



Health Care Availability and Access Committee

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LRB095 17528 RAS 47626 a

1 AMENDMENT TO HOUSE BILL 4554

2 AMENDMENT NO. _____. Amend House Bill 4554, AS AMENDED, by
3 replacing everything after the enacting clause with the
4 following:

5 "Section 1. Short title. This Act may be cited as the
6 Physician Profile Act.

7 Section 5. Definitions. In this Act:

8 "Department" means the Department of Financial and
9 Professional Regulation.

10 "Physician" has the meaning given to the term in the
11 Medical Practice Act of 1987.

12 "Disciplinary Board" means the Medical Disciplinary Board
13 created under the Medical Practice Act of 1987.

14 Section 10. Physician profile; availability.

15 (a) Beginning on the effective date of this Act, the

1 Department of Financial and Professional Regulation shall make
2 available to the public a profile of each physician licensed
3 under the Medical Practice Act of 1987. The Department shall
4 make this information available through an Internet web site
5 and, if requested, in writing.

6 (b) The Disciplinary Board shall provide individual
7 physicians with a copy of their profiles prior to release to
8 the public. A physician shall be provided 60 days to correct
9 factual inaccuracies that appear in such profile.

10 Section 15. Physician profile; contents. A physician
11 profile shall contain the following information:

12 (1) the full name of the physician;

13 (2) a description of any criminal convictions for
14 felonies and Class A misdemeanors, as determined by the
15 Department, within the most recent 5 years. For the
16 purposes of this Section, a person shall be deemed to be
17 convicted of a crime if he or she pleaded guilty or if he
18 was found or adjudged guilty by a court of competent
19 jurisdiction;

20 (3) a description of any final Department disciplinary
21 actions within the most recent 5 years;

22 (4) a description of any final disciplinary actions by
23 licensing boards in other states within the most recent 5
24 years;

25 (5) a description of revocation or involuntary

1 restriction of hospital privileges for reasons related to
2 competence or character that have been taken by the
3 hospital's governing body or any other official of the
4 hospital after procedural due process has been afforded, or
5 the resignation from or nonrenewal of medical staff
6 membership or the restriction of privileges at a hospital
7 taken in lieu of or in settlement of a pending disciplinary
8 case related to competence or character in that hospital.
9 Only cases which have occurred within the most recent 5
10 years shall be disclosed by the Department to the public;

11 (6) all medical malpractice court judgments and all
12 medical malpractice arbitration awards in which a payment
13 was awarded to a complaining party during the most recent 5
14 years and all settlements of medical malpractice claims in
15 which a payment was made to a complaining party within the
16 most recent 5 years. A medical malpractice judgment or
17 award that has been appealed shall be identified
18 prominently as "Under Appeal" on the profile within 20 days
19 of formal written notice to the Department. Information
20 concerning all settlements shall be accompanied by the
21 following statement: "Settlement of a claim may occur for a
22 variety of reasons which do not necessarily reflect
23 negatively on the professional competence or conduct of the
24 physician. A payment in settlement of a medical malpractice
25 action or claim should not be construed as creating a
26 presumption that medical malpractice has occurred."

1 Nothing in this item (6) shall be construed to limit or
2 prevent the Disciplinary Board from providing further
3 explanatory information regarding the significance of
4 categories in which settlements are reported. Pending
5 malpractice claims shall not be disclosed by the Department
6 to the public. Nothing in this subdivision (6) shall be
7 construed to prevent the Disciplinary Board from
8 investigating and the Department from disciplining a
9 physician on the basis of medical malpractice claims that
10 are pending;

11 (7) names of medical schools attended, dates of
12 attendance, and date of graduation;

13 (8) graduate medical education;

14 (9) specialty board certification; the toll-free
15 number of the American Board of Medical Specialties shall
16 be included to verify current board certification status;

17 (10) number of years in practice and locations;

18 (11) names of the hospitals where the physician has
19 privileges;

20 (12) appointments to medical school faculties and
21 indication as to whether a physician has a responsibility
22 for graduate medical education within the most recent 5
23 years;

24 (13) information regarding publications in
25 peer-reviewed medical literature within the most recent 5
26 years;

1 (14) information regarding professional or community
2 service activities and awards;

3 (15) the location of the physician's primary practice
4 setting;

5 (16) identification of any translating services that
6 may be available at the physician's primary practice
7 location;

8 (17) an indication of whether the physician
9 participates in the Medicaid program.

