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AN ACT concerning State government.

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

Section 5. The Compassionate Use of Medical Cannabis Pilot
Program Act is amended by changing Sections 5, 10, 15, 35, 45,
60, 70, 75, and 220 and by adding Sections 7 and 57 as follows:

7 (410 ILCS 130/5)

8 (Section scheduled to be repealed on January 1, 2018)

9 Sec. 5. Findings.

10 (a) The recorded use of cannabis as a medicine goes back 11 nearly 5,000 years. Modern medical research has confirmed the 12 beneficial uses of cannabis in treating or alleviating the 13 pain, nausea, and other symptoms associated with a variety of 14 debilitating medical conditions, including cancer, multiple 15 sclerosis, and HIV/AIDS, as found by the National Academy of 16 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 sclerosis, HIV/AIDS, and other illnesses that often fail to respond to conventional treatments and relief of nausea, vomiting, and other side effects of drugs used to treat SB0010 Enrolled - 2 - LRB099 04220 KTG 24242 b

HIV/AIDS and hepatitis C, increasing the chances of patients
 continuing on life-saving treatment regimens.

(c) Cannabis has many currently accepted medical uses in 3 the United States, having been recommended by thousands of 4 5 licensed physicians to at least 600,000 patients in states with medical cannabis laws. The medical utility of cannabis is 6 7 recognized by a wide range of medical and public health 8 organizations, including the American Academy of HIV Medicine, 9 the American College of Physicians, the American Nurses 10 Association, the American Public Health Association, the 11 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.

19 <u>(d-5) In 2014, the Task Force on Veterans' Suicide was</u> 20 <u>created by the Illinois General Assembly to gather data on</u> 21 <u>veterans' suicide prevention. Data from a U.S. Department of</u> 22 <u>Veterans Affairs study indicates that 22 veterans commit</u> 23 <u>suicide each day.</u>

(e) Alaska, Arizona, California, Colorado, Connecticut,
Delaware, Hawaii, Maine, Massachusetts, Michigan, Montana,
Nevada, New Jersey, New Mexico, Oregon, Rhode Island, Vermont,

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1 Washington, and Washington, D.C. have removed state-level 2 criminal penalties from the medical use and cultivation of 3 cannabis. Illinois joins in this effort for the health and 4 welfare of its citizens.

5 (f) States are not required to enforce federal law or 6 prosecute people for engaging in activities prohibited by 7 federal law. Therefore, compliance with this Act does not put 8 the State of Illinois in violation of federal law.

9 (g) State law should make a distinction between the medical 10 and non-medical uses of cannabis. Hence, the purpose of this 11 Act is to protect patients with debilitating medical 12 conditions, as well as their physicians and providers, from 13 arrest and prosecution, criminal and other penalties, and 14 property forfeiture if the patients engage in the medical use 15 of cannabis.

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

17 (410 ILCS 130/7 new)

18 Sec. 7. Lawful user and lawful products. For the purposes 19 of this Act and to clarify the legislative findings on the 20 lawful use of cannabis: 21 (1) A cardholder under this Act shall not be considered 22 an unlawful user or addicted to narcotics solely as a 23 result of his or her qualifying patient or designated

24 <u>caregiver status.</u>

25 (2) All medical cannabis products purchased by a

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1qualifying patient at a licensed dispensing organization2shall be lawful products and a distinction shall be made3between medical and non-medical uses of cannabis as a4result of the qualifying patient's cardholder status under5the authorized use granted under State law.

6 (410 ILCS 130/10)

7 (Section scheduled to be repealed on January 1, 2018)
8 Sec. 10. Definitions. The following terms, as used in this
9 Act, shall have the meanings set forth in this Section:

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(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.

13 (2) Subject to the rules of the Department of Public 14 Health, a patient may apply for a waiver where a physician 15 provides a substantial medical basis in a signed, written 16 statement asserting that, based on the patient's medical history, in the physician's professional judgment, 2.5 17 18 ounces is an insufficient adequate supply for a 14-day 19 period to properly alleviate the patient's debilitating associated with 20 medical condition or symptoms the 21 debilitating medical condition.

