

IDFPR: THE ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION – An Overview For Health Care Professionals

Every year, roughly 5 percent of doctors and other health care professionals practicing in the state of Illinois find themselves subject to a licensing inquiry or investigation initiated by the Illinois Department of Financial and Professional Regulation (IDFPR). Of those cases in 2006, the IDFPR sanctioned 172 physicians with the loss of license privileges or the restriction of those privileges. The physicians were disciplined for actions ranging from mishandling of payments to gross negligence.

Reorganized in 2004, the IDFPR licenses nearly one million professionals in approximately 100 professions. Its mandate is to promote public welfare by ensuring that licensure qualifications and standards for professional practice are properly evaluated, accurately applied, and vigorously enforced.

To begin the licensure application process, medical professionals must submit a completed application form, supporting documents and appropriate fees. Instructions and an application are available through the IDFPR website, www.idfpr.com. The Acts and Rules section on the site contains detailed licensure requirements.

In addition to licensing, the IDFPR is responsible for statewide enforcement of the 49 professional and occupation legislative acts that regulate the conduct of professions and occupations in the state. It is divided into investigative and prosecutions divisions.

The investigative division reviews complaints received from the public, other practitioners, as well as from law enforcement and other governmental agencies. The prosecutions division's duty is to ensure that licensees who violate a professional practice act are disciplined appropriately within the bounds of due process.



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In Illinois, the rate of disciplinary action has increased for the fifth consecutive year. The state now ranks 12th for its enforcement of disciplinary cases against physicians, according to an analysis released by Public Citizen in June 2006.

Cases referred to the prosecutions division may be addressed through an informal hearing or through a formal evidentiary hearing.

During the informal hearing, both sides will present a case. Although not necessary, the licensee is advised to have legal representation at the hearing. A knowledgeable, well-prepared attorney can be instrumental in assuring that the scope of questions is limited to the charges, that proper protocol is followed and he or she present any available mitigating factors. In addition to the licensee and his and her attorney, the division attorney and a member of a disciplinary board will also be present.

The result of an informal conference can be a recommendation for the case to be closed, the case to be investigated further, for the matter to be referred to a formal hearing or that a consent order be entered. Frequently, an informal conference will result in the drafting of a consent order. The consent order may include either a disciplinary or a non-disciplinary action. Examples of disciplinary actions include: reprimand, suspension, revocation, probation and/or fines. Non-disciplinary actions include remedial continuing medical education, referral to treatment and/or administrative warning. Once the consent order has been issued and forwarded to the respondent, he or she has 30 days to sign and return it.

The formal-level process is governed by the department's procedural rules which address the initiation of the complaint, answers, motions, subpoenas, discovery

and evidence. Additionally, the Administrative Procedure Act and each professional and occupational licensing act contain rules for adjudicatory actions. These procedural rules ensure fundamental fairness and due process.

For most alleged wrongful actions by physicians, the department must bring an action against a licensee within five years of the receipt of a complaint and not more than 10 years after the date of the incident or act under certain grounds or circumstances. Specifically, the five-year limitation does not apply to alleged violations relating to practicing under false name, fraud or misrepresentation in applying for or procuring a license, or cheating on the licensing exam.

For professional negligence settlements/judgments the department has an additional two years from the receipt of notification. For the licensee, the formal-level process begins with the filing of a written verified complaint setting out the facts for either suspension or revocation of a license under the Medical Practice Act of 1987.

Specifically, the formal hearing is an administrative proceeding, open to the public, involving the licensee and his or her counsel, an administrative law judge, a board or committee member and a department prosecutor. Also, in most cases, both sides retain the services of experts to testify on their behalf.

The hearing may take from several days to weeks to complete. Even if the formal proceeding is already underway, at any time before the conclusion of the hearing the par-

ties may attempt to settle the case.

Although in most cases referred to the department there is a hearing prior to the board taking any action, immediate action can be taken if allowing the accused physician to continue seeing patients would constitute "an immediate danger to the public."

At the conclusion of the formal hearing, the disciplinary board will recommend what type of disciplinary action, if any, should be given in the case. Such disciplinary action can include license termination, revocation, suspension, probation, reprimand, and censure.

If the evidence demonstrates that the licensee did not violate his or her professional or occupational practice act, the board can order that licensee to remain in good standing.

Committed to protecting Illinois citizens, the IDFPR also serves physicians, says a department spokeswoman. The bearing of an Illinois license certifies a physician's good standing in Illinois and counts as an indicia of professional competence and integrity.

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