

Rep. Kelly M. Cassidy

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1	AMENDMENT TO SENATE BILL 336
2	AMENDMENT NO Amend Senate Bill 336 by replacing
3	everything after the enacting clause with the following:
4	"Section 1. Short title. This Act may be referred to as the
5	Alternatives to Opioids Act of 2018.
6	Section 10. The Illinois Procurement Code is amended by
7	changing Section 1-10 as follows:
8	(30 ILCS 500/1-10)
9	Sec. 1-10. Application.
10	(a) This Code applies only to procurements for which
11	bidders, offerors, potential contractors, or contractors were
12	first solicited on or after July 1, 1998. This Code shall not
13	be construed to affect or impair any contract, or any provision
14	of a contract, entered into based on a solicitation prior to
15	the implementation date of this Code as described in Article

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

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

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

13 (2) Grants, except for the filing requirements of14 Section 20-80.

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

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

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(5) Collective bargaining contracts.

(6) Purchase of real estate, except that notice of this type of contract with a value of more than \$25,000 must be published in the Procurement Bulletin within 10 calendar days after the deed is recorded in the county of jurisdiction. The notice shall identify the real estate 1 purchased, the names of all parties to the contract, the 2 value of the contract, and the effective date of the 3 contract.

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

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(8) (Blank).

14 (9) Procurement expenditures by the Illinois15 Conservation Foundation when only private funds are used.

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(10) (Blank).

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

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

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

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

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

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

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(15) Contracts with a railroad or utility that requires

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

22 (16) Procurement expenditures necessary for the 23 Department of Agriculture, the Department of Financial and 24 Professional Regulation, the Department of Human Services, 25 and the Department of Public Health to implement the 26 Compassionate Use of Medical Cannabis Pilot Program and <u>Opioid Alternative Pilot Program requirements and ensure</u>
 <u>access to medical cannabis for patients with debilitating</u>
 <u>medical conditions in accordance with the Compassionate</u>
 <u>Use of Medical Cannabis Pilot Program Act.</u>

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

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

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

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

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

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(f) (Blank).

12 (g) (Blank).

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

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

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

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

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

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

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

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

15 (410 ILCS 130/5)

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

17 Sec. 5. Findings.

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

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

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

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

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

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

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

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

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

24 <u>The 2017 State of Illinois Opioid Action Plan also states</u>, 25 <u>"The increase in OUD [opioid use disorder] and opioid overdose</u> 26 <u>deaths is largely due to the dramatic rise in the rate and</u> amount of opioids prescribed for pain over the past decades".
 Further, according to the Action Plan, "In the absence of

3 <u>alternative treatments, reducing the supply of prescription</u> 4 <u>opioids too abruptly may drive more people to switch to using</u> 5 <u>illicit drugs (including heroin), thus increasing the risk of</u> 6 overdose".

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

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

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

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

1 (410 ILCS 130/7)

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

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

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

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

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

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

1	(410 ILCS 130/10)
2	(Section scheduled to be repealed on July 1, 2020)
3	Sec. 10. Definitions. The following terms, as used in this
4	Act, shall have the meanings set forth in this Section:
5	(a) "Adequate supply" means:
6	(1) 2.5 ounces of usable cannabis during a period of 14
7	days and that is derived solely from an intrastate source.
8	(2) Subject to the rules of the Department of Public
9	Health, a patient may apply for a waiver where a physician
10	provides a substantial medical basis in a signed, written
11	statement asserting that, based on the patient's medical
12	history, in the physician's professional judgment, 2.5
13	ounces is an insufficient adequate supply for a 14-day
14	period to properly alleviate the patient's debilitating
15	medical condition or symptoms associated with the
16	debilitating medical condition.
17	(3) This subsection may not be construed to authorize
18	the possession of more than 2.5 ounces at any time without

authority from the Department of Public Health.

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

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

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

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includes, but is not limited to, testing and data collection established and maintained by the registered cultivation center and available to the Department for the purposes of documenting each cannabis plant and for monitoring plant development throughout the life cycle of a cannabis plant cultivated for the intended use by a qualifying patient from 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.