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

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(4) The pre-mixed weight of medical cannabis used in

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1 making a cannabis infused product shall apply toward the 2 limit on the total amount of medical cannabis a registered 3 qualifying patient may possess at any one time.

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

(c) "Cannabis plant monitoring system" means a system that 6 7 includes, but is not limited to, testing and data collection 8 established and maintained by the registered cultivation 9 center and available to the Department for the purposes of 10 documenting each cannabis plant and for monitoring plant 11 development throughout the life cycle of a cannabis plant 12 cultivated for the intended use by a qualifying patient from seed planting to final packaging. 13

(d) "Cardholder" means a qualifying patient or a designated
caregiver who has been issued and possesses a valid registry
identification card by the Department of Public Health.

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

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

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(g) "Cultivation center agent identification card" means a

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document issued by the Department of Agriculture that
 identifies a person as a cultivation center agent.

3 (h) "Debilitating medical condition" means one or more of 4 the following:

5 (1) cancer, glaucoma, positive status for human 6 immunodeficiency virus, acquired immune deficiency syndrome, hepatitis C, amyotrophic lateral sclerosis, 7 8 Crohn's disease, agitation of Alzheimer's disease, 9 cachexia/wasting syndrome, muscular dystrophy, severe 10 fibromyalqia, spinal cord disease, including but not 11 limited to arachnoiditis, Tarlov cysts, hydromyelia, 12 syringomyelia, Rheumatoid arthritis, fibrous dysplasia, 13 spinal cord injury, traumatic brain injury and 14 post-concussion syndrome, Multiple Sclerosis, 15 Arnold-Chiari malformation and Syringomyelia, 16 Spinocerebellar Ataxia (SCA), Parkinson's, Tourette's, 17 Myoclonus, Dystonia, Reflex Sympathetic Dystrophy, RSD (Complex Regional Pain Syndromes Type I), Causalgia, CRPS 18 19 (Complex Regional Pain Syndromes Type II), 20 Neurofibromatosis, Chronic Inflammatory Demyelinating Polyneuropathy, Sjogren's syndrome, Lupus, Interstitial 21 22 Cystitis, Myasthenia Gravis, Hydrocephalus, nail-patella 23 syndrome, residual limb pain, seizures (including those 24 characteristic of epilepsy), post-traumatic stress 25 disorder (PTSD), or the treatment of these conditions; or (1.5) terminal illness with a diagnosis of 6 months or 26

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1 <u>less; if the terminal illness is not one of the qualifying</u> 2 <u>debilitating medical conditions, then the physician shall</u> 3 <u>on the certification form identify the cause of the</u> 4 <u>terminal illness; or</u>

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

8 (i) "Designated caregiver" means a person who: (1) is at 9 least 21 years of age; (2) has agreed to assist with a 10 patient's medical use of cannabis; (3) has not been convicted 11 of an excluded offense; and (4) assists no more than one 12 registered qualifying patient with his or her medical use of 13 cannabis.

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

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

(1) "Excluded offense" <u>for cultivation center agents and</u>
 <u>dispensing organizations</u> means:

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1 (1) a violent crime defined in Section 3 of the Rights 2 of Crime Victims and Witnesses Act or a substantially 3 similar offense that was classified as a felony in the 4 jurisdiction where the person was convicted; or

5 (2) a violation of a state or federal controlled 6 substance law, the Cannabis Control Act, or the Methamphetamine Control and Community Protection Act that 7 8 was classified as a felony in the jurisdiction where the 9 person was convicted, except that the registering 10 Department may waive this restriction if the person 11 demonstrates to the registering Department's satisfaction 12 that his or her conviction was for the possession, 13 cultivation, transfer, or delivery of a reasonable amount 14 of cannabis intended for medical use. This exception does 15 not apply if the conviction was under state law and 16 involved a violation of an existing medical cannabis law. 17 For purposes of this subsection, the Department of Public Health shall determine by emergency rule within 30 days after 18 19 the effective date of this amendatory Act of the 99th General 20 Assembly what constitutes a "reasonable amount".

