



Rep. Kelly M. Cassidy

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1 AMENDMENT TO SENATE BILL 336

2 AMENDMENT NO. _____. Amend Senate Bill 336 by replacing
3 everything after the enacting clause with the following:

4 "Section 1. Short title. This Act may be referred to as the
5 Alternatives to Opioids Act of 2018.

6 Section 10. The Illinois Procurement Code is amended by
7 changing Section 1-10 as follows:

8 (30 ILCS 500/1-10)

9 Sec. 1-10. Application.

10 (a) This Code applies only to procurements for which
11 bidders, offerors, potential contractors, or contractors were
12 first solicited on or after July 1, 1998. This Code shall not
13 be construed to affect or impair any contract, or any provision
14 of a contract, entered into based on a solicitation prior to
15 the implementation date of this Code as described in Article

1 99, including but not limited to any covenant entered into with
2 respect to any revenue bonds or similar instruments. All
3 procurements for which contracts are solicited between the
4 effective date of Articles 50 and 99 and July 1, 1998 shall be
5 substantially in accordance with this Code and its intent.

6 (b) This Code shall apply regardless of the source of the
7 funds with which the contracts are paid, including federal
8 assistance moneys. This Code shall not apply to:

9 (1) Contracts between the State and its political
10 subdivisions or other governments, or between State
11 governmental bodies, except as specifically provided in
12 this Code.

13 (2) Grants, except for the filing requirements of
14 Section 20-80.

15 (3) Purchase of care, except as provided in Section
16 5-30.6 of the Illinois Public Aid Code and this Section.

17 (4) Hiring of an individual as employee and not as an
18 independent contractor, whether pursuant to an employment
19 code or policy or by contract directly with that
20 individual.

21 (5) Collective bargaining contracts.

22 (6) Purchase of real estate, except that notice of this
23 type of contract with a value of more than \$25,000 must be
24 published in the Procurement Bulletin within 10 calendar
25 days after the deed is recorded in the county of
26 jurisdiction. The notice shall identify the real estate

1 purchased, the names of all parties to the contract, the
2 value of the contract, and the effective date of the
3 contract.

4 (7) Contracts necessary to prepare for anticipated
5 litigation, enforcement actions, or investigations,
6 provided that the chief legal counsel to the Governor shall
7 give his or her prior approval when the procuring agency is
8 one subject to the jurisdiction of the Governor, and
9 provided that the chief legal counsel of any other
10 procuring entity subject to this Code shall give his or her
11 prior approval when the procuring entity is not one subject
12 to the jurisdiction of the Governor.

13 (8) (Blank).

14 (9) Procurement expenditures by the Illinois
15 Conservation Foundation when only private funds are used.

16 (10) (Blank).

17 (11) Public-private agreements entered into according
18 to the procurement requirements of Section 20 of the
19 Public-Private Partnerships for Transportation Act and
20 design-build agreements entered into according to the
21 procurement requirements of Section 25 of the
22 Public-Private Partnerships for Transportation Act.

23 (12) Contracts for legal, financial, and other
24 professional and artistic services entered into on or
25 before December 31, 2018 by the Illinois Finance Authority
26 in which the State of Illinois is not obligated. Such

1 contracts shall be awarded through a competitive process
2 authorized by the Board of the Illinois Finance Authority
3 and are subject to Sections 5-30, 20-160, 50-13, 50-20,
4 50-35, and 50-37 of this Code, as well as the final
5 approval by the Board of the Illinois Finance Authority of
6 the terms of the contract.

7 (13) Contracts for services, commodities, and
8 equipment to support the delivery of timely forensic
9 science services in consultation with and subject to the
10 approval of the Chief Procurement Officer as provided in
11 subsection (d) of Section 5-4-3a of the Unified Code of
12 Corrections, except for the requirements of Sections
13 20-60, 20-65, 20-70, and 20-160 and Article 50 of this
14 Code; however, the Chief Procurement Officer may, in
15 writing with justification, waive any certification
16 required under Article 50 of this Code. For any contracts
17 for services which are currently provided by members of a
18 collective bargaining agreement, the applicable terms of
19 the collective bargaining agreement concerning
20 subcontracting shall be followed.

21 On and after January 1, 2019, this paragraph (13),
22 except for this sentence, is inoperative.

23 (14) Contracts for participation expenditures required
24 by a domestic or international trade show or exhibition of
25 an exhibitor, member, or sponsor.

26 (15) Contracts with a railroad or utility that requires

1 the State to reimburse the railroad or utilities for the
2 relocation of utilities for construction or other public
3 purpose. Contracts included within this paragraph (15)
4 shall include, but not be limited to, those associated
5 with: relocations, crossings, installations, and
6 maintenance. For the purposes of this paragraph (15),
7 "railroad" means any form of non-highway ground
8 transportation that runs on rails or electromagnetic
9 guideways and "utility" means: (1) public utilities as
10 defined in Section 3-105 of the Public Utilities Act, (2)
11 telecommunications carriers as defined in Section 13-202
12 of the Public Utilities Act, (3) electric cooperatives as
13 defined in Section 3.4 of the Electric Supplier Act, (4)
14 telephone or telecommunications cooperatives as defined in
15 Section 13-212 of the Public Utilities Act, (5) rural water
16 or waste water systems with 10,000 connections or less, (6)
17 a holder as defined in Section 21-201 of the Public
18 Utilities Act, and (7) municipalities owning or operating
19 utility systems consisting of public utilities as that term
20 is defined in Section 11-117-2 of the Illinois Municipal
21 Code.

22 (16) Procurement expenditures necessary for the
23 Department of Agriculture, the Department of Financial and
24 Professional Regulation, the Department of Human Services,
25 and the Department of Public Health to implement the
26 Compassionate Use of Medical Cannabis Pilot Program and

1 Opioid Alternative Pilot Program requirements and ensure
2 access to medical cannabis for patients with debilitating
3 medical conditions in accordance with the Compassionate
4 Use of Medical Cannabis Pilot Program Act.