10 Section 20. Omissions. A physician may elect to have his
11 or her profile omit certain information provided pursuant to
12 items (12) through (14) of Section 15 of this Act concerning
13 academic appointments and teaching responsibilities,
14 publication in peer-reviewed journals and professional and
15 community service awards. In collecting information for
16 physician profiles and in disseminating the same, the
17 Disciplinary Board shall inform physicians that they may choose
18 not to provide such information required pursuant to items (12)
19 through (14) of Section 15 of this Act.

20 Section 25. No authority to make or promulgate rules.
21 Notwithstanding any other rulemaking authority that may exist,
22 neither the Governor nor any agency or agency head under the
23 jurisdiction of the Governor has any authority to make or
24 promulgate rules to implement or enforce the provisions of this

1 Act. If, however, the Governor believes that rules are
2 necessary to implement or enforce the provisions of this Act,
3 the Governor may suggest rules to the General Assembly by
4 filing them with the Clerk of the House and Secretary of the
5 Senate and by requesting that the General Assembly authorize
6 such rulemaking by law, enact those suggested rules into law,
7 or take any other appropriate action in the General Assembly's
8 discretion. Nothing contained in this Act shall be interpreted
9 to grant rulemaking authority under any other Illinois statute
10 where such authority is not otherwise explicitly given. For the
11 purposes of this Act, "rules" is given the meaning contained in
12 Section 1-70 of the Illinois Administrative Procedure Act, and
13 "agency" and "agency head" are given the meanings contained in
14 Sections 1-20 and 1-25 of the Illinois Administrative Procedure
15 Act to the extent that such definitions apply to agencies or
16 agency heads under the jurisdiction of the Governor.

17 Section 90. The Medical Practice Act of 1987 is amended by
18 changing Sections 9 and 21 as follows:

19 (225 ILCS 60/9) (from Ch. 111, par. 4400-9)

20 (Section scheduled to be repealed on December 31, 2008)

21 Sec. 9. Application for license. Each applicant for a
22 license shall:

23 (A) Make application on blank forms prepared and
24 furnished by the Department of Professional Regulation

1 hereinafter referred to as the Department.

2 (B) Submit evidence satisfactory to the Department
3 that the applicant:

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

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

15 (3) (blank); and

16 (4) is physically, mentally, and professionally
17 capable of practicing medicine with reasonable
18 judgment, skill, and safety. In determining physical,
19 mental and professional capacity under this Section,
20 the Medical Licensing Board may, upon a showing of a
21 possible incapacity, compel any applicant to submit to
22 a mental or physical examination, or both. The
23 Licensing Board may condition or restrict any license,
24 subject to the same terms and conditions as are
25 provided for the Medical Disciplinary Board under
26 Section 22 of this Act. Any such condition of a

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

11 In determining professional capacity under this
12 Section any individual who has not been actively engaged in
13 the practice of medicine or as a medical, osteopathic, or
14 chiropractic student or who has not been engaged in a
15 formal program of medical education during the 2 years
16 immediately preceding their application may be required to
17 complete such additional testing, training, or remedial
18 education as the Licensing Board may deem necessary in
19 order to establish the applicant's present capacity to
20 practice medicine with reasonable judgment, skill, and
21 safety.

22 (C) Designate specifically the name, location, and
23 kind of professional school, college, or institution of
24 which the applicant is a graduate and the category under
25 which the applicant seeks, and will undertake, to practice.

26 (C-5) Submit to the Department all applicable

1 information required under the Physician Profile Act.

2 (D) Pay to the Department at the time of application
3 the required fees.

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

7 (F) Complete the application process within 3 years
8 from the date of application. If the process has not been
9 completed within 3 years, the application shall be denied,
10 application fees shall be forfeited, and the applicant must
11 reapply and meet the requirements in effect at the time of
12 reapplication.

