

1 AN ACT concerning regulation.

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

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

6 (5 ILCS 80/4.25a new)

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 Act repealed on December 31, 2015.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8 following Act is repealed on December 31, 2015:

9 The Medical Practice Act of 1987.

10 (5 ILCS 80/4.24 rep.)

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

13 Section 15. The Medical Practice Act of 1987 is amended by  
14 changing Sections 2, 3, 7, 7.5, 9, 9.3, 9.5, 13, 17, 18, 19,  
15 21, 22, 24, 33, 36, 37, 38, 40, and 41 as follows:

16 (225 ILCS 60/2) (from Ch. 111, par. 4400-2)

17 (Section scheduled to be repealed on December 31, 2014)

18 Sec. 2. Definitions. For purposes of this Act, the  
19 following definitions shall have the following meanings,  
20 except where the context requires otherwise:

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

2 "Address of record" means the designated address recorded  
3 by the Department in the applicant's or licensee's application  
4 file or license file as maintained by the Department's  
5 licensure maintenance unit. It is the duty of the applicant or  
6 licensee to inform the Department of any change of address and  
7 those changes must be made either through the Department's  
8 website or by contacting the Department.

9 "Chiropractic physician" means a person licensed to treat  
10 human ailments without the use of drugs and without operative  
11 surgery. Nothing in this Act shall be construed to prohibit a  
12 chiropractic physician from providing advice regarding the use  
13 of non-prescription products or from administering atmospheric  
14 oxygen. Nothing in this Act shall be construed to authorize a  
15 chiropractic physician to prescribe drugs.

16 "Department" means the Department of Financial and  
17 Professional Regulation.

18 "Disciplinary Action" means revocation, suspension,  
19 probation, supervision, practice modification, reprimand,  
20 required education, fines or any other action taken by the  
21 Department against a person holding a license.

22 "Disciplinary Board" means the Medical Disciplinary Board.

23 "Final Determination" means the governing body's final  
24 action taken under the procedure followed by a health care  
25 institution, or professional association or society, against  
26 any person licensed under the Act in accordance with the bylaws

1 or rules and regulations of such health care institution, or  
2 professional association or society.

3 "Fund" means the Medical Disciplinary Fund.

4 "Impaired" means the inability to practice medicine with  
5 reasonable skill and safety due to physical or mental  
6 disabilities as evidenced by a written determination or written  
7 consent based on clinical evidence including deterioration  
8 through the aging process or loss of motor skill, or abuse of  
9 drugs or alcohol, of sufficient degree to diminish a person's  
10 ability to deliver competent patient care.

11 "Licensing Board" means the Medical Licensing Board.

12 "Physician" means a person licensed under the Medical  
13 Practice Act to practice medicine in all of its branches or a  
14 chiropractic physician.

15 "Professional Association" means an association or society  
16 of persons licensed under this Act, and operating within the  
17 State of Illinois, including but not limited to, medical  
18 societies, osteopathic organizations, and chiropractic  
19 organizations, but this term shall not be deemed to include  
20 hospital medical staffs.

21 "Program of Care, Counseling, or Treatment" means a written  
22 schedule of organized treatment, care, counseling, activities,  
23 or education, satisfactory to the Disciplinary Board, designed  
24 for the purpose of restoring an impaired person to a condition  
25 whereby the impaired person can practice medicine with  
26 reasonable skill and safety of a sufficient degree to deliver

1 competent patient care.

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

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

6 "Secretary" means the Secretary of the Department of  
7 Financial and Professional Regulation.

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

9 (225 ILCS 60/3) (from Ch. 111, par. 4400-3)

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

11 Sec. 3. Licensure requirement. No person shall practice  
12 medicine, or any of its branches, or treat human ailments  
13 without the use of drugs and without operative surgery, without  
14 a valid, active ~~existing~~ license to do so, except that a  
15 physician who holds an active license in another state or a  
16 second year resident enrolled in a residency program accredited  
17 by the Liaison Committee on Graduate Medical Education or the  
18 Bureau of Professional Education of the American Osteopathic  
19 Association may provide medical services to patients in  
20 Illinois during a bonafide emergency in immediate preparation  
21 for or during interstate transit.

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

23 (225 ILCS 60/7) (from Ch. 111, par. 4400-7)

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

1           Sec. 7. Medical Disciplinary Board.

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

18           (B) Members of the Disciplinary Board shall be appointed  
19 for terms of 4 years. Upon the expiration of the term of any  
20 member, their successor shall be appointed for a term of 4  
21 years by the Governor by and with the advice and consent of the  
22 Senate. The Governor shall fill any vacancy for the remainder  
23 of the unexpired term with the advice and consent of the  
24 Senate. Upon recommendation of the Board, any member of the  
25 Disciplinary Board may be removed by the Governor for  
26 misfeasance, malfeasance, or wilful neglect of duty, after

1 notice, and a public hearing, unless such notice and hearing  
2 shall be expressly waived in writing. Each member shall serve  
3 on the Disciplinary Board until their successor is appointed  
4 and qualified. No member of the Disciplinary Board shall serve  
5 more than 2 consecutive 4 year terms.

6 In making appointments the Governor shall attempt to insure  
7 that the various social and geographic regions of the State of  
8 Illinois are properly represented.

9 In making the designation of persons to act for the several  
10 professions represented on the Disciplinary Board, the  
11 Governor shall give due consideration to recommendations by  
12 members of the respective professions and by organizations  
13 therein.

14 (C) The Disciplinary Board shall annually elect one of its  
15 voting members as chairperson and one as vice chairperson. No  
16 officer shall be elected more than twice in succession to the  
17 same office. Each officer shall serve until their successor has  
18 been elected and qualified.

19 (D) (Blank).

20 (E) Six voting members of the Disciplinary Board, at least  
21 4 of whom are physicians, shall constitute a quorum. A vacancy  
22 in the membership of the Disciplinary Board shall not impair  
23 the right of a quorum to exercise all the rights and perform  
24 all the duties of the Disciplinary Board. Any action taken by  
25 the Disciplinary Board under this Act may be authorized by  
26 resolution at any regular or special meeting and each such

1 resolution shall take effect immediately. The Disciplinary  
2 Board shall meet at least quarterly. ~~The Disciplinary Board is  
3 empowered to adopt all rules and regulations necessary and  
4 incident to the powers granted to it under this Act.~~

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

9 (G) The Secretary shall select a Chief Medical Coordinator  
10 and not less than 2 Deputy Medical Coordinators who shall not  
11 be members of the Disciplinary Board. Each medical coordinator  
12 shall be a physician licensed to practice medicine in all of  
13 its branches, and the Secretary shall set their rates of  
14 compensation. The Secretary shall assign at least one medical  
15 coordinator to a region composed of Cook County and such other  
16 counties as the Secretary may deem appropriate, and such  
17 medical coordinator or coordinators shall locate their office  
18 in Chicago. The Secretary shall assign at least one medical  
19 coordinator to a region composed of the balance of counties in  
20 the State, and such medical coordinator or coordinators shall  
21 locate their office in Springfield. The Chief Medical  
22 Coordinator shall be the chief enforcement officer of this Act.  
23 None of the functions, powers, or duties of the Department with  
24 respect to policies regarding enforcement or discipline under  
25 this Act, including the adoption of such rules as may be  
26 necessary for the administration of this Act, shall be

1 exercised by the Department except upon review of the  
2 Disciplinary Board. ~~Each medical coordinator shall be the chief~~  
3 ~~enforcement officer of this Act in his or her assigned region~~  
4 ~~and shall serve at the will of the Disciplinary Board.~~

5 The Secretary shall employ, in conformity with the  
6 Personnel Code, investigators who are college graduates with at  
7 least 2 years of investigative experience or one year of  
8 advanced medical education. Upon the written request of the  
9 Disciplinary Board, the Secretary shall employ, in conformity  
10 with the Personnel Code, such other professional, technical,  
11 investigative, and clerical help, either on a full or part-time  
12 basis as the Disciplinary Board deems necessary for the proper  
13 performance of its duties.