5 Notwithstanding any other provision of law, for contracts
6 entered into on or after October 1, 2017 under an exemption
7 provided in any paragraph of this subsection (b), except
8 paragraph (1), (2), or (5), each State agency shall post to the
9 appropriate procurement bulletin the name of the contractor, a
10 description of the supply or service provided, the total amount
11 of the contract, the term of the contract, and the exception to
12 the Code utilized. The chief procurement officer shall submit a
13 report to the Governor and General Assembly no later than
14 November 1 of each year that shall include, at a minimum, an
15 annual summary of the monthly information reported to the chief
16 procurement officer.

17 (c) This Code does not apply to the electric power
18 procurement process provided for under Section 1-75 of the
19 Illinois Power Agency Act and Section 16-111.5 of the Public
20 Utilities Act.

21 (d) Except for Section 20-160 and Article 50 of this Code,
22 and as expressly required by Section 9.1 of the Illinois
23 Lottery Law, the provisions of this Code do not apply to the
24 procurement process provided for under Section 9.1 of the
25 Illinois Lottery Law.

26 (e) This Code does not apply to the process used by the

1 Capital Development Board to retain a person or entity to
2 assist the Capital Development Board with its duties related to
3 the determination of costs of a clean coal SNG brownfield
4 facility, as defined by Section 1-10 of the Illinois Power
5 Agency Act, as required in subsection (h-3) of Section 9-220 of
6 the Public Utilities Act, including calculating the range of
7 capital costs, the range of operating and maintenance costs, or
8 the sequestration costs or monitoring the construction of clean
9 coal SNG brownfield facility for the full duration of
10 construction.

11 (f) (Blank).

12 (g) (Blank).

13 (h) This Code does not apply to the process to procure or
14 contracts entered into in accordance with Sections 11-5.2 and
15 11-5.3 of the Illinois Public Aid Code.

16 (i) Each chief procurement officer may access records
17 necessary to review whether a contract, purchase, or other
18 expenditure is or is not subject to the provisions of this
19 Code, unless such records would be subject to attorney-client
20 privilege.

21 (j) This Code does not apply to the process used by the
22 Capital Development Board to retain an artist or work or works
23 of art as required in Section 14 of the Capital Development
24 Board Act.

25 (k) This Code does not apply to the process to procure
26 contracts, or contracts entered into, by the State Board of

1 Elections or the State Electoral Board for hearing officers
2 appointed pursuant to the Election Code.

3 (1) This Code does not apply to the processes used by the
4 Illinois Student Assistance Commission to procure supplies and
5 services paid for from the private funds of the Illinois
6 Prepaid Tuition Fund. As used in this subsection (1), "private
7 funds" means funds derived from deposits paid into the Illinois
8 Prepaid Tuition Trust Fund and the earnings thereon.

9 (Source: P.A. 99-801, eff. 1-1-17; 100-43, eff. 8-9-17;
10 100-580, eff. 3-12-18.)

11 Section 15. The Compassionate Use of Medical Cannabis Pilot
12 Program Act is amended by changing Sections 5, 7, 10, 35, 55,
13 60, 65, 75, 130, and 160 and by adding Sections 36 and 62 as
14 follows:

15 (410 ILCS 130/5)

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

17 Sec. 5. Findings.

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

1 (b) Studies published since the 1999 Institute of Medicine
2 report continue to show the therapeutic value of cannabis in
3 treating a wide array of debilitating medical conditions. These
4 include relief of the neuropathic pain caused by multiple
5 sclerosis, HIV/AIDS, and other illnesses that often fail to
6 respond to conventional treatments and relief of nausea,
7 vomiting, and other side effects of drugs used to treat
8 HIV/AIDS and hepatitis C, increasing the chances of patients
9 continuing on life-saving treatment regimens.

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

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

26 (d-5) In 2014, the Task Force on Veterans' Suicide was

1 created by the Illinois General Assembly to gather data on
2 veterans' suicide prevention. Data from a U.S. Department of
3 Veterans Affairs study indicates that 22 veterans commit
4 suicide each day.

5 (d-10) According to the State of Illinois Opioid Action
6 Plan released in September 2017, "The opioid epidemic is the
7 most significant public health and public safety crisis facing
8 Illinois". According to the Action Plan, "Fueled by the growing
9 opioid epidemic, drug overdoses have now become the leading
10 cause of death nationwide for people under the age of 50. In
11 Illinois, opioid overdoses have killed nearly 11,000 people
12 since 2008. Just last year, nearly 1,900 people died of
13 overdoses—almost twice the number of fatal car accidents.
14 Beyond these deaths are thousands of emergency department
15 visits, hospital stays, as well as the pain suffered by
16 individuals, families, and communities".

17 According to the Action Plan, "At the current rate, the
18 opioid epidemic will claim the lives of more than 2,700
19 Illinoisans in 2020".

20 Further, the Action Plan states, "Physical tolerance to
21 opioids can begin to develop as early as two to three days
22 following the continuous use of opioids, which is a large
23 factor that contributes to their addictive potential".

24 The 2017 State of Illinois Opioid Action Plan also states,
25 "The increase in OUD [opioid use disorder] and opioid overdose
26 deaths is largely due to the dramatic rise in the rate and

1 amount of opioids prescribed for pain over the past decades".

2 Further, according to the Action Plan, "In the absence of
3 alternative treatments, reducing the supply of prescription
4 opioids too abruptly may drive more people to switch to using
5 illicit drugs (including heroin), thus increasing the risk of
6 overdose".

