



101ST GENERAL ASSEMBLY

State of Illinois

2019 and 2020

HB0163

by Rep. Katie Stuart

SYNOPSIS AS INTRODUCED:

720 ILCS 570/316

Amends the Illinois Controlled Substances Act. Provides that the information required to be transmitted under the prescription monitoring program must be transmitted not later than the end of the business day on which a controlled substance is dispensed, or at such other time as may be required by the Department of Human Services by administrative rule (rather than, at the end of the next business day on which the controlled substance is dispensed).

LRB101 04752 SLF 49761 b

1 AN ACT concerning criminal law.

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

4 Section 5. The Illinois Controlled Substances Act is
5 amended by changing Section 316 as follows:

6 (720 ILCS 570/316)

7 Sec. 316. Prescription Monitoring Program.

8 (a) The Department must provide for a Prescription
9 Monitoring Program for Schedule II, III, IV, and V controlled
10 substances that includes the following components and
11 requirements:

12 (1) The dispenser must transmit to the central
13 repository, in a form and manner specified by the
14 Department, the following information:

15 (A) The recipient's name and address.

16 (B) The recipient's date of birth and gender.

17 (C) The national drug code number of the controlled
18 substance dispensed.

19 (D) The date the controlled substance is
20 dispensed.

21 (E) The quantity of the controlled substance
22 dispensed and days supply.

23 (F) The dispenser's United States Drug Enforcement

Administration registration number.

(G) The prescriber's United States Drug Enforcement Administration registration number.

(H) The dates the controlled substance prescription is filled.

(I) The payment type used to purchase the controlled substance (i.e. Medicaid, cash, third party insurance).

(J) The patient location code (i.e. home, nursing home, outpatient, etc.) for the controlled substances other than those filled at a retail pharmacy.

(K) Any additional information that may be required by the department by administrative rule, including but not limited to information required for compliance with the criteria for electronic reporting of the American Society for Automation and Pharmacy or its successor.

(2) The information required to be transmitted under this Section must be transmitted not later than the end of the ~~next~~ business day ~~after the date~~ on which a controlled substance is dispensed, or at such other time as may be required by the Department by administrative rule.

(3) A dispenser must transmit the information required under this Section by:

(A) an electronic device compatible with the receiving device of the central repository;

1 (B) a computer diskette;

2 (C) a magnetic tape; or

3 (D) a pharmacy universal claim form or Pharmacy
4 Inventory Control form.~~+~~

5 (4) The Department may impose a civil fine of up to
6 \$100 per day for willful failure to report controlled
7 substance dispensing to the Prescription Monitoring
8 Program. The fine shall be calculated on no more than the
9 number of days from the time the report was required to be
10 made until the time the problem was resolved, and shall be
11 payable to the Prescription Monitoring Program.

12 (b) The Department, by rule, may include in the
13 Prescription Monitoring Program certain other select drugs
14 that are not included in Schedule II, III, IV, or V. The
15 Prescription Monitoring Program does not apply to controlled
16 substance prescriptions as exempted under Section 313.

17 (c) The collection of data on select drugs and scheduled
18 substances by the Prescription Monitoring Program may be used
19 as a tool for addressing oversight requirements of long-term
20 care institutions as set forth by Public Act 96-1372. Long-term
21 care pharmacies shall transmit patient medication profiles to
22 the Prescription Monitoring Program monthly or more frequently
23 as established by administrative rule.

24 (d) The Department of Human Services shall appoint a
25 full-time Clinical Director of the Prescription Monitoring
26 Program.

1 (e) (Blank) .

2 (f) Within one year of January 1, 2008 (the effective date
3 of 100-564) ~~this amendatory Act of the 100th General Assembly,~~
4 the Department shall adopt rules requiring all Electronic
5 Health Records Systems to interface with the Prescription
6 Monitoring Program application program on or before January 1,
7 2021 to ensure that all providers have access to specific
8 patient records during the treatment of their patients. These
9 rules shall also address the electronic integration of pharmacy
10 records with the Prescription Monitoring Program to allow for
11 faster transmission of the information required under this
12 Section. The Department shall establish actions to be taken if
13 a prescriber's Electronic Health Records System does not
14 effectively interface with the Prescription Monitoring Program
15 within the required timeline.

16 (g) The Department, in consultation with the Advisory
17 Committee, shall adopt rules allowing licensed prescribers or
18 pharmacists who have registered to access the Prescription
19 Monitoring Program to authorize a licensed or non-licensed
20 designee employed in that licensed prescriber's office or a
21 licensed designee in a licensed pharmacist's pharmacy, ~~and~~ who
22 has received training in the federal Health Insurance
23 Portability and Accountability Act to consult the Prescription
24 Monitoring Program on their behalf. The rules shall include
25 reasonable parameters concerning a practitioner's authority to
26 authorize a designee, and the eligibility of a person to be

1 selected as a designee. In this subsection (g), "pharmacist"
2 shall include a clinical pharmacist employed by and designated
3 by a Medicaid Managed Care Organization providing services
4 under Article V of the Illinois Public Aid Code under a
5 contract with the Department of Healthcare ~~Health~~ and Family
6 Services for the sole purpose of clinical review of services
7 provided to persons covered by the entity under the contract to
8 determine compliance with subsections (a) and (b) of Section
9 314.5 of this Act. A managed care entity pharmacist shall
10 notify prescribers of review activities.

11 (Source: P.A. 99-480, eff. 9-9-15; 100-564, eff. 1-1-18;
12 100-861, eff. 8-14-18; 100-1005, eff. 8-21-18; 100-1093, eff.
13 8-26-18; revised 10-9-18.)