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1 AN ACT concerning regulation.

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

Section 1. This Act may be referred to as the Alternatives
to Opioids Act of 2018.

Section 5. The Compassionate Use of Medical Cannabis Pilot
Program Act is amended by changing Sections 5, 7, 10, 35, 55,
60, 65, 75, 130, and 160 and by adding Section 62 as follows:

9 (410 ILCS 130/5)

10 (Section scheduled to be repealed on July 1, 2020)

11 Sec. 5. Findings.

(a) The recorded use of cannabis as a medicine goes back nearly 5,000 years. Modern medical research has confirmed the beneficial uses of cannabis in treating or alleviating the pain, nausea, and other symptoms associated with a variety of debilitating medical conditions, including cancer, multiple sclerosis, and HIV/AIDS, as found by the National Academy of Sciences' Institute of Medicine in March 1999.

(b) Studies published since the 1999 Institute of Medicine report continue to show the therapeutic value of cannabis in treating a wide array of debilitating medical conditions. These include relief of the neuropathic pain caused by multiple SB0336 Engrossed - 2 - LRB100 05118 RJF 15128 b

1 sclerosis, HIV/AIDS, and other illnesses that often fail to 2 respond to conventional treatments and relief of nausea, 3 vomiting, and other side effects of drugs used to treat 4 HIV/AIDS and hepatitis C, increasing the chances of patients 5 continuing on life-saving treatment regimens.

(c) Cannabis has many currently accepted medical uses in 6 7 the United States, having been recommended by thousands of licensed physicians to at least 600,000 patients in states with 8 9 medical cannabis laws. The medical utility of cannabis is 10 recognized by a wide range of medical and public health 11 organizations, including the American Academy of HIV Medicine, 12 the American College of Physicians, the American Nurses 13 Association, the American Public Health Association, the 14 Leukemia & Lymphoma Society, and many others.

(d) Data from the Federal Bureau of Investigation's Uniform Crime Reports and the Compendium of Federal Justice Statistics show that approximately 99 out of every 100 cannabis arrests in the U.S. are made under state law, rather than under federal law. Consequently, changing State law will have the practical effect of protecting from arrest the vast majority of seriously ill patients who have a medical need to use cannabis.

(d-5) In 2014, the Task Force on Veterans' Suicide was created by the Illinois General Assembly to gather data on veterans' suicide prevention. Data from a U.S. Department of Veterans Affairs study indicates that 22 veterans commit suicide each day. SB0336 Engrossed - 3 - LRB100 05118 RJF 15128 b

1	(d-10) According to the State of Illinois Opioid Action
2	Plan released in September 2017, "The opioid epidemic is the
3	most significant public health and public safety crisis facing
4	Illinois".
5	According to the Action Plan, "Fueled by the growing opioid
6	epidemic, drug overdoses have now become the leading cause of
7	death nationwide for people under the age of 50. In Illinois,
8	opioid overdoses have killed nearly 11,000 people since 2008.
9	Just last year, nearly 1,900 people died of overdoses-almost
10	twice the number of fatal car accidents. Beyond these deaths
11	are thousands of emergency department visits, hospital stays,
12	as well as the pain suffered by individuals, families, and
13	communities".
14	According to the Action Plan, "At the current rate, the
15	opioid epidemic will claim the lives of more than 2,700
16	Illinoisans in 2020".
17	Further, the Action Plan states, "Physical tolerance to
18	opioids can begin to develop as early as two to three days
19	following the continuous use of opioids, which is a large
20	factor that contributes to their addictive potential".
21	The 2017 State of Illinois Opioid Action Plan also states,
22	"The increase in OUD [opioid use disorder] and opioid overdose
23	deaths is largely due to the dramatic rise in the rate and
24	amount of opioids prescribed for pain over the past decades".
25	Further, according to the Action Plan, "In the absence of
26	alternative treatments, reducing the supply of prescription

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opioids too abruptly may drive more people to switch to using illicit drugs (including heroin), thus increasing the risk of overdose".

4 (e) Alaska, Arizona, California, Colorado, Connecticut,
5 Delaware, Hawaii, Maine, Massachusetts, Michigan, Montana,
6 Nevada, New Jersey, New Mexico, Oregon, Rhode Island, Vermont,
7 Washington, and Washington, D.C. have removed state-level
8 criminal penalties from the medical use and cultivation of
9 cannabis. Illinois joins in this effort for the health and
10 welfare of its citizens.

(f) States are not required to enforce federal law or prosecute people for engaging in activities prohibited by federal law. Therefore, compliance with this Act does not put the State of Illinois in violation of federal law.

(g) State law should make a distinction between the medical and non-medical uses of cannabis. Hence, the purpose of this Act is to protect patients with debilitating medical conditions, as well as their physicians and providers, from arrest and prosecution, criminal and other penalties, and property forfeiture if the patients engage in the medical use of cannabis.

22

(Source: P.A. 98-122, eff. 1-1-14; 99-519, eff. 6-30-16.)

23 (410 ILCS 130/7)

24 (Section scheduled to be repealed on July 1, 2020)

25 Sec. 7. Lawful user and lawful products. For the purposes

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1 of this Act and to clarify the legislative findings on the 2 lawful use of cannabis:

3 (1) A cardholder under this Act shall not be considered 4 an unlawful user or addicted to narcotics solely as a 5 result of his or her qualifying patient or designated 6 caregiver status.

7 (2) All medical cannabis products purchased by a 8 qualifying patient at a licensed dispensing organization 9 shall be lawful products and a distinction shall be made 10 between medical and non-medical uses of cannabis as a 11 result of the qualifying patient's cardholder status under 12 the authorized use granted under State law.