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

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

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

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

1 (410 ILCS 130/7)

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

3 Sec. 7. Lawful user and lawful products. For the purposes
4 of this Act and to clarify the legislative findings on the
5 lawful use of cannabis:

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

10 (2) All medical cannabis products purchased by a
11 qualifying patient at a licensed dispensing organization
12 shall be lawful products and a distinction shall be made
13 between medical and non-medical uses of cannabis as a
14 result of the qualifying patient's cardholder status,
15 provisional registration for qualifying patient cardholder
16 status, or participation in the Opioid Alternative Pilot
17 Program under the authorized use granted under State law.

18 (3) An individual with a provisional registration for
19 qualifying patient cardholder status, a qualifying patient
20 in the medical cannabis pilot program, or an Opioid
21 Alternative Pilot Program participant under Section 62
22 shall not be considered an unlawful user or addicted to
23 narcotics solely as a result of his or her application to
24 or participation in the program.

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

1 (410 ILCS 130/10)

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

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

5 (a) "Adequate supply" means:

6 (1) 2.5 ounces of usable cannabis during a period of 14
7 days and that is derived solely from an intrastate source.

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

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

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

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

26 (c) "Cannabis plant monitoring system" means a system that

1 includes, but is not limited to, testing and data collection
2 established and maintained by the registered cultivation
3 center and available to the Department for the purposes of
4 documenting each cannabis plant and for monitoring plant
5 development throughout the life cycle of a cannabis plant
6 cultivated for the intended use by a qualifying patient from
7 seed planting to final packaging.

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

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

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

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

23 (h) "Debilitating medical condition" means one or more of
24 the following:

25 (1) cancer, glaucoma, positive status for human
26 immunodeficiency virus, acquired immune deficiency

1 syndrome, hepatitis C, amyotrophic lateral sclerosis,
2 Crohn's disease, agitation of Alzheimer's disease,
3 cachexia/wasting syndrome, muscular dystrophy, severe
4 fibromyalgia, spinal cord disease, including but not
5 limited to arachnoiditis, Tarlov cysts, hydromyelia,
6 syringomyelia, Rheumatoid arthritis, fibrous dysplasia,
7 spinal cord injury, traumatic brain injury and
8 post-concussion syndrome, Multiple Sclerosis,
9 Arnold-Chiari malformation and Syringomyelia,
10 Spinocerebellar Ataxia (SCA), Parkinson's, Tourette's,
11 Myoclonus, Dystonia, Reflex Sympathetic Dystrophy, RSD
12 (Complex Regional Pain Syndromes Type I), Causalgia, CRPS
13 (Complex Regional Pain Syndromes Type II),
14 Neurofibromatosis, Chronic Inflammatory Demyelinating
15 Polyneuropathy, Sjogren's syndrome, Lupus, Interstitial
16 Cystitis, Myasthenia Gravis, Hydrocephalus, nail-patella
17 syndrome, residual limb pain, seizures (including those
18 characteristic of epilepsy), post-traumatic stress
19 disorder (PTSD), or the treatment of these conditions;

20 (1.5) terminal illness with a diagnosis of 6 months or
21 less; if the terminal illness is not one of the qualifying
22 debilitating medical conditions, then the physician shall
23 on the certification form identify the cause of the
24 terminal illness; or

25 (2) any other debilitating medical condition or its
26 treatment that is added by the Department of Public Health

1 by rule as provided in Section 45.

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

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

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

19 (l) "Excluded offense" for cultivation center agents and
20 dispensing organizations means:

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

25 (2) a violation of a state or federal controlled
26 substance law, the Cannabis Control Act, or the

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

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

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

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

5 (1-10) "Illinois Cannabis Tracking System" means a
6 web-based system established and maintained by the Department
7 of Public Health that is available to the Department of
8 Agriculture, the Department of Financial and Professional
9 Regulation, the Illinois State Police, and registered medical
10 cannabis dispensing organizations on a 24-hour basis to upload
11 written certifications for Opioid Alternative Pilot Program
12 participants, to verify Opioid Alternative Pilot Program
13 participants, to verify Opioid Alternative Pilot Program
14 participants' available cannabis allotment and assigned
15 dispensary, and the tracking of the date of sale, amount, and
16 price of medical cannabis purchased by an Opioid Alternative
17 Pilot Program participant.

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

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

25 (o) "Medical cannabis dispensing organization", or
26 "dispensing organization", or "dispensary organization" means

1 a facility operated by an organization or business that is
2 registered by the Department of Financial and Professional
3 Regulation to acquire medical cannabis from a registered
4 cultivation center for the purpose of dispensing cannabis,
5 paraphernalia, or related supplies and educational materials
6 to registered qualifying patients, individuals with a
7 provisional registration for qualifying patient cardholder
8 status, or an Opioid Alternative Pilot Program participant.

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

14 (q) "Medical cannabis infused product" means food, oils,
15 ointments, or other products containing usable cannabis that
16 are not smoked.

17 (r) "Medical use" means the acquisition; administration;
18 delivery; possession; transfer; transportation; or use of
19 cannabis to treat or alleviate a registered qualifying
20 patient's debilitating medical condition or symptoms
21 associated with the patient's debilitating medical condition.

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

26 (r-10) "Opioid Alternative Pilot Program participant"

1 means an individual who has received a valid written
2 certification to participate in the Opioid Alternative Pilot
3 Program for a medical condition for which an opioid has been or
4 could be prescribed by a physician based on generally accepted
5 standards of care.

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

12 (s-5) "Provisional registration" means a document issued
13 by the Department of Public Health to a qualifying patient who
14 has submitted: (1) an online application and paid a fee to
15 participate in Compassionate Use of Medical Cannabis Pilot
16 Program pending approval or denial of the patient's
17 application; or (2) a completed application for terminal
18 illness.

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

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

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

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

4 (w) "Usable cannabis" means the seeds, leaves, buds, and
5 flowers of the cannabis plant and any mixture or preparation
6 thereof, but does not include the stalks, and roots of the
7 plant. It does not include the weight of any non-cannabis
8 ingredients combined with cannabis, such as ingredients added
9 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
18 organizations, and the tracking of the date of sale, amount,
19 and price of medical cannabis purchased by a registered
20 qualifying patient.

