1 AN ACT concerning regulation.

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

Section 5. The Nurse Practice Act is amended by changing
Sections 65-5 and 65-40 as follows:

6 (225 ILCS 65/65-5) (was 225 ILCS 65/15-10)

7 (Section scheduled to be repealed on January 1, 2018)

8 Sec. 65-5. Qualifications for APN licensure.

9 (a) Each applicant who successfully meets the requirements 10 of this Section shall be entitled to licensure as an advanced 11 practice nurse.

(b) An applicant for licensure to practice as an advancedpractice nurse must do each of the following:

14 (1) Submit a completed application and any fees as15 established by the Department.

16 (2) Hold a current license to practice as a registered17 professional nurse under this Act.

18 (3) Have successfully completed requirements to
19 practice as, and holds a current, national certification
20 as, a nurse midwife, clinical nurse specialist, nurse
21 practitioner, or certified registered nurse anesthetist
22 from the appropriate national certifying body as
23 determined by rule of the Department.

1 (4) Have obtained a graduate degree appropriate for 2 national certification in a clinical advanced practice 3 nursing specialty or a graduate degree or post-master's 4 certificate from a graduate level program in a clinical 5 advanced practice nursing specialty.

6 (5) Have not violated the provisions of this Act 7 concerning the grounds for disciplinary action. The 8 Department may take into consideration any felony 9 conviction of the applicant, but such a conviction may not 10 operate as an absolute bar to licensure.

(6) Submit to the criminal history records check
 required under Section 50-35 of this Act.

13 (b-5) A registered professional nurse seeking licensure as 14 an advanced practice nurse in the category of certified 15 registered nurse anesthetist who does not have a graduate 16 degree as described in subsection (b) of this Section shall be 17 qualified for licensure if that person:

(1) submits evidence of having successfully completed 18 19 a nurse anesthesia program described in item (4) of subsection (b) of this Section prior to January 1, 1999; 20 21 (2) submits evidence of certification as a registered 22 nurse anesthetist by an appropriate national certifying 23 body; and 24 (3) has continually maintained active, up-to-date 25 recertification status as a certified registered nurse

26 <u>anesthetist by an appropriate national recertifying body.</u>

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1	(b-10) The Department shall issue a certified registered
2	nurse anesthetist license to an APN who (i) does not have a
3	graduate degree, (ii) applies for licensure before July 1,
4	2018, and (iii) submits all of the following to the Department:
5	(1) His or her current State registered nurse license
6	number.
7	(2) Proof of current national certification, which
8	includes the completion of an examination from either of
9	the following:
10	(A) the Council on Certification of the American
11	Association of Nurse Anesthetists; or
12	(B) the Council on Recertification of the American
13	Association of Nurse Anesthetists.
14	(3) Proof of the successful completion of a post-basic
14 15	(3) Proof of the successful completion of a post-basic advanced practice formal education program in the area of
15	advanced practice formal education program in the area of
15 16	advanced practice formal education program in the area of nurse anesthesia prior to January 1, 1999.
15 16 17	advanced practice formal education program in the area of nurse anesthesia prior to January 1, 1999. (4) His or her complete work history for the 5-year
15 16 17 18	advanced practice formal education program in the area of nurse anesthesia prior to January 1, 1999. (4) His or her complete work history for the 5-year period immediately preceding the date of his or her
15 16 17 18 19	advanced practice formal education program in the area of nurse anesthesia prior to January 1, 1999. (4) His or her complete work history for the 5-year period immediately preceding the date of his or her application.
15 16 17 18 19 20	advanced practice formal education program in the area of nurse anesthesia prior to January 1, 1999. (4) His or her complete work history for the 5-year period immediately preceding the date of his or her application. (5) Verification of licensure as an advanced practice
15 16 17 18 19 20 21	advanced practice formal education program in the area of nurse anesthesia prior to January 1, 1999. (4) His or her complete work history for the 5-year period immediately preceding the date of his or her application. (5) Verification of licensure as an advanced practice nurse from the state in which he or she was originally
15 16 17 18 19 20 21 22	<pre>advanced practice formal education program in the area of nurse anesthesia prior to January 1, 1999. (4) His or her complete work history for the 5-year period immediately preceding the date of his or her application. (5) Verification of licensure as an advanced practice nurse from the state in which he or she was originally licensed, current state of licensure, and any other state</pre>
15 16 17 18 19 20 21 22 23	<pre>advanced practice formal education program in the area of nurse anesthesia prior to January 1, 1999. (4) His or her complete work history for the 5-year period immediately preceding the date of his or her application. (5) Verification of licensure as an advanced practice nurse from the state in which he or she was originally licensed, current state of licensure, and any other state in which he or she has been actively practicing as an</pre>

