

93RD GENERAL ASSEMBLY

State of Illinois

2003 and 2004

Introduced 2/6/2004, by Angelo Saviano

SYNOPSIS AS INTRODUCED:

225 ILCS 60/22	from Ch.	111,	par.	4400-22
225 ILCS 60/23	from Ch.	111,	par.	4400-23
225 ILCS 60/36	from Ch.	111,	par.	4400-36

Amends the Medical Practice Act of 1987. In provisions concerning reports relating to professional conduct and capacity and investigations of violations of the Act, allows the Department of Professional Regulation to disclose information and documents to a federal, state, or local law enforcement agency upon service of a valid subpoena. Provides that violating state or federal laws or regulations relating to legend drugs or legally prohibited substances (rather than controlled substances) is grounds for disciplinary action.

LRB093 19986 AMC 45730 b

1

AN ACT concerning professional regulation.

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

4 Section 5. The Medical Practice Act of 1987 is amended by 5 changing Sections 22, 23, and 36 as follows:

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

(Section scheduled to be repealed on January 1, 2007)

8

32

7

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.

1.3

23

24

1

2

3

4

(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

- 4 - LRB093 19986 AMC 45730 b

HB5890

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.

16

31

32

33

(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

- 5 - LRB093 19986 AMC 45730 b

HB5890

1 2

28

29

30

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.

(33) Violating state or federal laws or regulations
 relating to <u>legend drugs or legally prohibited substances</u>
 controlled substances.

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

23 (35) Failure to report to the Department surrender of a license or authorization to practice as a medical doctor, a 24 25 doctor of osteopathy, a doctor of osteopathic medicine, or doctor of chiropractic in another state or jurisdiction, or 26 27 surrender of membership on any medical staff or in any 28 medical or professional association or society, while 29 under disciplinary investigation by any of those 30 authorities or bodies, for acts or conduct similar to acts 31 or conduct which would constitute grounds for action as 32 defined in this Section.

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

- 7 - LRB093 19986 AMC 45730 b

HB5890

1 this Section.

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

4 (38) Failure to furnish the Department, its 5 investigators or representatives, relevant information, 6 legally requested by the Department after consultation 7 with the Chief Medical Coordinator or the Deputy Medical 8 Coordinator.

9 (39) Violating the Health Care Worker Self-Referral 10 Act.

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

13 (41) Failure to establish and maintain records of14 patient care and treatment as required by this law.

15 (42) Entering into an excessive number of written 16 collaborative agreements with licensed advanced practice 17 nurses resulting in an inability to adequately collaborate 18 and provide medical direction.

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

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

- 8 - LRB093 19986 AMC 45730 b

HB5890

1 period of one year from the date of notification to the 2 Department under Section 23 of this Act of such settlement or 3 final judgment in which to investigate and commence formal 4 disciplinary proceedings under Section 36 of this Act, except 5 as otherwise provided by law. The time during which the holder of the license was outside the State of Illinois shall not be 6 included within any period of time limiting the commencement of 7 8 disciplinary action by the Department.

The entry of an order or judgment by any circuit court 9 10 establishing that any person holding a license under this Act 11 is a person in need of mental treatment operates as a 12 suspension of that license. That person may resume their 13 practice only upon the entry of a Departmental order based upon a finding by the Medical Disciplinary Board that they have been 14 15 determined to be recovered from mental illness by the court and 16 upon the Disciplinary Board's recommendation that they be 17 permitted to resume their practice.

The Department may refuse to issue or take disciplinary 18 19 action concerning the license of any person who fails to file a 20 return, or to pay the tax, penalty or interest shown in a filed return, or to pay any final assessment of tax, penalty or 21 22 interest, as required by any tax Act administered by the 23 Illinois Department of Revenue, until such time as the 24 requirements of any such tax Act are satisfied as determined by 25 the Illinois Department of Revenue.

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

29 30 (a) when a person will be deemed sufficiently rehabilitated to warrant the public trust;

31 (b) what constitutes dishonorable, unethical or 32 unprofessional conduct of a character likely to deceive, 33 defraud, or harm the public;

34 (c) what constitutes immoral conduct in the commission
 35 of any act, including, but not limited to, commission of an
 36 act of sexual misconduct related to the licensee's

- 9 - LRB093 19986 AMC 45730 b

HB5890

1 practice; and

2 (d) what constitutes gross negligence in the practice3 of medicine.