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

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

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:

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

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1 syndrome, hepatitis C, amyotrophic lateral sclerosis, Crohn's disease, agitation of Alzheimer's disease, 2 cachexia/wasting syndrome, muscular dystrophy, 3 severe 4 fibromyalgia, spinal cord disease, including but not 5 limited to arachnoiditis, Tarlov cysts, hydromyelia, syringomyelia, Rheumatoid arthritis, fibrous dysplasia, 6 cord injury, traumatic brain 7 spinal injury and 8 post-concussion syndrome, Multiple Sclerosis, malformation 9 Arnold-Chiari and Syringomyelia, 10 Spinocerebellar Ataxia (SCA), Parkinson's, Tourette's, 11 Myoclonus, Dystonia, Reflex Sympathetic Dystrophy, RSD (Complex Regional Pain Syndromes Type I), Causalgia, CRPS 12 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 syndrome, residual limb pain, seizures (including those 17 characteristic of epilepsy), post-traumatic stress 18 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

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

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by rule as provided in Section 45.

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

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

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

(1) "Excluded offense" for cultivation center agents anddispensing organizations means:

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

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

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

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

15 (1-5) (Blank). "Excluded offense" for a qualifying patient 16 or designated caregiver means a violation of state or federal controlled substance law, the Cannabis Control Act, or the 17 Methamphetamine and Community Protection Act that was 18 classified as a felony in the jurisdiction where the person was 19 20 convicted, except that the registering Department may waive 21 this restriction if the person demonstrates to the registering 22 Department's satisfaction that his or her conviction was for 23 the possession, cultivation, transfer, or delivery of a 24 reasonable amount of cannabis intended for medical use. This 25 exception does not apply if the conviction was under state law 26 and involved a violation of an existing medical cannabis law. For purposes of this subsection, the Department of Public Health shall determine by emergency rule within 30 days after the effective date of this amendatory Act of the 99th General Assembly what constitutes a "reasonable amount".

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

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

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

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

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

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

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

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

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

26 <u>(r-10)</u> "Opioid Alternative Pilot Program participant"

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

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

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

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

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

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

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

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

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

(y) "Written certification" means a document dated and signed by a physician, stating (1) that the qualifying patient has a debilitating medical condition and specifying the debilitating medical condition the qualifying patient has; and (2) that (A) the physician is treating or managing treatment of the patient's debilitating medical condition; or (B) an Opioid 1 Alternative Pilot Program participant has a medical condition for which opioids have been or could be prescribed. A written 2 3 certification shall be made only in the course of a bona fide 4 physician-patient relationship, after the physician has 5 completed an assessment of either a the qualifying patient's 6 medical history or Opioid Alternative Pilot Program reviewed relevant records related 7 participant, the to patient's debilitating condition, and conducted a physical 8 9 examination.

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

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

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

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)

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

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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 following requirements: 6

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

(2) A physician certifying a patient's condition shall 12 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 not be performed by remote means, including telemedicine. 17

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 from or to a qualifying patient, primary caregiver, 26

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

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 recommends the use of medical cannabis to qualified 17 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 purpose of performing a medical cannabis related research 21 22 study;

(5) serve on the board of directors or as an employee
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
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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.

(e) A physician who certifies a debilitating medical 12 13 condition for a qualifying patient may notify the Department of 14 Public Health in writing: (1) if the physician has reason to 15 believe either that the registered qualifying patient has ceased to suffer from a debilitating medical condition; (2) 16 that the bona fide physician-patient relationship has 17 terminated; or (3) that continued use of medical cannabis would 18 19 result in contraindication with the patient's other 20 medication. The registered qualifying patient's registry identification card shall be revoked by the Department of 21 22 Public Health after receiving the physician's notification. (Source: P.A. 98-122, eff. 1-1-14; 98-1172, eff. 1-12-15; 23

24 99-519, eff. 6-30-16.)