13 (3) An individual in possession of an endorsement card 14 from a dispensary organization under Section 62 shall not 15 be considered an unlawful user or addicted to narcotics 16 solely as a result of his or her endorsement card.

17 (Source: P.A. 99-519, eff. 6-30-16.)

18 (410 ILCS 130/10)

19 (Section scheduled to be repealed on July 1, 2020)

Sec. 10. Definitions. The following terms, as used in this
Act, shall have the meanings set forth in this Section:

22 (a) "Adequate supply" means:

(1) 2.5 ounces of usable cannabis during a period of 14
days and that is derived solely from an intrastate source.
(2) Subject to the rules of the Department of Public

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Health, a patient may apply for a waiver where a physician 1 2 provides a substantial medical basis in a signed, written statement asserting that, based on the patient's medical 3 history, in the physician's professional judgment, 2.5 4 5 ounces is an insufficient adequate supply for a 14-day period to properly alleviate the patient's debilitating 6 7 medical condition or symptoms associated with the 8 debilitating medical condition.

9 (3) This subsection may not be construed to authorize 10 the possession of more than 2.5 ounces at any time without 11 authority from the Department of Public Health.

12 (4) The pre-mixed weight of medical cannabis used in 13 making a cannabis infused product shall apply toward the 14 limit on the total amount of medical cannabis a registered 15 qualifying patient may possess at any one time.

(b) "Cannabis" has the meaning given that term in Section 3of the Cannabis Control Act.

(c) "Cannabis plant monitoring system" means a system that 18 includes, but is not limited to, testing and data collection 19 20 established and maintained by the registered cultivation center and available to the Department for the purposes of 21 22 documenting each cannabis plant and for monitoring plant 23 development throughout the life cycle of a cannabis plant cultivated for the intended use by a qualifying patient from 24 25 seed planting to final packaging.

26 (d) "Cardholder" means a qualifying patient or a designated

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caregiver who has been issued and possesses a valid registry
 identification card by the Department of Public Health.

3 (e) "Cultivation center" means a facility operated by an 4 organization or business that is registered by the Department 5 of Agriculture to perform necessary activities to provide only 6 registered medical cannabis dispensing organizations with 7 usable medical cannabis.

8 (f) "Cultivation center agent" means a principal officer, 9 board member, employee, or agent of a registered cultivation 10 center who is 21 years of age or older and has not been 11 convicted of an excluded offense.

12 (g) "Cultivation center agent identification card" means a 13 document issued by the Department of Agriculture that 14 identifies a person as a cultivation center agent.

15 (h) "Debilitating medical condition" means one or more of 16 the following:

17 (1) cancer, glaucoma, positive status for human immunodeficiency virus, acquired immune 18 deficiency syndrome, hepatitis C, amyotrophic lateral sclerosis, 19 20 Crohn's disease, agitation of Alzheimer's disease, 21 cachexia/wasting syndrome, muscular dystrophy, severe 22 fibromyalgia, spinal cord disease, including but not 23 limited to arachnoiditis, Tarlov cysts, hydromyelia, syringomyelia, Rheumatoid arthritis, fibrous dysplasia, 24 25 cord injury, traumatic brain spinal injury and 26 post-concussion syndrome, Multiple Sclerosis,

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Arnold-Chiari 1 malformation and Syringomyelia, 2 Spinocerebellar Ataxia (SCA), Parkinson's, Tourette's, 3 Myoclonus, Dystonia, Reflex Sympathetic Dystrophy, RSD (Complex Regional Pain Syndromes Type I), Causalgia, CRPS 4 5 (Complex Regional Pain Syndromes Type II), Neurofibromatosis, Chronic 6 Inflammatory Demyelinating Polyneuropathy, Sjogren's syndrome, Lupus, Interstitial 7 8 Cystitis, Myasthenia Gravis, Hydrocephalus, nail-patella 9 syndrome, residual limb pain, seizures (including those 10 characteristic of epilepsy), post-traumatic stress 11 disorder (PTSD), or the treatment of these conditions;

(1.5) terminal illness with a diagnosis of 6 months or less; if the terminal illness is not one of the qualifying debilitating medical conditions, then the physician shall on the certification form identify the cause of the terminal illness; or

17 (2) any other debilitating medical condition or its
18 treatment that is added by the Department of Public Health
19 by rule as provided in Section 45.

20 <u>Through June 30, 2020, "debilitating medical condition"</u> 21 <u>includes any other medical condition for which an opioid has</u> 22 <u>been or could be prescribed by a physician based on generally</u> 23 <u>accepted standards of care.</u>

(i) "Designated caregiver" means a person who: (1) is at
least 21 years of age; (2) has agreed to assist with a
patient's medical use of cannabis; (3) has not been convicted

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of an excluded offense; and (4) assists no more than one registered qualifying patient with his or her medical use of cannabis.

4 (j) "Dispensing organization agent identification card" 5 means a document issued by the Department of Financial and 6 Professional Regulation that identifies a person as a medical 7 cannabis dispensing organization agent.

8 (k) "Enclosed, locked facility" means a room, greenhouse, 9 building, or other enclosed area equipped with locks or other 10 security devices that permit access only by a cultivation 11 center's agents or a dispensing organization's agent working 12 for the registered cultivation center or the registered 13 dispensing organization to cultivate, store, and distribute 14 cannabis for registered qualifying patients.

