### 98TH GENERAL ASSEMBLY

## State of Illinois

# 2013 and 2014

#### SB1168

Introduced 1/30/2013, by Sen. Iris Y. Martinez

### SYNOPSIS AS INTRODUCED:

See Index

Amends the Medical Practice Act of 1987. Provides for the licensure of naturopathic physicians. Makes conforming changes in various other Acts. Effective immediately.

LRB098 02689 MGM 32695 b

FISCAL NOTE ACT MAY APPLY

A BILL FOR

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AN ACT concerning regulation.

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

Section 1. <u>Findings.</u> The General Assembly finds that:

5 (1) Naturopathic medicine is not currently regulated 6 in Illinois, and needs to be on the principles of freedom 7 of choice in healthcare and consumer protection;

8 (2) Naturopathic physicians are trained alongside and 9 at the same standard as chiropractic physicians in 10 Illinois;

11 (3) Naturopathic medicine has a federally recognized 12 accreditation agency, the Council on Naturopathic Medical 13 Education, which makes identification of properly 14 credentialed individuals simple and straightforward;

(4) Naturopathic medicine has a common licensing
examination used across North America, the Naturopathic
Physicians Licensing Examinations (NPLEX); and

18 (5) Citizens of Illinois are obtaining the credentials 19 for naturopathic physicians but do not currently have a 20 legislative framework that allows them to practice in the 21 State.

Section 5. The Geriatric Medicine Assistance Act is amendedby changing Section 2 as follows:

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#### (20 ILCS 3945/2) (from Ch. 144, par. 2002)

Sec. 2. There is created the Geriatric Medicine Assistance 2 3 Commission. The Commission shall receive and approve 4 applications for grants from schools, recognized by the 5 Department of Professional Regulation as being authorized to 6 confer doctor of medicine, doctor of osteopathy, doctor of 7 chiropractic, doctor of naturopathic medicine, or registered 8 professional nursing degrees in the State, to help finance the 9 establishment of geriatric medicine programs within such 10 schools. In determining eligibility for grants, the Commission 11 shall give preference to those programs which exhibit the 12 greatest potential for directly benefiting the largest number 13 of elderly citizens in the State. The Commission may not 14 approve the application of any institution which is unable to 15 demonstrate its current financial stability and reasonable 16 prospects for future stability. No institution which fails to possess and maintain an open policy with respect to race, 17 creed, color and sex as to admission of students, appointment 18 of faculty and employment of staff shall be eligible for grants 19 20 under this Act. The Commission shall establish such rules and 21 standards as it deems necessary for the implementation of this 22 Act.

The Commission shall be composed of 8 members selected as follows: 2 physicians licensed to practice under the Medical Practice Act of 1987 and specializing in geriatric medicine; a

registered professional nurse licensed under 1 the Nurse 2 Practice Act and specializing in geriatric health care; 2 representatives of organizations interested in geriatric 3 medicine or the care of the elderly; and 3 individuals 60 or 4 5 older who are interested in geriatric health care or the care of the elderly. The members of the Commission shall be selected 6 7 by the Governor from a list of recommendations submitted to him 8 by organizations concerned with geriatric medicine or the care 9 of the elderly.

10 The terms of the members of the Commission shall be 4 11 years, except that of the members initially appointed, 2 shall 12 be designated to serve until January 1, 1986, 3 until January 13 1, 1988, and 2 until January 1, 1990. Members of the Commission 14 shall receive no compensation, but shall be reimbursed for 15 actual expenses incurred in carrying out their duties.

16 (Source: P.A. 95-639, eff. 10-5-07.)

Section 10. The School Code is amended by changing Sections 24-6 and 26-1 as follows:

19 (105 ILCS 5/24-6)

Sec. 24-6. Sick leave. The school boards of all school districts, including special charter districts, but not including school districts in municipalities of 500,000 or more, shall grant their full-time teachers, and also shall grant such of their other employees as are eligible to

SB1168

participate in the Illinois Municipal Retirement Fund under the 1 2 "600-Hour Standard" established, or under such other 3 eligibility participation standard as may from time to time be established, by rules and regulations now or hereafter 4 5 promulgated by the Board of that Fund under Section 7-198 of 6 the Illinois Pension Code, as now or hereafter amended, sick leave provisions not less in amount than 10 days at full pay in 7 8 each school year. If any such teacher or employee does not use 9 the full amount of annual leave thus allowed, the unused amount 10 shall be allowed to accumulate to a minimum available leave of 11 180 days at full pay, including the leave of the current year. 12 Sick leave shall be interpreted to mean personal illness, 13 quarantine at home, serious illness or death in the immediate 14 family or household, or birth, adoption, or placement for 15 adoption. The school board may require a certificate from a 16 physician licensed in Illinois to practice medicine and surgery 17 in all its branches, a chiropractic physician or naturopathic physician licensed under the Medical Practice Act of 1987, an 18 19 advanced practice nurse who has a written collaborative 20 agreement with a collaborating physician that authorizes the advanced practice nurse to perform health examinations, a 21 22 physician assistant who has been delegated the authority to 23 perform health examinations by his or her supervising 24 physician, or, if the treatment is by prayer or spiritual 25 means, a spiritual adviser or practitioner of the teacher's or employee's faith as a basis for pay during leave after an 26

- 5 - LRB098 02689 MGM 32695 b

absence of 3 days for personal illness or 30 days for birth or 1 2 as the school board may deem necessary in other cases. If the school board does require a certificate as a basis for pay 3 during leave of less than 3 days for personal illness, the 4 5 school board shall pay, from school funds, the expenses incurred by the teachers or other employees in obtaining the 6 certificate. For paid leave for adoption or placement for 7 8 adoption, the school board may require that the teacher or 9 other employee provide evidence that the formal adoption 10 process is underway, and such leave is limited to 30 days 11 unless a longer leave has been negotiated with the exclusive 12 bargaining representative.

13 If, by reason of any change in the boundaries of school 14 districts, or by reason of the creation of a new school 15 district, the employment of a teacher is transferred to a new 16 or different board, the accumulated sick leave of such teacher 17 is not thereby lost, but is transferred to such new or 18 different district.

For purposes of this Section, "immediate family" shall include parents, spouse, brothers, sisters, children, grandparents, grandchildren, parents-in-law, brothers-in-law, sisters-in-law, and legal guardians.

23 (Source: P.A. 95-151, eff. 8-14-07; 96-51, eff. 7-23-09;
24 96-367, eff. 8-13-09; 96-1000, eff. 7-2-10.)

25 (105 ILCS 5/26-1) (from Ch. 122, par. 26-1)

SB1168

- 6 - LRB098 02689 MGM 32695 b

Sec. 26-1. Compulsory school age-Exemptions. Whoever has 1 2 custody or control of any child between the ages of 7 and 17 3 years (unless the child has already graduated from high school) shall cause such child to attend some public school in the 4 district wherein the child resides the entire time it is in 5 session during the regular school term, except as provided in 6 7 Section 10-19.1, and during a required summer school program established under Section 10-22.33B; provided, 8 that the 9 following children shall not be required to attend the public 10 schools:

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1. Any child attending a private or a parochial school where children are taught the branches of education taught to children of corresponding age and grade in the public schools, and where the instruction of the child in the branches of education is in the English language;

16 2. Any child who is physically or mentally unable to 17 attend school, such disability being certified to the county or district truant officer by a competent physician 18 19 licensed in Illinois to practice medicine and surgery in 20 all its branches, a chiropractic physician or naturopathic 21 physician licensed under the Medical Practice Act of 1987, 22 an advanced practice nurse who has a written collaborative 23 agreement with a collaborating physician that authorizes 24 advanced practice nurse to perform health the 25 examinations, a physician assistant who has been delegated 26 the authority to perform health examinations by his or her

SB1168

supervising physician, or a Christian Science practitioner 1 2 residing in this State and listed in the Christian Science 3 Journal; or who is excused for temporary absence for cause by the principal or teacher of the school which the child 4 5 attends; the exemptions in this paragraph (2) do not apply 6 to any female who is pregnant or the mother of one or more 7 children, except where a female is unable to attend school 8 due to a complication arising from her pregnancy and the 9 existence of such complication is certified to the county 10 or district truant officer by a competent physician;

11 3. Any child necessarily and lawfully employed 12 according to the provisions of the law regulating child labor may be excused from attendance at school by the 13 14 county superintendent of schools or the superintendent of 15 the public school which the child should be attending, on 16 certification of the facts by and the recommendation of the 17 school board of the public school district in which the child resides. In districts having part time continuation 18 19 schools, children so excused shall attend such schools at 20 least 8 hours each week;

4. Any child over 12 and under 14 years of age while in
attendance at confirmation classes;

5. Any child absent from a public school on a particular day or days or at a particular time of day for the reason that he is unable to attend classes or to participate in any examination, study or work requirements

1 on a particular day or days or at a particular time of day, 2 because the tenets of his religion forbid secular activity 3 on a particular day or days or at a particular time of day. Each school board shall prescribe rules and regulations 4 5 relative to absences for religious holidays including, but 6 not limited to, a list of religious holidays on which it 7 shall be mandatory to excuse a child; but nothing in this 8 paragraph 5 shall be construed to limit the right of any 9 school board, at its discretion, to excuse an absence on 10 any other day by reason of the observance of a religious 11 holiday. A school board may require the parent or guardian 12 of a child who is to be excused from attending school due to the observance of a religious holiday to give notice, 13 14 not exceeding 5 days, of the child's absence to the school 15 principal or other school personnel. Any child excused from 16 attending school under this paragraph 5 shall not be 17 required to submit a written excuse for such absence after 18 returning to school; and

19 6. Any child 16 years of age or older who (i) submits 20 to a school district evidence of necessary and lawful 21 employment pursuant to paragraph 3 of this Section and (ii) 22 is enrolled in a graduation incentives program pursuant to 23 Section 26-16 of this Code or an alternative learning 24 opportunities program established pursuant to Article 13B 25 of this Code.

26 (Source: P.A. 96-367, eff. 8-13-09.)

Section 15. The Illinois Insurance Code is amended by
 changing Section 122-1 as follows:

3 (215 ILCS 5/122-1) (from Ch. 73, par. 734-1)

Sec. 122-1. The authority and jurisdiction of Insurance 4 5 Department. Notwithstanding any other provision of law, and 6 except as provided herein, any person or other entity which 7 provides coverage in this State for medical, surgical, 8 chiropractic, <u>naturopathic</u>, naprapathic, physical therapy, 9 speech pathology, audiology, professional mental health, 10 dental, hospital, ophthalmologic, or optometric expenses, 11 whether such coverage is by direct-payment, reimbursement, or otherwise, shall be presumed to be subject to the jurisdiction 12 13 of the Department unless the person or other entity shows that 14 while providing such coverage it is subject to the jurisdiction 15 of another agency of this State, any subdivision of this State, or the federal government, or is a plan of self-insurance or 16 17 other employee welfare benefit program of an individual employer or labor union established or maintained under or 18 pursuant to a collective bargaining agreement 19 or other 20 arrangement which provides for health care services solely for 21 its employees or members and their dependents.

22 (Source: P.A. 90-7, eff. 6-10-97.)

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Section 20. The Medical Practice Act of 1987 is amended by

	SB1168 - 10 - LRB098 02689 MGM 32695 b
1	changing Sections 2, 7, 8, 9, 10, 11, 14, 15, 16, 17, 18, 19,
2	22, 24, 33, and 34 as follows:
3	(225 ILCS 60/2) (from Ch. 111, par. 4400-2)
4	(Section scheduled to be repealed on December 31, 2013)
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
0	by the Department in the applicant's or licensee's application
.1	file or license file as maintained by the Department's
2	licensure maintenance unit. It is the duty of the applicant or
3	licensee to inform the Department of any change of address and
4	those changes must be made either through the Department's
5	website or by contacting the Department.
6	"Approved naturopathic medical program" means a
7	naturopathic medical education program accredited or granted
8	candidacy status by the United States Council on Naturopathic
9	Medical Education, or an equivalent federally recognized
20	accrediting body for the naturopathic medical profession

1( 2( recognized by the Board, that offers graduate-level, full-time, didactic, and supervised clinical training of at least 4,200 hours in length leading to the degree of Doctor of Naturopathy or Doctor of Naturopathic Medicine and is part of an institution of higher education that is either accredited or <u>is a candidate for accreditation by a regional institutional</u>
 <u>accrediting agency recognized by the United States Secretary of</u>
 Education or eligible for student loans in Canada.

4 "Chiropractic physician" means a person licensed to treat 5 human ailments without the use of drugs and without operative 6 surgery. Nothing in this Act shall be construed to prohibit a 7 chiropractic physician from providing advice regarding the use 8 of non-prescription products or from administering atmospheric 9 oxygen. Nothing in this Act shall be construed to authorize a 10 chiropractic physician to prescribe drugs.

11 "Department" means the Department of Financial and 12 Professional Regulation.

13 "Disciplinary Action" means revocation, suspension, 14 probation, supervision, practice modification, reprimand, 15 required education, fines or any other action taken by the 16 Department against a person holding a license.

