



Sen. Don Harmon

Filed: 1/24/2018

10000SB0336sam001

LRB100 05118 MJP 33190 a

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. This Act may be referred to as the Alternatives
5 to Opioids Act of 2018.

6 Section 5. The Compassionate Use of Medical Cannabis Pilot
7 Program Act is amended by changing Sections 5, 10, 60, and 160
8 as follows:

9 (410 ILCS 130/5)

10 (Section scheduled to be repealed on July 1, 2020)

11 Sec. 5. Findings.

12 (a) The recorded use of cannabis as a medicine goes back
13 nearly 5,000 years. Modern medical research has confirmed the
14 beneficial uses of cannabis in treating or alleviating the
15 pain, nausea, and other symptoms associated with a variety of

1 debilitating medical conditions, including cancer, multiple
2 sclerosis, and HIV/AIDS, as found by the National Academy of
3 Sciences' Institute of Medicine in March 1999.

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

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

22 (d) Data from the Federal Bureau of Investigation's Uniform
23 Crime Reports and the Compendium of Federal Justice Statistics
24 show that approximately 99 out of every 100 cannabis arrests in
25 the U.S. are made under state law, rather than under federal
26 law. Consequently, changing State law will have the practical

1 effect of protecting from arrest the vast majority of seriously
2 ill patients who have a medical need to use cannabis.

3 (d-5) In 2014, the Task Force on Veterans' Suicide was
4 created by the Illinois General Assembly to gather data on
5 veterans' suicide prevention. Data from a U.S. Department of
6 Veterans Affairs study indicates that 22 veterans commit
7 suicide each day.

8 (d-10) According to the State of Illinois Opioid Action
9 Plan released in September 2017, "The opioid epidemic is the
10 most significant public health and public safety crisis facing
11 Illinois."

12 According to the Action Plan, "Fueled by the growing opioid
13 epidemic, drug overdoses have now become the leading cause of
14 death nationwide for people under the age of 50. In Illinois,
15 opioid overdoses have killed nearly 11,000 people since 2008.
16 Just last year, nearly 1,900 people died of overdoses—almost
17 twice the number of fatal car accidents. Beyond these deaths
18 are thousands of emergency department visits, hospital stays,
19 as well as the pain suffered by individuals, families, and
20 communities."

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

24 Further, the Action Plan states, "Physical tolerance to
25 opioids can begin to develop as early as two to three days
26 following the continuous use of opioids, which is a large

1 factor that contributes to their addictive potential."

2 The 2017 State of Illinois Opioid Action Plan also states,
3 "The increase in OUD [opioid use disorder] and opioid overdose
4 deaths is largely due to the dramatic rise in the rate and
5 amount of opioids prescribed for pain over the past decades."

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

11 According to the Action Plan, "Medication-assisted
12 treatment (MAT) is the use of medications in combination with
13 counseling, behavioral therapies, and other recovery support
14 services for the treatment of SUDs [substance use disorders]."

15 Finally, the Action Plan states, "The World Health
16 Organization (WHO), CDC, National Institutes of Health (NIH),
17 and other experts all agree that MAT is essential to treating
18 those with OUD and helping them recover."

19 (e) Alaska, Arizona, California, Colorado, Connecticut,
20 Delaware, Hawaii, Maine, Massachusetts, Michigan, Montana,
21 Nevada, New Jersey, New Mexico, Oregon, Rhode Island, Vermont,
22 Washington, and Washington, D.C. have removed state-level
23 criminal penalties from the medical use and cultivation of
24 cannabis. Illinois joins in this effort for the health and
25 welfare of its citizens.

26 (f) States are not required to enforce federal law or

1 prosecute people for engaging in activities prohibited by
2 federal law. Therefore, compliance with this Act does not put
3 the State of Illinois in violation of federal law.

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

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

12 (410 ILCS 130/10)

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

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

16 (a) "Adequate supply" means:

17 (1) 2.5 ounces of usable cannabis during a period of 14
18 days and that is derived solely from an intrastate source.

19 (2) Subject to the rules of the Department of Public
20 Health, a patient may apply for a waiver where a physician
21 provides a substantial medical basis in a signed, written
22 statement asserting that, based on the patient's medical
23 history, in the physician's professional judgment, 2.5
24 ounces is an insufficient adequate supply for a 14-day
25 period to properly alleviate the patient's debilitating

1 medical condition or symptoms associated with the
2 debilitating medical condition.

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

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

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

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

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

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

1 usable medical cannabis.