21 <u>(1-5) "Excluded offense" for a qualifying patient or</u> 22 <u>designated caregiver means a violation of state or federal</u> 23 <u>controlled substance law, the Cannabis Control Act, or the</u> 24 <u>Methamphetamine and Community Protection Act that was</u> 25 <u>classified as a felony in the jurisdiction where the person was</u> 26 <u>convicted, except that the registering Department may waive</u> SB0010 Enrolled - 9 - LRB099 04220 KTG 24242 b

this restriction if the person demonstrates to the registering 1 2 Department's satisfaction that his or her conviction was for 3 the possession, cultivation, transfer, or delivery of a reasonable amount of cannabis intended for medical use. This 4 5 exception does not apply if the conviction was under state law and involved a violation of an existing medical cannabis law. 6 For purposes of this subsection, the Department of Public 7 Health shall determine by emergency rule within 30 days after 8 9 the effective date of this amendatory Act of the 99th General Assembly what constitutes a "reasonable amount". 10

11 (m) "Medical cannabis cultivation center registration" 12 means a registration issued by the Department of Agriculture.

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

cannabis dispensing organization", 18 (\circ) "Medical or "dispensing organization", or "dispensary organization" means 19 a facility operated by an organization or business that is 20 registered by the Department of Financial and Professional 21 22 Regulation to acquire medical cannabis from a registered 23 cultivation center for the purpose of dispensing cannabis, paraphernalia, or related supplies and educational materials 24 25 to registered qualifying patients.

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(p) "Medical cannabis dispensing organization agent" or

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"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.

5 (q) "Medical cannabis infused product" means food, oils, 6 ointments, or other products containing usable cannabis that 7 are not smoked.

8 (r) "Medical use" means the acquisition; administration; 9 delivery; possession; transfer; transportation; or use of 10 cannabis to treat or alleviate a registered qualifying 11 patient's debilitating medical condition or symptoms 12 associated with the patient's debilitating medical condition.

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

19 (t) "Qualifying patient" means a person who has been 20 diagnosed by a physician as having a debilitating medical 21 condition.

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

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(v) "Registry identification card" means a document issued

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by the Department of Public Health that identifies a person as a registered qualifying patient or registered designated caregiver.

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

10 (X) "Verification system" means a Web-based system 11 established and maintained by the Department of Public Health 12 that is available to the Department of Agriculture, the 13 Department of Financial and Professional Regulation, law 14 enforcement personnel, and registered medical cannabis 15 dispensing organization agents on a 24-hour basis for the 16 verification of registry identification cards, the tracking of 17 delivery of medical cannabis to medical cannabis dispensing organizations, and the tracking of the date of sale, amount, 18 and price of medical cannabis purchased by a registered 19 20 qualifying patient.

(y) "Written certification" means a document dated and signed by a physician, stating (1) that in the physician's professional opinion the patient is likely to receive therapeutic or palliative benefit from the medical use of cannabis to treat or alleviate the patient's debilitating medical condition or symptoms associated with the debilitating SB0010 Enrolled - 12 - LRB099 04220 KTG 24242 b

medical condition; (2) that the qualifying patient has a 1 2 debilitating medical condition and specifying the debilitating 3 medical condition the qualifying patient has; and (2) (3) that the patient is under the physician's care for the physician is 4 5 treating or managing treatment of the patient's debilitating medical condition. A written certification shall be made only 6 7 in the course of a bona fide physician-patient relationship, 8 after the physician has completed an assessment of the 9 qualifying patient's medical history, reviewed relevant 10 records related to the patient's debilitating condition, and 11 conducted a physical examination.

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.

20 (Source: P.A. 98-122, eff. 1-1-14; 98-775, eff. 1-1-15.)

