



Rep. Michael J. Zalewski

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LRB098 04424 MGM 62414 a

1 AMENDMENT TO SENATE BILL 649

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

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

7 (5 ILCS 80/4.25a new)

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 Act repealed on December 31, 2015.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9 following Act is repealed on December 31, 2015:

10 The Medical Practice Act of 1987.

11 (5 ILCS 80/4.24 rep.)

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

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

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

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

4 (Section scheduled to be repealed on December 31, 2014)

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

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

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

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

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

25 "Disciplinary Action" means revocation, suspension,

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

4 "Disciplinary Board" means the Medical Disciplinary Board.

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

11 "Fund" means the Medical Disciplinary Fund.

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

19 "Licensing Board" means the Medical Licensing Board.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

8 Sec. 7. Medical Disciplinary Board.

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

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

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

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

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

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

1 (D) (Blank).

2 (E) Six voting members of the Disciplinary Board, at least
3 4 of whom are physicians, shall constitute a quorum. A vacancy
4 in the membership of the Disciplinary Board shall not impair
5 the right of a quorum to exercise all the rights and perform
6 all the duties of the Disciplinary Board. Any action taken by
7 the Disciplinary Board under this Act may be authorized by
8 resolution at any regular or special meeting and each such
9 resolution shall take effect immediately. The Disciplinary
10 Board shall meet at least quarterly. ~~The Disciplinary Board is
11 empowered to adopt all rules and regulations necessary and
12 incident to the powers granted to it under this Act.~~

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

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

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

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

22 (H) Upon the specific request of the Disciplinary Board,
23 signed by either the chairperson, vice chairperson, or a
24 medical coordinator of the Disciplinary Board, the Department
25 of Human Services, the Department of Healthcare and Family
26 Services, ~~or~~ the Department of State Police, or any other law

1 enforcement agency located in this State shall make available
2 any and all information that they have in their possession
3 regarding a particular case then under investigation by the
4 Disciplinary Board.

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

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

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

24 (225 ILCS 60/7.5)

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

1 Sec. 7.5. Complaint Committee.

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

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

24 (c) The Complaint Committee shall have the following duties
25 and functions:

26 (1) To recommend to the Disciplinary Board that a

1 complaint file be closed.

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

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

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

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

17 (225 ILCS 60/9) (from Ch. 111, par. 4400-9)

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

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

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

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

25 (1) is of good moral character. In determining

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

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

11 (3) (blank); and

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

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

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

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

21 (2) Specialized training or education.

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

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

26 (5) Professional service in a federal veterans or

1 military institution.

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

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

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

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

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

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

26 (F) Complete the application process within 3 years

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

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

7 (225 ILCS 60/9.3)

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

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

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

17 (225 ILCS 60/9.5)

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

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

1 shall assign a customer's identification number to each
2 applicant for a license.

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

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

7 (225 ILCS 60/13) (from Ch. 111, par. 4400-13)

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

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

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

21 (225 ILCS 60/17) (from Ch. 111, par. 4400-17)

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

23 Sec. 17. Temporary license. Persons holding the degree of
24 Doctor of Medicine, persons holding the degree of Doctor of

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

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

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

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

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

25 Three-year temporary licenses issued pursuant to this
26 Section shall be valid only for the period of time designated

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

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

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

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

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

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

25 (A) Visiting professor permit.

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

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

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

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

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

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

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

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

26 (6) After the initial renewal of a visiting professor

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

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

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

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

14 (B) Visiting physician permit.

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

18 (a) (blank);

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

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

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

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

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

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

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

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

1 (C) Visiting resident permit.

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

5 (a) (blank);

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

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

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

23 (e) that the temporary visiting resident permit
24 shall only permit the holder to practice medicine in
25 all of its branches or practice the treatment of human
26 ailments without the use of drugs and without operative

1 surgery within the scope of the medical, osteopathic,
2 chiropractic or clinical studies for which the holder
3 was invited or appointed.

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

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

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

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

20 (225 ILCS 60/19) (from Ch. 111, par. 4400-19)

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

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

1 territory, country or province, upon the following conditions
2 and submitting evidence satisfactory to the Department of the
3 following:

4 (A) (Blank);

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

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

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

26 (1) if the applicant was licensed in another

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

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

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

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

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

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

1 applicant's license;

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

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

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

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

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

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

17 (225 ILCS 60/21) (from Ch. 111, par. 4400-21)

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

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

21 (A) Renewal. The expiration date and renewal period for
22 each license issued under this Act shall be set by rule. The
23 holder of a license may renew the license by paying the
24 required fee. The holder of a license may also renew the
25 license within 90 days after its expiration by complying with

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

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

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

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

1 Licensing Board.

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

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

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

1 reinstate ~~restore~~ his or her license as provided in subsection
2 (B).