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## 1 (A) the time during which he or she was licensed in 2 each state, including the date of the original issuance 3 of each license; and 4 (B) any disciplinary action taken or pending

5 <u>concerning any nursing license held, currently or in</u> 6 the past, by the applicant.

(6) The required fee.

8 (c) Those applicants seeking licensure in more than one 9 advanced practice nursing specialty need not possess multiple 10 graduate degrees. Applicants may be eligible for licenses for 11 multiple advanced practice nurse licensure specialties, 12 provided that the applicant (i) has met the requirements for at 13 least one advanced practice nursing specialty under paragraphs (3) and (5) of subsection (a) of this Section, (ii) possesses 14 15 an additional graduate education that results in a certificate 16 for another clinical advanced practice nurse specialty and that 17 meets the requirements for the national certification from the appropriate nursing specialty, and (iii) holds a current 18 19 national certification from the appropriate national certifying body for that additional advanced practice nursing 20 21 specialty.

(d) Any person who holds a valid license as an advanced practice nurse issued under this Act as this Act existed before the effective date of this amendatory Act of the 95th General Assembly shall be subject only to the advanced practice nurse license renewal requirements of this Act as this Act exists on HB1014 Enrolled - 5 - LRB096 04500 ASK 14555 b

and after the effective date of this amendatory Act of the 95th
 General Assembly upon the expiration of that license.

3 (Source: P.A. 94-348, eff. 7-28-05; 95-639, eff. 10-5-07.)

4 (225 ILCS 65/65-40) (was 225 ILCS 65/15-20)

5

(Section scheduled to be repealed on January 1, 2018)

6

Sec. 65-40. Prescriptive authority.

7 (a) A collaborating physician or podiatrist may, but is not 8 required to, delegate prescriptive authority to an advanced 9 practice nurse as part of a written collaborative agreement. 10 This authority may, but is not required to, include 11 prescription of, selection of, orders for, administration of, 12 storage of, acceptance of samples of, and dispensing over the 13 counter medications, legend drugs, medical qases, and 14 controlled substances categorized as any Schedule III through, 15 III N, IV, or V controlled substances, as defined in Article II 16 Illinois Controlled Substances Act, of the and other preparations, including, but not limited to, botanical and 17 18 herbal remedies. The collaborating physician or podiatrist must have a valid current Illinois controlled substance license 19 20 and federal registration to delegate authority to prescribe 21 delegated controlled substances.

(b) To prescribe controlled substances under this Section, an advanced practice nurse must obtain a mid-level practitioner controlled substance license. Medication orders shall be reviewed periodically by the collaborating physician or HB1014 Enrolled - 6 - LRB096 04500 ASK 14555 b

1 podiatrist.

2 (c) The collaborating physician or podiatrist shall file with the Department notice of delegation of prescriptive 3 authority and termination of such delegation, in accordance 4 5 with rules of the Department. Upon receipt of this notice delegating authority to prescribe any Schedule III through, 6 7 HI N, IV, or V controlled substances, the licensed advanced practice nurse shall be eligible to register for a mid-level 8 9 practitioner controlled substance license under Section 303.05 10 of the Illinois Controlled Substances Act.

(d) In addition to the requirements of subsections (a),
(b), and (c) of this Section, a collaborating physician may,
but is not required to, delegate authority to an advanced
practice nurse to prescribe <u>any</u> Schedule II <del>or II-N</del> controlled
substances, if all of the following conditions apply:

16 (1) No more than 5 Schedule II or II N controlled
 17 substances by oral dosage may be delegated.

18 (2) Any delegation must be controlled substances that19 the collaborating physician prescribes.

(3) Any prescription must be limited to no more than a
30-day oral dosage, with any continuation authorized only
after prior approval of the collaborating physician.