14 (H) Upon the specific request of the Disciplinary Board,  
15 signed by either the chairperson, vice chairperson, or a  
16 medical coordinator of the Disciplinary Board, the Department  
17 of Human Services, the Department of Healthcare and Family  
18 Services, ~~or~~ the Department of State Police, or any other law  
19 enforcement agency located in this State shall make available  
20 any and all information that they have in their possession  
21 regarding a particular case then under investigation by the  
22 Disciplinary Board.

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



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

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

16 (225 ILCS 60/7.5)

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

18 Sec. 7.5. Complaint Committee.

19 (a) There shall be a Complaint Committee of the  
20 Disciplinary Board composed of at least one of the medical  
21 coordinators established by subsection (G) of Section 7 of this  
22 Act, the Chief of Medical Investigations (person employed by  
23 the Department who is in charge of investigating complaints  
24 against physicians and physician assistants), the Chief of  
25 Medical Prosecutions (the person employed by the Department who

1 is in charge of prosecuting formal complaints against  
2 physicians and physician assistants), and at least 3 ~~voting~~  
3 members of the Disciplinary Board (at least 2 of whom shall be  
4 physicians) designated by the Chairperson of the Disciplinary  
5 Board with the approval of the Disciplinary Board. ~~The~~  
6 ~~Disciplinary Board members so appointed shall serve one year~~  
7 ~~terms and may be eligible for reappointment for subsequent~~  
8 ~~terms.~~

9 (b) The Complaint Committee shall meet at least twice a  
10 month to exercise its functions and duties set forth in  
11 subsection (c) below. At least 2 members of the Disciplinary  
12 Board shall be in attendance in order for any business to be  
13 transacted by the Complaint Committee. The Complaint Committee  
14 shall make every effort to consider expeditiously and take  
15 prompt action on each item on its agenda.

16 (c) The Complaint Committee shall have the following duties  
17 and functions:

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

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

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

1 (d) In determining what action to take or whether to  
2 proceed with prosecution of a complaint, the Complaint  
3 Committee shall consider, but not be limited to, the following  
4 factors: sufficiency of the evidence presented, prosecutorial  
5 merit under Section 22 of this Act, any recommendation made by  
6 the Department, and insufficient cooperation from complaining  
7 parties.

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

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

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

11 Sec. 9. Application for license. Each applicant for a  
12 license shall:

13 (A) Make application on blank forms prepared and  
14 furnished by the Department.

15 (B) Submit evidence satisfactory to the Department  
16 that the applicant:

17 (1) is of good moral character. In determining  
18 moral character under this Section, the Department may  
19 take into consideration whether the applicant has  
20 engaged in conduct or activities which would  
21 constitute grounds for discipline under this Act. The  
22 Department may also request the applicant to submit,  
23 and may consider as evidence of moral character,  
24 endorsements from 2 or 3 individuals licensed under  
25 this Act;

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

3           (3) (blank); and

4           (4) is physically, mentally, and professionally  
5           capable of practicing medicine with reasonable  
6           judgment, skill, and safety. In determining physical  
7           and ~~7~~ mental ~~and professional~~ capacity under this  
8           Section, the Licensing Board may, upon a showing of a  
9           possible incapacity or conduct or activities that  
10          would constitute grounds for discipline under this  
11          Act, compel any applicant to submit to a mental or  
12          physical examination and evaluation, or both, as  
13          provided for in Section 22 of this Act. The Licensing  
14          Board may condition or restrict any license, subject to  
15          the same terms and conditions as are provided for the  
16          Disciplinary Board under Section 22 of this Act. Any  
17          such condition of a restricted license shall provide  
18          that the Chief Medical Coordinator or Deputy Medical  
19          Coordinator shall have the authority to review the  
20          subject physician's compliance with such conditions or  
21          restrictions, including, where appropriate, the  
22          physician's record of treatment and counseling  
23          regarding the impairment, to the extent permitted by  
24          applicable federal statutes and regulations  
25          safeguarding the confidentiality of medical records of  
26          patients.

1           In determining professional capacity under this  
2           Section, an individual may be required to complete such  
3           additional testing, training, or remedial education as the  
4           Licensing Board may deem necessary in order to establish  
5           the applicant's present capacity to practice medicine with  
6           reasonable judgment, skill, and safety. The Licensing  
7           Board may consider the following criteria, as they relate  
8           to an applicant, as part of its determination of  
9           professional capacity:

10                   (1) Medical research in an established research  
11                   facility, hospital, college or university, or private  
12                   corporation.

13                   (2) Specialized training or education.

14                   (3) Publication of original work in learned,  
15                   medical, or scientific journals.

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

18                   (5) Professional service in a federal veterans or  
19                   military institution.

20                   (6) Any other professional activities deemed to  
21                   maintain and enhance the clinical capabilities of the  
22                   applicant.

23           Any applicant applying for a license to practice  
24           medicine in all of its branches or for a license as a  
25           chiropractic physician who has not been engaged in the  
26           active practice of medicine or has not been enrolled in a

1 medical program for 2 years prior to application must  
2 submit proof of professional capacity to the Licensing  
3 Board.

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

9 (C) Designate specifically the name, location, and  
10 kind of professional school, college, or institution of  
11 which the applicant is a graduate and the category under  
12 which the applicant seeks, and will undertake, to practice.

13 (D) Pay to the Department at the time of application  
14 the required fees.

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

18 (F) Complete the application process within 3 years  
19 from the date of application. If the process has not been  
20 completed within 3 years, the application shall expire,  
21 application fees shall be forfeited, and the applicant must  
22 reapply and meet the requirements in effect at the time of  
23 reapplication.

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

25 (225 ILCS 60/9.3)

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

2 Sec. 9.3. Withdrawal of application. Any applicant  
3 applying for a license or permit under this Act may withdraw  
4 his or her application at any time. If an applicant withdraws  
5 his or her application after receipt of a written Notice of  
6 Intent to Deny License or Permit, then the withdrawal shall be  
7 reported to the Federation of State Medical Boards and the  
8 National Practitioner Data Bank.

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

10 (225 ILCS 60/9.5)

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

12 Sec. 9.5. Social Security Number on license application. In  
13 addition to any other information required to be contained in  
14 the application, every application for an original license  
15 under this Act shall include the applicant's Social Security  
16 Number, which shall be retained in the agency's records  
17 pertaining to the license. As soon as practical, the Department  
18 shall assign a customer's identification number to each  
19 applicant for a license.

20 Every application for a renewal or reinstated ~~restored~~  
21 license shall require the applicant's customer identification  
22 number.

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

24 (225 ILCS 60/13) (from Ch. 111, par. 4400-13)

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

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

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

14 (225 ILCS 60/17) (from Ch. 111, par. 4400-17)

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

16 Sec. 17. Temporary license. Persons holding the degree of  
17 Doctor of Medicine, persons holding the degree of Doctor of  
18 Osteopathy or Doctor of Osteopathic Medicine, and persons  
19 holding the degree of Doctor of Chiropractic or persons who  
20 have satisfied the requirements therefor and are eligible to  
21 receive such degree from a medical, osteopathic, or  
22 chiropractic school, who wish to pursue programs of graduate or  
23 specialty training in this State, may receive without  
24 examination, in the discretion of the Department, a 3-year  
25 temporary license. In order to receive a 3-year temporary



1 license hereunder, an applicant shall submit evidence  
2 satisfactory to the Department that the applicant:

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

11 (B) Has been accepted or appointed for specialty or  
12 residency training by a hospital situated in this State or  
13 a training program in hospitals or facilities maintained by  
14 the State of Illinois or affiliated training facilities  
15 which is approved by the Department for the purpose of such  
16 training under this Act. The applicant shall indicate the  
17 beginning and ending dates of the period for which the  
18 applicant has been accepted or appointed;

19 (C) Has or will satisfy the professional education  
20 requirements of Section 11 of this Act which are effective  
21 at the date of application except for postgraduate clinical  
22 training;

23 (D) Is physically, mentally, and professionally  
24 capable of practicing medicine or treating human ailments  
25 without the use of drugs and without operative surgery with  
26 reasonable judgment, skill, and safety. In determining

1 physical, mental and professional capacity under this  
2 Section, the Licensing Board may, upon a showing of a  
3 possible incapacity, compel an applicant to submit to a  
4 mental or physical examination and evaluation, or both, and  
5 may condition or restrict any temporary license, subject to  
6 the same terms and conditions as are provided for the  
7 Disciplinary Board under Section 22 of this Act. Any such  
8 condition of restricted temporary license shall provide  
9 that the Chief Medical Coordinator or Deputy Medical  
10 Coordinator shall have the authority to review the subject  
11 physician's compliance with such conditions or  
12 restrictions, including, where appropriate, the  
13 physician's record of treatment and counseling regarding  
14 the impairment, to the extent permitted by applicable  
15 federal statutes and regulations safeguarding the  
16 confidentiality of medical records of patients.

