

96TH GENERAL ASSEMBLY State of Illinois 2009 and 2010 HB5898

Introduced 2/10/2010, by Rep. William B. Black

SYNOPSIS AS INTRODUCED:

| 225 ILCS 15/2 | | from Ch. | 111, pa | r. 5352 | 2 |
|-----------------|-------|----------|----------|---------|-----|
| 225 ILCS 15/5.1 | new | | | | |
| 225 ILCS 15/5.2 | 2 new | | | | |
| 225 ILCS 15/5.3 | 3 new | | | | |
| 225 ILCS 15/5.4 | l new | | | | |
| 225 ILCS 15/5.5 | new . | | | | |
| 225 ILCS 15/5.6 | new | | | | |
| 225 ILCS 15/5.7 | new | | | | |
| 225 ILCS 15/5.8 | 3 new | | | | |
| 225 ILCS 15/15 | | from Ch. | 111, pa | r. 5365 | 5 |
| 225 ILCS 65/50- | -10 | was 225 | ILCS 65/ | 5-10 | |
| 720 ILCS 570/10 |)2 | from Ch. | 56 1/2, | par. 1 | 102 |

Amends the Clinical Psychologist Licensing Act. Provides that the Clinical Psychologists Licensing and Disciplinary Board shall grant certification as medical psychologists to doctoral level psychologists licensed under the Act who meet the additional education and training requirements under the Act, and that this certification shall grant medical psychologists prescriptive authority to prescribe and dispense those drugs used in the treatment of mental, emotional, and psychological disorders. Sets forth provisions concerning the additional education and training requirements, application requirements, renewal, prescribing practices, controlled substance prescriptive authority, and State Board of Pharmacy interaction. Amends the Nurse Practice Act and the Illinois Controlled Substances Act to make related changes.

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FISCAL NOTE ACT MAY APPLY

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1 AN ACT concerning professional regulation.

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

- Section 5. The Clinical Psychologist Licensing Act is amended by changing Sections 2 and 15 and by adding Sections
- 6 5.1, 5.2, 5.3, 5.4, 5.5, 5.6, 5.7, and 5.8 as follows:
- 7 (225 ILCS 15/2) (from Ch. 111, par. 5352)
- 8 (Section scheduled to be repealed on January 1, 2017)
- 9 Sec. 2. Definitions. As used in this Act:
- 10 (1) "Department" means the Department of Financial and
 11 Professional Regulation.
- 12 (2) "Secretary" means the Secretary of Financial and
 13 Professional Regulation.
 - (3) "Board" means the Clinical Psychologists Licensing and Disciplinary Board appointed by the Secretary.
 - (4) "Person" means an individual, association, partnership or corporation.
 - (5) "Clinical psychology" means the independent evaluation, classification and treatment of mental, emotional, behavioral or nervous disorders or conditions, developmental disabilities, alcoholism and substance abuse, disorders of habit or conduct, the psychological aspects of physical illness. The practice of clinical

psychology includes psychoeducational evaluation, therapy, remediation and consultation, the use of psychological and neuropsychological testing, assessment, psychotherapy, psychoanalysis, hypnosis, biofeedback, and behavioral modification when any of these are used for the purpose of preventing or eliminating psychopathology, or for the amelioration of psychological disorders of individuals or groups. "Clinical psychology" does not include the use of hypnosis by unlicensed persons pursuant to Section 3.

- (6) A person represents himself to be a "clinical psychologist" within the meaning of this Act when he or she holds himself out to the public by any title or description of services incorporating the words "psychological", "psychologic", "psychologist", "psychology", or "clinical psychologist" or under such title or description offers to render or renders clinical psychological services as defined in paragraph (7) of this Section to individuals, corporations, or the public for remuneration.
- (7) "Clinical psychological services" refers to any services under paragraph (5) of this Section if the words "psychological", "psychologic", "psychologist", "psychology" or "clinical psychologist" are used to describe such services by the person or organization offering to render or rendering them.
- (8) "Drugs" has the meaning given to that term in the Pharmacy Practice Act of 1987.

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| 1 | (9) "Medicines" has the meaning given to that term in |
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| 2 | the Pharmacy Practice Act of 1987. |
| 3 | (10) "Prescription" means an order for a drug, |
| 4 | laboratory test, or any medicines, devices, or treatments, |
| 5 | including controlled substances, as defined by State law. |
| 6 | (11) "Prescriptive authority" means the authority to |
| 7 | prescribe and dispense drugs, medicines, or other |
| 8 | treatment procedures. |
| 9 | (12) "Medical psychologist" means a licensed, doctoral |
| 10 | level psychologist who has undergone specialized training, |
| 11 | has passed an examination accepted by the Board, and has |
| 12 | received a current certificate granting prescriptive |
| 13 | authority that has not been revoked or suspended from the |
| 14 | Board. |
| 15 | This Act shall not apply to persons lawfully carrying on |
| 16 | their particular profession or business under any valid |
| 17 | existing regulatory Act of the State. |
| 18 | (Source: P.A. 94-870, eff. 6-16-06.) |
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| 19 | (225 ILCS 15/5.1 new) |
| 20 | Sec. 5.1. Certification to prescribe drugs. The Board shall |
| 21 | certify medical psychologists to prescribe and dispense drugs |
| 22 | under the direction of a supervising physician. The medical |
| 23 | psychologist shall prescribe only those drugs which are used in |

the treatment of mental, emotional and psychological disorders

in accordance with applicable State and federal laws which are

| 1 | approved by the FDA for the treatment of any condition in the |
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| 2 | most recent edition of the Diagnostic and Treatment Manual of |
| 3 | the American Psychiatric Association. The medical psychologist |
| 4 | shall prescribe only those drugs for which the medical |
| 5 | psychologist has been trained and which have been approved by |
| 6 | the medical psychologist's supervising physician. Only |
| 7 | conditions listed in the Diagnostic and Statistical Manual of |
| 8 | the American Psychiatric Association shall be treated using |
| 9 | drugs by the Prescribing Psychologist. |
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10 (225 ILCS 15/5.2 new)

