1 AN ACT concerning regulation.

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

- Section 5. The Clinical Psychologist Licensing Act is amended by changing Sections 4.2 and 4.3 as follows:
- 6 (225 ILCS 15/4.2)

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- 7 (Section scheduled to be repealed on January 1, 2027)
- 8 Sec. 4.2. Prescribing psychologist license.
- 9 (a) A psychologist may apply to the Department for a
 10 prescribing psychologist license. The application shall be
 11 made on a form approved by the Department, include the payment
 12 of any required fees, and be accompanied by evidence
 13 satisfactory to the Department that the applicant:
 - (1) holds a current license to practice clinical psychology in Illinois;
 - (2) has successfully completed the following minimum educational and training requirements either during the doctoral program required for licensure under this Section or in an accredited undergraduate or master level program prior to or subsequent to the doctoral program required under this Section:
- 22 (A) specific minimum undergraduate biomedical 23 prerequisite coursework, including, but not limited

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to: Medical Terminology (class or proficiency);
Chemistry or Biochemistry with lab (2 semesters);
Human Physiology (one semester); Human Anatomy (one semester); Anatomy and Physiology; Microbiology with lab (one semester); and General Biology for science majors or Cell and Molecular Biology (one semester);

- (B) a minimum of 60 credit hours of didactic coursework, including, but not limited to:

 Pharmacology; Clinical Psychopharmacology; Clinical Anatomy and Integrated Science; Patient Evaluation; Advanced Physical Assessment; Research Methods; Advanced Pathophysiology; Diagnostic Methods; Problem Based Learning; and Clinical and Procedural Skills; and
- (C) a full-time practicum of 14 months' months supervised clinical training of at least 36 credit hours, including a research project; during the clinical rotation phase, students complete rotations in Emergency Medicine, Family Medicine, Geriatrics, Internal Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatrics, Surgery, and one elective of the students' choice; program approval standards addressing faculty qualifications, regular competency evaluation and length of clinical rotations, and instructional settings, including, but not limited to, hospitals, medical centers, health care facilities

1	<u>located</u> at <u>federal</u> and <u>State</u> prisons, hospital
2	outpatient clinics, community mental health clinics,
3	patient-centered medical homes or family-centered
4	medical homes, women's medical health centers, and
5	Federally Qualified Health Centers; the clinical
6	training must meet the standards for: and correctional
7	facilities, in accordance with those of the
8	Accreditation Review Commission on Education for the
9	Physician Assistant shall be set by Department by rule;
10	(i) physician assistant education as defined
11	by the Accreditation Review Commission on
12	Education for the Physician Assistant;
13	(ii) advanced practice nurse education as
14	defined by the Commission on Collegiate Nursing
15	Education for the Advanced Nurse Practitioner or
16	the Accreditation Commission for Education in
17	Nursing for the Advanced Nurse Practitioner; or
18	(iii) medical education as defined by the
19	Accreditation Council for Graduate Medical
20	Education and shall be set by the Department by
21	rule;
22	(3) has completed a National Certifying Exam, as
23	determined by rule; and
24	(4) meets all other requirements for obtaining a
25	prescribing psychologist license, as determined by rule.

(b) The Department may issue a prescribing psychologist

- 1 license if it finds that the applicant has met the requirements
- of subsection (a) of this Section.
- 3 (c) A prescribing psychologist may only prescribe
- 4 medication pursuant to the provisions of this Act if the
- 5 prescribing psychologist:
- 6 (1) continues to hold a current license to practice
- 7 psychology in Illinois;
- 8 (2) satisfies the continuing education requirements
- 9 for prescribing psychologists, including 10 hours of
- 10 continuing education annually in pharmacology from
- 11 accredited providers; and
- 12 (3) maintains a written collaborative agreement with a
- 13 collaborating physician pursuant to Section 4.3 of this
- 14 Act.
- 15 (Source: P.A. 98-668, eff. 6-25-14.)
- 16 (225 ILCS 15/4.3)
- 17 (Section scheduled to be repealed on January 1, 2027)
- 18 Sec. 4.3. Written collaborative agreements.
- 19 (a) A written collaborative agreement is required for all
- 20 prescribing psychologists practicing under a prescribing
- 21 psychologist license issued pursuant to Section 4.2 of this
- 22 Act.
- 23 (b) A written delegation of prescriptive authority by a
- 24 collaborating physician may only include medications for the
- 25 treatment of mental health disease or illness the collaborating

- 1 physician generally provides to his or her patients in the
- 2 normal course of his or her clinical practice with the
- 3 exception of the following:

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- 4 (1) patients who are less than 17 years of age or over 5 65 years of age;
 - (2) patients during pregnancy;
- 7 (3) patients with serious medical conditions, such as
 8 heart disease, cancer, stroke, or seizures, and with
 9 developmental disabilities and intellectual disabilities;
 10 and
- 11 (4) prescriptive authority for benzodiazepine Schedule 12 III controlled substances.
 - (c) The collaborating physician shall file with the Department notice of delegation of prescriptive authority and termination of the delegation, in accordance with rules of the Department. Upon receipt of this notice delegating authority to prescribe any nonnarcotic Schedule III through V controlled substances, the licensed clinical psychologist shall be eligible to register for a mid-level practitioner controlled substance license under Section 303.05 of the Illinois Controlled Substances Act.
- 22 (d) All of the following shall apply to delegation of 23 prescriptive authority:
- 24 (1) Any delegation of Schedule III through V controlled 25 substances shall identify the specific controlled 26 substance by brand name or generic name. No controlled

substance to be delivered by injection may be delegated. No Schedule II controlled substance shall be delegated.