17 Three-year temporary licenses issued pursuant to this  
18 Section shall be valid only for the period of time designated  
19 therein, and may be extended or renewed pursuant to the rules  
20 of the Department, and if a temporary license is thereafter  
21 extended, it shall not extend beyond completion of the  
22 residency program. The holder of a valid 3-year temporary  
23 license shall be entitled thereby to perform only such acts as  
24 may be prescribed by and incidental to his or her program of  
25 residency training; he or she shall not be entitled to  
26 otherwise engage in the practice of medicine in this State

1 unless fully licensed in this State.

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

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

13 (225 ILCS 60/18) (from Ch. 111, par. 4400-18)

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

15 Sec. 18. Visiting professor, physician, or resident  
16 permits.

17 (A) Visiting professor permit.

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

22 (a) the person maintains an equivalent  
23 authorization to practice medicine in all of its  
24 branches or to practice the treatment of human ailments  
25 without the use of drugs and without operative surgery

1 in good standing in his or her native licensing  
2 jurisdiction during the period of the visiting  
3 professor permit;

4 (b) the person has received a faculty appointment  
5 to teach in a medical, osteopathic or chiropractic  
6 school in Illinois; and

7 (c) the Department may prescribe the information  
8 necessary to establish an applicant's eligibility for  
9 a permit. This information shall include without  
10 limitation (i) a statement from the dean of the medical  
11 school at which the applicant will be employed  
12 describing the applicant's qualifications and (ii) a  
13 statement from the dean of the medical school listing  
14 every affiliated institution in which the applicant  
15 will be providing instruction as part of the medical  
16 school's education program and justifying any clinical  
17 activities at each of the institutions listed by the  
18 dean.

19 (2) Application for visiting professor permits shall  
20 be made to the Department, in writing, on forms prescribed  
21 by the Department and shall be accompanied by the required  
22 fee established by rule, which shall not be refundable. Any  
23 application shall require the information as, in the  
24 judgment of the Department, will enable the Department to  
25 pass on the qualifications of the applicant.

26 (3) A visiting professor permit shall be valid for no

1 longer than 2 years from the date of issuance or until the  
2 time the faculty appointment is terminated, whichever  
3 occurs first, and may be renewed only in accordance with  
4 subdivision (A) (6) of this Section.

5 (4) The applicant may be required to appear before the  
6 Licensing Board for an interview prior to, and as a  
7 requirement for, the issuance of the original permit and  
8 the renewal.

9 (5) Persons holding a permit under this Section shall  
10 only practice medicine in all of its branches or practice  
11 the treatment of human ailments without the use of drugs  
12 and without operative surgery in the State of Illinois in  
13 their official capacity under their contract within the  
14 medical school itself and any affiliated institution in  
15 which the permit holder is providing instruction as part of  
16 the medical school's educational program and for which the  
17 medical school has assumed direct responsibility.

18 (6) After the initial renewal of a visiting professor  
19 permit, a visiting professor permit shall be valid until  
20 the last day of the next physician license renewal period,  
21 as set by rule, and may only be renewed for applicants who  
22 meet the following requirements:

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

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

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

6 (B) Visiting physician permit.

7 (1) The Department may, in its discretion, issue a  
8 temporary visiting physician permit, without examination,  
9 provided:

10 (a) (blank);

11 (b) that the person maintains an equivalent  
12 authorization to practice medicine in all of its  
13 branches or to practice the treatment of human ailments  
14 without the use of drugs and without operative surgery  
15 in good standing in his or her native licensing  
16 jurisdiction during the period of the temporary  
17 visiting physician permit;

18 (c) that the person has received an invitation or  
19 appointment to study, demonstrate, or perform a  
20 specific medical, osteopathic, chiropractic or  
21 clinical subject or technique in a medical,  
22 osteopathic, or chiropractic school, a state or  
23 national medical, osteopathic, or chiropractic  
24 professional association or society conference or  
25 meeting, a hospital licensed under the Hospital

1           Licensing Act, a hospital organized under the  
2           University of Illinois Hospital Act, or a facility  
3           operated pursuant to the Ambulatory Surgical Treatment  
4           Center Act; and

5           (d) that the temporary visiting physician permit  
6           shall only permit the holder to practice medicine in  
7           all of its branches or practice the treatment of human  
8           ailments without the use of drugs and without operative  
9           surgery within the scope of the medical, osteopathic,  
10          chiropractic, or clinical studies, or in conjunction  
11          with the state or national medical, osteopathic, or  
12          chiropractic professional association or society  
13          conference or meeting, for which the holder was invited  
14          or appointed.

15          (2) The application for the temporary visiting  
16          physician permit shall be made to the Department, in  
17          writing, on forms prescribed by the Department, and shall  
18          be accompanied by the required fee established by rule,  
19          which shall not be refundable. The application shall  
20          require information that, in the judgment of the  
21          Department, will enable the Department to pass on the  
22          qualification of the applicant, and the necessity for the  
23          granting of a temporary visiting physician permit.

24          (3) A temporary visiting physician permit shall be  
25          valid for no longer than (i) 180 days from the date of  
26          issuance or (ii) until the time the medical, osteopathic,

1       chiropractic, or clinical studies are completed, or the  
2       state or national medical, osteopathic, or chiropractic  
3       professional association or society conference or meeting  
4       has concluded, whichever occurs first. The temporary  
5       visiting physician permit may be issued multiple times to a  
6       visiting physician under this paragraph (3) as long as the  
7       total number of days it is active do not exceed 180 days  
8       within a 365-day period.

9               (4) The applicant for a temporary visiting physician  
10       permit may be required to appear before the Licensing Board  
11       for an interview prior to, and as a requirement for, the  
12       issuance of a temporary visiting physician permit.

13               (5) A limited temporary visiting physician permit  
14       shall be issued to a physician licensed in another state  
15       who has been requested to perform emergency procedures in  
16       Illinois if he or she meets the requirements as established  
17       by rule.

18       (C) Visiting resident permit.

19               (1) The Department may, in its discretion, issue a  
20       temporary visiting resident permit, without examination,  
21       provided:

22                       (a) (blank);

23                       (b) that the person maintains an equivalent  
24       authorization to practice medicine in all of its  
25       branches or to practice the treatment of human ailments



1 without the use of drugs and without operative surgery  
2 in good standing in his or her native licensing  
3 jurisdiction during the period of the temporary  
4 visiting resident permit;

5 (c) that the applicant is enrolled in a  
6 postgraduate clinical training program outside the  
7 State of Illinois that is approved by the Department;

8 (d) that the individual has been invited or  
9 appointed for a specific period of time to perform a  
10 portion of that post graduate clinical training  
11 program under the supervision of an Illinois licensed  
12 physician in an Illinois patient care clinic or  
13 facility that is affiliated with the out-of-State post  
14 graduate training program; and

15 (e) that the temporary visiting resident permit  
16 shall only permit the holder to practice medicine in  
17 all of its branches or practice the treatment of human  
18 ailments without the use of drugs and without operative  
19 surgery within the scope of the medical, osteopathic,  
20 chiropractic or clinical studies for which the holder  
21 was invited or appointed.