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- 11 <u>Sec. 5.2. Application requirements for prescriptive</u>
 12 authority.
 - (a) The Department shall grant certification to a psychologist who applies for prescriptive authority and demonstrates by official transcript or other official evidence satisfactory to the Board all of the following:
 - (1) completion of a doctoral program in psychology from a regionally-accredited university or professional school or, if the program is not accredited at the time of graduation, completion of a doctoral program in psychology that meets recognized acceptable professional standards as determined by the Board;
 - (2) that he or she holds a current license to practice psychology in the State;
 - (3) completion of an organized program of intensive

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didactic instruction as defined by the Board within the 5-year period immediately before the date of application, consisting of a minimum of 300 contact hours and consisting of the following core areas of instruction: neuroscience, pharmacology, psychopharmacology, physiology, pathophysiology, appropriate and relevant physical and laboratory assessment, and clinical pharmacotherapeutics;

- (4) that he or she has obtained supervised and relevant clinical experience sufficient to achieve competency in the treatment of a diverse patient population under the direction of qualified practitioners, as determined by the Board, within the 5-year period immediately preceding the date of application that includes the pharmacological treatment of a minimum of 100 patients under the full supervision and control of a designated qualified practitioner, who will then certify the clinical competency of the candidate for certification; and that he or she has had a minimum of 80 hours of supervised training in physical assessment under the full supervision and control of a designated qualified practitioner, and
- (5) that he or she has passed a certifying examination stipulated by the Board.
- (b) The Department shall grant certification to a psychologist who applies for prescriptive authority, has completed the requirements specified in subsection (a), except that the academic requirements in paragraph (3) of subsection

- 1 (a) have been met more than 5 years prior to the application
- 2 for prescriptive authority, and has completed 12 hours of
- 3 continuing education during the year immediately prior to
- 4 application as required by subsection (b) of Section 5.3 of
- 5 this Act.
- 6 (225 ILCS 15/5.3 new)
- 7 <u>Sec. 5.3. Renewal of prescriptive authority.</u>
- 8 (a) The Board shall establish by rule a method for the
- 9 <u>annual renewal of prescriptive authority at the time of or in</u>
- 10 conjunction with the renewal of clinical psychology licenses.
- 11 (b) Each applicant for renewal of prescriptive authority
- shall present satisfactory evidence to the Board demonstrating
- 13 the completion of 12 required hours of instruction relevant to
- 14 prescriptive authority during the year prior to application for
- 15 renewal.
- 16 (225 ILCS 15/5.4 new)
- 17 Sec. 5.4. Prescribing practices.
- 18 (a) Every prescription by a medical psychologist shall
- 19 comply with all applicable State and federal laws, be
- 20 identified as issued by the psychologist as a "medical
- 21 psychologist", and shall include the prescriber's
- 22 identification number assigned by the Board.
- 23 (b) Records of all prescriptions shall be maintained in
- 24 patient records.

- 1 (c) A medical psychologist shall not delegate the prescribing of drugs to any other person.
- (d) A medical psychologist shall maintain an ongoing

 collaborative relationship with the health care practitioner

 who oversees the patient's general medical care to ensure that

 necessary medical examinations are conducted, the psychotropic

 medication is appropriate for the patient's medical condition

 and significant changes in the patient's medical or

 psychological condition are discussed.
- 10 (e) For the purpose of this Section: "collaborative 11 relationship" means a cooperative working relationship between 12 a prescribing clinical psychologist and a health care practitioner in the provision of patient care, including 13 14 diagnosis and cooperation in the management and delivery of physical and mental health care; and "health care practitioner" 15 16 means a physician, osteopathic physician or nurse 17 practitioner.
- 18 (225 ILCS 15/5.5 new)
- 19 Sec. 5.5. Controlled substance prescriptive authority.
- 20 (a) When authorized to prescribe controlled substances,
 21 each psychologist certified to prescribe shall file in a timely
 22 manner any and all individual Drug Enforcement Administration
 23 (DEA) registrations and numbers with the Board. Medical
 24 Psychologists shall be designated as Mid-Level Practitioners,
 25 shall be prohibited from prescribing narcotics and shall be

| 1 | limited | to | the | prescription | on of | those | drugs | which | appear | on |
|---|---------|----|-----|--------------|-------|-------|-------|-------|--------|----|
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- 2 Schedule 2N, 3N, 4 and 5 of the Federal Drug Enforcement
- 3 Agency's Schedule of Controlled Substances.
- 4 (b) The Board shall maintain current records of every
- 5 medical psychologist, including DEA registration and numbers.
- 6 (225 ILCS 15/5.6 new)
- 7 Sec. 5.6. Interaction with the Illinois State Board of
- 8 <u>Pharmacy.</u>
- 9 (a) The Board shall transmit to the Illinois State Board of
- 10 Pharmacy an annual list of medical psychologists containing the
- 11 following information:
- 12 (1) the name of the medical psychologist;
- 13 (2) the name and license number of the medical
- 14 psychologist's Supervising Physician and the supervising
- physician's License Number;
- 16 (3) the medical psychologist's identification number
- assigned by the Board; and
- 18 (4) the effective date of prescriptive authority.
- 19 (b) The Board shall promptly forward to the Illinois State
- 20 Board of Pharmacy the names and titles of psychologists added
- 21 to or deleted from the annual list of medical psychologists.
- (c) The Board shall notify the Illinois State Board of
- 23 Pharmacy in a timely manner upon termination, suspension, or
- reinstatement of a psychologist's prescriptive authority.