15 <u>(k-5) "Endorsement card" means documentation provided by a</u> 16 <u>medical cannabis dispensing organization to an individual who</u> 17 <u>receives medical cannabis under Section 62.</u>

18 (1) "Excluded offense" for cultivation center agents and19 dispensing organizations means:

(1) a violent crime defined in Section 3 of the Rights
of Crime Victims and Witnesses Act or a substantially
similar offense that was classified as a felony in the
jurisdiction where the person was convicted; or

(2) a violation of a state or federal controlled
 substance law, the Cannabis Control Act, or the
 Methamphetamine Control and Community Protection Act that

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was classified as a felony in the jurisdiction where the 1 2 was convicted, except that the registering person Department may waive this restriction if the person 3 demonstrates to the registering Department's satisfaction 4 5 that his or her conviction was for the possession, cultivation, transfer, or delivery of a reasonable amount 6 7 of cannabis intended for medical use. This exception does not apply if the conviction was under state law and 8 9 involved a violation of an existing medical cannabis law.

For purposes of this subsection, the Department of Public Health shall determine by emergency rule within 30 days after the effective date of this amendatory Act of the 99th General Assembly what constitutes a "reasonable amount".

(1-5) (Blank). "Excluded offense" for a qualifying patient 14 15 or designated caregiver means a violation of state or federal 16 controlled substance law, the Cannabis Control Act, or the 17 Methamphetamine and Community Protection Act that was classified as a felony in the jurisdiction where the person was 18 19 convicted, except that the registering Department may waive 20 this restriction if the person demonstrates to the registering Department's satisfaction that his or her conviction was for 21 22 the possession, cultivation, transfer, or delivery of a 23 reasonable amount of cannabis intended for medical use. This exception does not apply if the conviction was under state law 24 25 and involved a violation of an existing medical cannabis law. 26 For purposes of this subsection, the Department of -Public SB0336 Engrossed - 11 - LRB100 05118 RJF 15128 b

Health shall determine by emergency rule within 30 days after the effective date of this amendatory Act of the 99th General Assembly what constitutes a "reasonable amount".

4 (m) "Medical cannabis cultivation center registration"
5 means a registration issued by the Department of Agriculture.

"Medical cannabis container" 6 (n) means а sealed, 7 traceable, food compliant, tamper resistant, tamper evident 8 container, or package used for the purpose of containment of 9 medical cannabis from a cultivation center to a dispensing organization. 10

11 (\circ) "Medical cannabis dispensing organization", or 12 "dispensing organization", or "dispensary organization" means a facility operated by an organization or business that is 13 registered by the Department of Financial and Professional 14 15 Regulation to acquire medical cannabis from a registered 16 cultivation center for the purpose of dispensing cannabis, 17 paraphernalia, or related supplies and educational materials to registered qualifying patients. 18

(p) "Medical cannabis dispensing organization agent" or "dispensing organization agent" means a principal officer, board member, employee, or agent of a registered medical cannabis dispensing organization who is 21 years of age or older and has not been convicted of an excluded offense.

(q) "Medical cannabis infused product" means food, oils, ointments, or other products containing usable cannabis that are not smoked. SB0336 Engrossed - 12 - LRB100 05118 RJF 15128 b

1 (r) "Medical use" means the acquisition; administration; 2 delivery; possession; transfer; transportation; or use of 3 cannabis to treat or alleviate a registered qualifying 4 patient's debilitating medical condition or symptoms 5 associated with the patient's debilitating medical condition.

6 (r-5) "Opioid" means a narcotic drug or substance that is a
7 Schedule II controlled substance under paragraph (1), (2), (3),
8 or (5) of subsection (b) or under subsection (c) of Section 206
9 of the Illinois Controlled Substances Act.

10 (s) "Physician" means a doctor of medicine or doctor of 11 osteopathy licensed under the Medical Practice Act of 1987 to 12 practice medicine and who has a controlled substances license 13 under Article III of the Illinois Controlled Substances Act. It 14 does not include a licensed practitioner under any other Act 15 including but not limited to the Illinois Dental Practice Act.

16 (t) "Qualifying patient" means a person who has been 17 diagnosed by a physician as having a debilitating medical 18 condition.

19 (u) "Registered" means licensed, permitted, or otherwise 20 certified by the Department of Agriculture, Department of 21 Public Health, or Department of Financial and Professional 22 Regulation.

(v) "Registry identification card" means a document issued by the Department of Public Health that identifies a person as a registered qualifying patient or registered designated caregiver. SB0336 Engrossed - 13 - LRB100 05118 RJF 15128 b

1 (w) "Usable cannabis" means the seeds, leaves, buds, and 2 flowers of the cannabis plant and any mixture or preparation 3 thereof, but does not include the stalks, and roots of the 4 plant. It does not include the weight of any non-cannabis 5 ingredients combined with cannabis, such as ingredients added 6 to prepare a topical administration, food, or drink.

7 "Verification system" means a Web-based system (X) 8 established and maintained by the Department of Public Health 9 that is available to the Department of Agriculture, the 10 Department of Financial and Professional Regulation, law 11 enforcement personnel, and registered medical cannabis 12 dispensing organization agents on a 24-hour basis for the 13 verification of registry identification cards, the tracking of delivery of medical cannabis to medical cannabis dispensing 14 organizations, and the tracking of the date of sale, amount, 15 16 and price of medical cannabis purchased by a registered 17 qualifying patient.