21 (y) "Written certification" means a document dated and
22 signed by a physician, stating (1) that the qualifying patient
23 has a debilitating medical condition and specifying the
24 debilitating medical condition the qualifying patient has; and
25 (2) that (A) the physician is treating or managing treatment of
26 the patient's debilitating medical condition; or (B) an Opioid

1 Alternative Pilot Program participant has a medical condition
2 for which opioids have been or could be prescribed. A written
3 certification shall be made only in the course of a bona fide
4 physician-patient relationship, after the physician has
5 completed an assessment of either a ~~the~~ qualifying patient's
6 medical history or Opioid Alternative Pilot Program
7 participant, reviewed relevant records related to the
8 patient's debilitating condition, and conducted a physical
9 examination.

10 (z) "Bona fide physician-patient relationship" means a
11 relationship established at a hospital, physician's office, or
12 other health care facility in which the physician has an
13 ongoing responsibility for the assessment, care, and treatment
14 of a patient's debilitating medical condition or a symptom of
15 the patient's debilitating medical condition.

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

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

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

1 (410 ILCS 130/35)

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

3 Sec. 35. Physician requirements.

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

7 (1) The Physician shall be currently licensed under the
8 Medical Practice Act of 1987 to practice medicine in all
9 its branches and in good standing, and must hold a
10 controlled substances license under Article III of the
11 Illinois Controlled Substances Act.

12 (2) A physician certifying a patient's condition shall
13 comply with generally accepted standards of medical
14 practice, the provisions of the Medical Practice Act of
15 1987 and all applicable rules.

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

18 (4) The physician shall maintain a record-keeping
19 system for all patients for whom the physician has
20 certified the patient's medical condition. These records
21 shall be accessible to and subject to review by the
22 Department of Public Health and the Department of Financial
23 and Professional Regulation upon request.

24 (b) A physician may not:

25 (1) accept, solicit, or offer any form of remuneration
26 from or to a qualifying patient, primary caregiver,

1 cultivation center, or dispensing organization, including
2 each principal officer, board member, agent, and employee,
3 to certify a patient, other than accepting payment from a
4 patient for the fee associated with the required
5 examination;

6 (2) offer a discount of any other item of value to a
7 qualifying patient who uses or agrees to use a particular
8 primary caregiver or dispensing organization to obtain
9 medical cannabis;

10 (3) conduct a personal physical examination of a
11 patient for purposes of diagnosing a debilitating medical
12 condition at a location where medical cannabis is sold or
13 distributed or at the address of a principal officer,
14 agent, or employee or a medical cannabis organization;

15 (4) hold a direct or indirect economic interest in a
16 cultivation center or dispensing organization if he or she
17 recommends the use of medical cannabis to qualified
18 patients or is in a partnership or other fee or
19 profit-sharing relationship with a physician who
20 recommends medical cannabis, except for the limited
21 purpose of performing a medical cannabis related research
22 study;

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

25 (6) refer patients to a cultivation center, a
26 dispensing organization, or a registered designated

1 caregiver; or

2 (7) advertise in a cultivation center or a dispensing
3 organization.

4 (c) The Department of Public Health may with reasonable
5 cause refer a physician, who has certified a debilitating
6 medical condition of a patient, to the Illinois Department of
7 Financial and Professional Regulation for potential violations
8 of this Section.

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

12 (e) A physician who certifies a debilitating medical
13 condition for a qualifying patient may notify the Department of
14 Public Health in writing: (1) if the physician has reason to
15 believe either that the registered qualifying patient has
16 ceased to suffer from a debilitating medical condition; (2)
17 that the bona fide physician-patient relationship has
18 terminated; or (3) that continued use of medical cannabis would
19 result in contraindication with the patient's other
20 medication. The registered qualifying patient's registry
21 identification card shall be revoked by the Department of
22 Public Health after receiving the physician's notification.

23 (Source: P.A. 98-122, eff. 1-1-14; 98-1172, eff. 1-12-15;
24 99-519, eff. 6-30-16.)

25 (410 ILCS 130/36 new)

1 Sec. 36. Written certification.

2 (a) A certification confirming a patient's debilitating
3 medical condition shall be written on a form provided by the
4 Department of Public Health and shall include, at a minimum,
5 the following:

6 (1) the qualifying patient's name, date of birth, home
7 address, and primary telephone number;

8 (2) the physician's name, address, telephone number,
9 email address, medical license number, and active
10 controlled substances license under the Illinois
11 Controlled Substances Act and indication of specialty or
12 primary area of clinical practice, if any;

13 (3) the qualifying patient's debilitating medical
14 condition;

15 (4) a statement that the physician has confirmed a
16 diagnosis of a debilitating condition; is treating or
17 managing treatment of the patient's debilitating
18 condition; has a bona-fide physician-patient relationship;
19 has conducted an in-person physical examination; and has
20 conducted a review of the patient's medical history,
21 including reviewing medical records from other treating
22 physicians, if any, from the previous 12 months;

23 (5) the physician's signature and date of
24 certification; and

25 (6) a statement that a participant in possession of a
26 written certification indicating a debilitating medical

1 condition shall not be considered an unlawful user or
2 addicted to narcotics solely as a result of his or her
3 pending application to or participation in the
4 Compassionate Use of Medical Cannabis Pilot Program.

5 (b) A written certification does not constitute a
6 prescription for medical cannabis.

7 (c) Applications for qualifying patients under 18 years old
8 shall require a written certification from a physician and a
9 reviewing physician.