25 (410 ILCS 130/36 new)

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1	Sec. 36. Written certification.
2	(a) A certification confirming a patient's debilitating
3	medical condition shall be written on a form provided by the
4	Department of Public Health and shall include, at a minimum,
5	the following:
6	(1) the qualifying patient's name, date of birth, home
7	address, and primary telephone number;
8	(2) the physician's name, address, telephone number,
9	email address, medical license number, and active
10	controlled substances license under the Illinois
11	Controlled Substances Act and indication of specialty or
12	primary area of clinical practice, if any;
13	(3) the qualifying patient's debilitating medical
14	condition;
15	(4) a statement that the physician has confirmed a
16	diagnosis of a debilitating condition; is treating or
17	managing treatment of the patient's debilitating
18	condition; has a bona fide physician-patient relationship;
19	has conducted an in-person physical examination; and has
20	conducted a review of the patient's medical history,
21	including reviewing medical records from other treating
22	physicians, if any, from the previous 12 months;
23	(5) the physician's signature and date of
24	certification; and
25	(6) a statement that a participant in possession of a
26	written certification indicating a debilitating medical

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1	condition shall not be considered an unlawful user or
2	addicted to narcotics solely as a result of his or her
3	pending application to or participation in the
4	Compassionate Use of Medical Cannabis Pilot Program.
5	(b) A written certification does not constitute a
6	prescription for medical cannabis.
7	(c) Applications for qualifying patients under 18 years old
8	shall require a written certification from a physician and a
9	reviewing physician.
10	(d) A certification confirming the patient's eligibility
11	to participate in the Opioid Alternative Pilot Program shall be
12	written on a form provided by the Department of Public Health
13	and shall include, at a minimum, the following:
14	(1) the participant's name, date of birth, home
15	address, and primary telephone number;
16	(2) the physician's name, address, telephone number,
17	email address, medical license number, and active
18	controlled substances license under the Illinois
19	Controlled Substances Act and indication of specialty or
20	primary area of clinical practice, if any;
21	(3) the physician's signature and date;
22	(4) the length of participation in the program, which
23	shall be limited to no more than 90 days;
24	(5) a statement identifying the patient has been
25	diagnosed with and is currently undergoing treatment for a
26	medical condition where an opioid has been or could be

1	prescribed; and
2	(6) a statement that a participant in possession of a
3	written certification indicating eligibility to
4	participate in the Opioid Alternative Pilot Program shall
5	not be considered an unlawful user or addicted to narcotics
6	solely as a result of his or her eligibility or
7	participation in the program.
8	(e) The Department of Public Health may provide a single
9	certification form for subsections (a) and (d) of this Section,
10	provided that all requirements of those subsections are
11	included on the form.
12	(f) The Department of Public Health shall not include the
13	word "cannabis" on any application forms or written
14	certification forms that it issues under this Section.
15	<u>(q) A written certification does not constitute a</u>
16	prescription.
17	(h) It is unlawful for any person to knowingly submit a
18	fraudulent certification to be a qualifying patient in the
1.0	
19	<u>Compassionate Use of Medical Cannabis Pilot Program or an</u>
20	Compassionate Use of Medical Cannabis Pilot Program or an Opioid Alternative Pilot Program participant. A violation of
20	Opioid Alternative Pilot Program participant. A violation of
20 21	Opioid Alternative Pilot Program participant. A violation of this subsection shall result in the person who has knowingly

25 (410 ILCS 130/55)

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

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

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

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

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

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

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

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

1 gualifying patient's physician; (6) the name, address, and date of birth of the 2 designated caregiver, if any, chosen by the qualifying 3 4 patient; 5 (7) the name of the registered medical cannabis dispensing organization the qualifying patient designates; 6 (8) signed statements from the patient and designated 7 caregiver asserting that they will not divert medical 8 9 cannabis; and 10 (9) (blank). completed background checks for the 11 patient and designated caregiver. (b) Notwithstanding any other provision of this Act, a 12 13 person provided a written certification for a debilitating 14 medical condition who has submitted a completed online 15 application to the Department of Public Health shall receive a 16 provisional registration and be entitled to purchase medical cannabis from a specified licensed dispensing organization for 17 a period of 90 days or until his or her application has been 18 denied or he or she receives a registry identification card, 19 20 whichever is earlier. However, a person may obtain an 21 additional provisional registration after the expiration of 90 22 days after the date of application if the Department of Public Health does not provide the individual with a registry 23 24 identification card or deny the individual's application 25 within those 90 days. The provisional registration may not be extended if the 26