13 (Source: P.A. 89-387, eff. 8-20-95; 89-702, eff. 7-1-97.)

14 (225 ILCS 60/21) (from Ch. 111, par. 4400-21)

15 (Section scheduled to be repealed on December 31, 2008)

16 Sec. 21. License renewal; restoration; inactive status;
17 disposition and collection of fees.

18 (A) Renewal. The expiration date and renewal period for
19 each license issued under this Act shall be set by rule. The
20 holder of a license may renew the license by paying the
21 required fee and submitting to or updating with the Department
22 all applicable information required under the Physician
23 Profile Act. The holder of a license may also renew the license
24 within 90 days after its expiration by complying with the
25 requirements for renewal and payment of an additional fee. A

1 license renewal within 90 days after expiration shall be
2 effective retroactively to the expiration date.

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

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

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

1 completion of the practical examination.

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 restoration from inactive status
23 shall be required to pay the current renewal fee, provide proof
24 of meeting the continuing education requirements for the period
25 of time the license is inactive not to exceed one renewal
26 period, and shall be required to restore his or her license as

1 provided in subsection (B).

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

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

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

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

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

24 (1) Applicants for any examination shall be required to
25 pay, either to the Department or to the designated testing
26 service, a fee covering the cost of determining the

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

8 (2) The fee for a license under Section 9 of this Act
9 is \$300.

10 (3) The fee for a license under Section 19 of this Act
11 is \$300.

12 (4) The fee for the renewal of a license for a resident
13 of Illinois shall be calculated at the rate of \$100 per
14 year, except for licensees who were issued a license within
15 12 months of the expiration date of the license, the fee
16 for the renewal shall be \$100. The fee for the renewal of a
17 license for a nonresident shall be calculated at the rate
18 of \$200 per year, except for licensees who were issued a
19 license within 12 months of the expiration date of the
20 license, the fee for the renewal shall be \$200.

21 (5) The fee for the restoration of a license other than
22 from inactive status, is \$100. In addition, payment of all
23 lapsed renewal fees not to exceed \$600 is required.

24 (6) The fee for a 3-year temporary license under
25 Section 17 is \$100.

26 (7) The fee for the issuance of a duplicate license,

1 for the issuance of a replacement license for a license
2 which has been lost or destroyed, or for the issuance of a
3 license with a change of name or address other than during
4 the renewal period is \$20. No fee is required for name and
5 address changes on Department records when no duplicate
6 license is issued.

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

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

13 (10) The fee to be paid by a licensee for a wall
14 certificate showing his or her license shall be the actual
15 cost of producing the certificate.

16 (11) The fee for a roster of persons licensed as
17 physicians in this State shall be the actual cost of
18 producing such a roster.

19 (F) Any person who delivers a check or other payment to the
20 Department that is returned to the Department unpaid by the
21 financial institution upon which it is drawn shall pay to the
22 Department, in addition to the amount already owed to the
23 Department, a fine of \$50. The fines imposed by this Section
24 are in addition to any other discipline provided under this Act
25 for unlicensed practice or practice on a nonrenewed license.
26 The Department shall notify the person that payment of fees and

1 fines shall be paid to the Department by certified check or
2 money order within 30 calendar days of the notification. If,
3 after the expiration of 30 days from the date of the
4 notification, the person has failed to submit the necessary
5 remittance, the Department shall automatically terminate the
6 license or certificate or deny the application, without
7 hearing. If, after termination or denial, the person seeks a
8 license or certificate, he or she shall apply to the Department
9 for restoration or issuance of the license or certificate and
10 pay all fees and fines due to the Department. The Department
11 may establish a fee for the processing of an application for
12 restoration of a license or certificate to pay all expenses of
13 processing this application. The Director may waive the fines
14 due under this Section in individual cases where the Director
15 finds that the fines would be unreasonable or unnecessarily
16 burdensome.

17 (Source: P.A. 91-239, eff. 1-1-00; 91-357, eff. 7-29-99; 92-16,
18 eff. 6-28-01; 92-146, eff. 1-1-02.)

19 (225 ILCS 60/24.1 rep.)

20 Section 95. The Medical Practice Act of 1987 is amended by
21 repealing Section 24.1.

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