21 (410 ILCS 130/15)

22 (Section scheduled to be repealed on January 1, 2018)
23 Sec. 15. Authority.

(a) It is the duty of the Department of Public Health toenforce the following provisions of this Act unless otherwise

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1 provided for by this Act:

(1) establish and maintain a confidential registry of
qualifying patients authorized to engage in the medical use
of cannabis and their caregivers;

5 (2) distribute educational materials about the health
6 <u>benefits and</u> risks associated with the <u>use</u> abuse of
7 cannabis and prescription medications;

8 (3) adopt rules to administer the patient and caregiver
9 registration program; and

10 (4) adopt rules establishing food handling 11 requirements for cannabis-infused products that are 12 prepared for human consumption.

(b) It is the duty of the Department of Agriculture to enforce the provisions of this Act relating to the registration and oversight of cultivation centers unless otherwise provided for in this Act.

(c) It is the duty of the Department of Financial and Professional Regulation to enforce the provisions of this Act relating to the registration and oversight of dispensing organizations unless otherwise provided for in this Act.

21 (d) The Department of Public Health, the Department of 22 Agriculture, or the Department of Financial and Professional 23 Regulation shall enter into intergovernmental agreements, as necessary, to carry out the provisions of this Act including, 24 25 but not limited to, the provisions relating to the registration 26 and oversight of cultivation centers, dispensing SB0010 Enrolled - 14 - LRB099 04220 KTG 24242 b

1 organizations, and qualifying patients and caregivers.

2 The Department of Public Health, Department of (e) 3 Agriculture, or the Department of Financial and Professional Regulation may suspend, revoke, or impose other penalties upon 4 5 a registration for violations of this Act and any rules adopted in accordance thereto. The suspension or revocation of, or 6 7 imposition of any other penalty upon, a registration is a final Agency action, subject to judicial review. Jurisdiction and 8 9 venue for judicial review are vested in the Circuit Court. 10 (Source: P.A. 98-122, eff. 1-1-14; 98-1172, eff. 1-12-15.)

11 (410 ILCS 130/35)

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

13 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:

17 (1) The Physician shall be currently licensed under the
18 Medical Practice Act of 1987 to practice medicine in all
19 its branches and in good standing, and must hold a
20 controlled substances license under Article III of the
21 Illinois Controlled Substances Act.

(2) A physician <u>certifying a patient's condition</u>
 making a medical cannabis recommendation shall comply with
 generally accepted standards of medical practice, the
 provisions of the Medical Practice Act of 1987 and all

1 applicable rules.

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

The physician shall maintain a record-keeping 4 (4) 5 system for all patients for whom the physician has 6 certified the patient's medical condition recommended the medical use of cannabis. These records shall be accessible 7 8 to and subject to review by the Department of Public Health 9 Department of Financial and Professional and the 10 Regulation upon request.

11 (b) A physician may not:

(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;

19 (2) offer a discount of any other item of value to a 20 qualifying patient who uses or agrees to use a particular 21 primary caregiver or dispensing organization to obtain 22 medical cannabis;

(3) conduct a personal physical examination of a
 patient for purposes of diagnosing a debilitating medical
 condition at a location where medical cannabis is sold or
 distributed or at the address of a principal officer,

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agent, or employee or a medical cannabis organization;

2 (4) hold a direct or indirect economic interest in a 3 cultivation center or dispensing organization if he or she recommends the use of medical cannabis to qualified 4 5 patients or is in a partnership or other fee or 6 profit-sharing relationship with a physician who recommends medical cannabis, except for the limited 7 8 purpose of performing a medical cannabis related research 9 study;

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

12 (6) refer patients to a cultivation center, a 13 dispensing organization, or a registered designated 14 caregiver; or

15 (7) advertise in a cultivation center or a dispensing 16 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.

(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.

25 (Source: P.A. 98-122, eff. 1-1-14; 98-1172, eff. 1-12-15.)