22 (2) The application for the temporary visiting  
23 resident permit shall be made to the Department, in  
24 writing, on forms prescribed by the Department, and shall  
25 be accompanied by the required fee established by rule. The  
26 application shall require information that, in the

1 judgment of the Department, will enable the Department to  
2 pass on the qualifications of the applicant.

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

7 (4) The applicant for a temporary visiting resident  
8 permit may be required to appear before the Licensing Board  
9 for an interview prior to, and as a requirement for, the  
10 issuance of a temporary visiting resident permit.

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

12 (225 ILCS 60/19) (from Ch. 111, par. 4400-19)

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

14 Sec. 19. Licensure by endorsement. The Department may, in  
15 its discretion, issue a license by endorsement to any person  
16 who is currently licensed to practice medicine in all of its  
17 branches, or a chiropractic physician, in any other state,  
18 territory, country or province, upon the following conditions  
19 and submitting evidence satisfactory to the Department of the  
20 following:

21 (A) (Blank);

22 (B) That the applicant is of good moral character. In  
23 determining moral character under this Section, the  
24 Department may take into consideration whether the  
25 applicant has engaged in conduct or activities which would

1           constitute grounds for discipline under this Act. The  
2           Department may also request the applicant to submit, and  
3           may consider as evidence of moral character, endorsements  
4           from 2 or 3 individuals licensed under this Act;

5           (C) That the applicant is physically, mentally and  
6           professionally capable of practicing medicine with  
7           reasonable judgment, skill and safety. In determining  
8           physical, mental and professional capacity under this  
9           Section the Licensing Board may, upon a showing of a  
10          possible incapacity, compel an applicant to submit to a  
11          mental or physical examination and evaluation, or both, in  
12          the same manner as provided in Section 22 and may condition  
13          or restrict any license, subject to the same terms and  
14          conditions as are provided for the Disciplinary Board under  
15          Section 22 of this Act.

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

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

23                 (2) if the applicant was licensed in another  
24                 jurisdiction after December 31, 1987, that the  
25                 applicant has satisfied the educational requirements  
26                 of paragraph (A) (2) of Section 11 of this Act; and

1           (3) the requirements for a license to practice  
2 medicine in all of its branches in the particular  
3 state, territory, country or province in which the  
4 applicant is licensed are deemed by the Department to  
5 have been substantially equivalent to the requirements  
6 for a license to practice medicine in all of its  
7 branches in force in this State at the date of the  
8 applicant's license;

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

11           (1) the applicant is a graduate of a chiropractic  
12 school or college approved by the Department at the  
13 time of their graduation;

14           (2) the requirements for the applicant's license  
15 to practice the treatment of human ailments without the  
16 use of drugs are deemed by the Department to have been  
17 substantially equivalent to the requirements for a  
18 license to practice in this State at the date of the  
19 applicant's license;

20           (F) That the Department may, in its discretion, issue a  
21 license by endorsement to any graduate of a medical or  
22 osteopathic college, reputable and in good standing in the  
23 judgment of the Department, who has passed an examination  
24 for admission to the United States Public Health Service,  
25 or who has passed any other examination deemed by the  
26 Department to have been at least equal in all substantial

1 respects to the examination required for admission to any  
2 such medical corps;

3 (G) That applications for licenses by endorsement  
4 shall be filed with the Department, under oath, on forms  
5 prepared and furnished by the Department, and shall set  
6 forth, and applicants therefor shall supply such  
7 information respecting the life, education, professional  
8 practice, and moral character of applicants as the  
9 Department may require to be filed for its use;

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

12 In the exercise of its discretion under this Section, the  
13 Department is empowered to consider and evaluate each applicant  
14 on an individual basis. It may take into account, among other  
15 things: the extent to which the applicant will bring unique  
16 experience and skills to the State of Illinois or ~~the extent~~  
17 ~~to which there is or is not available to the Department,~~  
18 authentic and definitive information concerning the quality of  
19 medical education and clinical training which the applicant has  
20 had. Under no circumstances shall a license be issued under the  
21 provisions of this Section to any person who has previously  
22 taken and failed the written examination conducted by the  
23 Department for such license. In the exercise of its discretion  
24 under this Section, the Department may require an applicant to  
25 successfully complete an examination as recommended by the  
26 Licensing Board. The Department may also request the applicant

1 to submit, and may consider as evidence of moral character,  
2 evidence from 2 or 3 individuals licensed under this Act.  
3 Applicants have 3 years from the date of application to  
4 complete the application process. If the process has not been  
5 completed within 3 years, the application shall be denied, the  
6 fees shall be forfeited, and the applicant must reapply and  
7 meet the requirements in effect at the time of reapplication.

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

9 (225 ILCS 60/21) (from Ch. 111, par. 4400-21)

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

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

13 (A) Renewal. The expiration date and renewal period for  
14 each license issued under this Act shall be set by rule. The  
15 holder of a license may renew the license by paying the  
16 required fee. The holder of a license may also renew the  
17 license within 90 days after its expiration by complying with  
18 the requirements for renewal and payment of an additional fee.  
19 A license renewal within 90 days after expiration shall be  
20 effective retroactively to the expiration date.

21 The Department shall mail to each licensee under this Act,  
22 at his or her address of record, at least 60 days in advance of  
23 the expiration date of his or her license, a renewal notice. No  
24 such license shall be deemed to have lapsed until 90 days after  
25 the expiration date and after such notice has been mailed by

1 the Department as herein provided.

2 (B) Reinstatement. ~~Restoration.~~ Any licensee who has  
3 permitted his or her license to lapse or who has had his or her  
4 license on inactive status may have his or her license  
5 reinstated ~~restored~~ by making application to the Department and  
6 filing proof acceptable to the Department of his or her fitness  
7 to have the license reinstated ~~restored~~, including evidence  
8 certifying to active practice in another jurisdiction  
9 satisfactory to the Department, proof of meeting the continuing  
10 education requirements for one renewal period, and by paying  
11 the required reinstatement ~~restoration~~ fee.

12 If the licensee has not maintained an active practice in  
13 another jurisdiction satisfactory to the Department, the  
14 Licensing Board shall determine, by an evaluation program  
15 established by rule, the applicant's fitness to resume active  
16 status and may require the licensee to complete a period of  
17 evaluated clinical experience and may require successful  
18 completion of a practical examination specified by the  
19 Licensing Board.

20 However, any registrant whose license has expired while he  
21 or she has been engaged (a) in Federal Service on active duty  
22 with the Army of the United States, the United States Navy, the  
23 Marine Corps, the Air Force, the Coast Guard, the Public Health  
24 Service or the State Militia called into the service or  
25 training of the United States of America, or (b) in training or  
26 education under the supervision of the United States

1 preliminary to induction into the military service, may have  
2 his or her license reinstated ~~or restored~~ without paying any  
3 lapsed renewal fees, if within 2 years after honorable  
4 termination of such service, training, or education, he or she  
5 furnishes to the Department with satisfactory evidence to the  
6 effect that he or she has been so engaged and that his or her  
7 service, training, or education has been so terminated.

8 (C) Inactive licenses. Any licensee who notifies the  
9 Department, in writing on forms prescribed by the Department,  
10 may elect to place his or her license on an inactive status and  
11 shall, subject to rules of the Department, be excused from  
12 payment of renewal fees until he or she notifies the Department  
13 in writing of his or her desire to resume active status.

14 Any licensee requesting reinstatement ~~restoration~~ from  
15 inactive status shall be required to pay the current renewal  
16 fee, provide proof of meeting the continuing education  
17 requirements for the period of time the license is inactive not  
18 to exceed one renewal period, and shall be required to  
19 reinstate ~~restore~~ his or her license as provided in subsection  
20 (B).