1 (225 ILCS 15/5.7 new)

Sec. 5.7. Collaboration with the patient's primary care provider. The medical psychologist shall obtain approval from a patient's primary care provider prior to starting, altering or discontinuing any medication except in the case of an emergency. In the case of an emergency the medical psychologist shall obtain the approval of the patient's physician as quickly as possible. The medical psychologist shall collaborate with the patient's primary care provider while continuing to practice under the supervision of the medical psychologist's supervising physician.

Nothing in this Act shall limit the medical psychologist in the practice of non-pharmacologic clinical psychology as defined in the Psychology Licensing Act.

The Board shall develop and implement procedures for reviewing educational and training credentials for that certification process in accordance with current standards of professional practice. The Board may seek the advice of other State agencies with relevant experience in devising the certification procedures and criteria.

21 (225 ILCS 15/5.8 new)

Sec. 5.8. Agreement with a supervising physician. The medical psychologist shall practice the management of psychotropic medications under the supervision of a physician, licensed in the State, who is experienced in the management of

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1 medications used in the treatment of mental disorders. For the

2 <u>management</u> of <u>psychotropic</u> <u>medication</u>, the <u>medical</u>

3 psychologist will:

- (a) Obtain a written supervisory agreement that shall describe the working relationship of the medical psychologist with the supervising physician and shall authorize the conditions to be treated and treatment protocols procedures to be performed by the medical psychologist. The treatment to be provided by the medical psychologist as defined by the supervisory agreement shall be services that the supervising physician generally provides to his or her patients in the normal course of his or her clinical medical practice. The agreement need not describe the exact steps that the Medical Psychologist must take with respect to each specific condition, disease, or symptom, but must specify which authorized procedures require the Physician's approval prior to proceeding. The supervisory relationship under an agreement shall not be construed to require the personal presence of a physician nor to require that the medical psychologist be employed by the supervising physician.
- (b) Maintain a copy of the signed, written supervisory agreement which must be available to the Board upon request from both the medical psychologist and the supervising physician and shall be annually updated. The medical psychologist shall inform each supervising physician of all collaborative agreements he or she has signed and provide a

- 1 copy of these to any supervising physician, upon request. The
- 2 supervisory agreement must be renewed annually and signed by
- 3 both the supervising physician and the medical psychologist.
- 4 (225 ILCS 15/15) (from Ch. 111, par. 5365)
- 5 (Section scheduled to be repealed on January 1, 2017)
- 6 Sec. 15. Disciplinary action; grounds.
- 7 <u>(a)</u> The Department may refuse to issue, refuse to renew,
- 8 suspend, or revoke any license, or may place on probation,
- 9 censure, reprimand, or take other disciplinary action deemed
- 10 appropriate by the Department, including the imposition of
- fines not to exceed \$10,000 for each violation, with regard to
- any license issued under the provisions of this Act for any one
- or a combination of the following reasons:
- 14 (1) Conviction of, or entry of a plea of guilty or nolo
- 15 contendere to, any crime that is a felony under the laws of
- the United States or any state or territory thereof or that
- 17 is a misdemeanor of which an essential element is
- 18 dishonesty, or any crime that is directly related to the
- 19 practice of the profession.
- 20 (2) Gross negligence in the rendering of clinical
- 21 psychological services.
- 22 (3) Using fraud or making any misrepresentation in
- 23 applying for a license or in passing the examination
- 24 provided for in this Act.
- 25 (4) Aiding or abetting or conspiring to aid or abet a

- person, not a clinical psychologist licensed under this Act, in representing himself or herself as so licensed or in applying for a license under this Act.
 - (5) Violation of any provision of this Act or the rules promulgated thereunder.
 - (6) Professional connection or association with any person, firm, association, partnership or corporation holding himself, herself, themselves, or itself out in any manner contrary to this Act.
 - (7) Unethical, unauthorized or unprofessional conduct as defined by rule. In establishing those rules, the Department shall consider, though is not bound by, the ethical standards for psychologists promulgated by recognized national psychology associations.
 - (8) Aiding or assisting another person in violating any provisions of this Act or the rules promulgated thereunder.
 - (9) Failing to provide, within 60 days, information in response to a written request made by the Department.
 - (10) Habitual or excessive use or addiction to alcohol, narcotics, stimulants, or any other chemical agent or drug that results in a clinical psychologist's inability to practice with reasonable judgment, skill or safety.
 - (11) Discipline by another state, territory, the District of Columbia or foreign country, if at least one of the grounds for the discipline is the same or substantially equivalent to those set forth herein.

| (12) Directly or indirectly giving or receiving from |
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| any person, firm, corporation, association or partnership |
| any fee, commission, rebate or other form of compensation |
| for any professional service not actually or personally |
| rendered. |

- (13) A finding by the Board that the licensee, after having his or her license placed on probationary status has violated the terms of probation.
- (14) Willfully making or filing false records or reports, including but not limited to, false records or reports filed with State agencies or departments.
- (15) Physical illness, including but not limited to, deterioration through the aging process, mental illness or disability that results in the inability to practice the profession with reasonable judgment, skill and safety.
- (16) Willfully failing to report an instance of suspected child abuse or neglect as required by the Abused and Neglected Child Reporting Act.
- (17) Being named as a perpetrator in an indicated report by the Department of Children and Family Services pursuant to the Abused and Neglected Child Reporting Act, and upon proof by clear and convincing evidence that the licensee has caused a child to be an abused child or neglected child as defined in the Abused and Neglected Child Reporting Act.
 - (18) Violation of the Health Care Worker Self-Referral

