



Sen. Don Harmon

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1 AMENDMENT TO SENATE BILL 336

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

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

7 Section 5. The Compassionate Use of Medical Cannabis Pilot
8 Program Act is amended by changing Sections 5, 7, 10, 35, 55,
9 60, 65, 75, 130, and 160 and by adding Section 62 as follows:

10 (410 ILCS 130/5)

11 (Section scheduled to be repealed on July 1, 2020)

12 Sec. 5. Findings.

13 (a) The recorded use of cannabis as a medicine goes back
14 nearly 5,000 years. Modern medical research has confirmed the
15 beneficial uses of cannabis in treating or alleviating the

1 pain, nausea, and other symptoms associated with a variety of
2 debilitating medical conditions, including cancer, multiple
3 sclerosis, and HIV/AIDS, as found by the National Academy of
4 Sciences' Institute of Medicine in March 1999.

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

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

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

1 law. Consequently, changing State law will have the practical
2 effect of protecting from arrest the vast majority of seriously
3 ill patients who have a medical need to use cannabis.

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

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

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

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

25 Further, the Action Plan states, "Physical tolerance to
26 opioids can begin to develop as early as two to three days

1 following the continuous use of opioids, which is a large
2 factor that contributes to their addictive potential".

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

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

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

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

23 (g) State law should make a distinction between the medical
24 and non-medical uses of cannabis. Hence, the purpose of this
25 Act is to protect patients with debilitating medical
26 conditions, as well as their physicians and providers, from

1 arrest and prosecution, criminal and other penalties, and
2 property forfeiture if the patients engage in the medical use
3 of cannabis.

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

5 (410 ILCS 130/7)

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

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

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

14 (2) All medical cannabis products purchased by a
15 qualifying patient at a licensed dispensing organization
16 shall be lawful products and a distinction shall be made
17 between medical and non-medical uses of cannabis as a
18 result of the qualifying patient's cardholder status under
19 the authorized use granted under State law.

20 (3) An individual in possession of an endorsement card
21 from a dispensary organization under Section 62 shall not
22 be considered an unlawful user or addicted to narcotics
23 solely as a result of his or her endorsement card.

24 (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 Through June 30, 2020, "debilitating medical condition"
3 includes any other medical condition for which an opioid has
4 been or could be prescribed by a physician based on generally
5 accepted standards of care.

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

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

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

23 (k-5) "Endorsement card" means documentation provided by a
24 medical cannabis dispensing organization to an individual who
25 receives medical cannabis under Section 62.

26 (l) "Excluded offense" for cultivation center agents and

1 dispensing organizations means:

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

6 (2) a violation of a state or federal controlled
7 substance law, the Cannabis Control Act, or the
8 Methamphetamine Control and Community Protection Act that
9 was classified as a felony in the jurisdiction where the
10 person was convicted, except that the registering
11 Department may waive this restriction if the person
12 demonstrates to the registering Department's satisfaction
13 that his or her conviction was for the possession,
14 cultivation, transfer, or delivery of a reasonable amount
15 of cannabis intended for medical use. This exception does
16 not apply if the conviction was under state law and
17 involved a violation of an existing medical cannabis law.

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

22 (1-5) (Blank). ~~"Excluded offense" for a qualifying patient~~
23 ~~or designated caregiver means a violation of state or federal~~
24 ~~controlled substance law, the Cannabis Control Act, or the~~
25 ~~Methamphetamine and Community Protection Act that was~~
26 ~~classified as a felony in the jurisdiction where the person was~~

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

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

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

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

1 (p) "Medical cannabis dispensing organization agent" or
2 "dispensing organization agent" means a principal officer,
3 board member, employee, or agent of a registered medical
4 cannabis dispensing organization who is 21 years of age or
5 older and has not been convicted of an excluded offense.

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

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

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

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

24 (t) "Qualifying patient" means a person who has been
25 diagnosed by a physician as having a debilitating medical
26 condition.

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

5 (v) "Registry identification card" means a document issued
6 by the Department of Public Health that identifies a person as
7 a registered qualifying patient or registered designated
8 caregiver.