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

23 (D) Disposition of monies collected. All monies collected  
24 under this Act by the Department shall be deposited in the  
25 Illinois State Medical Disciplinary Fund in the State Treasury,  
26 and used only for the following purposes: (a) by the



1 Disciplinary Board and Licensing Board in the exercise of its  
2 powers and performance of its duties, as such use is made by  
3 the Department with full consideration of all recommendations  
4 of the Disciplinary Board and Licensing Board, (b) for costs  
5 directly related to persons licensed under this Act, and (c)  
6 for direct and allocable indirect costs related to the public  
7 purposes of the Department.

8 Moneys in the Fund may be transferred to the Professions  
9 Indirect Cost Fund as authorized under Section 2105-300 of the  
10 Department of Professional Regulation Law (20 ILCS  
11 2105/2105-300).

12 The State Comptroller shall order and the State Treasurer  
13 shall transfer an amount equal to \$1,100,000 from the Illinois  
14 State Medical Disciplinary Fund to the Local Government Tax  
15 Fund on each of the following dates: July 1, 2014, October 1,  
16 2014, January 1, 2015, July 1, 2017, October 1, 2017, and  
17 January 1, 2018. These transfers shall constitute repayment of  
18 the \$6,600,000 transfer made under Section 6z-18 of the State  
19 Finance Act.

20 All earnings received from investment of monies in the  
21 Illinois State Medical Disciplinary Fund shall be deposited in  
22 the Illinois State Medical Disciplinary Fund and shall be used  
23 for the same purposes as fees deposited in such Fund.

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

25 (1) Applicants for any examination shall be required to  
26 pay, either to the Department or to the designated testing

1 service, a fee covering the cost of determining the  
2 applicant's eligibility and providing the examination.  
3 Failure to appear for the examination on the scheduled  
4 date, at the time and place specified, after the  
5 applicant's application for examination has been received  
6 and acknowledged by the Department or the designated  
7 testing service, shall result in the forfeiture of the  
8 examination fee.

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

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

15 (4) Before July 1, 2018, the fee for the renewal of a  
16 license for a resident of Illinois shall be calculated at  
17 the rate of \$230 per year, and beginning on July 1, 2018,  
18 the fee for the renewal of a license shall be \$167, except  
19 for licensees who were issued a license within 12 months of  
20 the expiration date of the license, before July 1, 2018,  
21 the fee for the renewal shall be \$230, and beginning on  
22 July 1, 2018 that fee will be \$167. Before July 1, 2018,  
23 the fee for the renewal of a license for a nonresident  
24 shall be calculated at the rate of \$460 per year, and  
25 beginning on July 1, 2018, the fee for the renewal of a  
26 license for a nonresident shall be \$250, except for

1 licensees who were issued a license within 12 months of the  
2 expiration date of the license, before July 1, 2018, the  
3 fee for the renewal shall be \$460, and beginning on July 1,  
4 2018 that fee will be \$250.

5 (5) The fee for the reinstatement ~~restoration~~ of a  
6 license other than from inactive status, is \$230. In  
7 addition, payment of all lapsed renewal fees not to exceed  
8 \$1,400 is required.

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

11 (7) The fee for the issuance of a duplicate license,  
12 for the issuance of a replacement license for a license  
13 which has been lost or destroyed, or for the issuance of a  
14 license with a change of name or address other than during  
15 the renewal period is \$20. No fee is required for name and  
16 address changes on Department records when no duplicate  
17 license is issued.

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

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

24 (10) The fee to be paid by a licensee for a wall  
25 certificate showing his or her license shall be the actual  
26 cost of producing the certificate as determined by the

1 Department.

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

5 (F) Any person who delivers a check or other payment to the  
6 Department that is returned to the Department unpaid by the  
7 financial institution upon which it is drawn shall pay to the  
8 Department, in addition to the amount already owed to the  
9 Department, a fine of \$50. The fines imposed by this Section  
10 are in addition to any other discipline provided under this Act  
11 for unlicensed practice or practice on a nonrenewed license.  
12 The Department shall notify the person that payment of fees and  
13 fines shall be paid to the Department by certified check or  
14 money order within 30 calendar days of the notification. If,  
15 after the expiration of 30 days from the date of the  
16 notification, the person has failed to submit the necessary  
17 remittance, the Department shall automatically terminate the  
18 license or permit ~~certificate~~ or deny the application, without  
19 hearing. If, after termination or denial, the person seeks a  
20 license or permit ~~certificate~~, he or she shall apply to the  
21 Department for reinstatement ~~restoration~~ or issuance of the  
22 license or permit ~~certificate~~ and pay all fees and fines due to  
23 the Department. The Department may establish a fee for the  
24 processing of an application for reinstatement ~~restoration~~ of a  
25 license or permit ~~certificate~~ to pay all expenses of processing  
26 this application. The Secretary may waive the fines due under

1 this Section in individual cases where the Secretary finds that  
2 the fines would be unreasonable or unnecessarily burdensome.

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

4 (225 ILCS 60/22) (from Ch. 111, par. 4400-22)

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

6 Sec. 22. Disciplinary action.

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

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

16 (a) a facility licensed pursuant to the Ambulatory  
17 Surgical Treatment Center Act;

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

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

1 management and control;

2 (d) ambulatory surgical treatment centers,  
3 hospitalization or care facilities maintained by the  
4 Federal Government; or

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

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

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

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

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

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

25 (7) Habitual or excessive use or abuse of drugs defined  
26 in law as controlled substances, of alcohol, or of any

1 other substances which results in the inability to practice  
2 with reasonable judgment, skill or safety.

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

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

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

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

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

26 (13) Violation of any provision of this Act or of the

1 Medical Practice Act prior to the repeal of that Act, or  
2 violation of the rules, or a final administrative action of  
3 the Secretary, after consideration of the recommendation  
4 of the Disciplinary Board.

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

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

12 (16) Abandonment of a patient.

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

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

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



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

4           (21) Wilfully making or filing false records or reports  
5 in his or her practice as a physician, including, but not  
6 limited to, false records to support claims against the  
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          (22) Wilful omission to file or record, or wilfully  
11 impeding the filing or recording, or inducing another  
12 person to omit to file or record, medical reports as  
13 required by law, or wilfully failing to report an instance  
14 of suspected abuse or neglect as required by law.

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

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

25          (25) Gross and wilful and continued overcharging for  
26 professional services, including filing false statements

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

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

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

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

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

19 (30) Wilfully or negligently violating the  
20 confidentiality between physician and patient except as  
21 required by law.

22 (31) The use of any false, fraudulent, or deceptive  
23 statement in any document connected with practice under  
24 this Act.

25 (32) Aiding and abetting an individual not licensed  
26 under this Act in the practice of a profession licensed

1 under this Act.

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

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

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

25 (36) Failure to report to the Department any adverse  
26 judgment, settlement, or award arising from a liability

1 claim related to acts or conduct similar to acts or conduct  
2 which would constitute grounds for action as defined in  
3 this Section.

4 (37) Failure to provide copies of medical records as  
5 required by law.

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

11 (39) Violating the Health Care Worker Self-Referral  
12 Act.

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

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

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

21 (43) Repeated failure to adequately collaborate with a  
22 licensed advanced practice nurse.

23 (44) Violating the Compassionate Use of Medical  
24 Cannabis Pilot Program Act.

25 (45) Entering into an excessive number of written  
26 collaborative agreements with licensed prescribing

1 psychologists resulting in an inability to adequately  
2 collaborate.

3 (46) Repeated failure to adequately collaborate with a  
4 licensed prescribing psychologist.