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

25 "Impaired" means the inability to practice medicine with 26 reasonable skill and safety due to physical or mental

"Fund" means the Medical Disciplinary Fund.

SB1168

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disabilities as evidenced by a written determination or written consent based on clinical evidence including deterioration through the aging process or loss of motor skill, or abuse of drugs or alcohol, of sufficient degree to diminish a person's ability to deliver competent patient care.

"Licensing Board" means the Medical Licensing Board.

7 "Naturopathic physician" means a practitioner of naturopathic medicine who has been properly licensed for that 8 9 purpose by the Department under this Act. "Naturopathic physician" includes all titles and designations associated 10 11 with the practice of naturopathic medicine, including, "doctor 12 of naturopathic medicine", "doctor of naturopathy", "naturopathic doctor", "naturopath", "naturopathic medical 13 doctor", "N.D.", "ND", "N.M.D.", and "NMD". 14

15 "Physician" means a person licensed under the Medical 16 Practice Act to practice medicine in all of its branches, a 17 <u>naturopathic physician</u>, or a chiropractic physician.

18 "Professional Association" means an association or society 19 of persons licensed under this Act, and operating within the 20 State of Illinois, including but not limited to, medical 21 societies, osteopathic organizations, <u>naturopathic</u> 22 <u>organizations</u>, and chiropractic organizations, but this term 23 shall not be deemed to include hospital medical staffs.

24 "Program of Care, Counseling, or Treatment" means a written
25 schedule of organized treatment, care, counseling, activities,
26 or education, satisfactory to the Disciplinary Board, designed

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1 for the purpose of restoring an impaired person to a condition 2 whereby the impaired person can practice medicine with 3 reasonable skill and safety of a sufficient degree to deliver 4 competent patient care.

5 "Secretary" means the Secretary of the Department of6 Financial and Professional Regulation.

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

8 (225 ILCS 60/7) (from Ch. 111, par. 4400-7)

9 (Section scheduled to be repealed on December 31, 2013)
10 Sec. 7. Medical Disciplinary Board.

11 (A) There is hereby created the Illinois State Medical 12 Disciplinary Board. The Disciplinary Board shall consist of 12 11 members, to be appointed by the Governor by and with the 13 advice and consent of the Senate. All members shall be 14 15 residents of the State, not more than 7  $\frac{6}{5}$  of whom shall be 16 members of the same political party. All members shall be voting members. Five members shall be physicians licensed to 17 practice medicine in all of its branches in Illinois possessing 18 the degree of doctor of medicine. One member shall be a 19 20 physician licensed to practice medicine in all its branches in 21 Illinois possessing the degree of doctor of osteopathy or 22 osteopathic medicine. One member shall be a chiropractic physician licensed to practice in Illinois and possessing the 23 24 degree of doctor of chiropractic. One member shall be a naturopathic physician licensed to practice in Illinois and 25

possessing the degree of naturopathic medicine. Four members
shall be members of the public, who shall not be engaged in any
way, directly or indirectly, as providers of health care.

(B) Members of the Disciplinary Board shall be appointed 4 5 for terms of 4 years. Upon the expiration of the term of any member, their successor shall be appointed for a term of 4 6 7 years by the Governor by and with the advice and consent of the 8 Senate. The Governor shall fill any vacancy for the remainder 9 of the unexpired term with the advice and consent of the 10 Senate. Upon recommendation of the Board, any member of the 11 Disciplinary Board may be removed by the Governor for 12 misfeasance, malfeasance, or wilful neglect of duty, after notice, and a public hearing, unless such notice and hearing 13 14 shall be expressly waived in writing. Each member shall serve 15 on the Disciplinary Board until their successor is appointed 16 and qualified. No member of the Disciplinary Board shall serve 17 more than 2 consecutive 4 year terms.

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

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

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(C) The Disciplinary Board shall annually elect one of its

SB1168

voting members as chairperson and one as vice chairperson. No
officer shall be elected more than twice in succession to the
same office. Each officer shall serve until their successor has
been elected and qualified.

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(D) (Blank).

SB1168

(E) Six voting members of the Disciplinary Board, at least 6 7 4 of whom are physicians, shall constitute a quorum. A vacancy 8 in the membership of the Disciplinary Board shall not impair 9 the right of a quorum to exercise all the rights and perform 10 all the duties of the Disciplinary Board. Any action taken by 11 the Disciplinary Board under this Act may be authorized by 12 resolution at any regular or special meeting and each such 13 resolution shall take effect immediately. The Disciplinary 14 Board shall meet at least quarterly. The Disciplinary Board is 15 empowered to adopt all rules and regulations necessary and 16 incident to the powers granted to it under this Act.

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

(G) The Secretary shall select a Chief Medical Coordinator and not less than 2 Deputy Medical Coordinators who shall not be members of the Disciplinary Board. Each medical coordinator shall be a physician licensed to practice medicine in all of its branches, and the Secretary shall set their rates of compensation. The Secretary shall assign at least one medical

coordinator to a region composed of Cook County and such other 1 2 counties as the Secretary may deem appropriate, and such medical coordinator or coordinators shall locate their office 3 in Chicago. The Secretary shall assign at least one medical 4 5 coordinator to a region composed of the balance of counties in the State, and such medical coordinator or coordinators shall 6 7 locate their office in Springfield. Each medical coordinator shall be the chief enforcement officer of this Act in his or 8 9 her assigned region and shall serve at the will of the 10 Disciplinary Board.

11 The Secretary shall employ, in conformity with the 12 Personnel Code, investigators who are college graduates with at least 2 years of investigative experience or one year of 13 14 advanced medical education. Upon the written request of the 15 Disciplinary Board, the Secretary shall employ, in conformity 16 with the Personnel Code, such other professional, technical, 17 investigative, and clerical help, either on a full or part-time basis as the Disciplinary Board deems necessary for the proper 18 19 performance of its duties.

20 (H) Upon the specific request of the Disciplinary Board, signed by either the chairperson, vice chairperson, or a 21 22 medical coordinator of the Disciplinary Board, the Department 23 of Human Services or the Department of State Police shall make available any and all information that they have in their 24 25 possession regarding а particular case then under 26 investigation by the Disciplinary Board.

SB1168

1 (I) Members of the Disciplinary Board shall be immune from 2 suit in any action based upon any disciplinary proceedings or 3 other acts performed in good faith as members of the 4 Disciplinary Board.

5 (J) The Disciplinary Board may compile and establish a 6 statewide roster of physicians and other medical 7 professionals, including the several medical specialties, of 8 such physicians and medical professionals, who have agreed to 9 serve from time to time as advisors to the medical 10 coordinators. Such advisors shall assist the medical 11 coordinators or the Disciplinary Board in their investigations 12 and participation in complaints against physicians. Such advisors shall serve under contract and shall be reimbursed at 13 14 a reasonable rate for the services provided, plus reasonable 15 expenses incurred. While serving in this capacity, the advisor, 16 for any act undertaken in good faith and in the conduct of his 17 or her duties under this Section, shall be immune from civil 18 suit.

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

20 (225 ILCS 60/8) (from Ch. 111, par. 4400-8)

21 (Section scheduled to be repealed on December 31, 2013)

22 Sec. 8. Medical Licensing Board.

(A) There is hereby created a Medical Licensing Board. The
Licensing Board shall be composed of 7 members, to be appointed
by the Governor by and with the advice and consent of the

Senate; 5 of whom shall be reputable physicians licensed to 1 2 practice medicine in all of its branches in Illinois, possessing the degree of doctor of medicine; one member shall 3 be a reputable physician licensed in Illinois to practice 4 5 medicine in all of its branches, possessing the degree of 6 doctor of osteopathy or osteopathic medicine; one member shall 7 be a reputable naturopathic physician licensed to practice in Illinois and possessing the degree of doctor of naturopathic 8 9 medicine; and one member shall be a reputable chiropractic 10 physician licensed to practice in Illinois and possessing the 11 degree of doctor of chiropractic. Of the 5 members holding the 12 degree of doctor of medicine, one shall be a full-time or 13 teacher of professorial rank in part-time the clinical department of an Illinois school of medicine. 14

15 (B) Members of the Licensing Board shall be appointed for 16 terms of 4 years, and until their successors are appointed and 17 qualified. Appointments to fill vacancies shall be made in the same manner as original appointments, for the unexpired portion 18 of the vacated term. No more than 4 members of the Licensing 19 20 Board shall be members of the same political party and all members shall be residents of this State. No member of the 21 22 Licensing Board may be appointed to more than 2 successive 4 23 vear terms.

(C) Members of the Licensing Board shall be immune from suit in any action based upon any licensing proceedings or other acts performed in good faith as members of the Licensing

- 1 Board.
- 2 (D) (Blank).

3 (E) The Licensing Board shall annually elect one of its 4 members as chairperson and one as vice chairperson. No member 5 shall be elected more than twice in succession to the same 6 office. Each officer shall serve until his or her successor has 7 been elected and qualified.

8 (F) None of the functions, powers or duties of the 9 Department with respect to policies regarding licensure and 10 examination under this Act, including the promulgation of such 11 rules as may be necessary for the administration of this Act, 12 shall be exercised by the Department except upon review of the 13 Licensing Board.

14 (G) The Licensing Board shall receive the same compensation 15 as the members of the Disciplinary Board, which compensation 16 shall be paid out of the Illinois State Medical Disciplinary 17 Fund.

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

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

20 (Section scheduled to be repealed on December 31, 2013)

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

(A) Make application on blank forms prepared andfurnished by the Department.

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(B) Submit evidence satisfactory to the Department

1 that the applicant:

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

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

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(3) (blank); and

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

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

11 In determining professional capacity under this 12 Section, an individual may be required to complete such 13 additional testing, training, or remedial education as the 14 Licensing Board may deem necessary in order to establish 15 the applicant's present capacity to practice medicine with 16 reasonable judgment, skill, and safety. The Licensing 17 Board may consider the following criteria, as they relate applicant, as part of its determination of 18 to an 19 professional capacity:

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

(2) Specialized training or education.

24 (3) Publication of original work in learned,
25 medical, or scientific journals.

(4) Participation in federal, State, local, or

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international public health programs or organizations.

2 3 (5) Professional service in a federal veterans or military institution.

4 (6) Any other professional activities deemed to 5 maintain and enhance the clinical capabilities of the 6 applicant.

7 Any applicant applying for a license to practice 8 medicine in all of its branches<u>, for a license as a</u> 9 <u>naturopathic physician</u>, or for a license as a chiropractic 10 physician who has not been engaged in the active practice 11 of medicine or has not been enrolled in a medical program 12 for 2 years prior to application must submit proof of 13 professional capacity to the Licensing Board.

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

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

(D) Pay to the Department at the time of applicationthe required fees.

(E) Pursuant to Department rules, as required, pass an
 examination authorized by the Department to determine the

SB1168 - 23 - LRB098 02689 MGM 32695 b

1 applicant's fitness to receive a license.

2 (F) Complete the application process within 3 years 3 from the date of application. If the process has not been 4 completed within 3 years, the application shall expire, 5 application fees shall be forfeited, and the applicant must 6 reapply and meet the requirements in effect at the time of 7 reapplication.

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

9 (225 ILCS 60/10) (from Ch. 111, par. 4400-10)

10 (Section scheduled to be repealed on December 31, 2013)

11 Sec. 10. The Department shall:

12 (A) Make rules for establishing reasonable minimum
13 standards of educational requirements to be observed by
14 medical, osteopathic, naturopathic, and chiropractic colleges;

(B) Effectuate the policy of the State of Illinois that the quality of medical training is an appropriate concern in the recruiting, licensing, credentialing and participation in residency programs of physicians. However, it is inappropriate to discriminate against any physician because of national origin or geographic location of medical education;

21 (C) Formulate rules and regulations required for the22 administration of this Act.

23 (Source: P.A. 86-573.)

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

(Section scheduled to be repealed on December 31, 2013) 1 2 Minimum education standards. The Sec. 11. minimum 3 standards of professional education to be enforced by the Department in conducting examinations and issuing licenses 4 5 shall be as follows: (A) Practice of medicine. For the practice of medicine 6 7 in all of its branches: 8 (1)For applications for licensure under 9 subsection (D) of Section 19 of this Act: 10 (a) that the applicant is a graduate of a 11 medical or osteopathic college in the United 12 States, its territories or Canada, that the 13 applicant has completed a 2 year course of 14 instruction in a college of liberal arts, or its 15 equivalent, and a course of instruction in a 16 medical or osteopathic college approved by the 17 Department or by a private, not for profit accrediting body approved by the Department, and 18 in addition thereto, a course of postgraduate 19 20 clinical training of not less than 12 months as 21 approved by the Department; or

22 (b) that the applicant is a graduate of a 23 medical or osteopathic college located outside the 24 United States, its territories or Canada, and that 25 the degree conferred is officially recognized by 26 the country for the purposes of licensure, that the - 25 - LRB098 02689 MGM 32695 b

applicant has completed a 2 year course 1 of 2 instruction in a college of liberal arts or its 3 equivalent, and a course of instruction in a medical or osteopathic college approved by the 4 5 Department, which course shall have been not less than 132 weeks in duration and shall have been 6 completed within a period of not less than 35 7 8 months, and, in addition thereto, has completed a 9 course of postgraduate clinical training of not 10 less than 12 months, as approved by the Department, 11 and has complied with any other standards 12 established by rule.