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1 individual does not respond to the Department of Public 2 Health's request for additional information or corrections to 3 required application documentation. 4 In order for a person to receive medical cannabis under 5 this subsection, a person must present his or her provisional registration along with a valid driver's license or State 6 identification card to the licensed dispensing organization 7 specified in his or her application. The dispensing 8 9 organization shall verify the person's provisional 10 registration through the Department of Public Health's online 11 verification system. Upon verification of the provided documents, the 12 13 dispensing organization shall dispense no more than 2.5 ounces 14 of medical cannabis during a 14-day period to the person for a 15 period of 90 days, until his or her application has been 16 denied, or until he or she receives a registry identification card from the Department of Public Health, whichever is 17 18 earlier. Persons with provisional registrations must keep their 19 20 provisional registration in his or her possession at all times 21 when transporting or engaging in the medical use of cannabis. 22 (c) No person or business shall charge a fee for assistance in the preparation, compilation, or submission of an 23 24 application to the Compassionate Use of Medical Cannabis Pilot 25 Program or the Opioid Alternative Pilot Program. A violation of this subsection is a Class C misdemeanor, for which restitution 26

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1	to the applicant and a fine of up to \$1,500 may be imposed. All
2	fines shall be deposited into the Compassionate Use of Medical
3	Cannabis Fund after restitution has been made to the applicant.
4	The Department of Public Health shall refer individuals making
5	complaints against a person or business under this Section to
6	the Illinois State Police, who shall enforce violations of this
7	provision. All application forms issued by the Department shall
8	state that no person or business may charge a fee for
9	assistance in the preparation, compilation, or submission of an
10	application to the Compassionate Use of Medical Cannabis Pilot
11	Program or the Opioid Alternative Pilot Program.
12	(Source: P.A. 98-122, eff. 1-1-14.)

13 (410 ILCS 130/60)

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

15 Sec. 60. Issuance of registry identification cards.

16 (a) Except as provided in subsection (b), the Department of 17 Public Health shall:

(1) verify the information contained in an application
or renewal for a registry identification card submitted
under this Act, and approve or deny an application or
renewal, within <u>90</u> 30 days of receiving a completed
application or renewal application and all supporting
documentation specified in Section 55;

(2) issue registry identification cards to a
 qualifying patient and his or her designated caregiver, if

any, within 15 business days of approving the application
 or renewal;

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

6 (4) allow for an electronic application process, and 7 provide a confirmation by electronic or other methods that 8 an application has been submitted.

9 (b) The Department of Public Health may not issue a 10 registry identification card to a qualifying patient who is 11 under 18 years of age, unless that patient suffers from seizures, including those characteristic of epilepsy, or as 12 13 provided by administrative rule. The Department of Public 14 Health shall adopt rules for the issuance of a registry 15 identification card for qualifying patients who are under 18 16 years of age and suffering from seizures, including those characteristic of epilepsy. The Department of Public Health may 17 adopt rules to allow other individuals under 18 years of age to 18 become registered gualifying patients under this Act with the 19 20 consent of a parent or legal guardian. Registered qualifying 21 patients under 18 years of age shall be prohibited from 22 consuming forms of cannabis other than medical cannabis infused 23 products and purchasing any usable cannabis.

(c) A veteran who has received treatment at a VA hospital
is deemed to have a bona fide physician-patient relationship
with a VA physician if the patient has been seen for his or her

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

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

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

the person's driving record. The Department and the Secretary of State may establish a system by which the information may be shared electronically.