(y) "Written certification" means a document dated and 18 19 signed by a physician, stating (1) that the qualifying patient 20 has a debilitating medical condition and specifying the debilitating medical condition the qualifying patient has; and 21 22 (2) that the physician is treating or managing treatment of the 23 patient's debilitating medical condition. written А certification shall be made only in the course of a bona fide 24 25 physician-patient relationship, after the physician has 26 completed an assessment of the qualifying patient's medical

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history, reviewed relevant records related to the patient's
 debilitating condition, and conducted a physical examination.

3 <u>(z) "Bona fide physician-patient relationship" means a</u> 4 <u>relationship in which the physician has an ongoing</u> 5 <u>responsibility for the assessment, care, and treatment of a</u> 6 <u>patient's debilitating medical condition or a symptom of the</u> 7 <u>patient's debilitating medical condition.</u>

A veteran who has received treatment at a VA hospital shall be deemed to have a bona fide physician-patient relationship with a VA physician if the patient has been seen for his or her debilitating medical condition at the VA Hospital in accordance with VA Hospital protocols.

A bona fide physician-patient relationship under this subsection is a privileged communication within the meaning of Section 8-802 of the Code of Civil Procedure.

16 (Source: P.A. 98-122, eff. 1-1-14; 98-775, eff. 1-1-15; 99-519, 17 eff. 6-30-16.)

18 (410 ILCS 130/35)

19 (Section scheduled to be repealed on July 1, 2020)

20 Sec. 35. Physician requirements.

(a) A physician who certifies a debilitating medical
 condition for a qualifying patient shall comply with all of the
 following requirements:

(1) The Physician shall be currently licensed under the
 Medical Practice Act of 1987 to practice medicine in all

its branches and in good standing, and must hold a
 controlled substances license under Article III of the
 Illinois Controlled Substances Act.

4 (2) A physician certifying a patient's condition shall
5 comply with generally accepted standards of medical
6 practice, the provisions of the Medical Practice Act of
7 1987 and all applicable rules.

8 (3) The physical examination required by this Act may
9 not be performed by remote means, including telemedicine.

10 (4) The physician shall maintain a record-keeping 11 system for all patients for whom the physician has 12 certified the patient's medical condition. These records 13 shall be accessible to and subject to review by the 14 Department of Public Health and the Department of Financial 15 and Professional Regulation upon request.

(b) A physician may not:

16

(1) accept, solicit, or offer any form of remuneration
from or to a qualifying patient, primary caregiver,
cultivation center, or dispensing organization, including
each principal officer, board member, agent, and employee,
to certify a patient, other than accepting payment from a
patient for the fee associated with the required
examination;

(2) offer a discount of any other item of value to a
 qualifying patient who uses or agrees to use a particular
 primary caregiver or dispensing organization to obtain

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1 medical cannabis;

2 (3) conduct a personal physical examination of a 3 patient for purposes of diagnosing a debilitating medical 4 condition at a location where medical cannabis is sold or 5 distributed or at the address of a principal officer, 6 agent, or employee or a medical cannabis organization;

7 (4) hold a direct or indirect economic interest in a 8 cultivation center or dispensing organization if he or she 9 recommends the use of medical cannabis to qualified 10 patients or is in a partnership or other fee or 11 profit-sharing relationship with a physician who 12 recommends medical cannabis, except for the limited 13 purpose of performing a medical cannabis related research 14 studv;

15 (5) serve on the board of directors or as an employee
16 of a cultivation center or dispensing organization;

17 (6) refer patients to a cultivation center, a 18 dispensing organization, or a registered designated 19 caregiver; or

20 (7) advertise in a cultivation center or a dispensing
 21 organization.

(c) The Department of Public Health may with reasonable cause refer a physician, who has certified a debilitating medical condition of a patient, to the Illinois Department of Financial and Professional Regulation for potential violations of this Section. SB0336 Engrossed - 17 - LRB100 05118 RJF 15128 b

(d) Any violation of this Section or any other provision of
 this Act or rules adopted under this Act is a violation of the
 Medical Practice Act of 1987.

4 (e) A physician who certifies a debilitating medical 5 condition for a qualifying patient may notify the Department in writing if the physician has reason to believe either that the 6 registered qualifying patient has ceased to suffer from a 7 8 debilitating medical condition or that continued use of medical 9 cannabis would result in contraindication with the patient's other medication. The registered qualifying patient's registry 10 11 identification card shall be revoked by the Department of 12 Public Health after receiving the physician's notification. 13 (Source: P.A. 98-122, eff. 1-1-14; 98-1172, eff. 1-12-15;

14 99-519, eff. 6-30-16.)

15 (410 ILCS 130/55)

16 (Section scheduled to be repealed on July 1, 2020)

Sec. 55. Registration of qualifying patients anddesignated caregivers.

(a) The Department of Public Health shall issue registry identification cards to qualifying patients and designated caregivers who submit a completed application, and at minimum, the following, in accordance with Department of Public Health rules:

24 (1) A written certification, on a form developed by the
 25 Department of Public Health and issued by a physician,

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within 90 days immediately preceding the date of an
application;

(2) upon the execution of applicable privacy waivers, 3 the patient's medical documentation related to his or her 4 5 debilitating condition and any other information that may 6 be reasonably required by the Department of Public Health to confirm that the physician and patient have a bona fide 7 8 physician-patient relationship, that the qualifying 9 patient is in the physician's care for his or her 10 debilitating medical condition, and to substantiate the 11 patient's diagnosis;

12

(3) the application or renewal fee as set by rule;

(4) the name, address, date of birth, and social
security number of the qualifying patient, except that if
the applicant is homeless no address is required;