13 For the purposes of this subparagraph (b) an 14 applicant is considered to be a graduate of a 15 medical college if the degree which is conferred is 16 officially recognized by that country for the 17 purposes of receiving a license to practice medicine in all of its branches or a document is 18 19 granted by the medical college which certifies the 20 completion of all formal training requirements 21 including any internship and social service; or

(c) that the applicant has studied medicine at
a medical or osteopathic college located outside
the United States, its territories, or Canada,
that the applicant has completed a 2 year course of
instruction in a college of liberal arts or its

equivalent and all of the formal requirements of a 1 2 foreign medical school except internship and 3 social service, which course shall have been not less than 132 weeks in duration and shall have been 4 5 completed within a period of not less than 35 6 months; that the applicant has submitted an 7 application to a medical college accredited by the 8 Liaison Committee on Medical Education and 9 submitted to such evaluation procedures, including 10 use of nationally recognized medical student tests 11 tests devised by the individual medical or 12 college, and that the applicant has satisfactorily 13 completed one academic year of supervised clinical 14 training under the direction of such medical 15 college; and, in addition thereto has completed a 16 course of postgraduate clinical training of not 17 less than 12 months, as approved by the Department, complied with 18 has any other standards and 19 established by rule.

20(d) Any clinical clerkships must have been21completed in compliance with Section 10.3 of the22Hospital Licensing Act, as amended.

(2) Effective January 1, 1988, for applications
for licensure made subsequent to January 1, 1988, under
Sections 9 or 17 of this Act by individuals not
described in paragraph (3) of subsection (A) of Section

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#### 11 who graduated after December 31, 1984:

(a) that the applicant: (i) graduated from a 2 3 medical osteopathic college officially or recognized by the jurisdiction in which it is 4 located for the purpose of receiving a license to 5 practice medicine in all of its branches, and the 6 7 applicant has completed, as defined by the 8 Department, a 6 year postsecondary course of study 9 comprising at least 2 academic years of study in 10 the basic medical sciences; and 2 academic years of study in the clinical sciences, while enrolled in 11 12 the medical college which conferred the degree, 13 core rotations of which must have been the 14 completed in clinical teaching facilities owned, 15 operated or formally affiliated with the medical 16 college which conferred the degree, or under 17 contract in teaching facilities owned, operated or affiliated with another medical college which is 18 19 officially recognized by the jurisdiction in which 20 the medical school which conferred the degree is 21 located; or (ii) graduated from a medical or 22 osteopathic college accredited by the Liaison 23 Committee on Medical Education, the Committee on Accreditation of Canadian Medical 24 Schools in 25 conjunction with the Liaison Committee on Medical 26 Education, or the Bureau of Professional Education 1

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of the American Osteopathic Association; and, (iii) in addition thereto, has completed 24 months of postgraduate clinical training, as approved by the Department; or

5 (b) that the applicant has studied medicine at 6 a medical or osteopathic college located outside 7 the United States, its territories, or Canada, 8 that the applicant, in addition to satisfying the 9 requirements of subparagraph (a), except for the 10 awarding of a degree, has completed all of the 11 formal requirements of a foreign medical school 12 except internship and social service and has 13 submitted an application to a medical college 14 accredited by the Liaison Committee on Medical 15 Education and submitted to such evaluation 16 procedures, including use of nationally recognized 17 medical student tests or tests devised by the 18 individual medical college, and that the applicant 19 has satisfactorily completed one academic year of 20 supervised clinical training under the direction 21 of such medical college; and, in addition thereto, 22 has completed 24 months of postgraduate clinical 23 training, as approved by the Department, and has 24 complied with any other standards established by 25 rule.

26 (3) (Blank).

1 (4) person granted a temporary license Anv 2 Section 17 of this Act who pursuant to shall 3 satisfactorily complete a course of postgraduate clinical training and meet all of the requirements for 4 5 licensure shall be granted a permanent license 6 pursuant to Section 9.

7 (5) Notwithstanding any other provision of this 8 Section an individual holding a temporary license 9 under Section 17 of this Act shall be required to 10 satisfy the undergraduate medical and post-graduate 11 clinical training educational requirements in effect 12 on the date of their application for a temporary 13 license, provided they apply for a license under 14 Section 9 of this Act and satisfy all other 15 requirements of this Section while their temporary 16 license is in effect.

17 (B) Treating human ailments without drugs and without 18 operative surgery. For the practice of treating human 19 ailments without the use of drugs and without operative 20 surgery:

(1) For an applicant who was a resident student and
who is a graduate after July 1, 1926, of a chiropractic
college or institution, that such school, college or
institution, at the time of the applicant's graduation
required as a prerequisite to admission thereto a 4
year course of instruction in a high school, and, as a

prerequisite to graduation therefrom, a course of 1 2 instruction in the treatment of human ailments, of not less than 132 weeks in duration and which shall have 3 been completed within a period of not less than 35 4 5 months except that as to students matriculating or entering upon a course of chiropractic study during the 6 7 years 1940, 1941, 1942, 1943, 1944, 1945, 1946, and 8 1947, such elapsed time shall be not less than 32 9 months, such high school and such school, college or 10 institution having been reputable and in good standing 11 in the judgment of the Department.

SB1168

12 (2) For an applicant who is a matriculant in a 13 chiropractic college after September 1, 1969, that 14 such applicant shall be required to complete a 2 year 15 course of instruction in a liberal arts college or its 16 equivalent and а course of instruction in а 17 chiropractic college in the treatment of human ailments, such course, as a prerequisite to graduation 18 19 therefrom, having been not less than 132 weeks in 20 duration and shall have been completed within a period of not less than 35 months, such college of liberal 21 22 arts and chiropractic college having been reputable 23 and in good standing in the judgment of the Department.

(3) For an applicant who is a graduate of a United
States chiropractic college after August 19, 1981, the
college of the applicant must be fully accredited by

1 the Commission on Accreditation of the Council on 2 Chiropractic Education or its successor at the time of 3 graduation. Such graduates shall be considered to have 4 met the minimum requirements which shall be in addition 5 to those requirements set forth in the rules and 6 regulations promulgated by the Department.

7 (4) For an applicant who is a graduate of a
8 chiropractic college in another country; that such
9 chiropractic college be equivalent to the standards of
10 education as set forth for chiropractic colleges
11 located in the United States.

12 <u>(C) Practice of naturopathic medicine. For the</u> 13 <u>practice of naturopathic medicine:</u>

14(1) For an applicant who is a graduate of an15approved naturopathic medical program, in accordance16with this Act, that he or she has successfully17completed a competency-based national naturopathic18licensing examination administered by the North19American Board of Naturopathic Examiners or an20equivalent agency, as recognized by the Department.

21 <u>(2) For an applicant who is a graduate of a</u> 22 <u>degree-granting approved naturopathic medical program</u> 23 <u>prior to 1986, evidence of successful passage of a</u> 24 <u>State competency examination in a licensed state or a</u> 25 <u>Canadian provincial examination in a licensed or</u> 26 <u>regulated province approved by the Department in lieu</u>

#### - 32 - LRB098 02689 MGM 32695 b

<u>of passage of a national licensing examination.</u>
 (Source: P.A. 97-622, eff. 11-23-11.)

3 (225 ILCS 60/14) (from Ch. 111, par. 4400-14)
4 (Section scheduled to be repealed on December 31, 2013)
5 Sec. 14. Chiropractic students <u>and naturopathic medicine</u>
6 <u>students</u>.

7 <u>(a)</u> Candidates for the degree of doctor of chiropractic 8 enrolled in a chiropractic college, accredited by the Council 9 on Chiropractic Education, may practice under the direct, 10 on-premises supervision of a chiropractic physician who is a 11 member of the faculty of an accredited chiropractic college.

12 (b) Candidates for the degree of doctor of naturopathic 13 medicine enrolled in a naturopathic college, accredited by the 14 United States Council on Naturopathic Medical Education, may 15 practice under the direct, on-premises supervision of a 16 naturopathic physician who is a member of the faculty of an 17 accredited naturopathic college.

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

19 (225 ILCS 60/15) (from Ch. 111, par. 4400-15)

20 (Section scheduled to be repealed on December 31, 2013)

Sec. 15. Chiropractic <u>and naturopathic</u> physician; license for general practice. Any chiropractic <u>or naturopathic</u> physician licensed under this Act shall be permitted to take the examination for licensure as a physician to practice

1 medicine in all its branches and shall receive a license to 2 practice medicine in all of its branches if he or she shall 3 successfully pass such examination, upon proof of having successfully completed in a medical college, osteopathic 4 5 college, naturopathic college, or chiropractic college 6 reputable and in good standing in the judgment of the 7 Department, courses of instruction in materia medica, 8 therapeutics, surgery, obstetrics, and theory and practice 9 deemed by the Department to be equal to the courses of 10 instruction required in those subjects for admission to the 11 examination for a license to practice medicine in all of its 12 branches, together with proof of having completed (a) the 2 13 year course of instruction in a college of liberal arts, or its 14 equivalent, required under this Act, and (b) a course of postgraduate clinical training of not less than 24 months as 15 16 approved by the Department.

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

18 (225 ILCS 60/16) (from Ch. 111, par. 4400-16)

19 (Section scheduled to be repealed on December 31, 2013)

Sec. 16. Ineligibility for examination. Any person who shall fail any examination for licensure as a medical doctor, doctor of osteopathy or osteopathic medicine, <u>doctor of</u> <u>naturopathic medicine</u>, or doctor of chiropractic in this or any other jurisdiction a total of 5 times shall thereafter be ineligible for further examinations until such time as such 1 person shall submit to the Department evidence of further 2 formal professional study, as required by rule of the 3 Department, in an accredited institution.

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

SB1168

5 (225 ILCS 60/17) (from Ch. 111, par. 4400-17)

6 (Section scheduled to be repealed on December 31, 2013)

7 Sec. 17. Temporary license. Persons holding the degree of 8 Doctor of Medicine, persons holding the degree of Doctor of 9 Osteopathy or Doctor of Osteopathic Medicine, persons holding 10 the degree of Doctor of Naturopathic Medicine, and persons 11 holding the degree of Doctor of Chiropractic or persons who 12 have satisfied the requirements therefor and are eligible to 13 receive such degree from a medical, osteopathic, naturopathic, 14 or chiropractic school, who wish to pursue programs of graduate 15 specialty training in this State, may receive without or 16 examination, in the discretion of the Department, a 3-year temporary license. In order to receive a 3-year temporary 17 18 license hereunder, an applicant shall submit evidence 19 satisfactory to the Department that the applicant:

20 (A) Is of good moral character. In determining moral 21 character under this Section, the Department may take into 22 consideration whether the applicant has engaged in conduct would 23 activities which constitute grounds for or 24 discipline under this Act. The Department may also request 25 the applicant to submit, and may consider as evidence of

1 moral character, endorsements from 2 or 3 individuals
2 licensed under this Act;

(B) Has been accepted or appointed for specialty or 3 residency training by a hospital situated in this State or 4 5 a training program in hospitals or facilities maintained by the State of Illinois or affiliated training facilities 6 7 which is approved by the Department for the purpose of such 8 training under this Act. The applicant shall indicate the 9 beginning and ending dates of the period for which the 10 applicant has been accepted or appointed;

11 (C) Has or will satisfy the professional education 12 requirements of Section 11 of this Act which are effective 13 at the date of application except for postgraduate clinical 14 training;

physically, mentally, and professionally 15 (D) Is 16 capable of practicing medicine or treating human ailments 17 without the use of drugs and without operative surgery with reasonable judgment, skill, and safety. In determining 18 19 physical, mental and professional capacity under this 20 Section, the Licensing Board may, upon a showing of a 21 possible incapacity, compel an applicant to submit to a 22 mental or physical examination and evaluation, or both, and 23 may condition or restrict any temporary license, subject to 24 the same terms and conditions as are provided for the 25 Disciplinary Board under Section 22 of this Act. Any such 26 condition of restricted temporary license shall provide

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

9 Three-year temporary licenses issued pursuant to this 10 Section shall be valid only for the period of time designated 11 therein, and may be extended or renewed pursuant to the rules 12 of the Department, and if a temporary license is thereafter 13 it shall not extend beyond completion of the extended, residency program. The holder of a valid 3-year temporary 14 15 license shall be entitled thereby to perform only such acts as 16 may be prescribed by and incidental to his or her program of 17 residency training; he or she shall not be entitled to otherwise engage in the practice of medicine in this State 18 unless fully licensed in this State. 19

A 3-year temporary license may be revoked by the Department upon proof that the holder thereof has engaged in the practice of medicine in this State outside of the program of his or her residency or specialty training, or if the holder shall fail to supply the Department, within 10 days of its request, with information as to his or her current status and activities in his or her specialty training program.