4 (e) Upon the approval of the registration and issuance of a 5 registry card under this Section, the Department of Public 6 Health shall electronically forward the registered qualifying patient's identification card information to the Prescription 7 Monitoring Program established under the Illinois Controlled 8 9 Substances Act and certify that the individual is permitted to 10 engage in the medical use of cannabis. For the purposes of 11 patient care, the Prescription Monitoring Program shall make a notation on the person's prescription record stating that the 12 person is a registered qualifying patient who is entitled to 13 the lawful medical use of cannabis. If the person no longer 14 15 holds a valid registry card, the Department of Public Health 16 notify the Prescription Monitoring Program shall and Department of Human Services to remove the notation from the 17 person's record. The Department of Human Services and the 18 Prescription Monitoring Program shall establish a system by 19 20 which the information may be shared electronically. This confidential list may not be combined or linked in any manner 21 22 with any other list or database except as provided in this Section. 23

(f) (Blank). All applicants for a registry card shall be
fingerprinted as part of the application process if they are a
first time applicant, if their registry card has already

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expired, or if they previously have had their registry card 1 revoked or otherwise denied. At renewal, cardholders whose 2 3 registry cards have not yet expired, been revoked, or otherwise 4 denied shall not be subject to fingerprinting. Registry cards 5 shall be revoked by the Department of Public Health if the Department of Public Health is notified by the Secretary of 6 State that a cardholder has been convicted of an excluded 7 offense. For purposes of enforcing this subsection, the 8 9 Department of Public Health and Secretary of State shall 10 establish a system by which violations reported to the 11 Secretary of State under paragraph 18 of subsection (a) of Section 6-205 of the Illinois Vehicle Code shall be shared with 12 13 the Department of Public Health. (Source: P.A. 98-122, eff. 1-1-14; 98-775, eff. 1-1-15; 99-519, 14 15 eff. 6-30-16.)

16 (410 ILCS 130/62 new)

17 <u>Sec. 62. Opioid Alternative Pilot Program.</u>

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

1	card to the licensed dispensing organization specified in his
2	or her application. The dispensing organization shall verify
3	the person's status as an Opioid Alternative Pilot Program
4	participant through the Department of Public Health's online
5	verification system.
6	(b) The Opioid Alternative Pilot Program shall be limited
7	to participation by Illinois residents age 21 and older.
8	(c) The Department of Financial and Professional
9	Regulation shall specify that all licensed dispensing
10	organizations participating in the Opioid Alternative Pilot
11	Program use the Illinois Cannabis Tracking System. The
12	Department of Public Health shall establish and maintain the
13	Illinois Cannabis Tracking System. The Illinois Cannabis
1 /	Tracking Custom shall be used to collect information shout all

14 Tracking System shall be used to collect information about all 15 persons participating in the Opioid Alternative Pilot Program 16 and shall be used to track the sale of medical cannabis for 17 verification purposes.

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

24 <u>The Illinois Cannabis Tracking System shall be accessible</u>
 25 <u>to the Department of Financial and Professional Regulation,</u>
 26 <u>Department of Public Health, Department of Agriculture, and the</u>

1 Illinois State Police.

2	The Department of Financial and Professional Regulation in
3	collaboration with the Department of Public Health shall
4	specify the data requirements for the Opioid Alternative Pilot
5	Program by licensed dispensing organizations; including, but
6	not limited to, the participant's full legal name, address, and
7	date of birth, date on which the Opioid Alternative Pilot
8	Program certification was issued, length of the participation
9	in the Program, including the start and end date to purchase
10	medical cannabis, name of the issuing physician, copy of the
11	participant's current driver's license or State identification
12	card, and phone number.
13	The Illinois Cannabis Tracking System shall provide
14	verification of a person's participation in the Opioid
15	Alternative Pilot Program for law enforcement at any time and
16	on any day.
17	(d) The certification for Opioid Alternative Pilot Program
18	participant must be issued by a physician licensed to practice
19	in Illinois under the Medical Practice Act of 1987 and in good
20	standing who holds a controlled substances license under
21	Article III of the Illinois Controlled Substance Act.
22	The certification for an Opioid Alternative Pilot Program
23	participant shall be written within 90 days before the
24	participant submits his or her certification to the dispensing