16 (5) the name, address, and telephone number of the 17 qualifying patient's physician;

18 (6) the name, address, and date of birth of the 19 designated caregiver, if any, chosen by the qualifying 20 patient;

(7) the name of the registered medical cannabis
 dispensing organization the qualifying patient designates;

(8) signed statements from the patient and designated
 caregiver asserting that they will not divert medical
 cannabis; and

26

(9) (blank). completed background checks for the

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1 patient and designated caregiver. 2 (Source: P.A. 98-122, eff. 1-1-14.) 3 (410 ILCS 130/60) 4 (Section scheduled to be repealed on July 1, 2020) Sec. 60. Issuance of registry identification cards. 5 6 (a) Except as provided in subsection (b), the Department of Public Health shall: 7 (1) verify the information contained in an application 8 9 or renewal for a registry identification card submitted 10 under this Act, and approve or deny an application or 11 renewal, within 30 days of receiving a completed 12 application or renewal application and all supporting documentation specified in Section 55; 13 14 (2)issue registry identification cards to а 15 qualifying patient and his or her designated caregiver, if 16 any, within 15 business days of approving the application or renewal; 17 (3) enter the registry identification number of the 18 19 registered dispensing organization the patient designates into the verification system; and 20 21 (4) allow for an electronic application process, and 22 provide a confirmation by electronic or other methods that 23 an application has been submitted. 24 The Department of Public Health may not issue a (b) 25 registry identification card to a qualifying patient who is

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1 under 18 years of age, unless that patient suffers from 2 seizures, including those characteristic of epilepsy, or as 3 provided by administrative rule. The Department of Public Health shall adopt rules for the issuance of a registry 4 5 identification card for qualifying patients who are under 18 years of age and suffering from seizures, including those 6 7 characteristic of epilepsy. The Department of Public Health may adopt rules to allow other individuals under 18 years of age to 8 9 become registered qualifying patients under this Act with the 10 consent of a parent or legal guardian. Registered gualifying 11 patients under 18 years of age shall be prohibited from 12 consuming forms of cannabis other than medical cannabis infused 13 products and purchasing any usable cannabis.

14 (c) A veteran who has received treatment at a VA hospital 15 is deemed to have a bona fide physician-patient relationship 16 with a VA physician if the patient has been seen for his or her 17 debilitating medical condition at the VA hospital in accordance hospital protocols. All reasonable inferences 18 with VA 19 regarding the existence of a bona fide physician-patient 20 relationship shall be drawn in favor of an applicant who is a 21 veteran and has undergone treatment at a VA hospital.

(c-10) An individual who submits an application as someone who is terminally ill shall have all fees and fingerprinting requirements waived. The Department of Public Health shall within 30 days after this amendatory Act of the 99th General Assembly adopt emergency rules to expedite approval for SB0336 Engrossed - 21 - LRB100 05118 RJF 15128 b

terminally ill individuals. These rules shall include, but not be limited to, rules that provide that applications by individuals with terminal illnesses shall be approved or denied within 14 days of their submission.

5 (d) Upon the approval of the registration and issuance of a registry card under this Section, the Department of Public 6 7 Health shall forward the designated caregiver or registered qualified patient's driver's registration number to the 8 9 Secretary of State and certify that the individual is permitted 10 to engage in the medical use of cannabis. For the purposes of 11 law enforcement, the Secretary of State shall make a notation 12 on the person's driving record stating the person is a 13 registered qualifying patient who is entitled to the lawful 14 medical use of cannabis. If the person no longer holds a valid 15 registry card, the Department shall notify the Secretary of 16 State and the Secretary of State shall remove the notation from 17 the person's driving record. The Department and the Secretary of State may establish a system by which the information may be 18 19 shared electronically.

(e) Upon the approval of the registration and issuance of a registry card under this Section, the Department of Public Health shall electronically forward the registered qualifying patient's identification card information to the Prescription Monitoring Program established under the Illinois Controlled Substances Act and certify that the individual is permitted to engage in the medical use of cannabis. For the purposes of SB0336 Engrossed - 22 - LRB100 05118 RJF 15128 b

patient care, the Prescription Monitoring Program shall make a 1 2 notation on the person's prescription record stating that the person is a registered qualifying patient who is entitled to 3 4 the lawful medical use of cannabis. If the person no longer 5 holds a valid registry card, the Department of Public Health 6 Prescription Monitoring shall notify the Program and Department of Human Services to remove the notation from the 7 8 person's record. The Department of Human Services and the 9 Prescription Monitoring Program shall establish a system by 10 which the information may be shared electronically. This 11 confidential list may not be combined or linked in any manner 12 with any other list or database except as provided in this 13 Section.

(f) (Blank). All applicants for a registry card shall be 14 15 fingerprinted as part of the application process if they are a 16 first time applicant, if their registry card has already 17 expired, or if they previously have had their registry card revoked or otherwise denied. At renewal, cardholders whose 18 19 registry cards have not yet expired, been revoked, or otherwise 20 denied shall not be subject to fingerprinting. Registry cards shall be revoked by the Department of Public Health if the 21 22 Department of Public Health is notified by the Secretary of State that a cardholder has been convicted of an excluded 23 offense. For purposes of enforcing this subsection, the 24 25 Department of Public Health and Secretary of State shall establish a system by which violations reported to the 26