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.

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

- 10 - LRB093 19986 AMC 45730 b

HB5890

restrictions who shall fail to comply with such terms, 1 2 conditions or restrictions, or to complete a required program of care, counseling, or treatment, as determined by the Chief 3 Medical Coordinator or Deputy Medical Coordinators, shall be 4 5 referred to the Director for a determination as to whether the 6 licensee shall have their license suspended immediately, pending a hearing by the Disciplinary Board. In instances in 7 which the Director immediately suspends a license under this 8 9 Section, a hearing upon such person's license must be convened 10 by the Disciplinary Board within 15 days after such suspension 11 and completed without appreciable delay. The Disciplinary 12 Board shall have the authority to review the subject 13 physician's record of treatment and counseling regarding the impairment, to the extent permitted by applicable federal 14 15 statutes and regulations safeguarding the confidentiality of 16 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 22 23 fines in disciplinary cases, not to exceed \$5,000 for each violation of this Act. Fines may be imposed in conjunction with 24 other forms of disciplinary action, but shall not be the 25 26 exclusive disposition of any disciplinary action arising out of 27 conduct resulting in death or injury to a patient. Any funds 28 collected from such fines shall be deposited in the Medical 29 Disciplinary Fund.

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

Public Aid Code. A person whose license or visiting permit is revoked under this subsection B of Section 22 of this Act shall be prohibited from practicing medicine or treating human ailments without the use of drugs and without operative surgery.

(C) The Medical Disciplinary Board shall recommend to the 6 7 Department civil penalties and any other appropriate discipline in disciplinary cases when the Board finds that a 8 physician 9 willfully performed an abortion with actual 10 knowledge that the person upon whom the abortion has been 11 performed is a minor or an incompetent person without notice as 12 required under the Parental Notice of Abortion Act of 1995. 13 Upon the Board's recommendation, the Department shall impose, for the first violation, a civil penalty of \$1,000 and for a 14 15 second or subsequent violation, a civil penalty of \$5,000. (Source: P.A. 89-18, eff. 6-1-95; 89-201, eff. 1-1-96; 89-626, 16 17 eff. 8-9-96; 89-702, eff. 7-1-97; 90-742, eff. 8-13-98.)

18 (225 ILCS 60/23) (from Ch. 111, par. 4400-23)

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

20 Sec. 23. Reports relating to professional conduct and 21 capacity.

22

19

(A) Entities required to report.

23 (1) Health care institutions. The chief administrator 24 or executive officer of any health care institution 25 licensed by the Illinois Department of Public Health shall 26 report to the Disciplinary Board when any person's clinical 27 privileges are terminated or are restricted based on a 28 final determination, in accordance with that institution's 29 by-laws or rules and regulations, that a person has either 30 committed an act or acts which may directly threaten 31 patient care, and not of an administrative nature, or that a person may be mentally or physically disabled in such a 32 33 manner as to endanger patients under that person's care. Such officer also shall report if a person accepts 34 35 voluntary termination or restriction of clinical

1 privileges in lieu of formal action based upon conduct 2 related directly to patient care and not of an 3 administrative nature, or in lieu of formal action seeking to determine whether a person may be mentally or physically 4 5 disabled in such a manner as to endanger patients under 6 that person's care. The Medical Disciplinary Board shall, by rule, provide for the reporting to it of all instances 7 in which a person, licensed under this Act, who is impaired 8 9 by reason of age, drug or alcohol abuse or physical or 10 mental impairment, is under supervision and, where 11 appropriate, is in a program of rehabilitation. Such 12 reports shall be strictly confidential and may be reviewed and considered only by the members of the Disciplinary 13 Board, or by authorized staff as provided by rules of the 14 Disciplinary Board. Provisions shall be made for the 15 16 periodic report of the status of any such person not less 17 than twice annually in order that the Disciplinary Board shall have current information upon which to determine the 18 status of any such person. Such initial and periodic 19 20 reports of impaired physicians shall not be considered records within the meaning of The State Records Act and 21 shall be disposed of, following a determination by the 22 23 Disciplinary Board that such reports are no longer required, in a manner and at such time as the Disciplinary 24 Board shall determine by rule. The filing of such reports 25 shall be construed as the filing of a report for purposes 26 27 of subsection (C) of this Section.

