



Sen. Thomas Cullerton

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LRB101 04187 SLF 57073 a

1 AMENDMENT TO SENATE BILL 411

2 AMENDMENT NO. _____. Amend Senate Bill 411 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Controlled Substances Act is
5 amended by changing Section 314.5 as follows:

6 (720 ILCS 570/314.5)

7 Sec. 314.5. Medication shopping; pharmacy shopping.

8 (a) It shall be unlawful for any person knowingly or
9 intentionally to fraudulently obtain or fraudulently seek to
10 obtain any controlled substance or prescription for a
11 controlled substance from a prescriber or dispenser while being
12 supplied with any controlled substance or prescription for a
13 controlled substance by another prescriber or dispenser,
14 without disclosing the fact of the existing controlled
15 substance or prescription for a controlled substance to the
16 prescriber or dispenser from whom the subsequent controlled

1 substance or prescription for a controlled substance is sought.

2 (b) It shall be unlawful for a person knowingly or
3 intentionally to fraudulently obtain or fraudulently seek to
4 obtain any controlled substance from a pharmacy while being
5 supplied with any controlled substance by another pharmacy,
6 without disclosing the fact of the existing controlled
7 substance to the pharmacy from which the subsequent controlled
8 substance is sought.

9 (c) A person may be in violation of Section 3.23 of the
10 Illinois Food, Drug and Cosmetic Act or Section 406 of this Act
11 when medication shopping or pharmacy shopping, or both.

12 (c-5) Effective January 1, 2018, each prescriber
13 possessing an Illinois controlled substances license shall
14 register with the Prescription Monitoring Program. Each
15 prescriber or his or her designee shall also document an
16 attempt to access patient information in the Prescription
17 Monitoring Program to assess patient access to controlled
18 substances when providing an initial prescription or
19 prescription refill for Schedule II narcotics such as opioids,
20 except for prescriptions for oncology treatment or palliative
21 care, or a 7-day or less supply provided by a hospital
22 emergency department when treating an acute, traumatic medical
23 condition. This attempt to access shall be documented in the
24 patient's medical record. The hospital shall facilitate the
25 designation of a prescriber's designee for the purpose of
26 accessing the Prescription Monitoring Program for services

1 provided at the hospital.

2 (d) When a person has been identified as having 2 ~~3~~ or more
3 prescribers or 2 ~~3~~ or more pharmacies, or both, that do not
4 utilize a common electronic file as specified in Section 20 of
5 the Pharmacy Practice Act for controlled substances within the
6 course of a continuous 30-day period, the Prescription
7 Monitoring Program shall ~~may~~ issue an unsolicited report to the
8 prescribers, dispensers, and their designees informing them of
9 the potential medication shopping. If an unsolicited report is
10 issued to a prescriber or prescribers, then the report must
11 also be sent to the applicable dispensing pharmacy.

12 (e) Nothing in this Section shall be construed to create a
13 requirement that any prescriber, dispenser, or pharmacist
14 request any patient medication disclosure, report any patient
15 activity, or prescribe or refuse to prescribe or dispense any
16 medications.

17 (f) This Section shall not be construed to apply to
18 inpatients or residents at hospitals or other institutions or
19 to institutional pharmacies.

20 (g) Any patient feedback, including grades, ratings, or
21 written or verbal statements, in opposition to a clinical
22 decision that the prescription of a controlled substance is not
23 medically necessary shall not be the basis of any adverse
24 action, evaluation, or any other type of negative
25 credentialing, contracting, licensure, or employment action
26 taken against a prescriber or dispenser.

1 (Source: P.A. 99-480, eff. 9-9-15; 100-564, eff. 1-1-18.)".