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

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

9 (h) "Debilitating medical condition" means one or more of
10 the following:

11 (1) cancer, glaucoma, positive status for human
12 immunodeficiency virus, acquired immune deficiency
13 syndrome, hepatitis C, amyotrophic lateral sclerosis,
14 Crohn's disease, agitation of Alzheimer's disease,
15 cachexia/wasting syndrome, muscular dystrophy, severe
16 fibromyalgia, spinal cord disease, including but not
17 limited to arachnoiditis, Tarlov cysts, hydromyelia,
18 syringomyelia, Rheumatoid arthritis, fibrous dysplasia,
19 spinal cord injury, traumatic brain injury and
20 post-concussion syndrome, Multiple Sclerosis,
21 Arnold-Chiari malformation and Syringomyelia,
22 Spinocerebellar Ataxia (SCA), Parkinson's, Tourette's,
23 Myoclonus, Dystonia, Reflex Sympathetic Dystrophy, RSD
24 (Complex Regional Pain Syndromes Type I), Causalgia, CRPS
25 (Complex Regional Pain Syndromes Type II),
26 Neurofibromatosis, Chronic Inflammatory Demyelinating

1 Polyneuropathy, Sjogren's syndrome, Lupus, Interstitial
2 Cystitis, Myasthenia Gravis, Hydrocephalus, nail-patella
3 syndrome, residual limb pain, seizures (including those
4 characteristic of epilepsy), post-traumatic stress
5 disorder (PTSD), or the treatment of these conditions;

6 (1.5) terminal illness with a diagnosis of 6 months or
7 less; if the terminal illness is not one of the qualifying
8 debilitating medical conditions, then the physician shall
9 on the certification form identify the cause of the
10 terminal illness; or

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

14 Through June 30, 2020, "debilitating medical condition"
15 includes any other medical condition for which an opioid has
16 been or could be prescribed by a physician based on generally
17 accepted standards of care.

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

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

1 cannabis dispensing organization agent.

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

9 (l) "Excluded offense" for cultivation center agents and
10 dispensing organizations means:

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

15 (2) a violation of a state or federal controlled
16 substance law, the Cannabis Control Act, or the
17 Methamphetamine Control and Community Protection Act that
18 was classified as a felony in the jurisdiction where the
19 person was convicted, except that the registering
20 Department may waive this restriction if the person
21 demonstrates to the registering Department's satisfaction
22 that his or her conviction was: (A) for the possession,
23 cultivation, transfer, or delivery of a reasonable amount
24 of cannabis intended for medical use; or (B) a result of
25 opioid addiction or dependence. This exception does not
26 apply if the conviction was under state law and involved a

1 violation of an existing medical cannabis law.

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

6 (1-5) "Excluded offense" for a qualifying patient or
7 designated caregiver means a violation of state or federal
8 controlled substance law, the Cannabis Control Act, or the
9 Methamphetamine and Community Protection Act that was
10 classified as a felony in the jurisdiction where the person was
11 convicted, except that the registering Department may waive
12 this restriction if the person demonstrates to the registering
13 Department's satisfaction that his or her conviction was: (1)
14 for the possession, cultivation, transfer, or delivery of a
15 reasonable amount of cannabis intended for medical use; or (2)
16 a result of opioid addiction or dependence. This exception does
17 not apply if the conviction was under state law and involved a
18 violation of an existing medical cannabis law. For purposes of
19 this subsection, the Department of Public Health shall
20 determine by emergency rule within 30 days after the effective
21 date of this amendatory Act of the 99th General Assembly what
22 constitutes a "reasonable amount".

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

25 (n) "Medical cannabis container" means a sealed,
26 traceable, food compliant, tamper resistant, tamper evident

1 container, or package used for the purpose of containment of
2 medical cannabis from a cultivation center to a dispensing
3 organization.

4 (o) "Medical cannabis dispensing organization", or
5 "dispensing organization", or "dispensary organization" means
6 a facility operated by an organization or business that is
7 registered by the Department of Financial and Professional
8 Regulation to acquire medical cannabis from a registered
9 cultivation center for the purpose of dispensing cannabis,
10 paraphernalia, or related supplies and educational materials
11 to registered qualifying patients.

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

17 (q) "Medical cannabis infused product" means food, oils,
18 ointments, or other products containing usable cannabis that
19 are not smoked.

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

25 (r-5) "Opioid" means a narcotic drug or substance that is a
26 Schedule II controlled substance under paragraph (1), (2), (3),

1 or (5) of subsection (b) or under subsection (c) of Section 206
2 of the Illinois Controlled Substances Act.

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

9 (t) "Qualifying patient" means a person who has been
10 diagnosed by a physician as having a debilitating medical
11 condition.

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

16 (v) "Registry identification card" means a document issued
17 by the Department of Public Health that identifies a person as
18 a registered qualifying patient or registered designated
19 caregiver.

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

26 (x) "Verification system" means a Web-based system

1 established and maintained by the Department of Public Health
2 that is available to the Department of Agriculture, the
3 Department of Financial and Professional Regulation, law
4 enforcement personnel, and registered medical cannabis
5 dispensing organization agents on a 24-hour basis for the
6 verification of registry identification cards, the tracking of
7 delivery of medical cannabis to medical cannabis dispensing
8 organizations, and the tracking of the date of sale, amount,
9 and price of medical cannabis purchased by a registered
10 qualifying patient.