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

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

26 (y) "Written certification" means a document dated and

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

11 (z) "Bona fide physician-patient relationship" means a
12 relationship in which the physician has an ongoing
13 responsibility for the assessment, care, and treatment of a
14 patient's debilitating medical condition or a symptom of the
15 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 in
14 writing if the physician has reason to believe either that the
15 registered qualifying patient has ceased to suffer from a
16 debilitating medical condition or that continued use of medical
17 cannabis would result in contraindication with the patient's
18 other medication. The registered qualifying patient's registry
19 identification card shall be revoked by the Department of
20 Public Health after receiving the physician's notification.

21 (Source: P.A. 98-122, eff. 1-1-14; 98-1172, eff. 1-12-15;
22 99-519, eff. 6-30-16.)

23 (410 ILCS 130/55)

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

25 Sec. 55. Registration of qualifying patients and

1 designated caregivers.

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

7 (1) A written certification, on a form developed by the
8 Department of Public Health and issued by a physician,
9 within 90 days immediately preceding the date of an
10 application;

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

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

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

24 (5) the name, address, and telephone number of the
25 qualifying patient's physician;

26 (6) the name, address, and date of birth of the

1 designated caregiver, if any, chosen by the qualifying
2 patient;

3 (7) the name of the registered medical cannabis
4 dispensing organization the qualifying patient designates;

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

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

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

11 (410 ILCS 130/60)

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

13 Sec. 60. Issuance of registry identification cards.

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

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

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

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

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

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

22 (c) A veteran who has received treatment at a VA hospital
23 is 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. All reasonable inferences

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

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

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

1 shared electronically.

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

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

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

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

14 (410 ILCS 130/62 new)

15 Sec. 62. Opioid Prescription Pilot Program.

16 (a) Notwithstanding Sections 55 and 60, a person who has
17 received a physician certification for a medical condition for
18 which an opioid has been or could be prescribed by a physician
19 based on generally accepted standards of care is entitled to
20 purchase medical cannabis from a dispensing organization.

21 In order to purchase medical cannabis from a dispensing
22 organization, the person must take the physician certification
23 and prescription, if provided, to the dispensing organization
24 of his or her choice.

25 A physician issuing a certification under this Section

1 shall indicate, on the certification form, the length of time
2 of the opioid prescription, including any refills or renewals,
3 that the physician did or could have prescribed to the patient.

4 Before dispensing medical cannabis to a person under this
5 Section, the dispensing organization must verify that the
6 person is not an active registered qualifying patient with a
7 valid medical cannabis registry identification card.

8 Upon verification of the physician certification, the
9 dispensing organization shall, subject to the limitations in
10 subsection (h) of Section 130, dispense medical cannabis to the
11 person according to the following schedule:

12 (1) If the certification indicates a prescription,
13 including any refills or renewals, for 7 days or less, then
14 the dispensing organization shall dispense medical
15 cannabis to the person for a length of time equivalent to 4
16 times the length of the prescription.

17 (2) If the certification indicates a prescription,
18 including any refills or renewals, for more than 7 days but
19 less than 30 days, then the dispensing organization shall
20 dispense medical cannabis to the person for a length of
21 time equivalent to 3 times the length of the prescription.

22 (3) If the certification indicates a prescription,
23 including any refills or renewals, for 30 days or more,
24 then the dispensing organization shall dispense medical
25 cannabis to the person for a length of time equivalent to
26 twice the length of the prescription.

1 Upon dispensing medical cannabis to a person, the
2 dispensing organization must enter information about the
3 person in the verification system and provide the person with
4 an endorsement card to certify that the person is in lawful
5 possession of medical cannabis.

6 The Department of Public Health shall review the
7 information entered into the verification system by the
8 dispensing organizations under this Section and electronically
9 forward the information to the Prescription Monitoring Program
10 under the Illinois Controlled Substances Act and certify that
11 the individual is permitted to engage in the medical use of
12 cannabis. For the purposes of patient care, the Prescription
13 Monitoring Program shall make a notation on the person's
14 prescription record stating that the person is entitled to the
15 lawful medical use of cannabis. If the person no longer holds a
16 valid endorsement card and does not have a valid registry
17 identification card, the Department of Public Health shall
18 notify the Prescription Monitoring Program and Department of
19 Human Services to remove the notation from the person's record.
20 This confidential notation may not be combined or linked in any
21 manner with any other list or database except those authorized
22 by this Act.

23 A person who wishes to continue use of medical cannabis
24 shall apply for a registration card with the Department of
25 Public Health.

26 (b) The provisions of this Section are inoperative on and

1 after July 1, 2020.