1 Act.

- (19) Making a material misstatement in furnishing information to the Department, any other State or federal agency, or any other entity.
- (20) Failing to report to the Department any adverse judgment, settlement, or award arising from a liability claim related to an act or conduct similar to an act or conduct that would constitute grounds for action as set forth in this Section.
- (21) Failing to report to the Department any adverse final action taken against a licensee or applicant by another licensing jurisdiction, including any other state or territory of the United States or any foreign state or country, or any peer review body, health care institution, professional society or association related to the profession, governmental agency, law enforcement agency, or court for an act or conduct similar to an act or conduct that would constitute grounds for disciplinary action as set forth in this Section.

The entry of an order by any circuit court establishing that any person holding a license under this Act is subject to involuntary admission or judicial admission as provided for in the Mental Health and Developmental Disabilities Code, operates as an automatic suspension of that license. That person may have his or her license restored only upon the determination by a circuit court that the patient is no longer

subject to involuntary admission or judicial admission and the issuance of an order so finding and discharging the patient and upon the Board's recommendation to the Department that the license be restored. Where the circumstances so indicate, the Board may recommend to the Department that it require an examination prior to restoring any license so automatically suspended.

The Department may refuse to issue or may suspend the license of any person who fails to file a return, or to pay the tax, penalty or interest shown in a filed return, or to pay any final assessment of the tax penalty or interest, as required by any tax Act administered by the Illinois Department of Revenue, until such time as the requirements of any such tax Act are satisfied.

In enforcing this Section, the Board upon a showing of a possible violation may compel any person licensed to practice under this Act, or who has applied for licensure or certification pursuant to this Act, to submit to a mental or physical examination, or both, as required by and at the expense of the Department. The examining physicians or clinical psychologists shall be those specifically designated by the Board. The Board or the Department may order the examining physician or clinical psychologist to present testimony concerning this mental or physical examination of the licensee or applicant. No information shall be excluded by reason of any common law or statutory privilege relating to communications

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between the licensee or applicant and the examining physician or clinical psychologist. The person to be examined may have, at his or her own expense, another physician or clinical psychologist of his or her choice present during all aspects of the examination. Failure of any person to submit to a mental or physical examination, when directed, shall be grounds for suspension of a license until the person submits to the examination if the Board finds, after notice and hearing, that the refusal to submit to the examination was without reasonable cause.

If the Board finds a person unable to practice because of the reasons set forth in this Section, the Board may require that person to submit to care, counseling or treatment by physicians or clinical psychologists approved or designated by the Board, as a condition, term, or restriction for continued, reinstated, or renewed licensure to practice; or, in lieu of care, counseling or treatment, the Board may recommend to the Department to file a complaint to immediately suspend, revoke or otherwise discipline the license of the person. Any person whose license was granted, continued, reinstated, renewed, disciplined or supervised subject to such terms, conditions or restrictions, and who fails to comply with such terms, conditions or restrictions, shall be referred to the Secretary for a determination as to whether the person shall have his or her license suspended immediately, pending a hearing by the Board.

In instances in which the Secretary immediately suspends a person's license under this Section, a hearing on that person's license must be convened by the Board within 15 days after the suspension and completed without appreciable delay. The Board shall have the authority to review the subject person's record of treatment and counseling regarding the impairment, to the extent permitted by applicable federal statutes and regulations safeguarding the confidentiality of medical records.

A person licensed under this Act and affected under this Section shall be afforded an opportunity to demonstrate to the Board that he or she can resume practice in compliance with acceptable and prevailing standards under the provisions of his or her license.

(b) The Board shall prescribe by rule criteria for disciplining, suspending, or revoking the prescriptive authority of a medical psychologist. The Board shall have the power and duty to require remediation, suspension, or revocation of a psychologist's prescriptive authority for a specified period of time to be determined at the discretion of the Board in accordance with State law.

22 (Source: P.A. 94-870, eff. 6-16-06.)

Section 10. The Nurse Practice Act is amended by changing Section 50-10 as follows:

the calendar year.

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- 1 (225 ILCS 65/50-10) (was 225 ILCS 65/5-10)
- 2 (Section scheduled to be repealed on January 1, 2018)
- Sec. 50-10. Definitions. Each of the following terms, when used in this Act, shall have the meaning ascribed to it in this
- 5 Section, except where the context clearly indicates otherwise:
- "Academic year" means the customary annual schedule of courses at a college, university, or approved school, customarily regarded as the school year as distinguished from
- 10 "Advanced practice nurse" or "APN" means a person who has 11 met the qualifications for a (i) certified nurse midwife (CNM); 12 (ii) certified nurse practitioner (CNP); (iii) certified 13 registered nurse anesthetist (CRNA); or (iv) clinical nurse specialist (CNS) and has been licensed by the Department. All 14 15 advanced practice nurses licensed and practicing in the State 16 of Illinois shall use the title APN and may use speciality 17 credentials after their name.
 - "Approved program of professional nursing education" and "approved program of practical nursing education" are programs of professional or practical nursing, respectively, approved by the Department under the provisions of this Act.
- "Board" means the Board of Nursing appointed by the Secretary.
- "Collaboration" means a process involving 2 or more health care professionals working together, each contributing one's respective area of expertise to provide more comprehensive