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1 (410 ILCS 130/45)

2 (Section scheduled to be repealed on January 1, 2018)
3 Sec. 45. Addition of debilitating medical conditions.

(a) Any resident citizen may petition the Department of 4 5 Public Health to add debilitating conditions or treatments to of debilitating medical conditions 6 the list listed in 7 subsection (h) of Section 10. The Department of Public Health 8 shall consider petitions in the manner required by Department 9 rule, including public notice and hearing. The Department shall 10 approve or deny a petition within 180 days of its submission, 11 and, upon approval, shall proceed to add that condition by rule 12 in accordance with the Administrative Procedure Act. The approval or denial of any petition is a final decision of the 13 Department, subject to judicial review. Jurisdiction and venue 14 15 are vested in the Circuit Court.

16 (b) The Department shall accept petitions once annually for 17 a one-month period determined by the Department. During the open period, the Department shall accept petitions from any 18 19 resident requesting the addition of a new debilitating medical 20 condition or disease to the list of approved debilitating medical conditions for which the use of cannabis has been shown 21 22 to have a therapeutic or palliative effect. The Department 23 shall provide public notice 30 days before the open period for accepting petitions, which shall describe the time period for 24 25 submission, the required format of the submission, and the 26 submission address.

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1	(c) Each petition shall be limited to one proposed
2	debilitating medical condition or disease.
3	(d) A petitioner shall file one original petition in the
4	format provided by the Department and in the manner specified
5	by the Department. For a petition to be processed and reviewed,
6	the following information shall be included:
7	(1) The petition, prepared on forms provided by the
8	Department, in the manner specified by the Department.
9	(2) A specific description of the medical condition or
10	disease that is the subject of the petition. Each petition
11	shall be limited to a single condition or disease.
12	Information about the proposed condition or disease shall
13	include:
14	(A) the extent to which the condition or disease
15	itself or the treatments cause severe suffering, such
16	as severe or chronic pain, severe nausea or vomiting,
17	or otherwise severely impair a person's ability to
18	conduct activities of daily living;
19	(B) information about why conventional medical
20	therapies are not sufficient to alleviate the
21	suffering caused by the disease or condition and its
22	treatment;
23	(C) the proposed benefits from the medical use of
24	cannabis specific to the medical condition or disease;
25	(D) evidence from the medical community and other
26	experts supporting the use of medical cannabis to

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alleviate suffering caused by the condition, disease, 1 2 or treatment; 3 (E) letters of support from physicians or other licensed health care providers knowledgeable about the 4 5 condition or disease, including, if feasible, a letter 6 from a physician with whom the petitioner has a bona 7 fide physician-patient relationship; 8 (F) any additional medical, testimonial, or 9 scientific documentation; and 10 (G) an electronic copy of all materials submitted. 11 (3) Upon receipt of a petition, the Department shall: 12 (A) determine whether the petition meets the standards for submission and, if so, shall accept the 13 14 petition for further review; or 15 (B) determine whether the petition does not meet 16 the standards for submission and, if so, shall deny the petition without further review. 17 (4) If the petition does not fulfill the standards for 18 19 submission, the petition shall be considered deficient. 20 The Department shall notify the petitioner, who may correct any deficiencies and resubmit the petition during the next 21 22 open period. 23 (e) The petitioner may withdraw his or her petition by 24 submitting a written statement to the Department indicating 25 withdrawal. (f) Upon review of accepted petitions, the Director shall 26