10 (d) A certification confirming the patient's eligibility
11 to participate in the Opioid Alternative Pilot Program shall be
12 written on a form provided by the Department of Public Health
13 and shall include, at a minimum, the following:

14 (1) the participant's name, date of birth, home
15 address, and primary telephone number;

16 (2) the physician's name, address, telephone number,
17 email address, medical license number, and active
18 controlled substances license under the Illinois
19 Controlled Substances Act and indication of specialty or
20 primary area of clinical practice, if any;

21 (3) the physician's signature and date;

22 (4) the length of participation in the program, which
23 shall be limited to no more than 90 days;

24 (5) a statement identifying the patient has been
25 diagnosed with and is currently undergoing treatment for a
26 medical condition where an opioid has been or could be

1 prescribed; and

2 (6) a statement that a participant in possession of a
3 written certification indicating eligibility to
4 participate in the Opioid Alternative Pilot Program shall
5 not be considered an unlawful user or addicted to narcotics
6 solely as a result of his or her eligibility or
7 participation in the program.

8 (e) The Department of Public Health may provide a single
9 certification form for subsections (a) and (d) of this Section,
10 provided that all requirements of those subsections are
11 included on the form.

12 (f) The Department of Public Health shall not include the
13 word "cannabis" on any application forms or written
14 certification forms that it issues under this Section.

15 (g) A written certification does not constitute a
16 prescription.

17 (h) It is unlawful for any person to knowingly submit a
18 fraudulent certification to be a qualifying patient in the
19 Compassionate Use of Medical Cannabis Pilot Program or an
20 Opioid Alternative Pilot Program participant. A violation of
21 this subsection shall result in the person who has knowingly
22 submitted the fraudulent certification being permanently
23 banned from participating in the Compassionate Use of Medical
24 Cannabis Pilot Program or the Opioid Alternative Pilot Program.

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

2 Sec. 55. Registration of qualifying patients and
3 designated caregivers.

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

9 (1) A written certification, on a form developed by the
10 Department of Public Health consistent with Section 36 and
11 issued by a physician, within 90 days immediately preceding
12 the date of an application;

13 (2) upon the execution of applicable privacy waivers,
14 the patient's medical documentation related to his or her
15 debilitating condition and any other information that may
16 be reasonably required by the Department of Public Health
17 to confirm that the physician and patient have a bona fide
18 physician-patient relationship, that the qualifying
19 patient is in the physician's care for his or her
20 debilitating medical condition, and to substantiate the
21 patient's diagnosis;

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

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

26 (5) the name, address, and telephone number of the

1 qualifying patient's physician;

2 (6) the name, address, and date of birth of the
3 designated caregiver, if any, chosen by the qualifying
4 patient;

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

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

10 (9) (blank). ~~completed background checks for the~~
11 ~~patient and designated caregiver.~~

12 (b) Notwithstanding any other provision of this Act, a
13 person provided a written certification for a debilitating
14 medical condition who has submitted a completed online
15 application to the Department of Public Health shall receive a
16 provisional registration and be entitled to purchase medical
17 cannabis from a specified licensed dispensing organization for
18 a period of 90 days or until his or her application has been
19 denied or he or she receives a registry identification card,
20 whichever is earlier. However, a person may obtain an
21 additional provisional registration after the expiration of 90
22 days after the date of application if the Department of Public
23 Health does not provide the individual with a registry
24 identification card or deny the individual's application
25 within those 90 days.

26 In order for a person to receive medical cannabis under

1 this subsection, a person must present his or her provisional
2 registration along with a valid driver's license or State
3 identification card to the licensed dispensing organization
4 specified in his or her application. The dispensing
5 organization shall verify the person's provisional
6 registration through the Department of Public Health's online
7 verification system.

8 Upon verification of the provided documents, the
9 dispensing organization shall dispense no more than 2.5 ounces
10 of medical cannabis during a 14-day period to the person for a
11 period of 90 days, until his or her application has been
12 denied, or until he or she receives a registry identification
13 card from the Department of Public Health, whichever is
14 earlier.

15 Purchases of medical cannabis to persons with provisional
16 registrations shall be tracked through the Illinois Cannabis
17 Tracking System.

18 Persons with provisional registrations must keep their
19 provisional registration in his or her possession at all times
20 when transporting or engaging in the medical use of cannabis.

21 (c) No person or business shall charge a fee for assistance
22 in the preparation, compilation, or submission of an
23 application to the Compassionate Use of Medical Cannabis Pilot
24 Program or the Opioid Alternative Pilot Program. A violation of
25 this subsection is a Class C misdemeanor, for which restitution
26 to the applicant and a fine of up to \$2,500 may be imposed. All

1 fines shall be deposited into the Compassionate Use of Medical
2 Cannabis Fund after restitution has been made to the applicant.
3 The Department of Public Health shall refer individuals making
4 complaints against a person or business under this Section to
5 the Illinois State Police, who shall enforce violations of this
6 provision. All application forms issued by the Department shall
7 state that no person or business may charge a fee for
8 assistance in the preparation, compilation, or submission of an
9 application to the Compassionate Use of Medical Cannabis Pilot
10 Program or the Opioid Alternative Pilot Program.

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

12 (410 ILCS 130/60)

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

14 Sec. 60. Issuance of registry identification cards.

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

17 (1) verify the information contained in an application
18 or renewal for a registry identification card submitted
19 under this Act, and approve or deny an application or
20 renewal, within 90 ~~30~~ days of receiving a completed
21 application or renewal application and all supporting
22 documentation specified in Section 55;

23 (2) issue registry identification cards to a
24 qualifying patient and his or her designated caregiver, if
25 any, within 15 business days of approving the application

1 or renewal;

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

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

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

23 (c) A veteran who has received treatment at a VA hospital
24 is deemed to have a bona fide physician-patient relationship
25 with a VA physician if the patient has been seen for his or her
26 debilitating medical condition at the VA hospital in accordance

1 with VA hospital protocols. All reasonable inferences
2 regarding the existence of a bona fide physician-patient
3 relationship shall be drawn in favor of an applicant who is a
4 veteran and has undergone treatment at a VA hospital.