5 Except for actions involving the ground numbered (26), all  
6 proceedings to suspend, revoke, place on probationary status,  
7 or take any other disciplinary action as the Department may  
8 deem proper, with regard to a license on any of the foregoing  
9 grounds, must be commenced within 5 years next after receipt by  
10 the Department of a complaint alleging the commission of or  
11 notice of the conviction order for any of the acts described  
12 herein. Except for the grounds numbered (8), (9), (26), and  
13 (29), no action shall be commenced more than 10 years after the  
14 date of the incident or act alleged to have violated this  
15 Section. For actions involving the ground numbered (26), a  
16 pattern of practice or other behavior includes all incidents  
17 alleged to be part of the pattern of practice or other behavior  
18 that occurred, or a report pursuant to Section 23 of this Act  
19 received, within the 10-year period preceding the filing of the  
20 complaint. In the event of the settlement of any claim or cause  
21 of action in favor of the claimant or the reduction to final  
22 judgment of any civil action in favor of the plaintiff, such  
23 claim, cause of action or civil action being grounded on the  
24 allegation that a person licensed under this Act was negligent  
25 in providing care, the Department shall have an additional  
26 period of 2 years from the date of notification to the

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

8 The entry of an order or judgment by any circuit court  
9 establishing that any person holding a license under this Act  
10 is a person in need of mental treatment operates as a  
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 Disciplinary Board that they have been  
14 determined to be recovered from mental illness by the court and  
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  
18 action concerning the license of any person who fails to file a  
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  
21 interest, as required by any tax Act administered by the  
22 Illinois Department of Revenue, until such time as the  
23 requirements of any such tax Act are satisfied as determined by  
24 the Illinois Department of Revenue.

25 The Department, upon the recommendation of the  
26 Disciplinary Board, shall adopt rules which set forth standards

1 to be used in determining:

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

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

7 (c) what constitutes immoral conduct in the commission  
8 of any act, including, but not limited to, commission of an  
9 act of sexual misconduct related to the licensee's  
10 practice; and

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

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

16 In enforcing this Section, the Disciplinary Board or the  
17 Licensing Board, upon a showing of a possible violation, may  
18 compel, in the case of the Disciplinary Board, any individual  
19 who is licensed to practice under this Act or holds a permit to  
20 practice under this Act, or, in the case of the Licensing  
21 Board, any individual who has applied for licensure or a permit  
22 pursuant to this Act, to submit to a mental or physical  
23 examination and evaluation, or both, which may include a  
24 substance abuse or sexual offender evaluation, as required by  
25 the Licensing Board or Disciplinary Board and at the expense of  
26 the Department. The Disciplinary Board or Licensing Board shall

1 specifically designate the examining physician licensed to  
2 practice medicine in all of its branches or, if applicable, the  
3 multidisciplinary team involved in providing the mental or  
4 physical examination and evaluation, or both. The  
5 multidisciplinary team shall be led by a physician licensed to  
6 practice medicine in all of its branches and may consist of one  
7 or more or a combination of physicians licensed to practice  
8 medicine in all of its branches, licensed chiropractic  
9 physicians, licensed clinical psychologists, licensed clinical  
10 social workers, licensed clinical professional counselors, and  
11 other professional and administrative staff. Any examining  
12 physician or member of the multidisciplinary team may require  
13 any person ordered to submit to an examination and evaluation  
14 pursuant to this Section to submit to any additional  
15 supplemental testing deemed necessary to complete any  
16 examination or evaluation process, including, but not limited  
17 to, blood testing, urinalysis, psychological testing, or  
18 neuropsychological testing. The Disciplinary Board, the  
19 Licensing Board, or the Department may order the examining  
20 physician or any member of the multidisciplinary team to  
21 provide to the Department, the Disciplinary Board, or the  
22 Licensing Board any and all records, including business  
23 records, that relate to the examination and evaluation,  
24 including any supplemental testing performed. The Disciplinary  
25 Board, the Licensing Board, or the Department may order the  
26 examining physician or any member of the multidisciplinary team



1 to present testimony concerning this examination and  
2 evaluation of the licensee, permit holder, or applicant,  
3 including testimony concerning any supplemental testing or  
4 documents relating to the examination and evaluation. No  
5 information, report, record, or other documents in any way  
6 related to the examination and evaluation shall be excluded by  
7 reason of any common law or statutory privilege relating to  
8 communication between the licensee, permit holder, or  
9 applicant and the examining physician or any member of the  
10 multidisciplinary team. No authorization is necessary from the  
11 licensee, permit holder, or applicant ordered to undergo an  
12 evaluation and examination for the examining physician or any  
13 member of the multidisciplinary team to provide information,  
14 reports, records, or other documents or to provide any  
15 testimony regarding the examination and evaluation. The  
16 individual to be examined may have, at his or her own expense,  
17 another physician of his or her choice present during all  
18 aspects of the examination. Failure of any individual to submit  
19 to mental or physical examination and evaluation, or both, when  
20 directed, shall result in an automatic suspension, without  
21 hearing, until such time as the individual submits to the  
22 examination. If the Disciplinary Board or Licensing Board finds  
23 a physician unable to practice following an examination and  
24 evaluation because of the reasons set forth in this Section,  
25 the Disciplinary Board or Licensing Board shall require such  
26 physician to submit to care, counseling, or treatment by

1 physicians, or other health care professionals, approved or  
2 designated by the Disciplinary Board, as a condition for  
3 issued, continued, reinstated, or renewed licensure to  
4 practice. Any physician, whose license was granted pursuant to  
5 Sections 9, 17, or 19 of this Act, or, continued, reinstated,  
6 renewed, disciplined or supervised, subject to such terms,  
7 conditions or restrictions who shall fail to comply with such  
8 terms, conditions or restrictions, or to complete a required  
9 program of care, counseling, or treatment, as determined by the  
10 Chief Medical Coordinator or Deputy Medical Coordinators,  
11 shall be referred to the Secretary for a determination as to  
12 whether the licensee shall have their license suspended  
13 immediately, pending a hearing by the Disciplinary Board. In  
14 instances in which the Secretary immediately suspends a license  
15 under this Section, a hearing upon such person's license must  
16 be convened by the Disciplinary Board within 15 days after such  
17 suspension and completed without appreciable delay. The  
18 Disciplinary Board shall have the authority to review the  
19 subject physician's record of treatment and counseling  
20 regarding the impairment, to the extent permitted by applicable  
21 federal statutes and regulations safeguarding the  
22 confidentiality of medical records.

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

1 of their license.

2 The Department may promulgate rules for the imposition of  
3 fines in disciplinary cases, not to exceed \$10,000 for each  
4 violation of this Act. Fines may be imposed in conjunction with  
5 other forms of disciplinary action, but shall not be the  
6 exclusive disposition of any disciplinary action arising out of  
7 conduct resulting in death or injury to a patient. Any funds  
8 collected from such fines shall be deposited in the Medical  
9 Disciplinary Fund.

10 All fines imposed under this Section shall be paid within  
11 60 days after the effective date of the order imposing the fine  
12 or in accordance with the terms set forth in the order imposing  
13 the fine.

14 (B) The Department shall revoke the license or permit  
15 issued under this Act to practice medicine or a chiropractic  
16 physician who has been convicted a second time of committing  
17 any felony under the Illinois Controlled Substances Act or the  
18 Methamphetamine Control and Community Protection Act, or who  
19 has been convicted a second time of committing a Class 1 felony  
20 under Sections 8A-3 and 8A-6 of the Illinois Public Aid Code. A  
21 person whose license or permit is revoked under this subsection  
22 B shall be prohibited from practicing medicine or treating  
23 human ailments without the use of drugs and without operative  
24 surgery.

25 (C) The Disciplinary Board shall recommend to the  
26 Department civil penalties and any other appropriate

1 discipline in disciplinary cases when the Board finds that a  
2 physician willfully performed an abortion with actual  
3 knowledge that the person upon whom the abortion has been  
4 performed is a minor or an incompetent person without notice as  
5 required under the Parental Notice of Abortion Act of 1995.  
6 Upon the Board's recommendation, the Department shall impose,  
7 for the first violation, a civil penalty of \$1,000 and for a  
8 second or subsequent violation, a civil penalty of \$5,000.