- 1 patient care.
- 2 "Consultation" means the process whereby an advanced
- 3 practice nurse seeks the advice or opinion of another health
- 4 care professional.
- 5 "Credentialed" means the process of assessing and
- 6 validating the qualifications of a health care professional.
- 7 "Current nursing practice update course" means a planned
- 8 nursing education curriculum approved by the Department
- 9 consisting of activities that have educational objectives,
- 10 instructional methods, content or subject matter, clinical
- 11 practice, and evaluation methods, related to basic review and
- 12 updating content and specifically planned for those nurses
- previously licensed in the United States or its territories and
- preparing for reentry into nursing practice.
- 15 "Dentist" means a person licensed to practice dentistry
- 16 under the Illinois Dental Practice Act.
- 17 "Department" means the Department of Financial and
- 18 Professional Regulation.
- "Impaired nurse" means a nurse licensed under this Act who
- 20 is unable to practice with reasonable skill and safety because
- of a physical or mental disability as evidenced by a written
- determination or written consent based on clinical evidence,
- including loss of motor skills, abuse of drugs or alcohol, or a
- 24 psychiatric disorder, of sufficient degree to diminish his or
- 25 her ability to deliver competent patient care.
- 26 "License-pending advanced practice nurse" means a

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- 1 registered professional nurse who has completed all 2 requirements for licensure as an advanced practice nurse except the certification examination and has applied to take the next 3 available certification exam and received a temporary license 4 5 from the Department.
 - "License-pending registered nurse" means a person who has passed the Department-approved registered nurse licensure exam and has applied for a license from the Department. A license-pending registered nurse shall use the title "RN license" on all documentation related to nursing practice.
- "Physician" means a person licensed to practice medicine in all its branches under the Medical Practice Act of 1987.
- "Podiatrist" means a person licensed to practice podiatry
 under the Podiatric Medical Practice Act of 1987.
 - "Practical nurse" or "licensed practical nurse" means a person who is licensed as a practical nurse under this Act and practices practical nursing as defined in this Act. Only a practical nurse licensed under this Act is entitled to use the title "licensed practical nurse" and the abbreviation "L.P.N.".
 - "Practical nursing" means the performance of nursing acts requiring the basic nursing knowledge, judgement, and skill acquired by means of completion of an approved practical nursing education program. Practical nursing includes assisting in the nursing process as delegated by a registered professional nurse or an advanced practice nurse. The practical

- 1 nurse may work under the direction of a licensed physician,
- 2 dentist, podiatrist, or other health care professional
- 3 determined by the Department.
- 4 "Privileged" means the authorization granted by the
- 5 governing body of a healthcare facility, agency, or
- 6 organization to provide specific patient care services within
- 7 well-defined limits, based on qualifications reviewed in the
- 8 credentialing process.
- 9 "Registered Nurse" or "Registered Professional Nurse"
- 10 means a person who is licensed as a professional nurse under
- 11 this Act and practices nursing as defined in this Act. Only a
- 12 registered nurse licensed under this Act is entitled to use the
- 13 titles "registered nurse" and "registered professional nurse"
- and the abbreviation, "R.N.".
- "Registered professional nursing practice" is a scientific
- 16 process founded on a professional body of knowledge; it is a
- 17 learned profession based on the understanding of the human
- 18 condition across the life span and environment and includes all
- 19 nursing specialities and means the performance of any nursing
- 20 act based upon professional knowledge, judgment, and skills
- 21 acquired by means of completion of an approved professional
- 22 nursing education program. A registered professional nurse
- provides holistic nursing care through the nursing process to
- 24 individuals, groups, families, or communities, that includes
- but is not limited to: (1) the assessment of healthcare needs,
- 26 nursing diagnosis, planning, implementation, and nursing

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evaluation; (2) the promotion, maintenance, and restoration of health; (3) counseling, patient education, health education, and patient advocacy; (4) the administration of medications and treatments as prescribed by a physician licensed to practice medicine in all of its branches, a licensed dentist, a licensed podiatrist, a medical psychologist, or a licensed optometrist or as prescribed by a physician assistant in accordance with written quidelines required under the Physician Assistant Practice Act of 1987 or by an advanced practice nurse in accordance with Article 65 of this Act; (5) the coordination and management of the nursing plan of care; (6) the delegation to and supervision of individuals who assist the registered professional nurse implementing the plan of care; and (7) teaching nursing students. The foregoing shall not be deemed to include those acts of medical diagnosis or prescription of therapeutic or corrective measures.

"Professional assistance program for nurses" means a professional assistance program that meets criteria established by the Board of Nursing and approved by the Secretary, which provides a non-disciplinary treatment approach for nurses licensed under this Act whose ability to practice is compromised by alcohol or chemical substance addiction.

"Secretary" means the Secretary of Financial and Professional Regulation.

26 "Unencumbered license" means a license issued in good

- 1 standing.
- 2 "Written collaborative agreement" means a written
- 3 agreement between an advanced practice nurse and a
- 4 collaborating physician, dentist, or podiatrist pursuant to
- 5 Section 65-35.
- 6 (Source: P.A. 95-639, eff. 10-5-07.)
- 7 Section 20. The Illinois Controlled Substances Act is
- 8 amended by changing Section 102 as follows:
- 9 (720 ILCS 570/102) (from Ch. 56 1/2, par. 1102)
- 10 Sec. 102. Definitions. As used in this Act, unless the
- 11 context otherwise requires:
- 12 (a) "Addict" means any person who habitually uses any drug,
- 13 chemical, substance or dangerous drug other than alcohol so as
- 14 to endanger the public morals, health, safety or welfare or who
- is so far addicted to the use of a dangerous drug or controlled
- 16 substance other than alcohol as to have lost the power of self
- 17 control with reference to his addiction.
- 18 (b) "Administer" means the direct application of a
- 19 controlled substance, whether by injection, inhalation,
- 20 ingestion, or any other means, to the body of a patient,
- 21 research subject, or animal (as defined by the Humane
- 22 Euthanasia in Animal Shelters Act) by:
- 23 (1) a practitioner (or, in his presence, by his
- 24 authorized agent),