5 (c-10) An individual who submits an application as someone
6 who is terminally ill shall have all fees ~~and fingerprinting~~
7 ~~requirements~~ waived. The Department of Public Health shall
8 within 30 days after this amendatory Act of the 99th General
9 Assembly adopt emergency rules to expedite approval for
10 terminally ill individuals. These rules shall include, but not
11 be limited to, rules that provide that applications by
12 individuals with terminal illnesses shall be approved or denied
13 within 14 days of their submission.

14 (d) Upon the approval of the registration and issuance of a
15 registry card under this Section, the Department of Public
16 Health shall forward the designated caregiver or registered
17 qualified patient's driver's registration number to the
18 Secretary of State and certify that the individual is permitted
19 to engage in the medical use of cannabis. For the purposes of
20 law enforcement, the Secretary of State shall make a notation
21 on the person's driving record stating the person is a
22 registered qualifying patient who is entitled to the lawful
23 medical use of cannabis. If the person no longer holds a valid
24 registry card, the Department shall notify the Secretary of
25 State and the Secretary of State shall remove the notation from
26 the person's driving record. The Department and the Secretary

1 of State may establish a system by which the information may be
2 shared electronically.

3 (e) Upon the approval of the registration and issuance of a
4 registry card under this Section, the Department of Public
5 Health shall electronically forward the registered qualifying
6 patient's identification card information to the Prescription
7 Monitoring Program established under the Illinois Controlled
8 Substances Act and certify that the individual is permitted to
9 engage in the medical use of cannabis. For the purposes of
10 patient care, the Prescription Monitoring Program shall make a
11 notation on the person's prescription record stating that the
12 person is a registered qualifying patient who is entitled to
13 the lawful medical use of cannabis. If the person no longer
14 holds a valid registry card, the Department of Public Health
15 shall notify the Prescription Monitoring Program and
16 Department of Human Services to remove the notation from the
17 person's record. The Department of Human Services and the
18 Prescription Monitoring Program shall establish a system by
19 which the information may be shared electronically. This
20 confidential list may not be combined or linked in any manner
21 with any other list or database except as provided in this
22 Section.

23 (f) (Blank). ~~All applicants for a registry card shall be~~
24 ~~fingerprinted as part of the application process if they are a~~
25 ~~first time applicant, if their registry card has already~~
26 ~~expired, or if they previously have had their registry card~~

1 ~~revoked or otherwise denied. At renewal, cardholders whose~~
2 ~~registry cards have not yet expired, been revoked, or otherwise~~
3 ~~denied shall not be subject to fingerprinting. Registry cards~~
4 ~~shall be revoked by the Department of Public Health if the~~
5 ~~Department of Public Health is notified by the Secretary of~~
6 ~~State that a cardholder has been convicted of an excluded~~
7 ~~offense. For purposes of enforcing this subsection, the~~
8 ~~Department of Public Health and Secretary of State shall~~
9 ~~establish a system by which violations reported to the~~
10 ~~Secretary of State under paragraph 18 of subsection (a) of~~
11 ~~Section 6-205 of the Illinois Vehicle Code shall be shared with~~
12 ~~the Department of Public Health.~~

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

15 (410 ILCS 130/62 new)

16 Sec. 62. Opioid Alternative Pilot Program.

17 (a) The Department of Public Health shall establish the
18 Opioid Alternative Pilot Program. Licensed dispensing
19 organizations shall allow persons with a written certification
20 from a licensed physician under Section 36 to purchase medical
21 cannabis upon enrollment in the Opioid Alternative Pilot
22 Program. For a person to receive medical cannabis under this
23 Section, the person must present the written certification
24 along with a valid driver's license or state identification
25 card to the licensed dispensing organization specified in his

1 or her application. The dispensing organization shall verify
2 the person's status as an Opioid Alternative Pilot Program
3 participant through the Department of Public Health's online
4 verification system.

5 (b) The Opioid Alternative Pilot Program shall be limited
6 to participation by Illinois residents age 21 and older.

7 (c) The Department of Financial and Professional
8 Regulation shall specify a cannabis tracking system for use by
9 all licensed dispensing organizations participating in the
10 Opioid Alternative Pilot Program. The Department of Public
11 Health shall establish and maintain the Illinois Cannabis
12 Tracking System. The Illinois Cannabis Tracking System shall be
13 used to collect information about all persons participating in
14 the Opioid Alternative Pilot Program and shall be used to track
15 the sale of medical cannabis for verification purposes.

16 Each dispensing organization shall retain a copy of the
17 Opioid Alternative Pilot Program certification and other
18 identifying information as required by the Department of
19 Financial and Professional Regulation, the Department of
20 Public Health, and the Illinois State Police in the Illinois
21 Cannabis Tracking System.

22 The Illinois Cannabis Tracking System shall be accessible
23 to the Department of Financial and Professional Regulation,
24 Department of Public Health, Department of Agriculture,
25 Department of Human Services and the Illinois State Police.

26 The Department of Financial and Professional Regulation in

1 collaboration with the Department of Public Health shall
2 specify the data requirements for the Opioid Alternative Pilot
3 Program by licensed dispensing organizations; including, but
4 not limited to, the participant's full legal name, address, and
5 date of birth, date on which the Opioid Alternative Pilot
6 Program certification was issued, length of the participation
7 in the Program, including the start and end date to purchase
8 medical cannabis, name of the issuing physician, copy of the
9 participant's current driver's license or State identification
10 card, and phone number.

11 The Illinois Cannabis Tracking System shall provide
12 verification of a person's participation in the Opioid
13 Alternative Pilot Program for law enforcement at any time and
14 on any day.