9 (Source: P.A. 97-622, eff. 11-23-11; 98-601, eff. 12-30-13;  
10 98-668, eff. 6-25-14.)

11 (225 ILCS 60/24) (from Ch. 111, par. 4400-24)

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

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

14 (a) Any physician licensed under this Act, the Illinois  
15 State Medical Society, the Illinois Association of Osteopathic  
16 Physicians and Surgeons, the Illinois Chiropractic Society,  
17 the Illinois Prairie State Chiropractic Association, or any  
18 component societies of any of these 4 groups, and any other  
19 person, may report to the Disciplinary Board any information  
20 the physician, association, society, or person may have that  
21 appears to show that a physician is or may be in violation of  
22 any of the provisions of Section 22 of this Act.

23 (b) The Department may enter into agreements with the  
24 Illinois State Medical Society, the Illinois Association of  
25 Osteopathic Physicians and Surgeons, the Illinois Prairie

1 State Chiropractic Association, or the Illinois Chiropractic  
2 Society to allow these organizations to assist the Disciplinary  
3 Board in the review of alleged violations of this Act. Subject  
4 to the approval of the Department, any organization party to  
5 such an agreement may subcontract with other individuals or  
6 organizations to assist in review.

7 (c) Any physician, association, society, or person  
8 participating in good faith in the making of a report under  
9 this Act or participating in or assisting with an investigation  
10 or review under this Act shall have immunity from any civil,  
11 criminal, or other liability that might result by reason of  
12 those actions.

13 (d) The medical information in the custody of an entity  
14 under contract with the Department participating in an  
15 investigation or review shall be privileged and confidential to  
16 the same extent as are information and reports under the  
17 provisions of Part 21 of Article VIII of the Code of Civil  
18 Procedure.

19 (e) Upon request by the Department after a mandatory report  
20 has been filed with the Department, an attorney for any party  
21 seeking to recover damages for injuries or death by reason of  
22 medical, hospital, or other healing art malpractice shall  
23 provide patient records related to the physician involved in  
24 the disciplinary proceeding to the Department within 30 days of  
25 the Department's request for use by the Department in any  
26 disciplinary matter under this Act. An attorney who provides

1 patient records to the Department in accordance with this  
2 requirement shall not be deemed to have violated any  
3 attorney-client privilege. Notwithstanding any other provision  
4 of law, consent by a patient shall not be required for the  
5 provision of patient records in accordance with this  
6 requirement.

7 (f) For the purpose of any civil or criminal proceedings,  
8 the good faith of any physician, association, society or person  
9 shall be presumed.

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

11 (225 ILCS 60/33) (from Ch. 111, par. 4400-33)

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

13 Sec. 33. Legend drugs.

14 (a) Any person licensed under this Act to practice medicine  
15 in all of its branches shall be authorized to purchase legend  
16 drugs requiring an order of a person authorized to prescribe  
17 drugs, and to dispense such legend drugs in the regular course  
18 of practicing medicine. The dispensing of such legend drugs  
19 shall be the personal act of the person licensed under this Act  
20 and may not be delegated to any other person not licensed under  
21 this Act or the Pharmacy Practice Act unless such delegated  
22 dispensing functions are under the direct supervision of the  
23 physician authorized to dispense legend drugs. Except when  
24 dispensing manufacturers' samples or other legend drugs in a  
25 maximum 72 hour supply, persons licensed under this Act shall

1 maintain a book or file of prescriptions as required in the  
2 Pharmacy Practice Act. Any person licensed under this Act who  
3 dispenses any drug or medicine shall dispense such drug or  
4 medicine in good faith and shall affix to the box, bottle,  
5 vessel or package containing the same a label indicating (1)  
6 ~~(a)~~ the date on which such drug or medicine is dispensed; (2)  
7 ~~(b)~~ the name of the patient; (3) ~~(c)~~ the last name of the  
8 person dispensing such drug or medicine; (4) ~~(d)~~ the directions  
9 for use thereof; and (5) ~~(e)~~ the proprietary name or names or,  
10 if there are none, the established name or names of the drug or  
11 medicine, the dosage and quantity, except as otherwise  
12 authorized by regulation of the Department.

13 (b) The ~~foregoing~~ labeling requirements set forth in  
14 subsection (a) shall not apply to drugs or medicines in a  
15 package which bears a label of the manufacturer containing  
16 information describing its contents which is in compliance with  
17 requirements of the Federal Food, Drug, and Cosmetic Act and  
18 the Illinois Food, Drug, and Cosmetic Act. "Drug" and  
19 "medicine" have the meanings ~~meaning~~ ascribed to them in the  
20 Pharmacy Practice Act, as now or hereafter amended; "good  
21 faith" has the meaning ascribed to it in subsection (u) ~~(v)~~ of  
22 Section 102 of the Illinois Controlled Substances Act.  
23 ~~"Illinois Controlled Substances Act", approved August 16,~~  
24 ~~1971, as amended.~~

25 (c) Prior to dispensing a prescription to a patient, the  
26 physician shall offer a written prescription to the patient

1 which the patient may elect to have filled by the physician or  
2 any licensed pharmacy.

3 (d) A violation of any provision of this Section shall  
4 constitute a violation of this Act and shall be grounds for  
5 disciplinary action provided for in this Act.

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

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

9 (225 ILCS 60/36) (from Ch. 111, par. 4400-36)

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

11 Sec. 36. Investigation; notice.

12 (a) Upon the motion of either the Department or the  
13 Disciplinary Board or upon the verified complaint in writing of  
14 any person setting forth facts which, if proven, would  
15 constitute grounds for suspension or revocation under Section  
16 22 of this Act, the Department shall investigate the actions of  
17 any person, so accused, who holds or represents that they hold  
18 a license. Such person is hereinafter called the accused.

19 (b) The Department shall, before suspending, revoking,  
20 placing on probationary status, or taking any other  
21 disciplinary action as the Department may deem proper with  
22 regard to any license at least 30 days prior to the date set  
23 for the hearing, notify the accused in writing of any charges  
24 made and the time and place for a hearing of the charges before  
25 the Disciplinary Board, direct them to file their written



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

14 (c) Where a physician has been found, upon complaint and  
15 investigation of the Department, and after hearing, to have  
16 performed an abortion procedure in a wilful and wanton manner  
17 upon a woman who was not pregnant at the time such abortion  
18 procedure was performed, the Department shall automatically  
19 revoke the license of such physician to practice medicine in  
20 Illinois.

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

25 (e) All information gathered by the Department during its  
26 investigation including information subpoenaed under Section

1 23 or 38 of this Act and the investigative file shall be kept  
2 for the confidential use of the Secretary, Disciplinary Board,  
3 the Medical Coordinators, persons employed by contract to  
4 advise the Medical Coordinator or the Department, the  
5 Disciplinary Board's attorneys, the medical investigative  
6 staff, and authorized clerical staff, as provided in this Act  
7 and shall be afforded the same status as is provided  
8 information concerning medical studies in Part 21 of Article  
9 VIII of the Code of Civil Procedure, except that the Department  
10 may disclose information and documents to a federal, State, or  
11 local law enforcement agency pursuant to a subpoena in an  
12 ongoing criminal investigation to a health care licensing body  
13 of this State or another state or jurisdiction pursuant to an  
14 official request made by that licensing body. Furthermore,  
15 information and documents disclosed to a federal, State, or  
16 local law enforcement agency may be used by that agency only  
17 for the investigation and prosecution of a criminal offense or,  
18 in the case of disclosure to a health care licensing body, only  
19 for investigations and disciplinary action proceedings with  
20 regard to a license issued by that licensing body.

21 (Source: P.A. 96-1372, eff. 7-29-10; 97-449, eff. 1-1-12;  
22 97-622, eff. 11-23-11.)

