunity to demonstrate to the 12 Disciplinary Board that they can resume practice in compliance 13 with acceptable and prevailing standards under the provisions 14 of their license.

15 The Department may promulgate rules for the imposition of 16 fines in disciplinary cases, not to exceed \$10,000 for each 17 violation of this Act. Fines may be imposed in conjunction with other forms of disciplinary action, but shall not be the 18 exclusive disposition of any disciplinary action arising out of 19 conduct resulting in death or injury to a patient. Any funds 20 collected from such fines shall be deposited in the Illinois 21 22 State Medical Disciplinary Fund.

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

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The Department shall revoke the license or permit 1 (B) 2 issued under this Act to practice medicine or a chiropractic physician who has been convicted a second time of committing 3 any felony under the Illinois Controlled Substances Act or the 4 5 Methamphetamine Control and Community Protection Act, or who 6 has been convicted a second time of committing a Class 1 felony 7 under Sections 8A-3 and 8A-6 of the Illinois Public Aid Code. A person whose license or permit is revoked under this subsection 8 9 B shall be prohibited from practicing medicine or treating 10 human ailments without the use of drugs and without operative 11 surgery.

12 (C) The Department shall not revoke, suspend, place on 13 probation, reprimand, refuse to issue or renew, or take any other disciplinary or non-disciplinary action against the 14 15 license or permit issued under this Act to practice medicine to 16 a physician based solely upon the recommendation of the 17 physician to an eligible patient regarding, or prescription for, or treatment with, an investigational drug, biological 18 product, or device. 19

20 Disciplinary Board (D) The shall recommend to the 21 Department civil penalties and any other appropriate 22 discipline in disciplinary cases when the Board finds that a 23 willfully performed abortion physician an with actual 24 knowledge that the person upon whom the abortion has been 25 performed is a minor or an incompetent person without notice as 26 required under the Parental Notice of Abortion Act of 1995.

1 Upon the Board's recommendation, the Department shall impose, 2 for the first violation, a civil penalty of \$1,000 and for a 3 second or subsequent violation, a civil penalty of \$5,000.

4 (E) The Department may not refuse to renew, or take disciplinary action concerning, the license of any physician 5 6 who continues prescribing previously prescribed medications to 7 existing patients for 90 days after the expiration of his or her license if the physician's license is not timely renewed 8 9 because of a clerical issue in the physician's renewal 10 application. 11 (Source: P.A. 99-270, eff. 1-1-16; 99-933, eff. 1-27-17; 12 100-429, eff. 8-25-17; 100-513, eff. 1-1-18; revised 9-29-17.)

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