15 (d) The certification for Opioid Alternative Pilot Program
16 participant must be issued by a physician licensed to practice
17 in Illinois under the Medical Practice Act of 1987 and in good
18 standing who holds a controlled substances license under
19 Article III of the Illinois Controlled Substance Act.

20 The certification for an Opioid Alternative Pilot Program
21 participant shall be written within 90 days before the
22 participant submits his or her certification to the dispensing
23 organization.

24 The written certification uploaded to the Illinois
25 Cannabis Tracking System shall be accessible to the Department
26 of Public Health.

1 (e) Upon verification of the individual's valid
2 certification and enrollment in the Illinois Cannabis Tracking
3 System, the dispensing organization may dispense the medical
4 cannabis, in amounts not exceeding 2.5 ounces of medical
5 cannabis per 14-day period to the participant at the
6 participant's specified dispensary for no more than 90 days.

7 An Opioid Alternative Pilot Program participant shall not
8 be registered as a medical cannabis cardholder. The dispensing
9 organization shall verify that the person is not an active
10 registered qualifying patient prior to enrollment in the Opioid
11 Alternative Pilot Program and each time medical cannabis is
12 dispensed.

13 Upon receipt of a written certification under the Opioid
14 Alternative Pilot Program, the Department of Public Health
15 shall electronically forward the patient's identification
16 information to the Prescription Monitoring Program established
17 under the Illinois Controlled Substances Act and certify that
18 the individual is permitted to engage in the medical use of
19 cannabis. For the purposes of patient care, the Prescription
20 Monitoring Program shall make a notation on the person's
21 prescription record stating that the person has a written
22 certification under the Opioid Alternative Pilot Program and is
23 a patient who is entitled to the lawful medical use of
24 cannabis. If the person is no longer authorized to engage in
25 the medical use of cannabis, the Department of Public Health
26 shall notify the Prescription Monitoring Program and

1 Department of Human Services to remove the notation from the
2 person's record. The Department of Human Services and the
3 Prescription Monitoring Program shall establish a system by
4 which the information may be shared electronically. This
5 confidential list may not be combined or linked in any manner
6 with any other list or database except as provided in this
7 Section.

8 (f) An Opioid Alternative Pilot Program participant shall
9 not be considered a qualifying patient with a debilitating
10 medical condition under this Act and shall be provided access
11 to medical cannabis solely for the duration of the
12 participant's certification. Nothing in this Section shall be
13 construed to limit or prohibit an Opioid Alternative Pilot
14 Program participant who has a debilitating medical condition
15 from applying to the Compassionate Use of Medical Cannabis
16 Pilot Program.

17 (g) A person with a provisional registration under Section
18 55 shall not be considered an Opioid Alternative Pilot Program
19 participant.

20 (h) The Department of Financial and Professional
21 Regulation and the Department of Public Health shall submit
22 emergency rulemaking to implement the changes made by this
23 amendatory Act of the 100th General Assembly by December 1,
24 2018. The Department of Financial and Professional Regulation,
25 the Department of Agriculture, the Department of Human
26 Services, the Department of Public Health, and the Illinois

1 State Police shall utilize emergency purchase authority for 12
2 months after the effective date of this amendatory Act of the
3 100th General Assembly for the purpose of implementing the
4 changes made by this amendatory Act of the 100th General
5 Assembly.

6 (i) Dispensing organizations are not authorized to
7 dispense medical cannabis to Opioid Alternative Pilot Program
8 participants until administrative rules are approved by the
9 Joint Committee on Administrative Rules and go into effect.

10 (j) The provisions of this Section are inoperative on and
11 after July 1, 2020.

12 (410 ILCS 130/65)

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

14 Sec. 65. Denial of registry identification cards.

15 (a) The Department of Public Health may deny an application
16 or renewal of a qualifying patient's registry identification
17 card only if the applicant:

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

20 (2) previously had a registry identification card
21 revoked;

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

23 (4) provided false or falsified information; ~~or~~

24 (5) violated any requirement of this Act.

25 (b) (Blank). ~~Except as provided in subsection (b 5) of this~~

1 ~~Section, no person who has been convicted of a felony under the~~
2 ~~Illinois Controlled Substances Act, Cannabis Control Act, or~~
3 ~~Methamphetamine Control and Community Protection Act, or~~
4 ~~similar provision in a local ordinance or other jurisdiction is~~
5 ~~eligible to receive a registry identification card.~~

6 (b-5) (Blank). ~~If a person was convicted of a felony under~~
7 ~~the Cannabis Control Act or a similar provision of a local~~
8 ~~ordinance or of a law of another jurisdiction, and the action~~
9 ~~warranting that felony is no longer considered a felony after~~
10 ~~the effective date of this amendatory Act of the 99th General~~
11 ~~Assembly, that person shall be eligible to receive a registry~~
12 ~~identification card.~~

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

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

18 (2) the applicant did not provide the information
19 required;

20 (3) the prospective patient's application was denied;

21 (4) the designated caregiver previously had a registry
22 identification card revoked; ~~or~~

23 (5) the applicant or the designated caregiver provided
24 false or falsified information; or

25 (6) violated any requirement of this Act.