23 (225 ILCS 60/37) (from Ch. 111, par. 4400-37)

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

25 Sec. 37. Disciplinary actions.

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

12       (b) In case the accused person, after receiving notice,  
13 fails to file an answer, their license may, in the discretion  
14 of the Secretary, having received first the recommendation of  
15 the Disciplinary Board, be suspended, revoked or placed on  
16 probationary status, or the Secretary may take whatever  
17 disciplinary action as he or she may deem proper, including  
18 limiting the scope, nature, or extent of said person's  
19 practice, without a hearing, if the act or acts charged  
20 constitute sufficient grounds for such action under this Act.

21       (c) The Disciplinary Board has the authority to recommend  
22 to the Secretary that probation be granted or that other  
23 disciplinary or non-disciplinary action, including the  
24 limitation of the scope, nature or extent of a person's  
25 practice, be taken as it deems proper. If disciplinary or  
26 non-disciplinary action, other than suspension or revocation,

1 is taken the Disciplinary Board may recommend that the  
2 Secretary impose reasonable limitations and requirements upon  
3 the accused registrant to insure compliance with the terms of  
4 the probation or other disciplinary action including, but not  
5 limited to, regular reporting by the accused to the Department  
6 of their actions, placing themselves under the care of a  
7 qualified physician for treatment, or limiting their practice  
8 in such manner as the Secretary may require.

9 (d) The Secretary, after consultation with the Chief  
10 Medical Coordinator or Deputy Medical Coordinator, may  
11 temporarily suspend the license of a physician without a  
12 hearing, simultaneously with the institution of proceedings  
13 for a hearing provided under this Section if the Secretary  
14 finds that evidence in his or her possession indicates that a  
15 physician's continuation in practice would constitute an  
16 immediate danger to the public. In the event that the Secretary  
17 suspends, temporarily, the license of a physician without a  
18 hearing, a hearing by the Disciplinary Board shall be held  
19 within 15 days after such suspension has occurred and shall be  
20 concluded without appreciable delay.

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

22 (225 ILCS 60/38) (from Ch. 111, par. 4400-38)

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

24 Sec. 38. Subpoena; oaths.

25 (a) The Disciplinary Board or Department has power to

1 subpoena and bring before it any person in this State and to  
2 take testimony either orally or by deposition, or both, with  
3 the same fees and mileage and in the same manner as is  
4 prescribed by law for judicial procedure in civil cases.

5 (b) The Disciplinary Board, upon a determination that  
6 probable cause exists that a violation of one or more of the  
7 grounds for discipline listed in Section 22 has occurred or is  
8 occurring, may subpoena the medical and hospital records of  
9 individual patients of physicians licensed under this Act,  
10 provided, that prior to the submission of such records to the  
11 Disciplinary Board, all information indicating the identity of  
12 the patient shall be removed and deleted. Notwithstanding the  
13 foregoing, the Disciplinary Board and Department shall possess  
14 the power to subpoena copies of hospital or medical records in  
15 mandatory report cases under Section 23 alleging death or  
16 permanent bodily injury when consent to obtain records is not  
17 provided by a patient or legal representative. Prior to  
18 submission of the records to the Disciplinary Board, all  
19 information indicating the identity of the patient shall be  
20 removed and deleted. All medical records and other information  
21 received pursuant to subpoena shall be confidential and shall  
22 be afforded the same status as is proved information concerning  
23 medical studies in Part 21 of Article VIII of the Code of Civil  
24 Procedure. The use of such records shall be restricted to  
25 members of the Disciplinary Board, the medical coordinators,  
26 and appropriate staff of the Department designated by the

1 Disciplinary Board for the purpose of determining the existence  
2 of one or more grounds for discipline of the physician as  
3 provided for by Section 22 of this Act. Any such review of  
4 individual patients' records shall be conducted by the  
5 Disciplinary Board in strict confidentiality, provided that  
6 such patient records shall be admissible in a disciplinary  
7 hearing, before the Disciplinary Board, when necessary to  
8 substantiate the grounds for discipline alleged against the  
9 physician licensed under this Act, and provided further, that  
10 nothing herein shall be deemed to supersede the provisions of  
11 Part 21 of Article VIII of the "Code of Civil Procedure", as  
12 now or hereafter amended, to the extent applicable.

13 (c) The Secretary, and any member of the Disciplinary Board  
14 each have power to administer oaths at any hearing which the  
15 Disciplinary Board or Department is authorized by law to  
16 conduct.

17 (d) The Disciplinary Board, upon a determination that  
18 probable cause exists that a violation of one or more of the  
19 grounds for discipline listed in Section 22 has occurred or is  
20 occurring on the business premises of a physician licensed  
21 under this Act, may issue an order authorizing an appropriately  
22 qualified investigator employed by the Department to enter upon  
23 the business premises with due consideration for patient care  
24 of the subject of the investigation so as to inspect the  
25 physical premises and equipment and furnishings therein. No  
26 such order shall include the right of inspection of business,

1 medical, or personnel records located on the premises. For  
2 purposes of this Section, "business premises" is defined as the  
3 office or offices where the physician conducts the practice of  
4 medicine. Any such order shall expire and become void five  
5 business days after its issuance by the Disciplinary Board. The  
6 execution of any such order shall be valid only during the  
7 normal business hours of the facility or office to be  
8 inspected.

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

10 (225 ILCS 60/40) (from Ch. 111, par. 4400-40)

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

12 Sec. 40. Findings and recommendations; rehearing.

13 (a) The Disciplinary Board shall present to the Secretary a  
14 written report of its findings and recommendations. A copy of  
15 such report shall be served upon the accused person, either  
16 personally or by registered or certified mail. Within 20 days  
17 after such service, the accused person may present to the  
18 Department their motion, in writing, for a rehearing, which  
19 written motion shall specify the particular ground therefor. If  
20 the accused person orders and pays for a transcript of the  
21 record as provided in Section 39, the time elapsing thereafter  
22 and before such transcript is ready for delivery to them shall  
23 not be counted as part of such 20 days.

24 (b) At the expiration of the time allowed for filing a  
25 motion for rehearing, the Secretary may take the action

1 recommended by the Disciplinary Board. Upon the suspension,  
2 revocation, placement on probationary status, or the taking of  
3 any other disciplinary action, including the limiting of the  
4 scope, nature, or extent of one's practice, deemed proper by  
5 the Department, with regard to the license or ~~, certificate or~~  
6 ~~visiting professor~~ permit, the accused shall surrender their  
7 license or permit to the Department, if ordered to do so by the  
8 Department, and upon their failure or refusal so to do, the  
9 Department may seize the same.

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

16 (d) The Department shall at least annually publish a list  
17 of the names of all persons disciplined under this Act in the  
18 preceding 12 months. Such lists shall be available by the  
19 Department on its website.

20 (e) In those instances where an order of revocation,  
21 suspension, or other disciplinary action has been rendered by  
22 virtue of a physician's physical illness, including, but not  
23 limited to, deterioration through the aging process, or loss of  
24 motor skill which results in a physician's inability to  
25 practice medicine with reasonable judgment, skill, or safety,  
26 the Department shall only permit this document, and the record



1 of the hearing incident thereto, to be observed, inspected,  
2 viewed, or copied pursuant to court order.

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

4 (225 ILCS 60/41) (from Ch. 111, par. 4400-41)

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

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

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

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

15 (c) The Department shall not be required to certify any  
16 record to the court, to file an answer in court, or to  
17 otherwise appear in any court in a judicial review proceeding  
18 unless and until the Department has received from the plaintiff  
19 payment of the costs of furnishing and certifying the record,  
20 which costs shall be determined by the Department. Exhibits  
21 shall be certified without cost. Failure on the part of the  
22 plaintiff to file a receipt in court shall be grounds for  
23 dismissal of the action. During the pendency and hearing of any  
24 and all judicial proceedings incident to the disciplinary  
25 action the sanctions imposed upon the accused by the Department

1 because of acts or omissions related to the delivery of direct  
2 patient care as specified in the Department's final  
3 administrative decision, shall as a matter of public policy  
4 remain in full force and effect in order to protect the public  
5 pending final resolution of any of the proceedings.

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

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