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1	(J) pediatrics; or
2	(K) psychiatry or mental health for children or
3	adolescents.
4	At least one appointed health care practitioner shall have
5	direct experience related to the health care needs of veterans
6	and at least one individual shall have pediatric experience.
7	(h) Members of the Advisory Board shall be appointed by the
8	<u>Governor.</u>
9	(1) Members shall serve a term of 4 years or until a
10	successor is appointed and qualified. If a vacancy occurs,
11	the Governor shall appoint a replacement to complete the
12	original term created by the vacancy.
13	(2) The Governor shall select a chairperson.
14	(3) Members may serve multiple terms.
15	(4) Members shall not have an affiliation with, serve
16	on the board of, or have a business relationship with a
17	registered cultivation center or a registered medical
18	cannabis dispensary.
19	(5) Members shall disclose any real or apparent
20	conflicts of interest that may have a direct bearing of the
21	subject matter, such as relationships with pharmaceutical
22	companies, biomedical device manufacturers, or
23	corporations whose products or services are related to the
24	medical condition or disease to be reviewed.
25	(6) Members shall not be paid but shall be reimbursed
26	for travel expenses incurred while fulfilling the

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1	responsibilities of the Advisory Board.
2	(i) On the effective date of this amendatory Act of the
3	99th General Assembly, the terms of office of the members of
4	the Advisory Board serving on that effective date shall
5	terminate and the Board shall be reconstituted.
6	(j) The Advisory Board shall convene at the call of the
7	Chair:
8	(1) to examine debilitating conditions or diseases
9	that would benefit from the medical use of cannabis; and
10	(2) to review new medical and scientific evidence
11	pertaining to currently approved conditions.
12	(k) The Advisory Board shall issue an annual report of its
13	activities each year.
14	(1) The Advisory Board shall receive administrative
15	support from the Department.
16	(Source: P.A. 98-122, eff. 1-1-14; revised 10-21-15.)
17	(410 ILCS 130/57 new)
18	Sec. 57. Qualifying patients under 18. Qualifying patients
19	that are under the age of 18 years shall not be prohibited from
20	having 2 designated caregivers as follows: if both biological
21	parents or 2 legal guardians of a qualifying patient under 18
22	both have significant decision-making responsibilities over
23	the qualifying patient, then both may serve as a designated
24	caregiver if they otherwise meet the definition of "designated
25	caregiver" under Section 10; however, if only one biological

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parent or legal guardian has significant decision-making responsibilities for the qualifying patient under 18, then he or she may appoint a second designated caregiver who meets the definition of "designated caregiver" under Section 10.

5 (410 ILCS 130/60)

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

7 Sec. 60. Issuance of registry identification cards.

8 (a) Except as provided in subsection (b), the Department of
9 Public Health shall:

10 (1) verify the information contained in an application 11 or renewal for a registry identification card submitted 12 under this Act, and approve or deny an application or 13 renewal, within 30 days of receiving a completed 14 application or renewal application and all supporting 15 documentation specified in Section 55;

16 (2) issue registry identification cards to a 17 qualifying patient and his or her designated caregiver, if 18 any, within 15 business days of approving the application 19 or renewal;

(3) enter the registry identification number of the
 registered dispensing organization the patient designates
 into the verification system; and

(4) allow for an electronic application process, and
 provide a confirmation by electronic or other methods that
 an application has been submitted.

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The Department of Public Health may not issue a 1 (b) 2 registry identification card to a qualifying patient who is 3 under 18 years of age, unless that patient suffers from seizures, including those characteristic of epilepsy, or as 4 5 provided by administrative rule. The Department of Public 6 Health shall adopt rules for the issuance of a registry 7 identification card for qualifying patients who are under 18 8 years of age and suffering from seizures, including those 9 characteristic of epilepsy. The Department of Public Health may 10 adopt rules to allow other individuals under 18 years of age to 11 become registered qualifying patients under this Act with the 12 consent of a parent or legal guardian. Registered qualifying 13 patients under 18 years of age shall be prohibited from consuming forms of cannabis other than medical cannabis infused 14 15 products and purchasing any usable cannabis.

16 (c) A veteran who has received treatment at a VA hospital 17 is deemed to have a bona fide physician-patient relationship with a VA physician if the patient has been seen for his or her 18 debilitating medical condition at the VA hospital in accordance 19 20 inferences with VA hospital protocols. All reasonable regarding the existence of a bona fide physician-patient 21 22 relationship shall be drawn in favor of an applicant who is a 23 veteran and has undergone treatment at a VA hospital.