SB0336 Engrossed - 23 - LRB100 05118 RJF 15128 b Secretary of State under paragraph 18 of subsection (a) of 1 2 Section 6-205 of the Illinois Vehicle Code shall be shared with the Department of Public Health. 3 4 (Source: P.A. 98-122, eff. 1-1-14; 98-775, eff. 1-1-15; 99-519, 5 eff. 6-30-16.) (410 ILCS 130/62 new) 6 7 Sec. 62. Opioid Prescription Pilot Program. 8 (a) Notwithstanding Sections 55 and 60, a person who has received a physician certification for <u>a medical condition for</u> 9 10 which an opioid has been or could be prescribed by a physician 11 based on generally accepted standards of care is entitled to 12 purchase medical cannabis from a dispensing organization. 13 In order to purchase medical cannabis from a dispensing organization, the person must take the physician certification 14 15 and prescription, if provided, to the dispensing organization 16 of his or her choice. A physician issuing a certification under this Section 17 shall indicate, on the certification form, the length of time 18 of the opioid prescription, including any refills or renewals, 19 20 that the physician did or could have prescribed to the patient. 21 Before dispensing medical cannabis to a person under this 22 Section, the dispensing organization must verify that the 23 person is not an active registered qualifying patient with a 24 valid medical cannabis registry identification card. Upon verification of the physician certification, the 25

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dispensing organization shall, subject to the limitations in subsection (h) of Section 130, dispense medical cannabis to the person according to the following schedule:

4 (1) If the certification indicates a prescription,
5 including any refills or renewals, for 7 days or less, then
6 the dispensing organization shall dispense medical
7 cannabis to the person for a length of time equivalent to 4
8 times the length of the prescription.

9 (2) If the certification indicates a prescription, 10 including any refills or renewals, for more than 7 days but 11 less than 30 days, then the dispensing organization shall 12 dispense medical cannabis to the person for a length of 13 time equivalent to 3 times the length of the prescription.

14 <u>(3) If the certification indicates a prescription,</u> 15 <u>including any refills or renewals, for 30 days or more,</u> 16 <u>then the dispensing organization shall dispense medical</u> 17 <u>cannabis to the person for a length of time equivalent to</u> 18 twice the length of the prescription.

19 <u>Upon dispensing medical cannabis to a person, the</u> 20 <u>dispensing organization must enter information about the</u> 21 <u>person in the verification system and provide the person with</u> 22 <u>an endorsement card to certify that the person is in lawful</u> 23 <u>possession of medical cannabis.</u>

24The Department of Public Health shall review the25information entered into the verification system by the26dispensing organizations under this Section and electronically

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1	forward the information to the Prescription Monitoring Program
2	under the Illinois Controlled Substances Act and certify that
3	the individual is permitted to engage in the medical use of
4	cannabis. For the purposes of patient care, the Prescription
5	Monitoring Program shall make a notation on the person's
6	prescription record stating that the person is entitled to the
7	lawful medical use of cannabis. If the person no longer holds a
8	valid endorsement card and does not have a valid registry
9	identification card, the Department of Public Health shall
10	notify the Prescription Monitoring Program and Department of
11	Human Services to remove the notation from the person's record.
12	This confidential notation may not be combined or linked in any
13	manner with any other list or database except those authorized
14	by this Act.
14 15	<u>by this Act.</u> <u>A person who wishes to continue use of medical cannabis</u>
15	A person who wishes to continue use of medical cannabis
15 16	A person who wishes to continue use of medical cannabis shall apply for a registration card with the Department of
15 16 17	A person who wishes to continue use of medical cannabis shall apply for a registration card with the Department of Public Health.
15 16 17 18	<u>A person who wishes to continue use of medical cannabis</u> <u>shall apply for a registration card with the Department of</u> <u>Public Health.</u> <u>(b) The provisions of this Section are inoperative on and</u>
15 16 17 18	<u>A person who wishes to continue use of medical cannabis</u> <u>shall apply for a registration card with the Department of</u> <u>Public Health.</u> <u>(b) The provisions of this Section are inoperative on and</u>
15 16 17 18 19	A person who wishes to continue use of medical cannabis shall apply for a registration card with the Department of <u>Public Health.</u> (b) The provisions of this Section are inoperative on and after July 1, 2020.
15 16 17 18 19 20	A person who wishes to continue use of medical cannabis shall apply for a registration card with the Department of Public Health. (b) The provisions of this Section are inoperative on and after July 1, 2020. (410 ILCS 130/65)
15 16 17 18 19 20 21	A person who wishes to continue use of medical cannabis shall apply for a registration card with the Department of Public Health. (b) The provisions of this Section are inoperative on and after July 1, 2020. (410 ILCS 130/65) (Section scheduled to be repealed on July 1, 2020)
15 16 17 18 19 20 21 22	A person who wishes to continue use of medical cannabis shall apply for a registration card with the Department of <u>Public Health.</u> (b) The provisions of this Section are inoperative on and after July 1, 2020. (410 ILCS 130/65) (Section scheduled to be repealed on July 1, 2020) Sec. 65. Denial of registry identification cards.

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1 (1) did not provide the required information and 2 materials;

3 (2) previously had a registry identification card 4 revoked;

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(3) did not meet the requirements of this Act; or

(4) provided false or falsified information; or \cdot

(5) violated any requirement of this Act.

8 (b) <u>(Blank)</u>. Except as provided in subsection (b 5) of this 9 Section, no person who has been convicted of a felony under the 10 Illinois Controlled Substances Act, Cannabis Control Act, or 11 Methamphetamine Control and Community Protection Act, or 12 similar provision in a local ordinance or other jurisdiction is 13 eligible to receive a registry identification card.