(4) The advanced practice nurse must discuss the
condition of any patients for whom a controlled substance
is prescribed monthly with the delegating physician.

26 (e) Nothing in this Act shall be construed to limit the

HB1014 Enrolled - 7 -LRB096 04500 ASK 14555 b delegation of tasks or duties by a physician to a licensed 1 2 practical nurse, a registered professional nurse, or other 3 persons. (Source: P.A. 95-639, eff. 10-5-07.) 4 5 Section 10. The Pharmacy Practice Act is amended by 6 changing Section 4 as follows: 7 (225 ILCS 85/4) (from Ch. 111, par. 4124) 8 (Section scheduled to be repealed on January 1, 2018) 9 Sec. 4. Exemptions. Nothing contained in any Section of 10 this Act shall apply to, or in any manner interfere with: 11 the lawful practice of any physician licensed to (a) 12 practice medicine in all of its branches, dentist, podiatrist, 13 veterinarian, or therapeutically or diagnostically certified 14 optometrist within the limits of his or her license, or prevent 15 him or her from supplying to his or her bona fide patients such 16 drugs, medicines, or poisons as may seem to him appropriate; 17 (b) the sale of compressed gases; (c) the sale of patent or proprietary medicines and 18

household remedies when sold in original and unbroken packages only, if such patent or proprietary medicines and household remedies be properly and adequately labeled as to content and usage and generally considered and accepted as harmless and nonpoisonous when used according to the directions on the label, and also do not contain opium or coca leaves, or any HB1014 Enrolled - 8 - LRB096 04500 ASK 14555 b

compound, salt or derivative thereof, or any drug which, 1 2 according to the latest editions of the following authoritative pharmaceutical treatises and standards, namely, 3 The United States Pharmacopoeia/National Formulary (USP/NF), the United 4 5 States Dispensatory, and the Accepted Dental Remedies of the 6 Dental Therapeutics of the American Council of Dental 7 Association or any or either of them, in use on the effective 8 date of this Act, or according to the existing provisions of 9 the Federal Food, Drug, and Cosmetic Act and Regulations of the 10 Department of Health and Human Services, Food and Drug 11 Administration, promulgated thereunder now in effect, is 12 designated, described or considered as a narcotic, hypnotic, 13 habit forming, dangerous, or poisonous drug;

14 (d) the sale of poultry and livestock remedies in original 15 and unbroken packages only, labeled for poultry and livestock 16 medication;

17 the sale of poisonous substances or mixture of (e) poisonous substances, in unbroken packages, for nonmedicinal 18 use in the arts or industries or for insecticide purposes; 19 provided, they are properly and adequately labeled as to 20 content and such nonmedicinal usage, in conformity with the 21 22 provisions of all applicable federal, state and local laws and 23 regulations promulgated thereunder now in effect relating 24 thereto and governing the same, and those which are required 25 under such applicable laws and regulations to be labeled with the word "Poison", are also labeled with the word "Poison" 26

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1 printed thereon in prominent type and the name of a readily 2 obtainable antidote with directions for its administration;

3 (f) the delegation of limited prescriptive authority by a physician licensed to practice medicine in all its branches to 4 5 a physician assistant under Section 7.5 of the Physician Assistant Practice Act of 1987. This delegated authority under 6 7 Section 7.5 of the Physician Assistant Practice Act of 1987 may but is not required to include prescription of controlled 8 9 substances, as defined in Article II of the Illinois Controlled 10 Substances Act, in accordance with written quidelines; and

11 (g) The delegation of prescriptive authority by a physician 12 licensed to practice medicine in all its branches or a licensed podiatrist to an advanced practice nurse in accordance with a 13 14 written collaborative agreement under Sections Section 65-35 15 and 65-40 of the Nurse Practice Act. This authority, which is 16 delegated under Section 65 40 of the Nurse Practice Act, may 17 but is not required to include the prescription of Schedule III, IV, or V controlled substances as defined in Article 18 H of 19 the Illinois Controlled Substances Act.

20 (Source: P.A. 95-639, eff. 10-5-07.)