26 (d) (Blank). ~~The Department of Public Health through the~~

1 ~~Department of State Police shall conduct a background check of~~
2 ~~the prospective qualifying patient and designated caregiver in~~
3 ~~order to carry out this Section. The Department of State Police~~
4 ~~shall charge a fee for conducting the criminal history record~~
5 ~~check, which shall be deposited in the State Police Services~~
6 ~~Fund and shall not exceed the actual cost of the record check.~~
7 ~~Each person applying as a qualifying patient or a designated~~
8 ~~caregiver shall submit a full set of fingerprints to the~~
9 ~~Department of State Police for the purpose of obtaining a State~~
10 ~~and federal criminal records check. These fingerprints shall be~~
11 ~~checked against the fingerprint records now and hereafter, to~~
12 ~~the extent allowed by law, filed in the Department of State~~
13 ~~Police and Federal Bureau of Investigation criminal history~~
14 ~~records databases. The Department of State Police shall~~
15 ~~furnish, following positive identification, all Illinois~~
16 ~~conviction information to the Department of Public Health. The~~
17 ~~Department of Public Health may waive the submission of a~~
18 ~~qualifying patient's complete fingerprints based on (1) the~~
19 ~~severity of the patient's illness and (2) the inability of the~~
20 ~~qualifying patient to supply those fingerprints, provided that~~
21 ~~a complete criminal background check is conducted by the~~
22 ~~Department of State Police prior to the issuance of a registry~~
23 ~~identification card.~~

24 (e) The Department of Public Health shall notify the
25 qualifying patient who has designated someone to serve as his
26 or her designated caregiver if a registry identification card

1 will not be issued to the designated caregiver.

2 (f) Denial of an application or renewal is considered a
3 final Department action, subject to judicial review.
4 Jurisdiction and venue for judicial review are vested in the
5 Circuit Court.

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

8 (410 ILCS 130/75)

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

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

12 (a) The following notifications and Department of Public
13 Health responses are required:

14 (1) A registered qualifying patient shall notify the
15 Department of Public Health of any change in his or her
16 name or address, or if the registered qualifying patient
17 ceases to have his or her debilitating medical condition,
18 within 10 days of the change.

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

24 (3) Before a registered qualifying patient changes his
25 or her designated caregiver, the qualifying patient must

1 notify the Department of Public Health.

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

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

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

24 (d) A cardholder who fails to make a notification to the
25 Department of Public Health that is required by this Section is
26 subject to a civil infraction, punishable by a penalty of no

1 more than \$150.

2 (e) A registered qualifying patient shall notify the
3 Department of Public Health of any change to his or her
4 designated registered dispensing organization. Registered
5 dispensing organizations must comply with all requirements of
6 this Act.

7 (f) If the registered qualifying patient's certifying
8 physician notifies the Department in writing that either the
9 registered qualifying patient has ceased to suffer from a
10 debilitating medical condition, that the bona fide
11 physician-patient relationship has terminated, or that
12 continued use of medical cannabis would result in
13 contraindication with the patient's other medication, the card
14 shall become null and void. However, the registered qualifying
15 patient shall have 15 days to destroy his or her remaining
16 medical cannabis and related paraphernalia.

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

18 (410 ILCS 130/130)

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

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

22 (a) The Department of Financial and Professional
23 Regulation shall implement the provisions of this Section by
24 rule.

25 (b) A dispensing organization shall maintain operating

1 documents which shall include procedures for the oversight of
2 the registered dispensing organization and procedures to
3 ensure accurate recordkeeping.

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

8 (d) A dispensing organization may not be located within
9 1,000 feet of the property line of a pre-existing public or
10 private preschool or elementary or secondary school or day care
11 center, day care home, group day care home, or part day child
12 care facility. A registered dispensing organization may not be
13 located in a house, apartment, condominium, or an area zoned
14 for residential use.

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

19 (f) A registered dispensing organization is prohibited
20 from dispensing cannabis for any purpose except to assist
21 registered qualifying patients with the medical use of cannabis
22 directly or through the qualifying patients' designated
23 caregivers.

24 (g) The area in a dispensing organization where medical
25 cannabis is stored can only be accessed by dispensing
26 organization agents working for the dispensing organization,

1 Department of Financial and Professional Regulation staff
2 performing inspections, law enforcement or other emergency
3 personnel, and contractors working on jobs unrelated to medical
4 cannabis, such as installing or maintaining security devices or
5 performing electrical wiring.

6 (h) A dispensing organization may not dispense more than
7 2.5 ounces of cannabis to a registered qualifying patient,
8 directly or via a designated caregiver, in any 14-day period
9 unless the qualifying patient has a Department of Public
10 Health-approved quantity waiver.

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

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

19 (2) that the person presenting the card is the person
20 identified on the registry identification card presented
21 to the dispensing organization agent;

22 (3) that the dispensing organization is the designated
23 dispensing organization for the registered qualifying
24 patient who is obtaining the cannabis directly or via his
25 or her designated caregiver; and

26 (4) that the registered qualifying patient has not

1 exceeded his or her adequate supply.

2 (i-5) A dispensing organization may dispense medical
3 cannabis to an Opioid Alternative Pilot Program participant
4 under Section 62 and to a person presenting proof of
5 provisional registration under Section 55. Before dispensing
6 medical cannabis, the dispensing organization shall comply
7 with the requirements of Section 62 or Section 55, whichever is
8 applicable, and verify the following:

9 (1) that the written certification presented to the
10 registered dispensing organization is valid and an
11 original document;

12 (2) that the person presenting the written
13 certification is the person identified on the written
14 certification; and

15 (3) that the participant has not exceeded his or her
16 adequate supply.

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

25 (k) The physician-patient privilege as set forth by Section
26 8-802 of the Code of Civil Procedure shall apply between a

1 qualifying patient and a registered dispensing organization
2 and its agents with respect to communications and records
3 concerning qualifying patients' debilitating conditions.

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

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

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

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

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

6 (410 ILCS 130/160)

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

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

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

17 (2) the number of qualifying patients and designated
18 caregivers served by each dispensary during the report
19 year;

20 (3) the nature of the debilitating medical conditions
21 of the qualifying patients;

22 (4) the number of registry identification cards or
23 registrations revoked for misconduct;

24 (5) the number of physicians providing written
25 certifications for qualifying patients; and

1 (6) the number of registered medical cannabis
2 cultivation centers or registered dispensing
3 organizations;~~;~~

4 (7) the number of Opioid Alternative Pilot Program
5 participants.

6 (Source: P.A. 98-122, eff. 1-1-14; revised 11-8-17.)".