SB1168 - 37 - LRB098 02689 MGM 32695 b (Source: P.A. 97-622, eff. 11-23-11.)

2 (225 ILCS 60/18) (from Ch. 111, par. 4400-18)
3 (Section scheduled to be repealed on December 31, 2013)
4 Sec. 18. Visiting professor, physician, or resident
5 permits.

(A) Visiting professor permit.

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

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

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

(c) the Department may prescribe the information
necessary to establish an applicant's eligibility for
a permit. This information shall include without
limitation (i) a statement from the dean of the medical
school at which the applicant will be employed

describing the applicant's qualifications and (ii) a statement from the dean of the medical school listing every affiliated institution in which the applicant will be providing instruction as part of the medical school's education program and justifying any clinical activities at each of the institutions listed by the dean.

8 (2) Application for visiting professor permits shall 9 be made to the Department, in writing, on forms prescribed 10 by the Department and shall be accompanied by the required 11 fee established by rule, which shall not be refundable. Any 12 application shall require the information as, in the 13 judgment of the Department, will enable the Department to 14 pass on the qualifications of the applicant.

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

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

(5) Persons holding a permit under this Section shall
 only practice medicine in all of its branches or practice
 the treatment of human ailments without the use of drugs

and without operative surgery in the State of Illinois in their official capacity under their contract within the medical school itself and any affiliated institution in which the permit holder is providing instruction as part of the medical school's educational program and for which the medical school has assumed direct responsibility.

7 (6) After the initial renewal of a visiting professor
8 permit, a visiting professor permit shall be valid until
9 the last day of the next physician license renewal period,
10 as set by rule, and may only be renewed for applicants who
11 meet the following requirements:

12 (i) have obtained the required continuing13 education hours as set by rule; and

14 (ii) have paid the fee prescribed for a license15 under Section 21 of this Act.

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

21 (B) Visiting physician permit.

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

25 (a) (blank);

1 (b) that the person maintains an equivalent 2 authorization to practice medicine in all of its 3 branches or to practice the treatment of human ailments 4 without the use of drugs and without operative surgery 5 in good standing in his or her native licensing 6 jurisdiction during the period of the temporary 7 visiting physician permit;

8 (c) that the person has received an invitation or 9 appointment to study, demonstrate, or perform a 10 specific medical, osteopathic, naturopathic, 11 chiropractic or clinical subject or technique in a 12 medical, osteopathic, naturopathic, or chiropractic 13 school, a state or national medical, osteopathic, 14 naturopathic, or chiropractic professional association 15 or society conference or meeting, a hospital licensed 16 under the Hospital Licensing Act, a hospital organized 17 under the University of Illinois Hospital Act, or a facility operated pursuant to the Ambulatory Surgical 18 19 Treatment Center Act; and

(d) that the temporary visiting physician permit shall only permit the holder to practice medicine in all of its branches or practice the treatment of human ailments without the use of drugs and without operative surgery within the scope of the medical, osteopathic, <u>naturopathic,</u> chiropractic, or clinical studies, or in conjunction with the state or national medical,

the

1 osteopathic, naturopathic, chiropractic or 2 professional association or society conference or meeting, for which the holder was invited or appointed. 3 application for the temporary visiting 4 (2)The 5 physician 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, 8 which shall not be refundable. The application shall 9 information that, in the judgment of require 10 Department, will enable the Department to pass on the

12 granting of a temporary visiting physician permit. 13 (3) A temporary visiting physician permit shall be 14 valid for no longer than (i) 180 days from the date of 15 issuance or (ii) until the time the medical, osteopathic, 16 naturopathic, chiropractic, or clinical studies are 17 completed, or the state or national medical, osteopathic, naturopathic, or chiropractic professional association or 18 19 society conference or meeting has concluded, whichever 20 occurs first.

qualification of the applicant, and the necessity for the

21 (4) The applicant for a temporary visiting physician 22 permit may be required to appear before the Licensing Board 23 for an interview prior to, and as a requirement for, the issuance of a temporary visiting physician permit. 24

25 (5) A limited temporary visiting physician permit 26 shall be issued to a physician licensed in another state

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who has been requested to perform emergency procedures in
 Illinois if he or she meets the requirements as established
 by rule.

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(C) Visiting resident permit.

5 (1) The Department may, in its discretion, issue a 6 temporary visiting resident permit, without examination, 7 provided:

8

(a) (blank);

9 (b) that the person maintains an equivalent 10 authorization to practice medicine in all of its 11 branches or to practice the treatment of human ailments 12 without the use of drugs and without operative surgery 13 in good standing in his or her native licensing 14 jurisdiction during the period of the temporary 15 visiting resident permit;

16 (c) that the applicant is enrolled in a 17 postgraduate clinical training program outside the 18 State of Illinois that is approved by the Department;

(d) that the individual has been invited or appointed for a specific period of time to perform a portion of that post graduate clinical training program under the supervision of an Illinois licensed physician in an Illinois patient care clinic or facility that is affiliated with the out-of-State post graduate training program; and 1 (e) that the temporary visiting resident permit 2 shall only permit the holder to practice medicine in 3 all of its branches or practice the treatment of human 4 ailments without the use of drugs and without operative 5 surgery within the scope of the medical, osteopathic, 6 <u>naturopathic</u>, chiropractic or clinical studies for 7 which the holder was invited or appointed.

application for the temporary visiting 8 (2) The 9 resident permit shall be made to the Department, in 10 writing, on forms prescribed by the Department, and shall 11 be accompanied by the required fee established by rule. The 12 application shall require information that, in the judgment of the Department, will enable the Department to 13 14 pass on the qualifications of the applicant.

15 (3) A temporary visiting resident permit shall be valid 16 for 180 days from the date of issuance or until the time 17 the medical, osteopathic, <u>naturopathic</u>, chiropractic, or 18 clinical studies are completed, whichever occurs first.

19 (4) The applicant for a temporary visiting resident 20 permit may be required to appear before the Licensing Board 21 for an interview prior to, and as a requirement for, the 22 issuance of a temporary visiting resident permit.

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

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

25 (Section scheduled to be repealed on December 31, 2013)

Sec. 19. Licensure by endorsement. The Department may, in 1 2 its discretion, issue a license by endorsement to any person 3 who is currently licensed to practice medicine in all of its a naturopathic physician, or a chiropractic 4 branches, 5 physician, in any other state, territory, country or province, the following conditions 6 upon and submitting evidence 7 satisfactory to the Department of the following:

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(A) (Blank);

9 (B) That the applicant is of good moral character. In 10 determining moral character under this Section, the 11 Department may take into consideration whether the 12 applicant has engaged in conduct or activities which would 13 constitute grounds for discipline under this Act. The 14 Department may also request the applicant to submit, and 15 may consider as evidence of moral character, endorsements 16 from 2 or 3 individuals licensed under this Act;

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

1 Section 22 of this Act.

2 (D) That if the applicant seeks to practice medicine in 3 all of its branches:

4 (1) if the applicant was licensed in another 5 jurisdiction prior to January 1, 1988, that the 6 applicant has satisfied the educational requirements 7 of paragraph (1) of subsection (A) or paragraph (2) of 8 subsection (A) of Section 11 of this Act; or

9 (2) if the applicant was licensed in another 10 jurisdiction after December 31, 1987, that the 11 applicant has satisfied the educational requirements 12 of paragraph (A)(2) of Section 11 of this Act; and

13 (3) the requirements for a license to practice 14 medicine in all of its branches in the particular 15 state, territory, country or province in which the 16 applicant is licensed are deemed by the Department to 17 have been substantially equivalent to the requirements for a license to practice medicine in all of its 18 branches in force in this State at the date of the 19 20 applicant's license;

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

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

(2) the requirements for the applicant's license

SB1168

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1 to practice the treatment of human ailments without the 2 use of drugs are deemed by the Department to have been 3 substantially equivalent to the requirements for a 4 license to practice in this State at the date of the 5 applicant's license;

6 <u>(E-5) That if the applicant seeks to practice</u> 7 <u>naturopathic medicine:</u>

8 (1) the applicant is a graduate of a naturopathic 9 school or college approved by the Department at the 10 time of their graduation; and

11 (2) the requirements for the applicant's license 12 to practice naturopathic medicine are deemed by the 13 Department to have been substantially equivalent to 14 the requirements for a license to practice in this 15 State at the date of the applicant's license;

16 (F) That the Department may, in its discretion, issue a 17 license by endorsement to any graduate of a medical or osteopathic college, reputable and in good standing in the 18 19 judgment of the Department, who has passed an examination 20 for admission to the United States Public Health Service, or who has passed any other examination deemed by the 21 22 Department to have been at least equal in all substantial 23 respects to the examination required for admission to any 24 such medical corps;

25 (G) That applications for licenses by endorsement26 shall be filed with the Department, under oath, on forms

SB1168

prepared and furnished by the Department, and shall set 1 2 forth, and applicants therefor shall supply such information respecting the life, education, professional 3 practice, and moral character of applicants 4 as the 5 Department may require to be filed for its use;

6 (H) That the applicant undergo the criminal background 7 check established under Section 9.7 of this Act.

In the exercise of its discretion under this Section, the 8 9 Department is empowered to consider and evaluate each applicant 10 on an individual basis. It may take into account, among other 11 things, the extent to which there is or is not available to the 12 Department, authentic and definitive information concerning the quality of medical education and clinical training which 13 14 the applicant has had. Under no circumstances shall a license 15 be issued under the provisions of this Section to any person 16 who has previously taken and failed the written examination 17 conducted by the Department for such license. In the exercise of its discretion under this Section, the Department may 18 19 require an applicant to successfully complete an examination as 20 recommended by the Licensing Board. The Department may also request the applicant to submit, and may consider as evidence 21 22 of moral character, evidence from 2 or 3 individuals licensed 23 under this Act. Applicants have 3 years from the date of application to complete the application process. If the process 24 25 has not been completed within 3 years, the application shall be denied, the fees shall be forfeited, and the applicant must 26

	SB1168 - 48 - LRB098 02689 MGM 32695 b
1	reapply and meet the requirements in effect at the time of
2	reapplication.
3	(Source: P.A. 97-622, eff. 11-23-11.)
4	(225 ILCS 60/22) (from Ch. 111, par. 4400-22)
5	(Section scheduled to be repealed on December 31, 2013)
6	Sec. 22. Disciplinary action.
7	(A) The Department may revoke, suspend, place on probation,
8	reprimand, refuse to issue or renew, or take any other
9	disciplinary or non-disciplinary action as the Department may
10	deem proper with regard to the license or permit of any person
11	issued under this Act to practice medicine, <u>a naturopathic</u>
12	physician, or a chiropractic physician, including imposing
13	fines not to exceed \$10,000 for each violation, upon any of the
14	following grounds:
15	(1) Performance of an elective abortion in any place,
16	locale, facility, or institution other than:
17	(a) a facility licensed pursuant to the Ambulatory
18	Surgical Treatment Center Act;
19	(b) an institution licensed under the Hospital
20	Licensing Act;
21	(c) an ambulatory surgical treatment center or
22	hospitalization or care facility maintained by the
23	State or any agency thereof, where such department or
24	agency has authority under law to establish and enforce
25	standards for the ambulatory surgical treatment

1 centers, hospitalization, or care facilities under its
2 management and control;

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

6 (e) ambulatory surgical treatment centers, 7 hospitalization or care facilities maintained by any 8 university or college established under the laws of 9 this State and supported principally by public funds 10 raised by taxation.

11 (2) Performance of an abortion procedure in a wilful 12 and wanton manner on a woman who was not pregnant at the 13 time the abortion procedure was performed.

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

20

(4) Gross negligence in practice under this Act.

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

24 (6) Obtaining any fee by fraud, deceit, or25 misrepresentation.

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(7) Habitual or excessive use or abuse of drugs defined

- in law as controlled substances, of alcohol, or of any
   other substances which results in the inability to practice
   with reasonable judgment, skill or safety.
- 4 (8) Practicing under a false or, except as provided by
  5 law, an assumed name.

6 (9) Fraud or misrepresentation in applying for, or 7 procuring, a license under this Act or in connection with 8 applying for renewal of a license under this Act.

9 (10) Making a false or misleading statement regarding 10 their skill or the efficacy or value of the medicine, 11 treatment, or remedy prescribed by them at their direction 12 in the treatment of any disease or other condition of the 13 body or mind.

14 (11) Allowing another person or organization to use15 their license, procured under this Act, to practice.

16 (12)Disciplinary action of another state or 17 jurisdiction against a license or other authorization to practice as a medical doctor, doctor of osteopathy, doctor 18 19 of osteopathic medicine, doctor of naturopathic medicine, 20 or doctor of chiropractic, a certified copy of the record 21 of the action taken by the other state or jurisdiction 22 being prima facie evidence thereof.

(13) Violation of any provision of this Act or of the
Medical Practice Act prior to the repeal of that Act, or
violation of the rules, or a final administrative action of
the Secretary, after consideration of the recommendation

1 of the Disciplinary Board.