21 Section 15. The Illinois Controlled Substances Act is 22 amended by changing Sections 102 and 303.05 as follows:

23 (720 ILCS 570/102) (from Ch. 56 1/2, par. 1102)

24 Sec. 102. Definitions. As used in this Act, unless the

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1 context otherwise requires:

(a) "Addict" means any person who habitually uses any drug,
chemical, substance or dangerous drug other than alcohol so as
to endanger the public morals, health, safety or welfare or who
is so far addicted to the use of a dangerous drug or controlled
substance other than alcohol as to have lost the power of self
control with reference to his addiction.

8 (b) "Administer" means the direct application of a 9 controlled substance, whether by injection, inhalation, 10 ingestion, or any other means, to the body of a patient, 11 research subject, or animal (as defined by the Humane 12 Euthanasia in Animal Shelters Act) by:

13 (1) a practitioner (or, in his presence, by his 14 authorized agent),

15 (2) the patient or research subject at the lawful16 direction of the practitioner, or

17 (3) a euthanasia technician as defined by the Humane18 Euthanasia in Animal Shelters Act.

(c) "Agent" means an authorized person who acts on behalf of or at the direction of a manufacturer, distributor, or dispenser. It does not include a common or contract carrier, public warehouseman or employee of the carrier or warehouseman.

23 (c-1) "Anabolic Steroids" means any drug or hormonal 24 substance, chemically and pharmacologically related to 25 testosterone (other than estrogens, progestins, and 26 corticosteroids) that promotes muscle growth, and includes:

1	(i) boldenone,
2	(ii) chlorotestosterone,
3	(iii) chostebol,
4	(iv) dehydrochlormethyltestosterone,
5	(v) dihydrotestosterone,
6	(vi) drostanolone,
7	(vii) ethylestrenol,
8	(viii) fluoxymesterone,
9	(ix) formebulone,
10	(x) mesterolone,
11	(xi) methandienone,
12	(xii) methandranone,
13	(xiii) methandriol,
14	(xiv) methandrostenolone,
15	(xv) methenolone,
16	(xvi) methyltestosterone,
17	(xvii) mibolerone,
18	(xviii) nandrolone,
19	(xix) norethandrolone,
20	(xx) oxandrolone,
21	(xxi) oxymesterone,
22	(xxii) oxymetholone,
23	(xxiii) stanolone,
24	(xxiv) stanozolol,
25	(xxv) testolactone,
26	(xxvi) testosterone,

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(xxvii) trenbolone, and

2 (xxviii) any salt, ester, or isomer of a drug or
3 substance described or listed in this paragraph, if
4 that salt, ester, or isomer promotes muscle growth.

5 Any person who is otherwise lawfully in possession of an anabolic steroid, or who otherwise lawfully manufactures, 6 7 distributes, dispenses, delivers, or possesses with intent to deliver an anabolic steroid, which anabolic steroid is 8 9 expressly intended for and lawfully allowed to be administered 10 through implants to livestock or other nonhuman species, and 11 which is approved by the Secretary of Health and Human Services 12 for such administration, and which the person intends to administer or have administered through such implants, shall 13 not be considered to be in unauthorized possession or to 14 unlawfully manufacture, distribute, dispense, deliver, 15 or 16 possess with intent to deliver such anabolic steroid for 17 purposes of this Act.

18 (d) "Administration" means the Drug Enforcement 19 Administration, United States Department of Justice, or its 20 successor agency.

(e) "Control" means to add a drug or other substance, or
immediate precursor, to a Schedule under Article II of this Act
whether by transfer from another Schedule or otherwise.

(f) "Controlled Substance" means a drug, substance, or
immediate precursor in the Schedules of Article II of this Act.
(g) "Counterfeit substance" means a controlled substance,

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1 which, or the container or labeling of which, without 2 authorization bears the trademark, trade name, or other 3 identifying mark, imprint, number or device, or any likeness 4 thereof, of a manufacturer, distributor, or dispenser other 5 than the person who in fact manufactured, distributed, or 6 dispensed the substance.

7 (h) "Deliver" or "delivery" means the actual, constructive
8 or attempted transfer of possession of a controlled substance,
9 with or without consideration, whether or not there is an
10 agency relationship.

(i) "Department" means the Illinois Department of Human Services (as successor to the Department of Alcoholism and Substance Abuse) or its successor agency.

14 (j) "Department of State Police" means the Department of15 State Police of the State of Illinois or its successor agency.