(2) A prescribing psychologist shall not prescribe narcotic drugs, as defined in Section 102 of the Illinois Controlled Substances Act.

Any prescribing psychologist who writes a prescription for a controlled substance without having valid and appropriate authority may be fined by the Department not more than \$50 per prescription and the Department may take any other disciplinary action provided for in this Act.

All prescriptions written by a prescribing psychologist must contain the name of the prescribing psychologist and his or her signature. The prescribing psychologist shall sign his or her own name.

(e) The written collaborative agreement shall describe the working relationship of the prescribing psychologist with the collaborating physician and shall delegate prescriptive authority as provided in this Act. Collaboration does not require an employment relationship between the collaborating physician and prescribing psychologist. Absent an employment relationship, an agreement may not restrict third-party payment sources accepted by the prescribing psychologist. For the purposes of this Section, "collaboration" means the relationship between a prescribing psychologist and a collaborating physician with respect to the delivery of prescribing services in accordance with (1) the prescribing

- 1 psychologist's training, education, and experience and (2)
- 2 collaboration and consultation as documented in a jointly
- 3 developed written collaborative agreement.
 - (f) The agreement shall promote the exercise of professional judgment by the prescribing psychologist corresponding to his or her education and experience.
 - (g) The collaborative agreement shall not be construed to require the personal presence of a physician at the place where services are rendered. Methods of communication shall be available for consultation with the collaborating physician in person or by telecommunications in accordance with established written guidelines as set forth in the written agreement.
 - (h) Collaboration and consultation pursuant to all collaboration agreements shall be adequate if a collaborating physician does each of the following:
 - (1) participates in the joint formulation and joint approval of orders or guidelines with the prescribing psychologist and he or she periodically reviews the prescribing psychologist's orders and the services provided patients under the orders in accordance with accepted standards of medical practice and prescribing psychologist practice;
 - (2) provides collaboration and consultation with the prescribing psychologist in person at least once a month for review of safety and quality clinical care or treatment;

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- 1 (3) is available through telecommunications for 2 consultation on medical problems, complications, 3 emergencies, or patient referral; and
 - (4) reviews medication orders of the prescribing psychologist no less than monthly, including review of laboratory tests and other tests as available.
 - (i) The written collaborative agreement shall contain provisions detailing notice for termination or change of status involving a written collaborative agreement, except when the notice is given for just cause.
 - (j) A copy of the signed written collaborative agreement shall be available to the Department upon request to either the prescribing psychologist or the collaborating physician.
 - (k) Nothing in this Section shall be construed to limit the authority of a prescribing psychologist to perform all duties authorized under this Act.
 - (1) A prescribing psychologist shall inform each collaborating physician of all collaborative agreements he or she has signed and provide a copy of these to any collaborating physician.
- 21 (m) No collaborating physician shall enter into more than 3 22 collaborative agreements with prescribing psychologists.
- 23 (Source: P.A. 98-668, eff. 6-25-14.)
- Section 10. The Telehealth Act is amended by changing Section 5 as follows:

- 1 (225 ILCS 150/5)
- 2 Sec. 5. Definitions. As used in this Act:
- 3 "Health care professional" includes physicians, physician
- 4 assistants, dentists, optometrists, advanced practice
- 5 registered nurses, clinical psychologists licensed in
- 6 Illinois, prescribing psychologists licensed in Illinois,
- 7 dentists, occupational therapists, pharmacists, physical
- 8 therapists, clinical social workers, speech-language
- 9 pathologists, audiologists, hearing instrument dispensers, and
- 10 mental health professionals and clinicians authorized by
- 11 Illinois law to provide mental health services.
- 12 "Telehealth" means the evaluation, diagnosis, or
- interpretation of electronically transmitted patient-specific
- 14 data between a remote location and a licensed health care
- 15 professional that generates interaction or treatment
- 16 recommendations. "Telehealth" includes telemedicine and the
- 17 delivery of health care services provided by way of an
- 18 interactive telecommunications system, as defined in
- 19 subsection (a) of Section 356z.22 of the Illinois Insurance
- 20 Code.
- 21 (Source: P.A. 100-317, eff. 1-1-18; 100-644, eff. 1-1-19;
- 22 100-930, eff. 1-1-19; revised 10-22-18.)
- 23 Section 99. Effective date. This Act takes effect upon
- 24 becoming law.