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

4 (15) A finding by the Disciplinary Board that the 5 registrant after having his or her license placed on 6 probationary status or subjected to conditions or 7 restrictions violated the terms of the probation or failed 8 to comply with such terms or conditions.

9

(16) Abandonment of a patient.

10 (17)Prescribing, selling, administering, 11 distributing, giving or self-administering any druq 12 classified as a controlled substance (designated product) or narcotic for other than medically accepted therapeutic 13 14 purposes.

15 (18) Promotion of the sale of drugs, devices, 16 appliances or goods provided for a patient in such manner 17 as to exploit the patient for financial gain of the 18 physician.

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

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

1 (21) Wilfully making or filing false records or reports 2 in his or her practice as a physician, including, but not 3 limited to, false records to support claims against the 4 medical assistance program of the Department of Healthcare 5 and Family Services (formerly Department of Public Aid) 6 under the Illinois Public Aid Code.

7 (22) Wilful omission to file or record, or wilfully
8 impeding the filing or recording, or inducing another
9 person to omit to file or record, medical reports as
10 required by law, or wilfully failing to report an instance
11 of suspected abuse or neglect as required by law.

12 (23) Being named as a perpetrator in an indicated 13 report by the Department of Children and Family Services 14 under the Abused and Neglected Child Reporting Act, and 15 upon proof by clear and convincing evidence that the 16 licensee has caused a child to be an abused child or 17 neglected child as defined in the Abused and Neglected 18 Child Reporting Act.

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

(25) Gross and wilful and continued overcharging for
professional services, including filing false statements
for collection of fees for which services are not rendered,
including, but not limited to, filing such false statements
for collection of monies for services not rendered from the

medical assistance program of the Department of Healthcare
 and Family Services (formerly Department of Public Aid)
 under the Illinois Public Aid Code.

4 (26) A pattern of practice or other behavior which
5 demonstrates incapacity or incompetence to practice under
6 this Act.

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

10 (28) Physical illness, including, but not limited to, 11 deterioration through the aging process, or loss of motor 12 skill which results in a physician's inability to practice 13 under this Act with reasonable judgment, skill or safety.

14 (29) Cheating on or attempt to subvert the licensing15 examinations administered under this Act.

16 (30) Wilfully or negligently violating the 17 confidentiality between physician and patient except as 18 required by law.

19 (31) The use of any false, fraudulent, or deceptive
20 statement in any document connected with practice under
21 this Act.

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

(33) Violating state or federal laws or regulations
 relating to controlled substances, legend drugs, or

SB1168 - 54 - LRB098 02689 MGM 32695 b

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ephedra as defined in the Ephedra Prohibition Act.

2 (34) Failure to report to the Department any adverse 3 final action taken against them by another licensing jurisdiction (any other state or any territory of the 4 5 United States or any foreign state or country), by any peer 6 review body, by any health care institution, by any 7 professional society or association related to practice 8 under this Act, by any governmental agency, by any law 9 enforcement agency, or by any court for acts or conduct 10 similar to acts or conduct which would constitute grounds 11 for action as defined in this Section.

12 (35) Failure to report to the Department surrender of a 13 license or authorization to practice as a medical doctor, a 14 doctor of osteopathy, a doctor of osteopathic medicine, a 15 doctor of naturopathic medicine, or doctor of chiropractic jurisdiction, or surrender 16 in another state or of 17 membership on any medical staff or in any medical or 18 professional association or society, while under 19 disciplinary investigation by any of those authorities or 20 bodies, for acts or conduct similar to acts or conduct 21 which would constitute grounds for action as defined in 22 this Section.

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

SB1168

1 this Section.

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

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

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

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

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

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

19 (43) Repeated failure to adequately collaborate with a20 licensed advanced practice nurse.

Except for actions involving the ground numbered (26), all proceedings to suspend, revoke, place on probationary status, or take any other disciplinary action as the Department may deem proper, with regard to a license on any of the foregoing grounds, must be commenced within 5 years next after receipt by the Department of a complaint alleging the commission of or

notice of the conviction order for any of the acts described 1 2 herein. Except for the grounds numbered (8), (9), (26), and 3 (29), no action shall be commenced more than 10 years after the date of the incident or act alleged to have violated this 4 5 Section. For actions involving the ground numbered (26), a pattern of practice or other behavior includes all incidents 6 7 alleged to be part of the pattern of practice or other behavior 8 that occurred, or a report pursuant to Section 23 of this Act 9 received, within the 10-year period preceding the filing of the 10 complaint. In the event of the settlement of any claim or cause 11 of action in favor of the claimant or the reduction to final 12 judgment of any civil action in favor of the plaintiff, such 13 claim, cause of action or civil action being grounded on the 14 allegation that a person licensed under this Act was negligent 15 in providing care, the Department shall have an additional 16 period of 2 years from the date of notification to the 17 Department under Section 23 of this Act of such settlement or final judgment in which to investigate and commence formal 18 19 disciplinary proceedings under Section 36 of this Act, except 20 as otherwise provided by law. The time during which the holder of the license was outside the State of Illinois shall not be 21 22 included within any period of time limiting the commencement of 23 disciplinary action by the Department.

The entry of an order or judgment by any circuit court establishing that any person holding a license under this Act is a person in need of mental treatment operates as a 1 suspension of that license. That person may resume their 2 practice only upon the entry of a Departmental order based upon 3 a finding by the Disciplinary Board that they have been 4 determined to be recovered from mental illness by the court and 5 upon the Disciplinary Board's recommendation that they be 6 permitted to resume their practice.

7 The Department may refuse to issue or take disciplinary 8 action concerning the license of any person who fails to file a 9 return, or to pay the tax, penalty or interest shown in a filed 10 return, or to pay any final assessment of tax, penalty or 11 interest, as required by any tax Act administered by the 12 Illinois Department of Revenue, until such time as the 13 requirements of any such tax Act are satisfied as determined by 14 the Illinois Department of Revenue.

15 The Department, upon the recommendation of the 16 Disciplinary Board, shall adopt rules which set forth standards 17 to be used in determining:

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

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

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

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

3 However, no such rule shall be admissible into evidence in 4 any civil action except for review of a licensing or other 5 disciplinary action under this Act.

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

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

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

hearing by the Disciplinary Board. In instances in which the 1 2 Secretary immediately suspends a license under this Section, a 3 hearing upon such person's license must be convened by the Disciplinary Board within 15 days after such suspension and 4 5 completed without appreciable delay. The Disciplinary Board 6 shall have the authority to review the subject physician's 7 record of treatment and counseling regarding the impairment, to 8 the extent permitted by applicable federal statutes and 9 regulations safequarding the confidentiality of medical 10 records.

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

16 The Department may promulgate rules for the imposition of 17 fines in disciplinary cases, not to exceed \$10,000 for each violation of this Act. Fines may be imposed in conjunction with 18 other forms of disciplinary action, but shall not be the 19 20 exclusive disposition of any disciplinary action arising out of conduct resulting in death or injury to a patient. Any funds 21 22 collected from such fines shall be deposited in the Medical 23 Disciplinary Fund.

(B) The Department shall revoke the license or permit
issued under this Act to practice medicine, a naturopathic
<u>physician</u>, or a chiropractic physician who has been convicted a

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

9 The Disciplinary Board shall recommend (C) to the 10 Department civil penalties and any other appropriate 11 discipline in disciplinary cases when the Board finds that a 12 physician willfully performed abortion with an actual 13 knowledge that the person upon whom the abortion has been 14 performed is a minor or an incompetent person without notice as required under the Parental Notice of Abortion Act of 1995. 15 16 Upon the Board's recommendation, the Department shall impose, 17 for the first violation, a civil penalty of \$1,000 and for a second or subsequent violation, a civil penalty of \$5,000. 18 (Source: P.A. 96-608, eff. 8-24-09; 96-1000, eff. 7-2-10; 19 97-622, eff. 11-23-11.) 20

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

(Section scheduled to be repealed on December 31, 2013)

23 Sec. 24. Report of violations; medical associations. Any 24 physician licensed under this Act, the Illinois State Medical 25 Society, the Illinois Association of Osteopathic Physicians

and Surgeons, the Illinois Chiropractic Society, the Illinois 1 2 Prairie State Chiropractic Association, the Illinois 3 Association of Naturopathic Physicians, or any component societies of any of these 4 groups, and any other person, may 4 5 report to the Disciplinary Board any information the physician, 6 association, society, or person may have that appears to show 7 that a physician is or may be in violation of any of the provisions of Section 22 of this Act. 8

9 The Department may enter into agreements with the Illinois 10 State Medical Society, the Illinois Association of Osteopathic 11 Physicians and Surgeons, the Illinois Prairie State 12 Association, Illinois Chiropractic or the Chiropractic 13 Society, or the Illinois Association of Naturopathic 14 Physicians to allow these organizations to assist the 15 Disciplinary Board in the review of alleged violations of this 16 Act. Subject to the approval of the Department, any 17 organization party to such an agreement may subcontract with other individuals or organizations to assist in review. 18

19 physician, association, society, Anv or person 20 participating in good faith in the making of a report under this Act or participating in or assisting with an investigation 21 22 or review under this Act shall have immunity from any civil, 23 criminal, or other liability that might result by reason of those actions. 24

The medical information in the custody of an entity under contract with the Department participating in an investigation

or review shall be privileged and confidential to the same
 extent as are information and reports under the provisions of
 Part 21 of Article VIII of the Code of Civil Procedure.

Upon request by the Department after a mandatory report has 4 5 been filed with the Department, an attorney for any party seeking to recover damages for injuries or death by reason of 6 7 medical, hospital, or other healing art malpractice shall 8 provide patient records related to the physician involved in 9 the disciplinary proceeding to the Department within 30 days of 10 the Department's request for use by the Department in any 11 disciplinary matter under this Act. An attorney who provides 12 patient records to the Department in accordance with this 13 shall not be deemed to have violated requirement any 14 attorney-client privilege. Notwithstanding any other provision 15 of law, consent by a patient shall not be required for the 16 provision of patient records in accordance with this 17 requirement.

For the purpose of any civil or criminal proceedings, the good faith of any physician, association, society or person shall be presumed.

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

22 (225 ILCS 60/33) (from Ch. 111, par. 4400-33)

(Section scheduled to be repealed on December 31, 2013)
 Sec. 33. Any person licensed under this Act to practice
 medicine in all of its branches shall be authorized to purchase

1 legend drugs requiring an order of a person authorized to 2 prescribe drugs, and to dispense such legend drugs in the 3 regular course of practicing medicine. The dispensing of such legend drugs shall be the personal act of the person licensed 4 5 under this Act and may not be delegated to any other person not 6 licensed under this Act or the Pharmacy Practice Act unless 7 such delegated dispensing functions are under the direct 8 supervision of the physician authorized to dispense legend 9 drugs. Except when dispensing manufacturers' samples or other 10 legend drugs in a maximum 72 hour supply, persons licensed under this Act shall maintain a book or file of prescriptions 11 12 as required in the Pharmacy Practice Act. Any person licensed 13 under this Act who dispenses any drug or medicine shall dispense such drug or medicine in good faith and shall affix to 14 15 the box, bottle, vessel or package containing the same a label 16 indicating (a) the date on which such drug or medicine is 17 dispensed; (b) the name of the patient; (c) the last name of the person dispensing such drug or medicine; (d) the directions 18 19 for use thereof; and (e) the proprietary name or names or, if there are none, the established name or names of the drug or 20 21 medicine, the dosage and quantity, except as otherwise 22 authorized by regulation of the Department. The foregoing 23 labeling requirements shall not apply to drugs or medicines in a package which bears a label of the manufacturer containing 24 25 information describing its contents which is in compliance with requirements of the Federal Food, Drug, and Cosmetic Act and 26

the Illinois Food, Drug, and Cosmetic Act. "Drug" and "medicine" have the meaning ascribed to them in the Pharmacy Practice Act, as now or hereafter amended; "good faith" has the meaning ascribed to it in subsection (v) of Section 102 of the "Illinois Controlled Substances Act", approved August 16, 1971, as amended.

7 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 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 Nothing in this Section shall be construed to authorize a 15 chiropractic physician <u>or naturopathic physician</u> to prescribe 16 drugs.

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

18 (225 ILCS 60/34) (from Ch. 111, par. 4400-34)

19 (Section scheduled to be repealed on December 31, 2013)

Sec. 34. The provisions of this Act shall not be so construed nor shall they be so administered as to discriminate against any type or category of physician or against any medical, osteopathic, naturopathic, or chiropractic college.

24 (Source: P.A. 85-4.)