16 (k) "Department of Corrections" means the Department of17 Corrections of the State of Illinois or its successor agency.

(1) "Department of Professional Regulation" means the
 Department of Professional Regulation of the State of Illinois
 or its successor agency.

21

(m) "Depressant" or "stimulant substance" means:

(1) a drug which contains any quantity of (i)
barbituric acid or any of the salts of barbituric acid
which has been designated as habit forming under section
502 (d) of the Federal Food, Drug, and Cosmetic Act (21
U.S.C. 352 (d)); or

(2) 1 drug which contains any quantity of а (i) amphetamine or methamphetamine and any of their optical 2 3 isomers; (ii) any salt of amphetamine or methamphetamine or any salt of an optical isomer of amphetamine; or (iii) any 4 5 substance which the Department, after investigation, has found to be, and by rule designated as, habit forming 6 7 because of its depressant or stimulant effect on the 8 central nervous system; or

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(3) lysergic acid diethylamide; or

10 (4) any drug which contains any quantity of a substance 11 which the Department, after investigation, has found to 12 have, and by rule designated as having, a potential for 13 abuse because of its depressant or stimulant effect on the 14 central nervous system or its hallucinogenic effect.

15 (n) (Blank).

16 (o) "Director" means the Director of the Department of 17 State Police or the Department of Professional Regulation or 18 his designated agents.

(p) "Dispense" means to deliver a controlled substance to an ultimate user or research subject by or pursuant to the lawful order of a prescriber, including the prescribing, administering, packaging, labeling, or compounding necessary to prepare the substance for that delivery.

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(q) "Dispenser" means a practitioner who dispenses.

25 (r) "Distribute" means to deliver, other than by 26 administering or dispensing, a controlled substance. HB1014 Enrolled - 15 -LRB096 04500 ASK 14555 b

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(s) "Distributor" means a person who distributes.

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(t) "Drug" means (1) substances recognized as drugs in the 3 official United States Pharmacopoeia, Official Homeopathic Pharmacopoeia of the United States, or official National 4 5 Formulary, or any supplement to any of them; (2) substances intended for use in diagnosis, cure, mitigation, treatment, or 6 7 prevention of disease in man or animals; (3) substances (other than food) intended to affect the structure of any function of 8 9 the body of man or animals and (4) substances intended for use 10 as a component of any article specified in clause (1), (2), or 11 (3) of this subsection. It does not include devices or their 12 components, parts, or accessories.

13 (t-5) "Euthanasia agency" means an entity certified by the 14 Department of Professional Regulation for the purpose of animal 15 euthanasia that holds an animal control facility license or 16 animal shelter license under the Animal Welfare Act. A 17 euthanasia agency is authorized to purchase, store, possess, Schedule utilize ΤТ nonnarcotic and Schedule 18 and TTT 19 nonnarcotic drugs for the sole purpose of animal euthanasia.

20 (t-10) "Euthanasia drugs" means Schedule II or Schedule III substances (nonnarcotic controlled substances) that are used 21 22 by a euthanasia agency for the purpose of animal euthanasia.

23 (u) "Good faith" means the prescribing or dispensing of a 24 controlled substance by a practitioner in the regular course of 25 professional treatment to or for any person who is under his 26 treatment for a pathology or condition other than that HB1014 Enrolled - 16 - LRB096 04500 ASK 14555 b

individual's physical or psychological dependence upon or 1 2 addiction to a controlled substance, except as provided herein: and application of the term to a pharmacist shall mean the 3 dispensing of a controlled substance pursuant to 4 the 5 prescriber's order which in the professional judgment of the pharmacist is lawful. The pharmacist shall be quided by 6 7 accepted professional standards including, but not limited to 8 the following, in making the judgment:

9 (1) lack of consistency of doctor-patient 10 relationship,

(2) frequency of prescriptions for same drug by one
 prescriber for large numbers of patients,

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(3) quantities beyond those normally prescribed,

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(4) unusual dosages,

15 (5) unusual geographic distances between patient,16 pharmacist and prescriber,

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(6) consistent prescribing of habit-forming drugs.