(2) Professional associations. The President or chief 28 executive officer of any association or society, of persons 29 30 licensed under this Act, operating within this State shall 31 report to the Disciplinary Board when the association or 32 society renders a final determination that a person has committed unprofessional conduct related directly 33 to patient care or that a person may be mentally or physically 34 disabled in such a manner as to endanger patients under 35 that person's care. 36

1 (3) Professional liability insurers. Every insurance 2 company which offers policies of professional liability insurance to persons licensed under this Act, or any other 3 entity which seeks to indemnify the professional liability 4 5 of a person licensed under this Act, shall report to the 6 Disciplinary Board the settlement of any claim or cause of action, or final judgment rendered in any cause of action, 7 which alleged negligence in the furnishing of medical care 8 9 by such licensed person when such settlement or final judgment is in favor of the plaintiff. 10

11 (4) State's Attorneys. The State's Attorney of each 12 county shall report to the Disciplinary Board all instances in which a person licensed under this Act is convicted or 13 otherwise found guilty of the commission of any felony. The 14 State's Attorney of each county may report to the 15 16 Disciplinary Board through a verified complaint any 17 instance in which the State's Attorney believes that a physician has willfully violated the notice requirements 18 of the Parental Notice of Abortion Act of 1995. 19

20 (5) State agencies. All agencies, boards, commissions, departments, or other instrumentalities of the government 21 of the State of Illinois shall report to the Disciplinary 22 23 Board any instance arising in connection with the operations of such agency, including the administration of 24 25 any law by such agency, in which a person licensed under this Act has either committed an act or acts which may be a 26 27 violation of this Act or which may constitute 28 unprofessional conduct related directly to patient care or 29 which indicates that a person licensed under this Act may 30 be mentally or physically disabled in such a manner as to 31 endanger patients under that person's care.

32 (B) Mandatory reporting. All reports required by items 33 (34), (35), and (36) of subsection (A) of Section 22 and by 34 Section 23 shall be submitted to the Disciplinary Board in a 35 timely fashion. The reports shall be filed in writing within 60 36 days after a determination that a report is required under this - 14 - LRB093 19986 AMC 45730 b

HB5890

1 Act. All reports shall contain the following information:

2 (1) The name, address and telephone number of the3 person making the report.

4 5 (2) The name, address and telephone number of the person who is the subject of the report.

6 (3) The name or other means of identification of any 7 patient or patients whose treatment is a subject of the 8 report, provided, however, no medical records may be 9 revealed without the written consent of the patient or 10 patients.

(4) A brief description of the facts which gave rise to
the issuance of the report, including the dates of any
occurrences deemed to necessitate the filing of the report.

14 (5) If court action is involved, the identity of the
15 court in which the action is filed, along with the docket
16 number and date of filing of the action.

17 (6) Any further pertinent information which the
18 reporting party deems to be an aid in the evaluation of the
19 report.

The Department shall have the right to inform patients of 20 the right to provide written consent for the Department to 21 22 obtain copies of hospital and medical records. The Disciplinary 23 Board or Department may exercise the power under Section 38 of this Act to subpoena copies of hospital or medical records in 24 25 mandatory report cases alleging death or permanent bodily 26 injury when consent to obtain records is not provided by a 27 patient or legal representative. Appropriate rules shall be 28 adopted by the Department with the approval of the Disciplinary 29 Board.

30 When the Department has received written reports concerning incidents required to be reported in items (34), 31 32 (35), and (36) of subsection (A) of Section 22, the licensee's failure to report the incident to the Department under those 33 items shall not be the sole grounds for disciplinary action. 34

35 Nothing contained in this Section shall act to in any way, 36 waive or modify the confidentiality of medical reports and - 15 - LRB093 19986 AMC 45730 b

HB5890

1 committee reports to the extent provided by law. Any 2 information reported or disclosed shall be kept for the 3 confidential use of the Disciplinary Board, the Medical 4 Coordinators, the Disciplinary Board's attorneys, the medical 5 investigative staff, and authorized clerical staff, as 6 provided in this Act, and shall be afforded the same status as is provided information concerning medical studies in Part 21 7 8 of Article VIII of the Code of Civil Procedure, except that 9 upon service of a valid subpoena the Department may disclose information and documents to a federal, state, or local law 10 11 enforcement agency.