14 (b-5) <u>(Blank).</u> If a person was convicted of a felony under 15 the Cannabis Control Act or a similar provision of a local 16 ordinance or of a law of another jurisdiction, and the action 17 warranting that felony is no longer considered a felony after 18 the effective date of this amendatory Act of the 99th General 19 Assembly, that person shall be eligible to receive a registry 20 identification card.

(c) The Department of Public Health may deny an application or renewal for a designated caregiver chosen by a qualifying patient whose registry identification card was granted only if:

(1) the designated caregiver does not meet the
 requirements of subsection (i) of Section 10;

(2) the applicant did not provide the information

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- 1 required;
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(3) the prospective patient's application was denied;

- 3 (4) the designated caregiver previously had a registry
 4 identification card revoked; or
- 5 6

(5) the applicant or the designated caregiver provided false or falsified information; or $\overline{\cdot}$

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(6) violated any requirement of this Act.

8 (d) (Blank). The Department of Public Health through the 9 Department of State Police shall conduct a background check of 10 the prospective qualifying patient and designated caregiver in 11 order to carry out this Section. The Department of State Police 12 shall charge a fee for conducting the criminal history record check, which shall be deposited in the State Police Services 13 Fund and shall not exceed the actual cost of the record check. 14 15 Each person applying as a qualifying patient or a designated 16 caregiver shall submit a full set of fingerprints to the 17 Department of State Police for the purpose of obtaining a State and federal criminal records check. These fingerprints shall be 18 19 checked against the fingerprint records now and hereafter, to 20 the extent allowed by law, filed in the Department of State Police and Federal Bureau of Investigation criminal history 21 22 records databases. The Department of State Police shall 23 furnish, following positive identification, all Illinois conviction information to the Department of Public Health. The 24 25 Department of Public Health may waive the submission of a 26 qualifying patient's complete fingerprints based on (1) the

severity of the patient's illness and (2) the inability of the qualifying patient to supply those fingerprints, provided that a complete criminal background check is conducted by the Department of State Police prior to the issuance of a registry identification card.

6 (e) The Department of Public Health shall notify the 7 qualifying patient who has designated someone to serve as his 8 or her designated caregiver if a registry identification card 9 will not be issued to the designated caregiver.

10 (f) Denial of an application or renewal is considered a 11 final Department action, subject to judicial review. 12 Jurisdiction and venue for judicial review are vested in the 13 Circuit Court.

14 (Source: P.A. 98-122, eff. 1-1-14; 98-1172, eff. 1-12-15; 15 99-697, eff. 7-29-16.)

16 (410 ILCS 130/75)

17 (Section scheduled to be repealed on July 1, 2020)

Sec. 75. Notifications to Department of Public Health and responses; civil penalty.

20 (a) The following notifications and Department of Public21 Health responses are required:

(1) A registered qualifying patient shall notify the
 Department of Public Health of any change in his or her
 name or address, or if the registered qualifying patient
 ceases to have his or her debilitating medical condition,

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1 within 10 days of the change.

(2) A registered designated caregiver shall notify the
Department of Public Health of any change in his or her
name or address, or if the designated caregiver becomes
aware the registered qualifying patient passed away,
within 10 days of the change.

7 (3) Before a registered qualifying patient changes his
8 or her designated caregiver, the qualifying patient must
9 notify the Department of Public Health.

10 (4) If a cardholder loses his or her registry
11 identification card, he or she shall notify the Department
12 within 10 days of becoming aware the card has been lost.

13 (b) When a cardholder notifies the Department of Public 14 Health of items listed in subsection (a), but remains eligible 15 under this Act, the Department of Public Health shall issue the 16 cardholder a new registry identification card with a new random 17 alphanumeric identification number within 15 business days of receiving the updated information and a fee as specified in 18 19 Department of Public Health rules. If the person notifying the 20 Department of Public Health is a registered qualifying patient, Department shall also issue his or her registered 21 the 22 designated caregiver, if any, a new registry identification 23 card within 15 business days of receiving the updated information. 24

(c) If a registered qualifying patient ceases to be a
 registered qualifying patient or changes his or her registered

designated caregiver, the Department of Public Health shall promptly notify the designated caregiver. The registered designated caregiver's protections under this Act as to that qualifying patient shall expire 15 days after notification by the Department.

6 (d) A cardholder who fails to make a notification to the 7 Department of Public Health that is required by this Section is 8 subject to a civil infraction, punishable by a penalty of no 9 more than \$150.

10 (e) A registered qualifying patient shall notify the 11 Department of Public Health of any change to his or her 12 designated registered dispensing organization. Registered 13 dispensing organizations must comply with all requirements of 14 this Act.

(f) If the registered qualifying patient's certifying 15 16 physician notifies the Department in writing that either the 17 registered qualifying patient has ceased to suffer from a debilitating medical condition or that continued use of medical 18 cannabis would result in contraindication with the patient's 19 20 other medication, the card shall become null and void. However, 21 the registered qualifying patient shall have 15 days to destroy 22 his her remaining medical cannabis and or related 23 paraphernalia.

24 (Source: P.A. 98-122, eff. 1-1-14; 99-519, eff. 6-30-16.)

25 (410 ILCS 130/130)

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(Section scheduled to be repealed on July 1, 2020)

Sec. 130. Requirements; prohibitions; penalties;
 dispensing organizations.

4 (a) The Department of Financial and Professional 5 Regulation shall implement the provisions of this Section by 6 rule.

7 (b) A dispensing organization shall maintain operating 8 documents which shall include procedures for the oversight of 9 the registered dispensing organization and procedures to 10 ensure accurate recordkeeping.