2 (410 ILCS 130/65)

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

4 Sec. 65. Denial of registry identification cards.

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

8 (1) did not provide the required information and
9 materials;

10 (2) previously had a registry identification card
11 revoked;

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

13 (4) provided false or falsified information; or.

14 (5) violated any requirement of this Act.

15 (b) (Blank). ~~Except as provided in subsection (b-5) of this~~
16 ~~Section, no person who has been convicted of a felony under the~~
17 ~~Illinois Controlled Substances Act, Cannabis Control Act, or~~
18 ~~Methamphetamine Control and Community Protection Act, or~~
19 ~~similar provision in a local ordinance or other jurisdiction is~~
20 ~~eligible to receive a registry identification card.~~

21 (b-5) (Blank). ~~If a person was convicted of a felony under~~
22 ~~the Cannabis Control Act or a similar provision of a local~~
23 ~~ordinance or of a law of another jurisdiction, and the action~~
24 ~~warranting that felony is no longer considered a felony after~~
25 ~~the effective date of this amendatory Act of the 99th General~~

1 ~~Assembly, that person shall be eligible to receive a registry~~
2 ~~identification card.~~

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

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

8 (2) the applicant did not provide the information
9 required;

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

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

13 (5) the applicant or the designated caregiver provided
14 false or falsified information; or;

15 (6) violated any requirement of this Act.

16 (d) (Blank). ~~The Department of Public Health through the~~
17 ~~Department of State Police shall conduct a background check of~~
18 ~~the prospective qualifying patient and designated caregiver in~~
19 ~~order to carry out this Section. The Department of State Police~~
20 ~~shall charge a fee for conducting the criminal history record~~
21 ~~check, which shall be deposited in the State Police Services~~
22 ~~Fund and shall not exceed the actual cost of the record check.~~
23 ~~Each person applying as a qualifying patient or a designated~~
24 ~~caregiver shall submit a full set of fingerprints to the~~
25 ~~Department of State Police for the purpose of obtaining a State~~
26 ~~and federal criminal records check. These fingerprints shall be~~

1 ~~checked against the fingerprint records now and hereafter, to~~
2 ~~the extent allowed by law, filed in the Department of State~~
3 ~~Police and Federal Bureau of Investigation criminal history~~
4 ~~records databases. The Department of State Police shall~~
5 ~~furnish, following positive identification, all Illinois~~
6 ~~conviction information to the Department of Public Health. The~~
7 ~~Department of Public Health may waive the submission of a~~
8 ~~qualifying patient's complete fingerprints based on (1) the~~
9 ~~severity of the patient's illness and (2) the inability of the~~
10 ~~qualifying patient to supply those fingerprints, provided that~~
11 ~~a complete criminal background check is conducted by the~~
12 ~~Department of State Police prior to the issuance of a registry~~
13 ~~identification card.~~

14 (e) The Department of Public Health shall notify the
15 qualifying patient who has designated someone to serve as his
16 or her designated caregiver if a registry identification card
17 will not be issued to the designated caregiver.

18 (f) Denial of an application or renewal is considered a
19 final Department action, subject to judicial review.
20 Jurisdiction and venue for judicial review are vested in the
21 Circuit Court.

22 (Source: P.A. 98-122, eff. 1-1-14; 98-1172, eff. 1-12-15;
23 99-697, eff. 7-29-16.)

24 (410 ILCS 130/75)

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

1 Sec. 75. Notifications to Department of Public Health and
2 responses; civil penalty.

3 (a) The following notifications and Department of Public
4 Health responses are required:

5 (1) A registered qualifying patient shall notify the
6 Department of Public Health of any change in his or her
7 name or address, or if the registered qualifying patient
8 ceases to have his or her debilitating medical condition,
9 within 10 days of the change.

10 (2) A registered designated caregiver shall notify the
11 Department of Public Health of any change in his or her
12 name or address, or if the designated caregiver becomes
13 aware the registered qualifying patient passed away,
14 within 10 days of the change.

15 (3) Before a registered qualifying patient changes his
16 or her designated caregiver, the qualifying patient must
17 notify the Department of Public Health.

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

21 (b) When a cardholder notifies the Department of Public
22 Health of items listed in subsection (a), but remains eligible
23 under this Act, the Department of Public Health shall issue the
24 cardholder a new registry identification card with a new random
25 alphanumeric identification number within 15 business days of
26 receiving the updated information and a fee as specified in

1 Department of Public Health rules. If the person notifying the
2 Department of Public Health is a registered qualifying patient,
3 the Department shall also issue his or her registered
4 designated caregiver, if any, a new registry identification
5 card within 15 business days of receiving the updated
6 information.

