



# MEDICAL MINUTE *with* **IDFPR**

Quarterly Newsletter

Illinois Department of Financial and Professional Regulation

**SPRING 2022**

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# INTRODUCING THE EXECUTIVE DIRECTOR OF THE ILLINOIS STATE MEDICAL BOARD

**Cecilia Abundis** serves as the first Executive Director of the Illinois State Medical Board. She was appointed Director of the Division of Professional Regulation for the Illinois Department of Financial and Professional Regulation in May of 2019. Previously, she was an attorney in the Consumer Fraud Bureau of the Illinois Attorney General's Office. Ms. Abundis investigated companies and/or individuals for violations of Illinois' consumer protection laws; including mortgage lending institutions, mortgage brokers, forprofit schools, unauthorized immigration services providers and "notarios", car dealerships, auto manufacturers and suppliers, and auto finance companies.



Additionally, Ms. Abundis helped train Mexican prosecutors in trial advocacy skills in collaboration with the Conference of Western Attorneys General's Alliance Partnership. Prior to her role with the Illinois Attorney General's Office in 2006, Ms. Abundis worked at the Lawyers' Committee for Better Housing, where she started in 2001 as a law clerk and then became an Equal Justice Works ("EJW") Fellow in 2004. As an EJW Fellow, she created the source of income project where she represented tenants and fair housing organizations who were victims of housing discrimination and tenants facing eviction. Ms. Abundis continues volunteering with Equal Justice Works as an alumni reviewer of project proposals submitted by prospective EJW Fellows.

Ms. Abundis graduated from the University of Illinois at Urbana-Champaign with a Bachelor of Arts in Political Science and earned her J.D. from DePaul University College of Law.

In 2015, Ms. Abundis was awarded the Excellence in Legal Service award by the Mexican American Legal Defense and Educational Fund at its Chicago Gala. Ms. Abundis is also the recipient of the 2006 Distinguished Alumni Service Award from the Latino Law Student Association of DePaul University College of Law.

Ms. Abundis is fluent in Spanish and conversant in French and Italian.



## ILLINOIS STATE MEDICAL BOARD CREATED

On January 1, 2022, the Illinois State Medical Board was established. This new board is a combination of the former Illinois Medical Disciplinary Board and Illinois Medical Licensing Board, which were separate entities responsible for separate parts of the Department's functions. The Illinois Medical Disciplinary Board heard all disciplinary matters related to physicians and physician assistants, while the Illinois Medical Licensing Board considered all licensing matters for physicians. The Illinois State Medical Board combines both of these functions under one board, allowing for one board to consider all matters that relate to physicians and physician assistants.

The newly-created Illinois State Medical Board consists of 17 members, including two doctors of osteopathy, two physicians who collaborate with physician assistants, two chiropractic physicians, two physician assistants, and three members of the public. This diverse makeup gives the Illinois State Medical Board a broad realm of expertise to pull opinions and information from, creating a stronger board. The Illinois State Medical Board meets twice per month, the first and third Wednesday of each month, to ensure they have adequate time to review all matters before them. Currently, all members of the former disciplinary and licensing boards who wished to continue serve as members of the Illinois State Medical Board. The Department is always seeking applications from interested individuals to serve on the Illinois State Medical Board. Interested individuals can apply [here](#).



# ILLINOIS

## STATE MEDICAL BOARD NEEDS YOU!

If you live in Illinois and have a full-time active practice in Illinois, apply to be an expert reviewer for the board.



### Requirements to serve:

- Must be licensed in the State of Illinois as a physician and surgeon and must have no prior complaints or disciplinary history.
- Board certification by a member board of the American Board of Medical Specialties is preferred.