12 (C) Immunity from prosecution. Any individual or 13 organization acting in good faith, and not in a wilful and wanton manner, in complying with this Act by providing any 14 15 report or other information to the Disciplinary Board, or 16 assisting in the investigation or preparation of such 17 information, or by participating in proceedings of the Disciplinary Board, or by serving as a member 18 of the 19 Disciplinary Board, shall not, as a result of such actions, be 20 subject to criminal prosecution or civil damages.

(D) Indemnification. Members of the Disciplinary Board, 21 the Medical Coordinators, the Disciplinary Board's attorneys, 22 23 the medical investigative staff, physicians retained under 24 contract to assist and advise the medical coordinators in the 25 investigation, and authorized clerical staff shall he 26 indemnified by the State for any actions occurring within the 27 scope of services on the Disciplinary Board, done in good faith 28 and not wilful and wanton in nature. The Attorney General shall 29 defend all such actions unless he or she determines either that 30 there would be a conflict of interest in such representation or 31 that the actions complained of were not in good faith or were 32 wilful and wanton.

33 Should the Attorney General decline representation, the 34 member shall have the right to employ counsel of his or her 35 choice, whose fees shall be provided by the State, after 36 approval by the Attorney General, unless there is a - 16 - LRB093 19986 AMC 45730 b

HB5890

1 determination by a court that the member's actions were not in 2 good faith or were wilful and wanton.

The member must notify the Attorney General within 7 days of receipt of notice of the initiation of any action involving services of the Disciplinary Board. Failure to so notify the Attorney General shall constitute an absolute waiver of the right to a defense and indemnification.

8 The Attorney General shall determine within 7 days after 9 receiving such notice, whether he or she will undertake to 10 represent the member.

(E) Deliberations of Disciplinary Board. Upon the receipt 11 12 of any report called for by this Act, other than those reports of impaired persons licensed under this Act required pursuant 13 to the rules of the Disciplinary Board, the Disciplinary Board 14 15 shall notify in writing, by certified mail, the person who is 16 the subject of the report. Such notification shall be made 17 within 30 days of receipt by the Disciplinary Board of the 18 report.

19 The notification shall include a written notice setting 20 forth the person's right to examine the report. Included in such notification shall be the address at which the file is 21 maintained, the name of the custodian of the reports, and the 22 23 telephone number at which the custodian may be reached. The person who is the subject of the report shall submit a written 24 statement responding, clarifying, adding to, or proposing the 25 26 amending of the report previously filed. The statement shall 27 become a permanent part of the file and must be received by the 28 Disciplinary Board no more than 60 days after the date on which 29 the person was notified by the Disciplinary Board of the 30 existence of the original report.

31 The Disciplinary Board shall review all reports received by 32 it, together with any supporting information and responding 33 statements submitted by persons who are the subject of reports. 34 The review by the Disciplinary Board shall be in a timely 35 manner but in no event, shall the Disciplinary Board's initial 36 review of the material contained in each disciplinary file be - 17 - LRB093 19986 AMC 45730 b

HB5890

less than 61 days nor more than 180 days after the receipt of
 the initial report by the Disciplinary Board.

3 When the Disciplinary Board makes its initial review of the 4 materials contained within its disciplinary files, the 5 Disciplinary Board shall, in writing, make a determination as to whether there are sufficient facts to warrant further 6 investigation or action. Failure to make such determination 7 8 within the time provided shall be deemed to be a determination that there are not sufficient facts to warrant further 9 10 investigation or action.