(c) A dispensing organization shall implement appropriate security measures, as provided by rule, to deter and prevent the theft of cannabis and unauthorized entrance into areas containing cannabis.

(d) A dispensing organization may not be located within 1,000 feet of the property line of a pre-existing public or private preschool or elementary or secondary school or day care center, day care home, group day care home, or part day child care facility. A registered dispensing organization may not be located in a house, apartment, condominium, or an area zoned for residential use.

(e) A dispensing organization is prohibited from acquiring
cannabis from anyone other than a registered cultivation
center. A dispensing organization is prohibited from obtaining
cannabis from outside the State of Illinois.

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(f) A registered dispensing organization is prohibited

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1 from dispensing cannabis for any purpose except to assist 2 registered qualifying patients with the medical use of cannabis 3 directly or through the qualifying patients' designated 4 caregivers.

5 (q) The area in a dispensing organization where medical cannabis is stored can only be accessed by dispensing 6 7 organization agents working for the dispensing organization, 8 Department of Financial and Professional Regulation staff 9 performing inspections, law enforcement or other emergency 10 personnel, and contractors working on jobs unrelated to medical 11 cannabis, such as installing or maintaining security devices or 12 performing electrical wiring.

(h) A dispensing organization may not dispense more than 2.5 ounces of cannabis to a registered qualifying patient, directly or via a designated caregiver, in any 14-day period unless the qualifying patient has a Department of Public Health-approved quantity waiver.

(i) Except as provided in subsection (i-5), before Before medical cannabis may be dispensed to a designated caregiver or a registered qualifying patient, a dispensing organization agent must determine that the individual is a current cardholder in the verification system and must verify each of the following:

(1) that the registry identification card presented to
 the registered dispensing organization is valid;

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(2) that the person presenting the card is the person

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identified on the registry identification card presented
 to the dispensing organization agent;

3 (3) that the dispensing organization is the designated 4 dispensing organization for the registered qualifying 5 patient who is obtaining the cannabis directly or via his 6 or her designated caregiver; and

7 (4) that the registered qualifying patient has not
8 exceeded his or her adequate supply.

9 <u>(i-5) A dispensing organization may dispense medical</u>
 10 <u>cannabis to a qualifying patient under Section 62.</u>

11 (j) Dispensing organizations shall ensure compliance with 12 this limitation by maintaining internal, confidential records 13 that include records specifying how much medical cannabis is dispensed to the registered qualifying patient and whether it 14 15 was dispensed directly to the registered qualifying patient or 16 to the designated caregiver. Each entry must include the date 17 and time the cannabis was dispensed. Additional recordkeeping requirements may be set by rule. 18

(k) The physician-patient privilege as set forth by Section 8-802 of the Code of Civil Procedure shall apply between a qualifying patient and a registered dispensing organization and its agents with respect to communications and records concerning qualifying patients' debilitating conditions.

(1) A dispensing organization may not permit any person to
 consume cannabis on the property of a medical cannabis
 organization.

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(m) A dispensing organization may not share office space
 with or refer patients to a physician.

(n) Notwithstanding any other criminal penalties related 3 to the unlawful possession of cannabis, the Department of 4 5 Financial and Professional Regulation may revoke, suspend, place on probation, reprimand, refuse to issue or renew, or 6 take any other disciplinary or non-disciplinary action as the 7 Department of Financial and Professional Regulation may deem 8 9 proper with regard to the registration of any person issued 10 under this Act to operate a dispensing organization or act as a 11 dispensing organization agent, including imposing fines not to 12 exceed \$10,000 for each violation, for any violations of this 13 Act and rules adopted in accordance with this Act. The 14 procedures for disciplining а registered dispensing 15 organization shall be determined by rule. All final 16 administrative decisions of the Department of Financial and 17 Professional Regulation are subject to judicial review under the Administrative Review Law and its rules. 18 The term "administrative decision" is defined as in Section 3-101 of the 19 Code of Civil Procedure. 20

(o) Dispensing organizations are subject to random inspection and cannabis testing by the Department of Financial and Professional Regulation and State Police as provided by rule.

25 (Source: P.A. 98-122, eff. 1-1-14.)

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(410 ILCS 130/160) 1

2 (Section scheduled to be repealed on July 1, 2020)

Sec. 160. Annual reports. (a) The Department of Public 3 Health shall submit to the General Assembly a report, by 4 5 September 30 of each year, that does not disclose any identifying information about registered qualifying patients, 6 registered caregivers, or physicians, but does contain, at a 7 8 minimum, all of the following information based on the fiscal 9 year for reporting purposes:

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(1) the number of applications and renewals filed for 11 registry identification cards or registrations;

12 (2) the number of qualifying patients and designated 13 caregivers served by each dispensary during the report 14 year;

15 (3) the nature of the debilitating medical conditions 16 of the qualifying patients;

17 (4) the number of registry identification cards or registrations revoked for misconduct; 18

19 (5) the number of physicians providing written 20 certifications for qualifying patients; and

number of registered medical 21 (6) the cannabis 22 cultivation registered dispensing centers or 23 organizations; -

24 (7) the number of applications received from 25 applicants seeking an alternative to opioid treatment; 26 (8) the nature of the conditions of the applicants SB0336 Engrossed - 36 - LRB100 05118 RJF 15128 b

1	seeking an alternative to opioid treatment; and
2	(9) the number of applications approved and denied from
3	applicants seeking an alternative to opioid treatment.
4	(Source: P.A. 98-122, eff. 1-1-14; revised 11-8-17.)