### The Board is looking for experts in the following specialties:

- Addiction Medicine with added certification in Family or Internal or Psychiatry
- Dermatology
- Family Medicine
- Gastroenterology
- Hematology
- Neurological Surgery
- Neurology
- Obstetrics and Gynecology
- Orthopedic Surgery
- Pain Medicine
- Plastic Surgery
- Psychiatry (Forensic and Addiction)
- Surgery
- Thoracic and Cardiac Surgery
- Urology
- Vascular Surgery



*Connect With*

## THE MEDICAL BOARD

1

### LINKS TO OUR WEBSITE

1. [Update your contact information](#)
2. [Physician webpage on the IDFPR website](#)
3. [Submit questions to IDFPR about your profession](#)

2

### FOLLOW IDFPR ON SOCIAL MEDIA!

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3

### FEEDBACK

We want your feedback on the Medical Minute with IDFPR newsletter! Are there updates you wish to see? An idea on how we could improve our publication? Please email IDFPR's public information officer, Chris Slaby, at [Christopher.Slaby@illinois.gov](mailto:Christopher.Slaby@illinois.gov)!







## INTERNATIONAL MEDICAL GRADUATES CAN JOIN THE FIGHT AGAINST COVID-19 IN ILLINOIS

IDFPR Secretary Mario Treto, Jr. signed a [proclamation on January 10](#) that allows physicians trained in a country outside the United States, but not yet licensed to practice medicine in the United States, to assist in providing vital healthcare services in Illinois during the COVID-19 pandemic.

International medical graduate (IMG) physicians may be delegated healthcare responsibilities from Illinois-licensed physicians and surgeons. IMG physicians may only provide treatment under the supervision of a licensed physician or surgeon during the Gubernatorial COVID-19 Disaster Proclamations.

Learn more about this initiative from [our informational video](#).

IMG physicians may apply to IDFPR by completing and submitting [this application](#).



## ALL YOU NEED TO KNOW ABOUT COMPLETING DEATH CERTIFICATES IN ILLINOIS

One of the more frequent (and preventable) complaints received by the Department is in reference to the signing of death certificates by physicians. The death certificate is required by a funeral home in order to proceed with burial, cremation, or transfer of the deceased out of state. The prompt signing of the death certificate will help to minimize any additional grieving by loved ones, while also creating a permanent record.

The death certificate is a legal document, not a scientific document. In Illinois, it is mandated under the Vitals Records Act (410 ILCS 535), "The medical certification shall be completed and signed within 48 hours after death by the physician in charge of the patient's care for the illness or condition which resulted in death." The act does not apply to coroner or medical examiner cases.

While the certifying physician may not know with 100% confidence the cause of death, this is not required. The standard is more likely than not, similar to what physicians use when establishing a clinical diagnosis. It is appropriate to use "probable" when completing a death certificate. Any good faith effort by the physician to use the most knowledgeable diagnosis places the provider free of liability. Not completing the death certificate or knowingly providing false information is a Class A misdemeanor. When physician hesitancy precludes signing the death certificate, the medical examiner or coroner is not bound to sign it. If the treating physician is unavailable, a physician associate or chief medical office may sign the death certificate.

When completing the death certificate, it is important to list a etiologically specific underlying cause of death, as opposed to a mechanism (shock, cardiac arrest, etc). The county coroner and medical examiner's offices are resources available should there be questions about the completion of the death certificate.

Please refer to the [CDC's Physicians' Handbook on Medical Certification of Death](#) for more information.



# CONSUMER CORNER: COMMON TELEHEALTH FRAUD SCHEMES YOU SHOULD KNOW ABOUT



As the COVID-19 pandemic radically changed every aspect of our lives, we've become accustomed to staying home and letting necessary goods and services come to us. This was especially true for healthcare as virtual medical visits and examinations (commonly referred to as "telehealth") took off. As the number of medical patients seeking telehealth visits increased during the pandemic, so did the potential for telehealth fraud.

There were 23-times the number of medical visits each week via telehealth than before the pandemic, according to a recent study<sup>1</sup> published in Health Affairs. Between mid-March and mid-October 2020, almost 40% (about 24.5 million) out of 63 million Medicare beneficiaries and enrollees received a Medicare telehealth service, according to the Centers for Medicare & Medicaid Services (CMS)<sup>2</sup>.