24 (c-10) An individual who submits an application as someone
 25 who is terminally ill shall have all fees and fingerprinting
 26 requirements waived. The Department of Public Health shall

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1 within 30 days after this amendatory Act of the 99th General 2 Assembly adopt emergency rules to expedite approval for 3 terminally ill individuals. These rules shall include, but not 4 be limited to, rules that provide that applications by 5 individuals with terminal illnesses shall be approved or denied 6 within 14 days of their submission.

7 (d) Upon the approval of the registration and issuance of a 8 registry card under this Section, the Department of Public 9 Health shall forward the designated caregiver or registered 10 qualified patient's driver's registration number to the 11 Secretary of State and certify that the individual is permitted 12 to engage in the medical use of cannabis. For the purposes of law enforcement, the Secretary of State shall make a notation 13 14 on the person's driving record stating the person is a 15 registered qualifying patient who is entitled to the lawful 16 medical use of cannabis. If the person no longer holds a valid 17 registry card, the Department shall notify the Secretary of State and the Secretary of State shall remove the notation from 18 19 the person's driving record. The Department and the Secretary 20 of State may establish a system by which the information may be 21 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 SB0010 Enrolled - 26 - LRB099 04220 KTG 24242 b

1	Substances Act and certify that the individual is permitted to
2	engage in the medical use of cannabis. For the purposes of
3	patient care, the Prescription Monitoring Program shall make a
4	notation on the person's prescription record stating that the
5	person is a registered qualifying patient who is entitled to
6	the lawful medical use of cannabis. If the person no longer
7	holds a valid registry card, the Department of Public Health
8	shall notify the Prescription Monitoring Program and
9	Department of Human Services to remove the notation from the
10	person's record. The Department of Human Services and the
11	Prescription Monitoring Program shall establish a system by
12	which the information may be shared electronically. This
13	confidential list may not be combined or linked in any manner
14	with any other list or database except as provided in this
15	Section.
16	(f) All applicants for a registry card shall be
17	fingerprinted as part of the application process if they are a

18 first-time applicant, if their registry card has already expired, or if they previously have had their registry card 19 revoked or otherwise denied. At renewal, cardholders whose 20 21 registry cards have not yet expired, been revoked, or otherwise 22 denied shall not be subject to fingerprinting. Registry cards 23 shall be revoked by the Department of Public Health if the 24 Department of Public Health is notified by the Secretary of 25 State that a cardholder has been convicted of an excluded 26 offense. For purposes of enforcing this subsection, the SB0010 Enrolled - 27 - LRB099 04220 KTG 24242 b

1 Department of Public Health and Secretary of State shall 2 establish a system by which violations reported to the 3 Secretary of State under paragraph 18 of subsection (a) of Section 6-205 of the Illinois Vehicle Code shall be shared with 4 5 the Department of Public Health. (Source: P.A. 98-122, eff. 1-1-14; 98-775, eff. 1-1-15.) 6 (410 ILCS 130/70) 7 8 (Section scheduled to be repealed on January 1, 2018) 9 Sec. 70. Registry identification cards. 10 (a) Α registered qualifying patient or designated 11 caregiver must keep their registry identification card in his 12 or her possession at all times when engaging in the medical use 13 of cannabis. 14 (b) Registry identification cards shall contain the 15 following: 16 (1) the name of the cardholder; (2) a designation of whether the cardholder is a 17 18 designated caregiver or qualifying patient; 19 (3) the date of issuance and expiration date of the 20 registry identification card; 21 (4) a random alphanumeric identification number that 22 is unique to the cardholder; (5) if the cardholder is a designated caregiver, the 23 24 alphanumeric identification number of random the 25 registered qualifying patient the designated caregiver is

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receiving the registry identification card to assist; and

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(6) a photograph of the cardholder, if required by Department of Public Health rules.