18 (u-1) "Home infusion services" means services provided by a 19 pharmacy in compounding solutions for direct administration to 20 a patient in a private residence, long-term care facility, or 21 hospice setting by means of parenteral, intravenous, 22 intramuscular, subcutaneous, or intraspinal infusion.

23

(v) "Immediate precursor" means a substance:

(1) which the Department has found to be and by rule
 designated as being a principal compound used, or produced
 primarily for use, in the manufacture of a controlled

1 substance;

2 (2) which is an immediate chemical intermediary used or
3 likely to be used in the manufacture of such controlled
4 substance; and

5 (3) the control of which is necessary to prevent, 6 curtail or limit the manufacture of such controlled 7 substance.

8 (w) "Instructional activities" means the acts of teaching, 9 educating or instructing by practitioners using controlled 10 substances within educational facilities approved by the State 11 Board of Education or its successor agency.

12 (x) "Local authorities" means a duly organized State,13 County or Municipal peace unit or police force.

14 (y) "Look-alike substance" means a substance, other than a (1) by overall dosage unit 15 controlled substance which 16 appearance, including shape, color, size, markings or lack 17 thereof, taste, consistency, or any other identifying physical characteristic of the substance, would lead a reasonable person 18 19 to believe that the substance is a controlled substance, or (2) 20 is expressly or impliedly represented to be a controlled substance or is distributed under circumstances which would 21 22 lead a reasonable person to believe that the substance is a 23 controlled substance. For the purpose of determining whether 24 representations made or the circumstances of the the distribution would lead a reasonable person to believe the 25 substance to be a controlled substance under this clause (2) of 26

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subsection (y), the court or other authority may consider the following factors in addition to any other factor that may be relevant:

4 5 (a) statements made by the owner or person in controlof the substance concerning its nature, use or effect;

6 (b) statements made to the buyer or recipient that the 7 substance may be resold for profit;

8 (c) whether the substance is packaged in a manner 9 normally used for the illegal distribution of controlled 10 substances;

11 (d) whether the distribution or attempted distribution 12 included an exchange of or demand for money or other 13 property as consideration, and whether the amount of the 14 consideration was substantially greater than the 15 reasonable retail market value of the substance.

16 Clause (1) of this subsection (y) shall not apply to a 17 noncontrolled substance in its finished dosage form that was 18 initially introduced into commerce prior to the initial 19 introduction into commerce of a controlled substance in its 20 finished dosage form which it may substantially resemble.

Nothing in this subsection (y) prohibits the dispensing or distributing of noncontrolled substances by persons authorized to dispense and distribute controlled substances under this Act, provided that such action would be deemed to be carried out in good faith under subsection (u) if the substances involved were controlled substances. HB1014 Enrolled - 19 - LRB096 04500 ASK 14555 b

Nothing in this subsection (y) or in this Act prohibits the
 manufacture, preparation, propagation, compounding,
 processing, packaging, advertising or distribution of a drug or
 drugs by any person registered pursuant to Section 510 of the
 Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360).

6 (y-1) "Mail-order pharmacy" means a pharmacy that is 7 located in a state of the United States, other than Illinois, 8 that delivers, dispenses or distributes, through the United 9 States Postal Service or other common carrier, to Illinois 10 residents, any substance which requires a prescription.

11 (z) "Manufacture" means the production, preparation, 12 propagation, compounding, conversion or processing of а 13 controlled substance other than methamphetamine, either 14 directly or indirectly, by extraction from substances of 15 natural origin, or independently by means of chemical 16 synthesis, or by a combination of extraction and chemical 17 synthesis, and includes any packaging or repackaging of the substance or labeling of its container, except that this term 18 does not include: 19

(1) by an ultimate user, the preparation or compounding
of a controlled substance for his own use; or

(2) by a practitioner, or his authorized agent under
his supervision, the preparation, compounding, packaging,
or labeling of a controlled substance:

(a) as an incident to his administering or
 dispensing of a controlled substance in the course of

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his professional practice; or

2 (b) as an incident to lawful research, teaching or 3 chemical analysis and not for sale.

4 (z-1) (Blank).