	SB1168 - 67 - LRB098 02689 MGM 32695 b
1 2	Section 25. The Patients' Right to Know Act is amended by changing Section 5 as follows:
3	(225 ILCS 61/5)
4	Sec. 5. Definitions. For purposes of this Act, the
5	following definitions shall have the following meanings,
6	except where the context requires otherwise:
7	"Department" means the Department of Financial and
8	Professional Regulation.
9	"Disciplinary Board" means the Medical Disciplinary Board.
10	"Physician" means a person licensed under the Medical
11	Practice Act to practice medicine in all of its branches <u>, a</u>
12	naturopathic physician, or a chiropractic physician licensed
13	to treat human ailments without the use of drugs and without
14	operative surgery.
15	"Secretary" means the Secretary of the Department of
16	Financial and Professional Regulation.

17 (Source: P.A. 97-280, eff. 8-9-11.)

Section 30. The Naprapathic Practice Act is amended by changing Sections 25 and 110 as follows:

20 (225 ILCS 63/25)

(Section scheduled to be repealed on January 1, 2023)
Sec. 25. Title and designation of licensed naprapaths.
Every person to whom a valid existing license as a naprapath

1 has been issued under this Act shall be designated 2 professionally a "naprapath", and not otherwise, and any 3 licensed naprapath may, in connection with the practice of his profession, use the title or designation of "naprapath", and, 4 5 if entitled by degree from a college or university recognized by the Department, may use the title of "Doctor of Naprapathy" 6 or the abbreviation "D.N.". When the name of the licensed 7 naprapath is used professionally in oral, written, or printed 8 9 announcements, professional cards, or publications for the 10 information of the public and is preceded by the title "Doctor" 11 or the abbreviation "Dr.", the explanatory designation of 12 "naprapath", "naprapathy", "Doctor of Naprapathy", or the designation "D.N." shall be added immediately following title 13 and name. When the announcement, professional cards, or 14 publication is in writing or in print, the explanatory addition 15 16 shall be in writing, type, or print not less than 1/2 the size 17 of that used in the name and title. No person other than the holder of a valid existing license under this Act shall use the 18 title and designation of "Doctor of Naprapathy", "D.N.", or 19 20 "naprapath", either directly or indirectly, in connection with his or her profession or business. 21

A naprapath licensed under this Act shall not hold himself or herself out as a Doctor of Chiropractic <u>or a Doctor of</u> <u>Naturopathic Medicine</u> unless he or she is licensed as a Doctor of Chiropractic <u>or Doctor of Naturopathic Medicine</u> under the Medical Practice Act of 1987 or any successor Act. SB1168 - 69 - LRB098 02689 MGM 32695 b

1 (Source: P.A. 97-778, eff. 7-13-12.)

2 (225 ILCS 63/110)

3 (Section scheduled to be repealed on January 1, 2023)
4 Sec. 110. Grounds for disciplinary action; refusal,
5 revocation, suspension.

6 (a) The Department may refuse to issue or to renew, or may 7 revoke, suspend, place on probation, reprimand or take other 8 disciplinary or non-disciplinary action as the Department may 9 deem appropriate, including imposing fines not to exceed 10 \$10,000 for each violation, with regard to any licensee or 11 license for any one or combination of the following causes:

12 (1) Violations of this Act or of rules adopted under13 this Act.

14 (2) Material misstatement in furnishing information to15 the Department.

16 (3) Conviction by plea of guilty or nolo contendere, finding of guilt, jury verdict, or entry of judgment, or by 17 18 sentencing of any crime, including, but not limited to, 19 convictions, preceding sentences of supervision, 20 conditional discharge, or first offender probation, under 21 the laws of any jurisdiction of the United States: (i) that is a felony or (ii) that is a misdemeanor, an essential 22 element of which is dishonesty, or that is directly related 23 24 to the practice of the profession.

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(4) Fraud or any misrepresentation in applying for or

SB1168

procuring a license under this Act or in connection with applying for renewal of a license under this Act.

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(5) Professional incompetence or gross negligence.

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(6) Malpractice.

5 (7) Aiding or assisting another person in violating any
6 provision of this Act or its rules.

7 (8) Failing to provide information within 60 days in
8 response to a written request made by the Department.

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

12 (10) Habitual or excessive use or abuse of drugs 13 defined in law as controlled substances, alcohol, or any 14 other substance which results in the inability to practice 15 with reasonable judgment, skill, or safety.

16 (11) Discipline by another U.S. jurisdiction or 17 foreign nation if at least one of the grounds for the 18 discipline is the same or substantially equivalent to those 19 set forth in this Act.

20 (12) Directly or indirectly giving to or receiving from 21 any person, firm, corporation, partnership, or association 22 any fee, commission, rebate, or other form of compensation 23 for any professional services not actually or personally 24 rendered. This shall not be deemed to include rent or other 25 remunerations paid to an individual, partnership, or 26 corporation by a naprapath for the lease, rental, or use of

space, owned or controlled by the individual, partnership, 1 2 corporation, or association. Nothing in this paragraph 3 (12) affects any bona fide independent contractor or employment arrangements among health care professionals, 4 5 health facilities, health care providers, or other 6 entities, except as otherwise prohibited by law. Anv 7 employment arrangements may include provisions for 8 health insurance, pension, compensation, or other 9 employment benefits for the provision of services within 10 the scope of the licensee's practice under this Act. 11 Nothing in this paragraph (12) shall be construed to 12 require an employment arrangement to receive professional 13 fees for services rendered.

14 (13) Using the title "Doctor" or its abbreviation 15 without further clarifying that title or abbreviation with 16 the word "naprapath" or "naprapathy" or the designation 17 "D.N.".

(14) A finding by the Department that the licensee,
after having his or her license placed on probationary
status, has violated the terms of probation.

21

(15) Abandonment of a patient without cause.

(16) Willfully making or filing false records or
 reports relating to a licensee's practice, including but
 not limited to, false records filed with State agencies or
 departments.

26

(17) Willfully failing to report an instance of

suspected child abuse or neglect as required by the Abused
 and Neglected Child Reporting Act.

3 (18) Physical or mental illness or disability, 4 including, but not limited to, deterioration through the 5 aging process or loss of motor skill that results in the 6 inability to practice the profession with reasonable 7 judgment, skill, or safety.

8 (19) Solicitation of professional services by means
9 other than permitted advertising.

(20) Failure to provide a patient with a copy of his or
 her record upon the written request of the patient.

12 (21) Cheating on or attempting to subvert the licensing13 examination administered under this Act.

14 (22) Allowing one's license under this Act to be used15 by an unlicensed person in violation of this Act.

16

(23) (Blank).

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

24 (25) Practicing under a false or, except as provided by25 law, an assumed name.

26

(26) Immoral conduct in the commission of any act, such

as sexual abuse, sexual misconduct, or sexual
 exploitation, related to the licensee's practice.

3 (27) Maintaining a professional relationship with any 4 person, firm, or corporation when the naprapath knows, or 5 should know, that the person, firm, or corporation is 6 violating this Act.

7 (28) Promotion of the sale of food supplements,
8 devices, appliances, or goods provided for a client or
9 patient in such manner as to exploit the patient or client
10 for financial gain of the licensee.

11 (29) Having treated ailments of human beings other than 12 by the practice of naprapathy as defined in this Act, or 13 having treated ailments of human beings as a licensed 14 naprapath independent of a documented referral or 15 documented current and relevant diagnosis from а 16 physician, dentist, or podiatrist, or having failed to 17 notify the physician, dentist, or podiatrist who established a documented current and relevant diagnosis 18 19 that the patient is receiving naprapathic treatment 20 pursuant to that diagnosis.

(30) Use by a registered naprapath of the word
"infirmary", "hospital", "school", "university", in
English or any other language, in connection with the place
where naprapathy may be practiced or demonstrated.

(31) Continuance of a naprapath in the employ of any
 person, firm, or corporation, or as an assistant to any

SB1168

naprapath or naprapaths, directly or indirectly, after his or her employer or superior has been found guilty of violating or has been enjoined from violating the laws of the State of Illinois relating to the practice of naprapathy when the employer or superior persists in that violation.

7 (32) The performance of naprapathic service in 8 conjunction with a scheme or plan with another person, 9 firm, or corporation known to be advertising in a manner 10 contrary to this Act or otherwise violating the laws of the 11 State of Illinois concerning the practice of naprapathy.

12 (33) Failure to provide satisfactory proof of having 13 participated in approved continuing education programs as 14 determined by and approved by the Secretary. Exceptions for 15 extreme hardships are to be defined by the rules of the 16 Department.

17 (34) (Blank).

18 (35) Gross or willful overcharging for professional19 services.

20

(36) (Blank).

All fines imposed under this Section shall be paid within 60 days after the effective date of the order imposing the fine.

(b) The Department may refuse to issue or may suspend
 without hearing, as provided for in the Department of
 Professional Regulation Law of the Civil Administrative Code,

the license of any person who fails to file a return, or pay 1 2 the tax, penalty, or interest shown in a filed return, or pay 3 any final assessment of the tax, penalty, or interest as required by any tax Act administered by the Illinois Department 4 5 of Revenue, until such time as the requirements of any such tax 6 Act are satisfied in accordance with subsection (q) of Section 7 2105-15 of the Department of Professional Regulation Law of the Civil Administrative Code of Illinois. 8

9 (c) The Department shall deny a license or renewal 10 authorized by this Act to a person who has defaulted on an 11 educational loan or scholarship provided or guaranteed by the 12 Illinois Student Assistance Commission or any governmental 13 agency of this State in accordance with item (5) of subsection 14 (a) of Section 2105-15 of the Department of Professional 15 Regulation Law of the Civil Administrative Code of Illinois.

16 (d) In cases where the Department of Healthcare and Family 17 Services has previously determined a licensee or a potential licensee is more than 30 days delinquent in the payment of 18 19 child support and has subsequently certified the delinquency to 20 the Department, the Department may refuse to issue or renew or 21 may revoke or suspend that person's license or may take other 22 disciplinary action against that person based solely upon the 23 certification of delinquency made by the Department of Healthcare and Family Services in accordance with item (5) of 24 25 subsection (a) of Section 2105-15 of the Department of 26 Professional Regulation Law of the Civil Administrative Code of

SB1168

1 Illinois.

2 (e) The determination by a circuit court that a licensee is subject to involuntary admission or judicial admission, as 3 provided in the Mental Health and Developmental <del>Development</del> 4 5 Disabilities Code, operates as an automatic suspension. The suspension shall end only upon a finding by a court that the 6 7 patient is no longer subject to involuntary admission or judicial admission and the issuance of an order so finding and 8 9 discharging the patient.

10 (f) In enforcing this Act, the Department, upon a showing 11 of a possible violation, may compel an individual licensed to 12 practice under this Act, or who has applied for licensure under 13 this Act, to submit to a mental or physical examination and evaluation, or both, which may include a substance abuse or 14 15 sexual offender evaluation, as required by and at the expense 16 of the Department. The Department shall specifically designate 17 the examining physician licensed to practice medicine in all of its branches or, if applicable, the multidisciplinary team 18 involved in providing the mental or physical examination and 19 20 evaluation, or both. The multidisciplinary team shall be led by a physician licensed to practice medicine in all of its 21 22 branches and may consist of one or more or a combination of 23 physicians licensed to practice medicine in all of its 24 branches, licensed chiropractic physicians, licensed 25 naturopathic physicians, licensed clinical psychologists, social 26 licensed clinical workers, licensed clinical

and 1 professional counselors, other professional and 2 administrative staff. Any examining physician or member of the multidisciplinary team may require any person ordered to submit 3 to an examination and evaluation pursuant to this Section to 4 5 submit to any additional supplemental testing deemed necessary to complete any examination or evaluation process, including, 6 7 but not limited to, blood testing, urinalysis, psychological 8 testing, or neuropsychological testing.

9 The Department may order the examining physician or any 10 member of the multidisciplinary team to provide to the 11 Department any and all records including business records that 12 relate to the examination and evaluation, including any 13 supplemental testing performed. The Department may order the 14 examining physician or any member of the multidisciplinary team 15 to present testimony concerning the examination and evaluation of the licensee or applicant, including testimony concerning 16 17 any supplemental testing or documents in any way related to the examination and evaluation. No information, report, record, or 18 other documents in any way related to the examination and 19 20 evaluation shall be excluded by reason of any common law or statutory privilege relating to communications between the 21 22 licensee or applicant and the examining physician or any member 23 of the multidisciplinary team. No authorization is necessary from the licensee or applicant ordered to undergo an evaluation 24 25 and examination for the examining physician or any member of 26 the multidisciplinary team to provide information, reports,

records, or other documents or to provide any testimony 1 2 regarding the examination and evaluation. The individual to be 3 examined may have, at his or her own expense, another physician of his or her choice present during all aspects of this 4 5 examination. Failure of an individual to submit to a mental or physical examination and evaluation, or both, when directed, 6 shall result in an automatic suspension without hearing, until 7 such time as the individual submits to the examination. 8

9 A person holding a license under this Act or who has 10 applied for a license under this Act who, because of a physical 11 or mental illness or disability, including, but not limited to, 12 deterioration through the aging process or loss of motor skill, is unable to practice the profession with reasonable judgment, 13 14 skill, or safety, may be required by the Department to submit 15 to care, counseling, or treatment by physicians approved or 16 designated by the Department as a condition, term, or 17 restriction for continued, reinstated, or renewed licensure to practice. Submission to care, counseling, or treatment as 18 required by the Department shall not be considered discipline 19 of a license. If the licensee refuses to enter into a care, 20 counseling, or treatment agreement or fails to abide by the 21 22 terms of the agreement, the Department may file a complaint to 23 revoke, suspend, or otherwise discipline the license of the 24 individual. The Secretary may order the license suspended 25 immediately, pending a hearing by the Department. Fines shall 26 not be assessed in disciplinary actions involving physical or

1 mental illness or impairment.