| 1 | (2) the patient or research subject at the lawful |
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| 2 | direction of the practitioner, or |
| 3 | (3) a euthanasia technician as defined by the Humane |
| 4 | Euthanasia in Animal Shelters Act. |
| 5 | (c) "Agent" means an authorized person who acts on behalf |
| 6 | of or at the direction of a manufacturer, distributor, or |
| 7 | dispenser. It does not include a common or contract carrier, |
| 8 | public warehouseman or employee of the carrier or warehouseman. |
| 9 | (c-1) "Anabolic Steroids" means any drug or hormonal |
| 10 | substance, chemically and pharmacologically related to |
| 11 | testosterone (other than estrogens, progestins, and |
| 12 | corticosteroids) that promotes muscle growth, and includes: |
| 13 | (i) boldenone, |
| 14 | (ii) chlorotestosterone, |
| 15 | (iii) chostebol, |
| 16 | (iv) dehydrochlormethyltestosterone, |
| 17 | (v) dihydrotestosterone, |
| 18 | (vi) drostanolone, |
| 19 | (vii) ethylestrenol, |
| 20 | (viii) fluoxymesterone, |
| 21 | (ix) formebulone, |
| 22 | (x) mesterolone, |
| 23 | (xi) methandienone, |
| 24 | (xii) methandranone, |
| 25 | (xiii) methandriol, |
| 26 | (xiv) methandrostenolone, |

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| (XV) | methenolone, |
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- 2 (xvi) methyltestosterone,
- 3 (xvii) mibolerone,
- 4 (xviii) nandrolone,
- 5 (xix) norethandrolone,
- 6 (xx) oxandrolone,
- 7 (xxi) oxymesterone,
- 8 (xxii) oxymetholone,
- 9 (xxiii) stanolone,
- 10 (xxiv) stanozolol,
- 11 (xxv) testolactone,
- 12 (xxvi) testosterone,
- 13 (xxvii) trenbolone, and

14 (xxviii) any salt, ester, or isomer of a drug or 15 substance described or listed in this paragraph, if

that salt, ester, or isomer promotes muscle growth.

Any person who is otherwise lawfully in possession of an anabolic steroid, or who otherwise lawfully manufactures, distributes, dispenses, delivers, or possesses with intent to deliver an anabolic steroid, which anabolic steroid is expressly intended for and lawfully allowed to be administered through implants to livestock or other nonhuman species, and which is approved by the Secretary of Health and Human Services for such administration, and which the person intends to administer or have administered through such implants, shall not be considered to be in unauthorized possession or to

- 1 unlawfully manufacture, distribute, dispense, deliver, or
- 2 possess with intent to deliver such anabolic steroid for
- 3 purposes of this Act.
- 4 (d) "Administration" means the Drug Enforcement
- 5 Administration, United States Department of Justice, or its
- 6 successor agency.
- 7 (e) "Control" means to add a drug or other substance, or
- 8 immediate precursor, to a Schedule under Article II of this Act
- 9 whether by transfer from another Schedule or otherwise.
- 10 (f) "Controlled Substance" means a drug, substance, or
- immediate precursor in the Schedules of Article II of this Act.
- 12 (g) "Counterfeit substance" means a controlled substance,
- 13 which, or the container or labeling of which, without
- 14 authorization bears the trademark, trade name, or other
- 15 identifying mark, imprint, number or device, or any likeness
- 16 thereof, of a manufacturer, distributor, or dispenser other
- 17 than the person who in fact manufactured, distributed, or
- 18 dispensed the substance.
- 19 (h) "Deliver" or "delivery" means the actual, constructive
- or attempted transfer of possession of a controlled substance,
- 21 with or without consideration, whether or not there is an
- 22 agency relationship.
- (i) "Department" means the Illinois Department of Human
- 24 Services (as successor to the Department of Alcoholism and
- 25 Substance Abuse) or its successor agency.
- 26 (j) "Department of State Police" means the Department of

- 1 State Police of the State of Illinois or its successor agency.
- 2 (k) "Department of Corrections" means the Department of Corrections of the State of Illinois or its successor agency.
 - (1) "Department of Professional Regulation" means the Department of Professional Regulation of the State of Illinois or its successor agency.
 - (m) "Depressant" or "stimulant substance" means:
 - (1) a drug which contains any quantity of (i) barbituric acid or any of the salts of barbituric acid which has been designated as habit forming under section 502 (d) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 352 (d)); or
 - (2) a drug which contains any quantity of (i) amphetamine or methamphetamine and any of their optical isomers; (ii) any salt of amphetamine or methamphetamine or any salt of an optical isomer of amphetamine; or (iii) any substance which the Department, after investigation, has found to be, and by rule designated as, habit forming because of its depressant or stimulant effect on the central nervous system; or
 - (3) lysergic acid diethylamide; or
 - (4) any drug which contains any quantity of a substance which the Department, after investigation, has found to have, and by rule designated as having, a potential for abuse because of its depressant or stimulant effect on the central nervous system or its hallucinogenic effect.