Should the Disciplinary Board find that there are not 11 12 sufficient facts to warrant further investigation, or action, 13 the report shall be accepted for filing and the matter shall be deemed closed and so reported to the Director. The Director 14 15 shall then have 30 days to accept the Medical Disciplinary 16 Board's decision or request further investigation. The 17 Director shall inform the Board in writing of the decision to request further investigation, including the specific reasons 18 19 for the decision. The individual or entity filing the original 20 report or complaint and the person who is the subject of the report or complaint shall be notified in writing by the 21 22 Director of any final action on their report or complaint.

23 (F) Summary reports. The Disciplinary Board shall prepare, 24 on a timely basis, but in no event less than one every other 25 month, a summary report of final actions taken upon 26 disciplinary files maintained by the Disciplinary Board. The 27 summary reports shall be sent by the Disciplinary Board to every health care facility licensed by the Illinois Department 28 29 of Public Health, every professional association and society of 30 persons licensed under this Act functioning on a statewide 31 basis in this State, the American Medical Association, the 32 American Osteopathic Association, the American Chiropractic Association, all insurers providing professional liability 33 insurance to persons licensed under this Act in the State of 34 35 Illinois, the Federation of State Medical Licensing Boards, and the Illinois Pharmacists Association. 36

19

(G) Any violation of this Section shall be a Class A
 misdemeanor.

(H) If any such person violates the provisions of this 3 4 Section an action may be brought in the name of the People of 5 the State of Illinois, through the Attorney General of the 6 State of Illinois, for an order enjoining such violation or for an order enforcing compliance with this Section. Upon filing of 7 a verified petition in such court, the court may issue a 8 temporary restraining order without notice or bond and may 9 10 preliminarily or permanently enjoin such violation, and if it 11 is established that such person has violated or is violating 12 the injunction, the court may punish the offender for contempt of court. Proceedings under this paragraph shall be in addition 13 to, and not in lieu of, all other remedies and penalties 14 provided for by this Section. 15

16 (Source: P.A. 89-18, eff. 6-1-95; 89-702, eff. 7-1-97; 90-699, 17 eff. 1-1-99.)

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

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

Sec. 36. Upon the motion of either the Department or the Disciplinary Board or upon the verified complaint in writing of any person setting forth facts which, if proven, would constitute grounds for suspension or revocation under Section 22 of this Act, the Department shall investigate the actions of any person, so accused, who holds or represents that they hold a license. Such person is hereinafter called the accused.

27 The Department shall, before suspending, revoking, placing on probationary status, or taking any other disciplinary action 28 29 as the Department may deem proper with regard to any license at 30 least 30 days prior to the date set for the hearing, notify the 31 accused in writing of any charges made and the time and place for a hearing of the charges before the Disciplinary Board, 32 direct them to file their written answer thereto to the 33 Disciplinary Board under oath within 20 days after the service 34 35 on them of such notice and inform them that if they fail to

file such answer default will be taken against them and their license may be suspended, revoked, placed on probationary status, or have other disciplinary action, including limiting the scope, nature or extent of their practice, as the Department may deem proper taken with regard thereto.

6 Where a physician has been found, upon complaint and 7 investigation of the Department, and after hearing, to have 8 performed an abortion procedure in a wilful and wanton manner upon a woman who was not pregnant at the time such abortion 9 procedure was performed, the Department shall automatically 10 11 revoke the license of such physician to practice medicine in 12 Illinois.

13 Such written notice and any notice in such proceedings 14 thereafter may be served by delivery of the same, personally, 15 to the accused person, or by mailing the same by registered or 16 certified mail to the address last theretofore specified by the 17 accused in their last notification to the Department.

All information gathered by the Department during its 18 19 investigation including information subpoenaed under Section 23 or 38 of this Act and the investigative file shall be kept 20 for the confidential use of the Director, Disciplinary Board, 21 22 the Medical Coordinators, persons employed by contract to 23 advise the Medical Coordinator or the Department, the Disciplinary Board's attorneys, the medical investigative 24 staff, and authorized clerical staff, as provided in this Act 25 and shall be afforded the same status as is 26 provided 27 information concerning medical studies in Part 21 of Article VIII of the Code of Civil Procedure, except that upon service 28 of a valid subpoena the Department may disclose information and 29 documents to a federal, state, or local law enforcement agency. 30 (Source: P.A. 90-699, eff. 1-1-99.) 31