2 In instances in which the Secretary immediately suspends a 3 person's license under this Section, a hearing on that person's license must be convened by the Department within 15 days after 4 5 the suspension and completed without appreciable delay. The 6 Department shall have the authority to review the subject 7 individual's record of treatment and counseling regarding the 8 impairment to the extent permitted by applicable federal 9 statutes and regulations safeguarding the confidentiality of 10 medical records.

An individual licensed under this Act and affected under this Section shall be afforded an opportunity to demonstrate to the Department that he or she can resume practice in compliance with acceptable and prevailing standards under the provisions of his or her license.

16 (Source: P.A. 96-1482, eff. 11-29-10; 97-778, eff. 7-13-12; 17 revised 8-3-12.)

Section 35. The Illinois Physical Therapy Act is amended by changing Section 1 as follows:

20 (225 ILCS 90/1) (from Ch. 111, par. 4251)
21 (Section scheduled to be repealed on January 1, 2016)
22 Sec. 1. Definitions. As used in this Act:
23 (1) "Physical therapy" means all of the following:
24 (A) Examining, evaluating, and testing individuals who

1 may have mechanical, physiological, or developmental 2 impairments, functional limitations, disabilities, or 3 other health and movement-related conditions, classifying 4 these disorders, determining a rehabilitation prognosis 5 and plan of therapeutic intervention, and assessing the 6 on-going effects of the interventions.

7 (B) Alleviating impairments, functional limitations, 8 or disabilities by designing, implementing, and modifying 9 therapeutic interventions that may include, but are not 10 limited to, the evaluation or treatment of a person through 11 the use of the effective properties of physical measures 12 and heat, cold, light, water, radiant energy, electricity, 13 sound, and air and use of therapeutic massage, therapeutic 14 exercise, mobilization, and rehabilitative procedures, 15 with or without assistive devices, for the purposes of 16 preventing, correcting, or alleviating a physical or 17 mental impairment, functional limitation, or disability.

risk of 18 (C) Reducing the injury, impairment, 19 functional limitation, or disability, including the 20 maintenance promotion and of fitness, health, and wellness. 21

(D) Engaging in administration, consultation,education, and research.

Physical therapy includes, but is not limited to: (a) performance of specialized tests and measurements, (b) administration of specialized treatment procedures, (c)

interpretation of referrals from physicians, 1 dentists, 2 advanced practice nurses, physician assistants, and podiatrists, (d) establishment, and modification of physical 3 therapy treatment programs, (e) administration of topical 4 5 medication used in generally accepted physical therapy procedures when such medication is prescribed by the patient's 6 7 physician, licensed to practice medicine in all its branches, 8 the patient's physician licensed to practice podiatric 9 medicine, the patient's advanced practice nurse, the patient's 10 physician assistant, or the patient's dentist, and (f) 11 supervision or teaching of physical therapy. Physical therapy 12 include radiology, electrosurgery, chiropractic does not 13 technique, naturopathic technique, or determination of а differential diagnosis; provided, however, the limitation on 14 15 determining a differential diagnosis shall not in any manner 16 limit a physical therapist licensed under this Act from 17 performing an evaluation pursuant to such license. Nothing in this Section shall limit a physical therapist from employing 18 19 appropriate physical therapy techniques that he or she is 20 educated and licensed to perform. A physical therapist shall refer to a licensed physician, advanced practice nurse, 21 22 physician assistant, dentist, or podiatrist any patient whose 23 medical condition should, at the time of evaluation or treatment, be determined to be beyond the scope of practice of 24 25 the physical therapist.

26

SB1168

(2) "Physical therapist" means a person who practices

1 physical therapy and who has met all requirements as provided 2 in this Act.

3 (3) "Department" means the Department of Professional4 Regulation.

5 (4) "Director" means the Director of Professional6 Regulation.

7 (5) "Board" means the Physical Therapy Licensing and8 Disciplinary Board approved by the Director.

9 (6) "Referral" means a written or oral authorization for 10 physical therapy services for a patient by a physician, 11 dentist, advanced practice nurse, physician assistant, or 12 podiatrist who maintains medical supervision of the patient and 13 makes a diagnosis or verifies that the patient's condition is 14 such that it may be treated by a physical therapist.

15 (7) "Documented current and relevant diagnosis" for the 16 purpose of this Act means a diagnosis, substantiated by 17 signature or oral verification of a physician, dentist, advanced practice nurse, physician assistant, or podiatrist, 18 19 that a patient's condition is such that it may be treated by 20 physical therapy as defined in this Act, which diagnosis shall 21 remain in effect until changed by the physician, dentist, 22 advanced practice nurse, physician assistant, or podiatrist.

23

SB1168

(8) "State" includes:

24 (a) the states of the United States of America;

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- (b) the District of Columbia; and
- 26 (c) the Commonwealth of Puerto Rico.

(9) "Physical therapist assistant" means a person licensed 1 2 to assist a physical therapist and who has met all requirements as provided in this Act and who works under the supervision of 3 a licensed physical therapist to assist in implementing the 4 5 physical therapy treatment program as established by the 6 licensed physical therapist. The patient care activities 7 provided by the physical therapist assistant shall not include 8 the interpretation of referrals, evaluation procedures, or the 9 planning or major modification of patient programs.

10 (10) "Physical therapy aide" means a person who has 11 received on the job training, specific to the facility in which 12 he is employed, but who has not completed an approved physical 13 therapist assistant program.

14 (11) "Advanced practice nurse" means a person licensed 15 under the Nurse Practice Act who has a collaborative agreement 16 with a collaborating physician that authorizes referrals to 17 physical therapists.

(12) "Physician assistant" means a person licensed under
the Physician Assistant Practice Act of 1987 who has been
delegated authority to make referrals to physical therapists.
(Source: P.A. 94-651, eff. 1-1-06; 95-639, eff. 10-5-07.)

22 Section 40. The Illinois Vehicle Code is amended by 23 changing Section 6-500 as follows:

24 (625 ILCS 5/6-500) (from Ch. 95 1/2, par. 6-500)

6-500. Definitions 1 Sec. of words and phrases. 2 Notwithstanding the definitions set forth elsewhere in this Code, for purposes of the Uniform Commercial Driver's License 3 Act (UCDLA), the words and phrases listed below have the 4 5 meanings ascribed to them as follows: 6 (1) Alcohol. "Alcohol" means any substance containing any form of alcohol, including but not limited to ethanol, 7 8 methanol, propanol, and isopropanol. 9 (2) Alcohol concentration. "Alcohol concentration" means: 10 (A) the number of grams of alcohol per 210 liters of 11 breath; or 12 (B) the number of grams of alcohol per 100 milliliters of blood; or 13 (C) the number of grams of alcohol per 67 milliliters 14 15 of urine. Alcohol tests administered within 2 hours of the driver 16 17 being "stopped or detained" shall be considered that driver's "alcohol concentration" for the purposes of enforcing this 18 19 UCDLA. 20 (3) (Blank). 21 (4) (Blank). 22 (5) (Blank). 23 (5.3) CDLIS driver record. "CDLIS driver record" means the electronic record of the individual CDL driver's status and 24 25 history stored by the State-of-Record as part of the Commercial 26 Driver's License Information System, or CDLIS, established

- 85 - LRB098 02689 MGM 32695 b

1 under 49 U.S.C. 31309.

SB1168

(5.5) CDLIS motor vehicle record. "CDLIS motor vehicle
record" or "CDLIS MVR" means a report generated from the CDLIS
driver record meeting the requirements for access to CDLIS
information and provided by states to users authorized in 49
C.F.R. 384.225(e)(3) and (4), subject to the provisions of the
Driver Privacy Protection Act, 18 U.S.C. 2721-2725.

8 (5.7) Commercial driver's license downgrade. "Commercial
9 driver's license downgrade" or "CDL downgrade" means either:

10 (A) a state allows the driver to change his or her 11 self-certification to interstate, but operating 12 exclusively in transportation or operation excepted from 13 49 C.F.R. Part 391, as provided in 49 C.F.R. 390.3(f), 14 391.2, 391.68, or 398.3;

(B) a state allows the driver to change his or her self-certification to intrastate only, if the driver qualifies under that state's physical qualification requirements for intrastate only;

19 (C) a state allows the driver to change his or her 20 certification to intrastate, but operating exclusively in 21 transportation or operations excepted from all or part of 22 the state driver qualification requirements; or

(D) a state removes the CDL privilege from the driverlicense.

25 (6) Commercial Motor Vehicle.

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(A) "Commercial motor vehicle" or "CMV" means a motor

SB1168

vehicle used in commerce, except those referred to in subdivision (B), designed to transport passengers or property if:

4 (i) the vehicle has a GVWR of 26,001 pounds or more
5 or such a lesser GVWR as subsequently determined by
6 federal regulations or the Secretary of State; or any
7 combination of vehicles with a GCWR of 26,001 pounds or
8 more, provided the GVWR of any vehicle or vehicles
9 being towed is 10,001 pounds or more; or

10 (ii) the vehicle is designed to transport 16 or 11 more persons; or

12 (iii) the vehicle is transporting hazardous
13 materials and is required to be placarded in accordance
14 with 49 C.F.R. Part 172, subpart F.

15 (B) Pursuant to the interpretation of the Commercial 16 Motor Vehicle Safety Act of 1986 by the Federal Highway 17 Administration, the definition of "commercial motor 18 vehicle" does not include:

19 (i) recreational vehicles, when operated primarily20 for personal use;

(ii) vehicles owned by or operated under the direction of the United States Department of Defense or the United States Coast Guard only when operated by non-civilian personnel. This includes any operator on active military duty; members of the Reserves; National Guard; personnel on part-time training; and National Guard military technicians (civilians who are
 required to wear military uniforms and are subject to
 the Code of Military Justice); or

(iii) firefighting, police, and other emergency 4 5 equipment (including, without limitation, equipment owned or operated by a HazMat or technical rescue team 6 7 authorized by a county board under Section 5-1127 of 8 the Counties Code), with audible and visual signals, 9 owned or operated by or for a governmental entity, which is necessary to the preservation of life or 10 11 property or the execution of emergency governmental 12 functions which are normally not subject to general 13 traffic rules and regulations.

14 (7) Controlled Substance. "Controlled substance" shall 15 have the same meaning as defined in Section 102 of the Illinois 16 Controlled Substances Act, and shall also include cannabis as 17 defined in Section 3 of the Cannabis Control Act and 18 methamphetamine as defined in Section 10 of the Methamphetamine 19 Control and Community Protection Act.

Conviction. 20 "Conviction" (8) means an unvacated adjudication of guilt or a determination that a person has 21 22 violated or failed to comply with the law in a court of 23 original jurisdiction or by an authorized administrative tribunal; an unvacated forfeiture of bail or collateral 24 25 deposited to secure the person's appearance in court; a plea of 26 quilty or nolo contendere accepted by the court; the payment of

1 a fine or court cost regardless of whether the imposition of 2 sentence is deferred and ultimately a judgment dismissing the 3 underlying charge is entered; or a violation of a condition of 4 release without bail, regardless of whether or not the penalty 5 is rebated, suspended or probated.

- 6 (8.5) Day. "Day" means calendar day.
- 7 (9) (Blank).
- 8 (10) (Blank).
- 9 (11) (Blank).
- 10 (12) (Blank).

(13) Driver. "Driver" means any person who drives, operates, or is in physical control of a commercial motor vehicle, any person who is required to hold a CDL, or any person who is a holder of a CDL while operating a non-commercial motor vehicle.

16 (13.5) Driver applicant. "Driver applicant" means an 17 individual who applies to a state to obtain, transfer, upgrade, 18 or renew a CDL.

19 (13.8) Electronic device. "Electronic device" includes, 20 but is not limited to, a cellular telephone, personal digital 21 assistant, pager, computer, or any other device used to input, 22 write, send, receive, or read text.

(14) Employee. "Employee" means a person who is employed as
a commercial motor vehicle driver. A person who is
self-employed as a commercial motor vehicle driver must comply
with the requirements of this UCDLA pertaining to employees. An

1 owner-operator on a long-term lease shall be considered an 2 employee.

3 (15) Employer. "Employer" means a person (including the 4 United States, a State or a local authority) who owns or leases 5 a commercial motor vehicle or assigns employees to operate such 6 a vehicle. A person who is self-employed as a commercial motor 7 vehicle driver must comply with the requirements of this UCDLA.