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

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

18 (e) A registered qualifying patient shall notify the
19 Department of Public Health of any change to his or her
20 designated registered dispensing organization. Registered
21 dispensing organizations must comply with all requirements of
22 this Act.

23 (f) If the registered qualifying patient's certifying
24 physician notifies the Department in writing that either the
25 registered qualifying patient has ceased to suffer from a
26 debilitating medical condition or that continued use of medical

1 cannabis would result in contraindication with the patient's
2 other medication, the card shall become null and void. However,
3 the registered qualifying patient shall have 15 days to destroy
4 his or her remaining medical cannabis and related
5 paraphernalia.

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

7 (410 ILCS 130/130)

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

9 Sec. 130. Requirements; prohibitions; penalties;
10 dispensing organizations.

11 (a) The Department of Financial and Professional
12 Regulation shall implement the provisions of this Section by
13 rule.

14 (b) A dispensing organization shall maintain operating
15 documents which shall include procedures for the oversight of
16 the registered dispensing organization and procedures to
17 ensure accurate recordkeeping.

18 (c) A dispensing organization shall implement appropriate
19 security measures, as provided by rule, to deter and prevent
20 the theft of cannabis and unauthorized entrance into areas
21 containing cannabis.

22 (d) A dispensing organization may not be located within
23 1,000 feet of the property line of a pre-existing public or
24 private preschool or elementary or secondary school or day care
25 center, day care home, group day care home, or part day child

1 care facility. A registered dispensing organization may not be
2 located in a house, apartment, condominium, or an area zoned
3 for residential use.

4 (e) A dispensing organization is prohibited from acquiring
5 cannabis from anyone other than a registered cultivation
6 center. A dispensing organization is prohibited from obtaining
7 cannabis from outside the State of Illinois.

8 (f) A registered dispensing organization is prohibited
9 from dispensing cannabis for any purpose except to assist
10 registered qualifying patients with the medical use of cannabis
11 directly or through the qualifying patients' designated
12 caregivers.

13 (g) The area in a dispensing organization where medical
14 cannabis is stored can only be accessed by dispensing
15 organization agents working for the dispensing organization,
16 Department of Financial and Professional Regulation staff
17 performing inspections, law enforcement or other emergency
18 personnel, and contractors working on jobs unrelated to medical
19 cannabis, such as installing or maintaining security devices or
20 performing electrical wiring.

21 (h) A dispensing organization may not dispense more than
22 2.5 ounces of cannabis to a registered qualifying patient,
23 directly or via a designated caregiver, in any 14-day period
24 unless the qualifying patient has a Department of Public
25 Health-approved quantity waiver.

26 (i) Except as provided in subsection (i-5), before ~~Before~~

1 medical cannabis may be dispensed to a designated caregiver or
2 a registered qualifying patient, a dispensing organization
3 agent must determine that the individual is a current
4 cardholder in the verification system and must verify each of
5 the following:

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

8 (2) that the person presenting the card is the person
9 identified on the registry identification card presented
10 to the dispensing organization agent;

11 (3) that the dispensing organization is the designated
12 dispensing organization for the registered qualifying
13 patient who is obtaining the cannabis directly or via his
14 or her designated caregiver; and

15 (4) that the registered qualifying patient has not
16 exceeded his or her adequate supply.

17 (i-5) A dispensing organization may dispense medical
18 cannabis to a qualifying patient under Section 62.

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

1 (k) The physician-patient privilege as set forth by Section
2 8-802 of the Code of Civil Procedure shall apply between a
3 qualifying patient and a registered dispensing organization
4 and its agents with respect to communications and records
5 concerning qualifying patients' debilitating conditions.

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

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

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

1 "administrative decision" is defined as in Section 3-101 of the
2 Code of Civil Procedure.

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

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

8 (410 ILCS 130/160)

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

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

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

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

22 (3) the nature of the debilitating medical conditions
23 of the qualifying patients;

24 (4) the number of registry identification cards or
25 registrations revoked for misconduct;

1 (5) the number of physicians providing written
2 certifications for qualifying patients; ~~and~~

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

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

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

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

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