(c) To maintain a valid registration identification card, a 4 5 registered qualifying patient and caregiver must annually resubmit, at least 45 days prior to the expiration date stated 6 on the registry identification card, a completed renewal 7 8 application, renewal fee, and accompanying documentation as 9 described in Department of Public Health rules. The Department 10 of Public Health shall send a notification to a registered 11 qualifying patient or registered designated caregiver 90 days 12 prior to the expiration of the registered qualifying patient's 13 or registered designated caregiver's identification card. If 14 the Department of Public Health fails to grant or deny a 15 renewal application received in accordance with this Section, 16 then the renewal is deemed granted and the registered 17 qualifying patient or registered designated caregiver may continue to use the expired identification card until the 18 19 Department of Public Health denies the renewal or issues a new 20 identification card.

(d) Except as otherwise provided in this Section, the
expiration date is <u>3 years</u> one year after the date of issuance.

(e) The Department of Public Health may electronically store in the card any or all of the information listed in subsection (b), along with the address and date of birth of the cardholder and the qualifying patient's designated dispensary

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1	organization, to allow it to be read by law enforcement agents.
2	(Source: P.A. 98-122, eff. 1-1-14.)
3	(410 ILCS 130/75)
4	(Section scheduled to be repealed on January 1, 2018)
5	Sec. 75. Notifications to Department of Public Health and
6	responses; civil penalty.
7	(a) The following notifications and Department of Public
8	Health responses are required:
9	(1) A registered qualifying patient shall notify the
10	Department of Public Health of any change in his or her
11	name or address, or if the registered qualifying patient
12	ceases to have his or her debilitating medical condition,
13	within 10 days of the change.
14	(2) A registered designated caregiver shall notify the
15	Department of Public Health of any change in his or her
16	name or address, or if the designated caregiver becomes
17	aware the registered qualifying patient passed away,
18	within 10 days of the change.
19	(3) Before a registered qualifying patient changes his
20	or her designated caregiver, the qualifying patient must
21	notify the Department of Public Health.
22	(4) If a cardholder loses his or her registry
23	identification card, he or she shall notify the Department
24	within 10 days of becoming aware the card has been lost.
25	(b) When a cardholder notifies the Department of Public

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1 Health of items listed in subsection (a), but remains eligible 2 under this Act, the Department of Public Health shall issue the 3 cardholder a new registry identification card with a new random alphanumeric identification number within 15 business days of 4 5 receiving the updated information and a fee as specified in 6 Department of Public Health rules. If the person notifying the 7 Department of Public Health is a registered qualifying patient, 8 Department shall also issue his or her registered the 9 designated caregiver, if any, a new registry identification 10 card within 15 business days of receiving the updated 11 information.

12 (c) If a registered qualifying patient ceases to be a 13 registered qualifying patient or changes his or her registered 14 designated caregiver, the Department of Public Health shall 15 promptly notify the designated caregiver. The registered 16 designated caregiver's protections under this Act as to that 17 qualifying patient shall expire 15 days after notification by 18 the Department.

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

(e) A registered qualifying patient shall notify the Department of Public Health of any change to his or her designated registered dispensing organization. Registered dispensing organizations must comply with all requirements of SB0010 Enrolled - 31 - LRB099 04220 KTG 24242 b

1 this Act.

2 If the registered qualifying patient's certifying (f) physician notifies the Department in writing that either the 3 registered qualifying patient has ceased to suffer from a 4 5 debilitating medical condition or that the physician no longer 6 believes the patient would receive therapeutic or palliative 7 benefit from the medical use of cannabis, the card shall become 8 null and void. However, the registered qualifying patient shall 9 have 15 days to destroy his or her remaining medical cannabis 10 and related paraphernalia.

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

12 (410 ILCS 130/220)

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

Sec. 220. Repeal of Act. This Act is repealed <u>on July 1</u>,
<u>2020</u> 4 years after the effective date of this Act.

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

Section 99. Effective date. This Act takes effect uponbecoming law.