8 (15.3) Excepted interstate. "Excepted interstate" means a 9 person who operates or expects to operate in interstate 10 commerce, but engages exclusively in transportation or 11 operations excepted under 49 C.F.R. 390.3(f), 391.2, 391.68, or 12 398.3 from all or part of the qualification requirements of 49 13 C.F.R. Part 391 and is not required to obtain a medical examiner's certificate by 49 C.F.R. 391.45. 14

15 (15.5) Excepted intrastate. "Excepted intrastate" means a 16 person who operates in intrastate commerce but engages 17 exclusively in transportation or operations excepted from all 18 or parts of the state driver qualification requirements.

19 (16) (Blank).

20 (16.5) Fatality. "Fatality" means the death of a person as 21 a result of a motor vehicle accident.

(17) Foreign jurisdiction. "Foreign jurisdiction" means a
 sovereign jurisdiction that does not fall within the definition
 of "State".

- 25 (18) (Blank).
- 26 (19) (Blank).

1 (20) Hazardous materials. "Hazardous Material" means any 2 material that has been designated under 49 U.S.C. 5103 and is 3 required to be placarded under subpart F of 49 C.F.R. part 172 4 or any quantity of a material listed as a select agent or toxin 5 in 42 C.F.R. part 73.

6 Imminent Hazard. "Imminent hazard" (20.5)means the 7 existence of a condition that presents a substantial likelihood 8 that death, serious illness, severe personal injury, or a 9 substantial endangerment to health, property, or the 10 environment may occur before the reasonably foreseeable 11 completion date of a formal proceeding begun to lessen the risk 12 of that death, illness, injury or endangerment.

13 (21) Long-term lease. "Long-term lease" means a lease of a 14 commercial motor vehicle by the owner-lessor to a lessee, for a 15 period of more than 29 days.

16 (21.1) Medical examiner. "Medical examiner" means a person 17 who is licensed, certified, or registered in accordance with 18 applicable state laws and regulations to perform physical 19 examinations. The term includes but is not limited to doctors 20 of medicine, doctors of osteopathy, physician assistants, 21 advanced practice nurses, <u>doctors of naturopathic medicine,</u> 22 and doctors of chiropractic.

(21.2) Medical examiner's certificate. "Medical examiner's certificate" means a document prescribed or approved by the Secretary of State that is issued by a medical examiner to a driver to medically qualify him or her to drive.

(21.5) Medical variance. "Medical variance" means a driver 1 2 has received one of the following from the Federal Motor Carrier Safety Administration which allows the driver to be 3 medical certificate: (1) an exemption 4 issued a letter 5 permitting operation of a commercial motor vehicle pursuant to 6 49 C.F.R. Part 381, Subpart C or 49 C.F.R. 391.64; or (2) a 7 skill performance evaluation (SPE) certificate permitting 8 operation of a commercial motor vehicle pursuant to 49 C.F.R. 9 391.49.

10 (21.7) Mobile telephone. "Mobile telephone" means a mobile 11 communication device that falls under or uses any commercial 12 mobile radio service, as defined in regulations of the Federal 13 Communications Commission, 47 CFR 20.3. It does not include 14 two-way or citizens band radio services.

15 (22) Motor Vehicle. "Motor vehicle" means every vehicle 16 which is self-propelled, and every vehicle which is propelled 17 by electric power obtained from over head trolley wires but not 18 operated upon rails, except vehicles moved solely by human 19 power and motorized wheel chairs.

20 (22.2) Motor vehicle record. "Motor vehicle record" means a 21 report of the driving status and history of a driver generated 22 from the driver record provided to users, such as drivers or 23 employers, and is subject to the provisions of the Driver 24 Privacy Protection Act, 18 U.S.C. 2721-2725.

25 (22.5) Non-CMV. "Non-CMV" means a motor vehicle or 26 combination of motor vehicles not defined by the term

1 "commercial motor vehicle" or "CMV" in this Section.

2 (22.7) Non-excepted interstate. "Non-excepted interstate"
3 means a person who operates or expects to operate in interstate
4 commerce, is subject to and meets the qualification
5 requirements under 49 C.F.R. Part 391, and is required to
6 obtain a medical examiner's certificate by 49 C.F.R. 391.45.

7 (22.8) Non-excepted intrastate. "Non-excepted intrastate"
8 means a person who operates only in intrastate commerce and is
9 subject to State driver qualification requirements.

10 (23) Non-resident CDL. "Non-resident CDL" means a 11 commercial driver's license issued by a state under either of 12 the following two conditions:

(i) to an individual domiciled in a foreign country
meeting the requirements of Part 383.23(b)(1) of 49 C.F.R.
of the Federal Motor Carrier Safety Administration.

16 (ii) to an individual domiciled in another state
17 meeting the requirements of Part 383.23(b)(2) of 49 C.F.R.
18 of the Federal Motor Carrier Safety Administration.

19 (24) (Blank).

SB1168

20 (25) (Blank).

21 (25.5) Railroad-Highway Grade Crossing Violation.
22 "Railroad-highway grade crossing violation" means a violation,
23 while operating a commercial motor vehicle, of any of the
24 following:

25 (A) Section 11-1201, 11-1202, or 11-1425 of this
26 Code.

SB1168

## - 93 - LRB098 02689 MGM 32695 b

(B) Any other similar law or local ordinance of any 1 state relating to railroad-highway grade crossing. 2 (25.7) School Bus. "School bus" means a commercial motor 3 vehicle used to transport pre-primary, primary, or secondary 4 5 school students from home to school, from school to home, or to and from school-sponsored events. "School bus" does not include 6 7 a bus used as a common carrier. 8 (26)Serious Traffic Violation. "Serious traffic violation" means: 9 10 (A) a conviction when operating a commercial motor 11 vehicle, or when operating a non-CMV while holding a CDL, 12 of: 13 (i) a violation relating to excessive speeding, 14 involving a single speeding charge of 15 miles per hour 15 or more above the legal speed limit; or 16 (ii) a violation relating to reckless driving; or 17 (iii) a violation of any State law or local ordinance relating to motor vehicle traffic control 18 19 (other than parking violations) arising in connection with a fatal traffic accident; or 20 (iv) a violation of Section 6-501, relating to 21 22 having multiple driver's licenses; or 23 (v) a violation of paragraph (a) of Section 6-507, 24 relating to the requirement to have a valid CDL; or 25 (vi) a violation relating to improper or erratic 26 traffic lane changes; or

(vii) a violation relating to following another 1 2 vehicle too closely; or 3 (viii) a violation relating to texting while driving; or 4 5 (ix) a violation relating to the use of a hand-held 6 mobile telephone while driving; or 7 (B) any other similar violation of a law or local 8 ordinance of any state relating to motor vehicle traffic 9 control, other than a parking violation, which the 10 Secretary of State determines by administrative rule to be 11 serious. 12 (27) State. "State" means a state of the United States, the District of Columbia and any province or territory of Canada. 13 14 (28) (Blank). 15 (29) (Blank). 16 (30) (Blank). 17 (31) (Blank). Texting. "Texting" 18 (32) means manually entering 19 alphanumeric text into, or reading text from, an electronic 20 device. Texting includes, but is not limited to, short 21 (1)22 message service, emailing, instant messaging, a command or 23 request to access a World Wide Web page, pressing more than 24 single button to initiate or terminate a voice а 25 communication using a mobile telephone, or engaging in any other form of electronic text retrieval or entry for 26

SB1168

present or future communication.

(2) Texting does not include:

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(i) inputting, selecting, or reading information on a global positioning system or navigation system; or

5 (ii) pressing a single button to initiate or voice communication using 6 terminate a а mobile 7 telephone; or

8 using a device capable of (iii) performing 9 multiple functions (for example, a fleet management 10 system, dispatching device, smart phone, citizens band 11 radio, or music player) for a purpose that is not 12 otherwise prohibited by Part 392 of the Federal Motor 13 Carrier Safety Regulations.

14 (33) Use a hand-held mobile telephone. "Use a hand-held 15 mobile telephone" means:

16 17

(1) using at least one hand to hold a mobile telephone to conduct a voice communication;

(2) dialing or answering a mobile telephone by pressing 18 19 more than a single button; or

20 (3) reaching for a mobile telephone in a manner that requires a driver to maneuver so that he or she is no 21 22 longer in a seated driving position, restrained by a seat 23 belt that is installed in accordance with 49 CFR 393.93 and adjusted in accordance with the vehicle manufacturer's 24 25 instructions.

(Source: P.A. 97-208, eff. 1-1-12; 97-750, eff. 7-6-12; 97-829, 26

SB1168 - 96 - LRB098 02689 MGM 32695 b

1 eff. 1-1-13; revised 8-3-12.)

2 Section 45. The Health Care Arbitration Act is amended by 3 changing Section 2 as follows:

4 (710 ILCS 15/2) (from Ch. 10, par. 202)

5 Sec. 2. Definitions. As used in this Act:

(a) "Health care provider" means a person, partnership,
corporation, or other entity lawfully engaged in the practice
of medicine, surgery, chiropractic, <u>naturopathy</u>, dentistry,
podiatry, optometry, physical therapy or nursing.

10 (b) "Hospital" means a person, partnership, corporation or 11 other entity lawfully engaged in the operation or 12 administration of a hospital, clinic, nursing home or 13 sanitarium.

(c) "Supplier" means a person, corporation, partnership or other entity that has manufactured, designed, distributed, sold, or otherwise provided any medication, device, equipment, service, or other product used in the diagnosis or treatment of a patient.

(d) "Health care arbitration agreement" or "agreement" means a written agreement between a patient and a hospital or health care provider to submit to binding arbitration a claim for damages arising out of (1) injuries alleged to have been received by a patient or (2) death of a patient, due to hospital or health care provider negligence or other wrongful SB1168 - 97 - LRB098 02689 MGM 32695 b act, but not including intentional torts. (Source: P.A. 90-655, eff. 7-30-98.)

3 Section 50. The Illinois Anatomical Gift Act is amended by4 changing Section 5-10 as follows:

5 (755 ILCS 50/5-10) (was 755 ILCS 50/4)

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6 Sec. 5-10. Persons Who May Become Donees; Purposes for 7 Which Anatomical Gifts May be Made. The following persons may 8 become donees of gifts of bodies or parts thereof for the 9 purposes stated:

(1) any hospital, surgeon, or physician, for medical or
dental education, research, advancement of medical or
dental science, therapy, or transplantation; or

13 (2) any accredited medical, chiropractic,
 14 <u>naturopathic</u>, mortuary, or dental school, college or
 15 university for education, research, advancement of medical
 16 or dental science, or therapy; or

(3) any bank or storage facility, for medical or dental
education, research, advancement of medical or dental
science, therapy, or transplantation; or

(4) any federally designated organ procurement agency
or tissue bank, for medical or dental education, research,
advancement of medical or dental science, therapy, or
transplantation; or

(5) any specified individual for therapy or

	SB1168	- 98 -	LRB098	3 02689	MGM 32	695 b
1	transplantation needed	by him or	her,	or for	any o	other
2	purpose.					
3	(Source: P.A. 93-794, eff.	7-22-04.)				
4	Section 99. Effective	date. This	Act	takes e	ffect	upon
5	becoming law.					

	SB1168	- 99 - LRB098 02689 MGM 32695 b
1		INDEX
2	Statutes amend	ed in order of appearance
3	20 ILCS 3945/2	from Ch. 144, par. 2002
4	105 ILCS 5/24-6	
5	105 ILCS 5/26-1	from Ch. 122, par. 26-1
6	215 ILCS 5/122-1	from Ch. 73, par. 734-1
7	225 ILCS 60/2	from Ch. 111, par. 4400-2
8	225 ILCS 60/7	from Ch. 111, par. 4400-7
9	225 ILCS 60/8	from Ch. 111, par. 4400-8
10	225 ILCS 60/9	from Ch. 111, par. 4400-9
11	225 ILCS 60/10	from Ch. 111, par. 4400-10
12	225 ILCS 60/11	from Ch. 111, par. 4400-11
13	225 ILCS 60/14	from Ch. 111, par. 4400-14
14	225 ILCS 60/15	from Ch. 111, par. 4400-15
15	225 ILCS 60/16	from Ch. 111, par. 4400-16
16	225 ILCS 60/17	from Ch. 111, par. 4400-17
17	225 ILCS 60/18	from Ch. 111, par. 4400-18
18	225 ILCS 60/19	from Ch. 111, par. 4400-19
19	225 ILCS 60/22	from Ch. 111, par. 4400-22
20	225 ILCS 60/24	from Ch. 111, par. 4400-24
21	225 ILCS 60/33	from Ch. 111, par. 4400-33
22	225 ILCS 60/34	from Ch. 111, par. 4400-34
23	225 ILCS 61/5	
24	225 ILCS 63/25	
25	225 ILCS 63/110	

- 100 - LRB098 02689 MGM 32695 b SB1168

225 ILCS 90/1 1

3

- from Ch. 111, par. 4251
- 2 625 ILCS 5/6-500
- from Ch. 95 1/2, par. 6-500
- 710 ILCS 15/2 from Ch. 10, par. 202
- 4
- 755 ILCS 50/5-10 was 755 ILCS 50/4