5 (aa) "Narcotic drug" means any of the following, whether 6 produced directly or indirectly by extraction from substances 7 of natural origin, or independently by means of chemical 8 synthesis, or by a combination of extraction and chemical 9 synthesis:

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(1) opium and opiate, and any salt, compound,derivative, or preparation of opium or opiate;

12 (2) any salt, compound, isomer, derivative, or 13 preparation thereof which is chemically equivalent or 14 identical with any of the substances referred to in clause 15 (1), but not including the isoquinoline alkaloids of opium;

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(3) opium poppy and poppy straw;

17 (4) coca leaves and any salts, compound, isomer, salt of an isomer, derivative, or preparation of coca leaves 18 19 including cocaine or ecgonine, and any salt, compound, 20 isomer, derivative, or preparation thereof which is chemically equivalent or identical with any of these 21 22 substances, but not including decocainized coca leaves or 23 extractions of coca leaves which do not contain cocaine or 24 ecgonine (for the purpose of this paragraph, the term 25 "isomer" includes optical, positional and geometric 26 isomers).

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(bb) "Nurse" means a registered nurse licensed under the
 Nurse Practice Act.

3 (cc) (Blank).

4 (dd) "Opiate" means any substance having an addiction
5 forming or addiction sustaining liability similar to morphine
6 or being capable of conversion into a drug having addiction
7 forming or addiction sustaining liability.

8 (ee) "Opium poppy" means the plant of the species Papaver
9 somniferum L., except its seeds.

10 (ff) "Parole and Pardon Board" means the Parole and Pardon11 Board of the State of Illinois or its successor agency.

12 (gg) "Person" means any individual, corporation, 13 mail-order pharmacy, government or governmental subdivision or 14 agency, business trust, estate, trust, partnership or 15 association, or any other entity.

16 (hh) "Pharmacist" means any person who holds a license or 17 certificate of registration as a registered pharmacist, a local 18 registered pharmacist or a registered assistant pharmacist 19 under the Pharmacy Practice Act.

20 (ii) "Pharmacy" means any store, ship or other place in 21 which pharmacy is authorized to be practiced under the Pharmacy 22 Practice Act.

(jj) "Poppy straw" means all parts, except the seeds, ofthe opium poppy, after mowing.

25 (kk) "Practitioner" means a physician licensed to practice 26 medicine in all its branches, dentist, optometrist, HB1014 Enrolled - 22 - LRB096 04500 ASK 14555 b

podiatrist, veterinarian, scientific investigator, pharmacist, 1 2 physician assistant, advanced practice nurse, licensed 3 practical nurse, registered nurse, hospital, laboratory, or pharmacy, or other person licensed, registered, or otherwise 4 5 lawfully permitted by the United States or this State to distribute, dispense, conduct research with respect to, 6 7 administer or use in teaching or chemical analysis, a 8 controlled substance in the course of professional practice or 9 research.

10 (11) "Pre-printed prescription" means a written 11 prescription upon which the designated drug has been indicated 12 prior to the time of issuance.

13 (mm) "Prescriber" means a physician licensed to practice 14 medicine in all its branches, dentist, optometrist, podiatrist 15 or veterinarian who issues a prescription, a physician 16 assistant who issues a prescription for a Schedule III, IV, or  $\forall$  controlled substance in accordance with Section 303.05 and 17 the written guidelines required under Section 7.5 of the 18 19 Physician Assistant Practice Act of 1987, or an advanced 20 practice nurse with prescriptive authority delegated under Section 65-40 of the Nurse Practice Act and in accordance with 21 22 Section 303.05, a written delegation, and a written 23 collaborative agreement under Section 65-35 of the Nurse 24 Practice Act.

25 (nn) "Prescription" means a lawful written, facsimile, or 26 verbal order of a physician licensed to practice medicine in HB1014 Enrolled - 23 - LRB096 04500 ASK 14555 b

all its branches, dentist, podiatrist or veterinarian for any 1 2 controlled substance, of an optometrist for a Schedule III, IV, or V controlled substance in accordance with Section 15.1 of 3 the Illinois Optometric Practice Act of 1987, of a physician 4 5 assistant for a Schedule III, IV, or V controlled substance in accordance with Section 303.05 and the written guidelines 6 required under Section 7.5 of the Physician Assistant Practice 7 8 Act of 1987, or of an advanced practice nurse with prescriptive 9 authority delegated under Section 65-40 of the Nurse Practice 10 Act who issues a prescription for a Schedule III, IV, or V 11 controlled substance in accordance with Section 303.05, a 12 written delegation, and a written collaborative agreement under Section 65-35 of the Nurse Practice Act. 13

14 (oo) "Production" or "produce" means manufacture, 15 planting, cultivating, growing, or harvesting of a controlled 16 substance other than methamphetamine.