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- 1 (n) (Blank).
- 2 (o) "Director" means the Director of the Department of 3 State Police or the Department of Professional Regulation or 4 his designated agents.
 - (p) "Dispense" means to deliver a controlled substance to an ultimate user or research subject by or pursuant to the lawful order of a prescriber, including the prescribing, administering, packaging, labeling, or compounding necessary to prepare the substance for that delivery.
- 10 (q) "Dispenser" means a practitioner who dispenses.
- 11 (r) "Distribute" means to deliver, other than by
 12 administering or dispensing, a controlled substance.
- 13 (s) "Distributor" means a person who distributes.
 - (t) "Drug" means (1) substances recognized as drugs in the official United States Pharmacopoeia, Official Homeopathic Pharmacopoeia of the United States, or official National Formulary, or any supplement to any of them; (2) substances intended for use in diagnosis, cure, mitigation, treatment, or prevention of disease in man or animals; (3) substances (other than food) intended to affect the structure of any function of the body of man or animals and (4) substances intended for use as a component of any article specified in clause (1), (2), or (3) of this subsection. It does not include devices or their components, parts, or accessories.
 - (t-5) "Euthanasia agency" means an entity certified by the Department of Professional Regulation for the purpose of animal

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- euthanasia that holds an animal control facility license or animal shelter license under the Animal Welfare Act. A euthanasia agency is authorized to purchase, store, possess, and utilize Schedule II nonnarcotic and Schedule III nonnarcotic drugs for the sole purpose of animal euthanasia.
 - (t-10) "Euthanasia drugs" means Schedule II or Schedule III substances (nonnarcotic controlled substances) that are used by a euthanasia agency for the purpose of animal euthanasia.
 - (u) "Good faith" means the prescribing or dispensing of a controlled substance by a practitioner in the regular course of professional treatment to or for any person who is under his treatment for a pathology or condition other than that individual's physical or psychological dependence upon or addiction to a controlled substance, except as provided herein: and application of the term to a pharmacist shall mean the dispensing of a controlled substance pursuant to the prescriber's order which in the professional judgment of the pharmacist is lawful. The pharmacist shall be guided by accepted professional standards including, but not limited to the following, in making the judgment:
- 21 (1) lack of consistency of doctor-patient 22 relationship,
 - (2) frequency of prescriptions for same drug by one prescriber for large numbers of patients,
 - (3) quantities beyond those normally prescribed,
 - (4) unusual dosages,

- 1 (5) unusual geographic distances between patient,
 2 pharmacist and prescriber,
 - (6) consistent prescribing of habit-forming drugs.
 - (u-1) "Home infusion services" means services provided by a pharmacy in compounding solutions for direct administration to a patient in a private residence, long-term care facility, or hospice setting by means of parenteral, intravenous, intramuscular, subcutaneous, or intraspinal infusion.
 - (v) "Immediate precursor" means a substance:
 - (1) which the Department has found to be and by rule designated as being a principal compound used, or produced primarily for use, in the manufacture of a controlled substance;
 - (2) which is an immediate chemical intermediary used or likely to be used in the manufacture of such controlled substance; and
 - (3) the control of which is necessary to prevent, curtail or limit the manufacture of such controlled substance.
 - (w) "Instructional activities" means the acts of teaching, educating or instructing by practitioners using controlled substances within educational facilities approved by the State Board of Education or its successor agency.
- 24 (x) "Local authorities" means a duly organized State, 25 County or Municipal peace unit or police force.
 - (y) "Look-alike substance" means a substance, other than a

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(1) by overall dosage controlled substance which appearance, including shape, color, size, markings or lack thereof, taste, consistency, or any other identifying physical characteristic of the substance, would lead a reasonable person to believe that the substance is a controlled substance, or (2) is expressly or impliedly represented to be a controlled substance or is distributed under circumstances which would lead a reasonable person to believe that the substance is a controlled substance. For the purpose of determining whether representations made or t.he circumstances the distribution would lead a reasonable person to believe the substance to be a controlled substance under this clause (2) of subsection (y), the court or other authority may consider the following factors in addition to any other factor that may be relevant:

- (a) statements made by the owner or person in control of the substance concerning its nature, use or effect;
- (b) statements made to the buyer or recipient that the substance may be resold for profit;
- (c) whether the substance is packaged in a manner normally used for the illegal distribution of controlled substances;
- (d) whether the distribution or attempted distribution included an exchange of or demand for money or other property as consideration, and whether the amount of the consideration was substantially greater than the

1 reasonable retail market value of the substance.

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

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

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

- (y-1) "Mail-order pharmacy" means a pharmacy that is located in a state of the United States, other than Illinois, that delivers, dispenses or distributes, through the United States Postal Service or other common carrier, to Illinois residents, any substance which requires a prescription.
- (z) "Manufacture" means the production, preparation, propagation, compounding, conversion or processing of a controlled substance other than methamphetamine, either directly or indirectly, by extraction from substances of

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| 1 | natural | origi | n, o | r in | ndepe | ndent | cly | by | means | of | chen | nical |
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| 3 | synthesis | s, and | lincl | udes | any | pack | agin | g or | repa | ckagi | ng of | the |
| 4 | substance | e or l | abeli | ng of | its | cont | aine | r, e | xcept | that | this | term |
| 5 | does not | inclu | de: | | | | | | | | | |

- (1) by an ultimate user, the preparation or compounding of a controlled substance for his own use; or
 - (2) by a practitioner, or his authorized agent under his supervision, the preparation, compounding, packaging, or labeling of a controlled substance:
 - (a) as an incident to his administering or dispensing of a controlled substance in the course of his professional practice; or
- (b) as an incident to lawful research, teaching or chemical analysis and not for sale.
- 16 (z-1) (Blank).
- 17 (aa) "Narcotic drug" means any of the following, whether 18 produced directly or indirectly by extraction from substances 19 of natural origin, or independently by means of chemical 20 synthesis, or by a combination of extraction and chemical 21 synthesis:
- 22 (1) opium and opiate, and any salt, compound, 23 derivative, or preparation of opium or opiate;
- (2) any salt, compound, isomer, derivative, or preparation thereof which is chemically equivalent or identical with any of the substances referred to in clause