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

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

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

20 The State Comptroller shall order and the State Treasurer
21 shall transfer an amount equal to \$1,100,000 from the Illinois
22 State Medical Disciplinary Fund to the Local Government Tax
23 Fund on each of the following dates: July 1, 2014, October 1,
24 2014, January 1, 2015, July 1, 2017, October 1, 2017, and
25 January 1, 2018. These transfers shall constitute repayment of
26 the \$6,600,000 transfer made under Section 6z-18 of the State

1 Finance Act.

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

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

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

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

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

23 (4) Before July 1, 2018, the fee for the renewal of a
24 license for a resident of Illinois shall be calculated at
25 the rate of \$230 per year, and beginning on July 1, 2018,
26 the fee for the renewal of a license shall be \$167, except

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

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

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

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

26 (8) The fee to be paid for a license record for any

1 purpose is \$20.

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

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

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

13 (F) Any person who delivers a check or other payment to the
14 Department that is returned to the Department unpaid by the
15 financial institution upon which it is drawn shall pay to the
16 Department, in addition to the amount already owed to the
17 Department, a fine of \$50. The fines imposed by this Section
18 are in addition to any other discipline provided under this Act
19 for unlicensed practice or practice on a nonrenewed license.
20 The Department shall notify the person that payment of fees and
21 fines shall be paid to the Department by certified check or
22 money order within 30 calendar days of the notification. If,
23 after the expiration of 30 days from the date of the
24 notification, the person has failed to submit the necessary
25 remittance, the Department shall automatically terminate the
26 license or permit ~~certificate~~ or deny the application, without

1 hearing. If, after termination or denial, the person seeks a
2 license or permit ~~certificate~~, he or she shall apply to the
3 Department for reinstatement ~~restoration~~ or issuance of the
4 license or permit ~~certificate~~ and pay all fees and fines due to
5 the Department. The Department may establish a fee for the
6 processing of an application for reinstatement ~~restoration~~ of a
7 license or permit ~~certificate~~ to pay all expenses of processing
8 this application. The Secretary may waive the fines due under
9 this Section in individual cases where the Secretary finds that
10 the fines would be unreasonable or unnecessarily burdensome.

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

12 (225 ILCS 60/22) (from Ch. 111, par. 4400-22)

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

14 Sec. 22. Disciplinary action.

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

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

24 (a) a facility licensed pursuant to the Ambulatory
25 Surgical Treatment Center Act;

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

20 (16) Abandonment of a patient.

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

26 (18) Promotion of the sale of drugs, devices,

1 appliances or goods provided for a patient in such manner
2 as to exploit the patient for financial gain of the
3 physician.

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

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

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

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

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

1 licensee has caused a child to be an abused child or
2 neglected child as defined in the Abused and Neglected
3 Child Reporting Act.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

25 (42) Entering into an excessive number of written
26 collaborative agreements with licensed advanced practice

1 nurses resulting in an inability to adequately
2 collaborate.

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

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

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

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

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

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

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

25 The Department may refuse to issue or take disciplinary
26 action concerning the license of any person who fails to file a

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

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

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

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

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

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

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

24 In enforcing this Section, the Disciplinary Board or the
25 Licensing Board, upon a showing of a possible violation, may
26 compel, in the case of the Disciplinary Board, any individual

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

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

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

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

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

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

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

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

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

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

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

19 (225 ILCS 60/24) (from Ch. 111, par. 4400-24)

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

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

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

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

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

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

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

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

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

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

19 (225 ILCS 60/33) (from Ch. 111, par. 4400-33)

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

21 Sec. 33. Legend drugs.

22 (a) Any person licensed under this Act to practice medicine
23 in all of its branches shall be authorized to purchase legend
24 drugs requiring an order of a person authorized to prescribe
25 drugs, and to dispense such legend drugs in the regular course

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

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

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

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

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

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

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

17 (225 ILCS 60/36) (from Ch. 111, par. 4400-36)

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

19 Sec. 36. Investigation; notice.

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

1 a license. Such person is hereinafter called the accused.

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

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

1 revoke the license of such physician to practice medicine in
2 Illinois.

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

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

1 for investigations and disciplinary action proceedings with
2 regard to a license issued by that licensing body.

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

5 (225 ILCS 60/37) (from Ch. 111, par. 4400-37)

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

7 Sec. 37. Disciplinary actions.

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

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

1 practice, without a hearing, if the act or acts charged
2 constitute sufficient grounds for such action under this Act.

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

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

1 within 15 days after such suspension has occurred and shall be
2 concluded without appreciable delay.

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

4 (225 ILCS 60/38) (from Ch. 111, par. 4400-38)

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

6 Sec. 38. Subpoena; oaths.

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

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

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

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

25 (d) The Disciplinary Board, upon a determination that
26 probable cause exists that a violation of one or more of the

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

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

18 (225 ILCS 60/40) (from Ch. 111, par. 4400-40)

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

20 Sec. 40. Findings and recommendations; rehearing.

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

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

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

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

24 (d) The Department shall at least annually publish a list
25 of the names of all persons disciplined under this Act in the
26 preceding 12 months. Such lists shall be available by the

1 Department on its website.

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

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

12 (225 ILCS 60/41) (from Ch. 111, par. 4400-41)

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

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

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

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

23 (c) The Department shall not be required to certify any
24 record to the court, to file an answer in court, or to
25 otherwise appear in any court in a judicial review proceeding

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

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

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