17 (pp) "Registrant" means every person who is required to 18 register under Section 302 of this Act.

19 (qq) "Registry number" means the number assigned to each 20 person authorized to handle controlled substances under the 21 laws of the United States and of this State.

(rr) "State" includes the State of Illinois and any state, district, commonwealth, territory, insular possession thereof, and any area subject to the legal authority of the United States of America.

26 (ss) "Ultimate user" means a person who lawfully possesses

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1 a controlled substance for his own use or for the use of a 2 member of his household or for administering to an animal owned 3 by him or by a member of his household.

4 (Source: P.A. 94-556, eff. 9-11-05; 95-242, eff. 1-1-08;
5 95-639, eff. 10-5-07; 95-689, eff. 10-29-07; 95-876, eff.
6 8-21-08.)

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(720 ILCS 570/303.05)

Sec. 303.05. Mid-level practitioner registration.

9 (a) The Department of Professional Regulation shall 10 register licensed physician assistants and licensed advanced 11 practice nurses to prescribe and dispense Schedule III, IV, or 12 ¥ controlled substances under Section 303 and euthanasia 13 agencies to purchase, store, or administer <u>animal</u> euthanasia 14 drugs under the following circumstances:

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(1) with respect to physician assistants or advanced practice nurses,

(A) the physician assistant or advanced practice
nurse has been delegated prescriptive authority to
prescribe any Schedule III through V controlled
substances by a physician licensed to practice
medicine in all its branches in accordance with Section
7.5 of the Physician Assistant Practice Act of 1987 or
Section 65-40 of the Nurse Practice Act; and

(B) the physician assistant or advanced practice
 nurse has completed the appropriate application forms

and has paid the required fees as set by rule; or 1 (2) with respect to advanced practice nurses, 2 3 (A) the advanced practice nurse has been delegated authority to prescribe any Schedule III through V 4 5 controlled substances by a physician licensed to practice medicine in all its branches or a podiatrist 6 7 in accordance with Section 65-40 of the Nurse Practice 8 Act. The advanced practice nurse has completed the 9 appropriate application forms and has paid the 10 required fees as set by rule; or 11 (B) the advanced practice nurse has been delegated 12 authority by a collaborating physician licensed to practice medicine in all its branches to prescribe or 13 14 dispense Schedule II controlled substances through a written delegation of authority and under the 15 16 following conditions: (i) no more than 5 Schedule II controlled 17 18 substances by oral dosage may be delegated; 19 (ii) any delegation must be of controlled 20 substances prescribed by the collaborating 21 physician; 22 (iii) all prescriptions must be limited to no 23 more than a 30-day oral dosage, with any 24 continuation authorized only after prior approval 25 of the collaborating physician; 26 (iv) the advanced practice nurse must discuss

1the condition of any patients for whom a controlled2substance is prescribed monthly with the3delegating physician; and

4(v) the advanced practice nurse must have5completed the appropriate application forms and6paid the required fees as set by rule; or

7 <u>(3)</u> (2) with respect to <u>animal</u> euthanasia agencies, the 8 euthanasia agency has obtained a license from the 9 Department of Professional Regulation and obtained a 10 registration number from the Department.

11 (b) The mid-level practitioner shall only be licensed to 12 prescribe those schedules of controlled substances for which a licensed physician or licensed podiatrist has delegated 13 14 prescriptive authority, except that an animal a euthanasia 15 agency does not have any prescriptive authority. A physician 16 assistant and an advanced practice nurse are prohibited from 17 prescribing medications and controlled substances not set forth in the required written delegation of authority. 18

(c) Upon completion of all registration requirements,
 physician assistants, advanced practice nurses, and <u>animal</u>
 euthanasia agencies shall be issued a mid-level practitioner
 controlled substances license for Illinois.

23 (Source: P.A. 95-639, eff. 10-5-07.)

24 Section 99. Effective date. This Act takes effect upon 25 becoming law.