- 1 (1), but not including the isoquinoline alkaloids of opium;
- 2 (3) opium poppy and poppy straw;
- (4) coca leaves and any salts, compound, isomer, salt 3 of an isomer, derivative, or preparation of coca leaves 4 5 including cocaine or ecgonine, and any salt, compound, isomer, derivative, or preparation thereof which is 6 7 chemically equivalent or identical with any of these 8 substances, but not including decocainized coca leaves or 9 extractions of coca leaves which do not contain cocaine or 10 ecgonine (for the purpose of this paragraph, the term 11 "isomer" includes optical, positional and geometric 12 isomers).
- 13 (bb) "Nurse" means a registered nurse licensed under the
 14 Nurse Practice Act.
- 15 (cc) (Blank).
- 16 (dd) "Opiate" means any substance having an addiction 17 forming or addiction sustaining liability similar to morphine 18 or being capable of conversion into a drug having addiction 19 forming or addiction sustaining liability.
- 20 (ee) "Opium poppy" means the plant of the species Papaver 21 somniferum L., except its seeds.
- (ff) "Parole and Pardon Board" means the Parole and Pardon Board of the State of Illinois or its successor agency.
- (gg) "Person" means any individual, corporation, mail-order pharmacy, government or governmental subdivision or agency, business trust, estate, trust, partnership or

- 1 association, or any other entity.
- 2 (hh) "Pharmacist" means any person who holds a license or
- 3 certificate of registration as a registered pharmacist, a local
- 4 registered pharmacist or a registered assistant pharmacist
- 5 under the Pharmacy Practice Act.
- 6 (ii) "Pharmacy" means any store, ship or other place in
- 7 which pharmacy is authorized to be practiced under the Pharmacy
- 8 Practice Act.
- 9 (jj) "Poppy straw" means all parts, except the seeds, of
- 10 the opium poppy, after mowing.
- 11 (kk) "Practitioner" means a physician licensed to practice
- 12 medicine in all its branches, dentist, optometrist,
- 13 podiatrist, veterinarian, medical psychologist under the
- 14 Clinical Psychologist Licensing Act, scientific investigator,
- 15 pharmacist, physician assistant, advanced practice nurse,
- 16 licensed practical nurse, registered nurse, hospital,
- laboratory, or pharmacy, or other person licensed, registered,
- or otherwise lawfully permitted by the United States or this
- 19 State to distribute, dispense, conduct research with respect
- 20 to, administer or use in teaching or chemical analysis, a
- 21 controlled substance in the course of professional practice or
- 22 research.
- 23 (11) "Pre-printed prescription" means a written
- 24 prescription upon which the designated drug has been indicated
- 25 prior to the time of issuance.
- 26 (mm) "Prescriber" means a physician licensed to practice

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1 in medicine all its branches, dentist, optometrist, 2 podiatrist, medical psychologist under the Clinical Psychologist Licensing Act, or veterinarian who issues a 3 prescription, a physician assistant who issues a prescription 4 5 for a controlled substance in accordance with Section 303.05, a 6 written delegation, and a written supervision agreement 7 required under Section 7.5 of the Physician Assistant Practice Act of 1987, or an advanced practice nurse with prescriptive 8 authority delegated under Section 65-40 of the Nurse Practice 9 10 Act and in accordance with Section 303.05, a written 11 delegation, and a written collaborative agreement 12 Section 65-35 of the Nurse Practice Act.

(nn) "Prescription" means a lawful written, facsimile, or verbal order of a physician licensed to practice medicine in all its branches, dentist, podiatrist or veterinarian for any controlled substance, of an optometrist for a Schedule III, IV, or V controlled substance in accordance with Section 15.1 of the Illinois Optometric Practice Act of 1987, of a physician assistant for a controlled substance in accordance with Section 303.05, a written delegation, and a written supervision agreement required under Section 7.5 of the Physician Assistant Practice Act of 1987, or of an advanced practice nurse with prescriptive authority delegated under Section 65-40 of the Nurse Practice Act who issues a prescription for a controlled substance in accordance with Section 303.05, a written delegation, and a written collaborative agreement under

- 1 Section 65-35 of the Nurse Practice Act.
- 2 (oo) "Production" or "produce" means manufacture,
- 3 planting, cultivating, growing, or harvesting of a controlled
- 4 substance other than methamphetamine.
- 5 (pp) "Registrant" means every person who is required to
- 6 register under Section 302 of this Act.
- 7 (qq) "Registry number" means the number assigned to each
- 8 person authorized to handle controlled substances under the
- 9 laws of the United States and of this State.
- 10 (rr) "State" includes the State of Illinois and any state,
- district, commonwealth, territory, insular possession thereof,
- 12 and any area subject to the legal authority of the United
- 13 States of America.
- 14 (ss) "Ultimate user" means a person who lawfully possesses
- a controlled substance for his own use or for the use of a
- 16 member of his household or for administering to an animal owned
- by him or by a member of his household.
- 18 (Source: P.A. 95-242, eff. 1-1-08; 95-639, eff. 10-5-07;
- 19 95-689, eff. 10-29-07; 95-876, eff. 8-21-08; 96-189, eff.
- 20 8-10-09; 96-268, eff. 8-11-09.)