11 (y) "Written certification" means a document dated and
12 signed by a physician, stating (1) that the qualifying patient
13 has a debilitating medical condition and specifying the
14 debilitating medical condition the qualifying patient has; and
15 (2) that the physician is treating or managing treatment of the
16 patient's debilitating medical condition. A written
17 certification shall be made only in the course of a bona fide
18 physician-patient relationship, after the physician has
19 completed an assessment of the qualifying patient's medical
20 history, reviewed relevant records related to the patient's
21 debilitating condition, and conducted a physical examination.

22 A veteran who has received treatment at a VA hospital shall
23 be deemed to have a bona fide physician-patient relationship
24 with a VA physician if the patient has been seen for his or her
25 debilitating medical condition at the VA Hospital in accordance
26 with VA Hospital protocols.

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

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

6 (410 ILCS 130/60)

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

8 Sec. 60. Issuance of registry identification cards.

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

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

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

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

24 (4) allow for an electronic application process, and
25 provide a confirmation by electronic or other methods that

1 an application has been submitted.

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

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

25 (c-10) An individual who submits an application as someone
26 who is terminally ill shall have all fees and fingerprinting

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

8 (c-15) An individual whose initial application is
9 submitted as an alternative to opioid treatment shall have all
10 provisions of subsection (f) of Section 60 of this Act relating
11 to fingerprints and background checks waived. An individual
12 issued a registry card under this subsection who is seeking
13 renewal of the registry card must follow the renewal
14 requirements under subsection (c) of Section 70 of this Act.
15 Within 30 days after the effective date of this amendatory Act
16 of the 100th General Assembly, the Department of Public Health
17 shall adopt emergency rules to expedite approval for
18 individuals who submit an application under this subsection.
19 The rules shall include, but are not be limited to, rules that
20 provide that:

21 (1) an application by an individual whose application
22 is submitted as an alternative to opioid treatment shall be
23 approved or denied within 14 days after submission; and

24 (2) a registry card issued under this subsection and
25 the rules applicable to the card shall be valid for 12
26 months.

1 (c-20) The provisions of subsection (c-15) are inoperative
2 on and after July 1, 2020.

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

18 (e) Upon the approval of the registration and issuance of a
19 registry card under this Section, the Department of Public
20 Health shall electronically forward the registered qualifying
21 patient's identification card information to the Prescription
22 Monitoring Program established under the Illinois Controlled
23 Substances Act and certify that the individual is permitted to
24 engage in the medical use of cannabis. For the purposes of
25 patient care, the Prescription Monitoring Program shall make a
26 notation on the person's prescription record stating that the

1 person is a registered qualifying patient who is entitled to
2 the lawful medical use of cannabis. If the person no longer
3 holds a valid registry card, the Department of Public Health
4 shall notify the Prescription Monitoring Program and
5 Department of Human Services to remove the notation from the
6 person's record. The Department of Human Services and the
7 Prescription Monitoring Program shall establish a system by
8 which the information may be shared electronically. This
9 confidential list may not be combined or linked in any manner
10 with any other list or database except as provided in this
11 Section.

12 (f) All applicants for a registry card shall be
13 fingerprinted as part of the application process if they are a
14 first-time applicant, if their registry card has already
15 expired, or if they previously have had their registry card
16 revoked or otherwise denied. At renewal, cardholders whose
17 registry cards have not yet expired, been revoked, or otherwise
18 denied shall not be subject to fingerprinting. Registry cards
19 shall be revoked by the Department of Public Health if the
20 Department of Public Health is notified by the Secretary of
21 State that a cardholder has been convicted of an excluded
22 offense. For purposes of enforcing this subsection, the
23 Department of Public Health and Secretary of State shall
24 establish a system by which violations reported to the
25 Secretary of State under paragraph 18 of subsection (a) of
26 Section 6-205 of the Illinois Vehicle Code shall be shared with

1 the Department of Public Health.

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

4 (410 ILCS 130/160)

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

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

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

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

18 (3) the nature of the debilitating medical conditions
19 of the qualifying patients;

20 (4) the number of registry identification cards or
21 registrations revoked for misconduct;

22 (5) the number of physicians providing written
23 certifications for qualifying patients; and

24 (6) the number of registered medical cannabis
25 cultivation centers or registered dispensing

1 organizations;~~i~~

2 (7) the number of applications received from
3 applicants seeking an alternative to opioid treatment;

4 (8) the nature of the conditions of the applicants
5 seeking an alternative to opioid treatment; and

6 (9) the number of applications approved and denied from
7 applicants seeking an alternative to opioid treatment.

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