The Medicare Fraud Strike Force, a joint initiative between the Department of Justice and the Department of Health and Human Services<sup>3</sup>, works to prevent and deter fraud and enforce current anti-fraud laws around the country. In addition, the U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services, working in conjunction with the Health and Human Services Office of Inspector General<sup>3</sup>, are taking steps to increase accountability and decrease the presence of fraudulent providers.

The False Claims Act, primarily enforced by the Department of Justice<sup>4</sup>, provides guidance for

fraudulent activities including Telemedicine fraud. Common fraudulent activities are:

- Billing for unnecessary medical services
- Billing for services that were not provided
- Phantom patients
- Billing virtual appointments at a higher than the normal reimbursement rate
- Up-coding by:
  - Falsely extending the length of an appointment that is billed hourly
  - Exaggerating the complexity of a visit
  - Unbundling grouped or global procedures to file separate claims
  - Illegal kickbacks

## References

<sup>1</sup> <https://www.healthaffairs.org/doi/10.1377/hlthaff.2020.01786>

<sup>2</sup> <https://www.cms.gov/newsroom/press-releases/trump-administration-finalizes-permanent-expansion-medicare-telehealth-services-and-improved-payment>

<sup>3</sup> [https://oig.hhs.gov/documents/root/230/2020HealthCareTakedownFactSheet\\_9dtlhW4.pdf](https://oig.hhs.gov/documents/root/230/2020HealthCareTakedownFactSheet_9dtlhW4.pdf)

<sup>4</sup> <https://www.justice.gov/opa/pr/national-health-care-fraud-enforcement-action-results-charges-involving-over-14-billion>

# IDFPR DEPUTY MEDICAL COORDINATOR PUBLISHED IN THE WISCONSIN MEDICAL JOURNAL

Joseph E. Fojtik, MD, MPH, FACP, a Deputy Medical Coordinator for the Illinois Department of Financial and Professional Regulation, recently wrote a commentary published in the Wisconsin Medical Journal. The Three Confounding Elements of the Triple Aim addresses some of the central issues impeding the Triple Aim from achieving its goal of an affordable and sustainable healthcare delivery system. This is the first of a three-part series that will also introduce a new ethic, The Physician Ethic, which ascribes the need to recognize and protect the physician's cognitive space in order for the physician to safely evaluate and treat patients. The article can be accessed here: WMJ ([wmjonline.org](http://wmjonline.org)).

## CONGRATULATIONS TO SECRETARY TRETO AND DIRECTOR ABUNDIS!

IDFPR Secretary Mario Treto, Jr. was confirmed to his position by the Illinois Senate on March 28 and DPR Director Cecilia Abundis was confirmed on March 22. IDFPR is thankful for the experience, knowledge, and leadership they bring to the Department!



## CONGRATULATIONS TO DR. SHAMI GOYAL ON HER RECOGNITION BY CRAIN'S CHICAGO!

Congratulations to IDFPR Chief Medical Officer and Coordinator, Dr. Shami Goyal, on being named as one of Crain's Notable Executives of Color in Health Care! Dr. Goyal was one of 34 individuals selected for the honor on March 4, which highlights each recipient's contributions in expanding the service and diversity of health care. Learn more about Dr. Goyal's accomplishments in health care [here](#).



Dr. Goyal is responsible for the implementation of the Illinois Medical Practice Act, along with being the Act's Chief Enforcement Officer. IDFPR is thankful for the expertise and skill she brings as Chief Medical Officer and Coordinator.

Congratulations, Dr. Goyal!

## CONTACT US

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Springfield, Illinois 62786

### General Assistance:

1-888-473-4858

### Enforcement, Complaints, and Investigations

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Chicago, Illinois 60661

### Complaint Intake Unit:

312-814-6910

### General Assistance:

1-888-473-4858

### Professional Licensing:

1-800-560-6420

### TTY Line:

866-325-4949

[www.idfpr.illinois.gov/DPR.asp](http://www.idfpr.illinois.gov/DPR.asp)



State of Illinois

Illinois Department of Financial and Professional Regulation