- 25 <u>organization</u>.
- 26 <u>The written certification uploaded to the Illinois</u>

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1	Cannabis Tracking System shall be accessible to the Department
2	of Public Health.
3	(e) Upon verification of the individual's valid
4	certification and enrollment in the Illinois Cannabis Tracking
5	System, the dispensing organization may dispense the medical
6	cannabis, in amounts not exceeding 2.5 ounces of medical
7	cannabis per 14-day period to the participant at the
8	participant's specified dispensary for no more than 90 days.
9	An Opioid Alternative Pilot Program participant shall not
10	be registered as a medical cannabis cardholder. The dispensing
11	organization shall verify that the person is not an active
12	registered qualifying patient prior to enrollment in the Opioid
13	Alternative Pilot Program and each time medical cannabis is
14	dispensed.
15	Upon receipt of a written certification under the Opioid
16	Alternative Pilot Program, the Department of Public Health
17	shall electronically forward the patient's identification
18	information to the Prescription Monitoring Program established
19	under the Illinois Controlled Substances Act and certify that
20	the individual is permitted to engage in the medical use of
21	cannabis. For the purposes of patient care, the Prescription
22	Monitoring Program shall make a notation on the person's
23	prescription record stating that the person has a written
24	certification under the Opioid Alternative Pilot Program and is
25	a patient who is entitled to the lawful medical use of
26	cannabis. If the person is no longer authorized to engage in

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1	the medical use of cannabis, the Department of Public Health
2	shall notify the Prescription Monitoring Program and
3	Department of Human Services to remove the notation from the
4	person's record. The Department of Human Services and the
5	Prescription Monitoring Program shall establish a system by
6	which the information may be shared electronically. This
7	confidential list may not be combined or linked in any manner
8	with any other list or database except as provided in this
9	Section.
10	(f) An Opioid Alternative Pilot Program participant shall
11	not be considered a qualifying patient with a debilitating
12	medical condition under this Act and shall be provided access
13	to medical cannabis solely for the duration of the
14	participant's certification. Nothing in this Section shall be
15	construed to limit or prohibit an Opioid Alternative Pilot
16	Program participant who has a debilitating medical condition
17	from applying to the Compassionate Use of Medical Cannabis
18	<u>Pilot Program.</u>
19	(g) A person with a provisional registration under Section
20	55 shall not be considered an Opioid Alternative Pilot Program
21	participant.
22	(h) The Department of Financial and Professional
23	Regulation and the Department of Public Health shall submit
24	emergency rulemaking to implement the changes made by this
25	amendatory Act of the 100th General Assembly by December 1,
26	2018. The Department of Financial and Professional Regulation,

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1	the Department of Agriculture, the Department of Human
2	Services, the Department of Public Health, and the Illinois
3	State Police shall utilize emergency purchase authority for 12
4	months after the effective date of this amendatory Act of the
5	100th General Assembly for the purpose of implementing the
6	changes made by this amendatory Act of the 100th General
7	Assembly.
8	(i) Dispensing organizations are not authorized to
9	dispense medical cannabis to Opioid Alternative Pilot Program
10	participants until administrative rules are approved by the
11	Joint Committee on Administrative Rules and go into effect.
12	(j) The provisions of this Section are inoperative on and
13	after July 1, 2020.
14	(410 ILCS 130/65)
15	(Section scheduled to be repealed on July 1, 2020)
16	Sec. 65. Denial of registry identification cards.
17	(a) The Department of Public Health may deny an application
18	or renewal of a qualifying patient's registry identification
19	card only if the applicant:
20	(1) did not provide the required information and
21	materials;
22	(2) previously had a registry identification card
23	revoked;
24	(3) did not meet the requirements of this Act; \overline{or}
25	(4) provided false or falsified information; or-

- 1 (5) violated any requirement of this Act. (b) (Blank). Except as provided in subsection (b-5) of this 2 3 Section, no person who has been convicted of a felony under the 4 Illinois Controlled Substances Act, Cannabis Control Act, or 5 Methamphetamine Control and Community Protection Act, or similar provision in a local ordinance or other jurisdiction is 6 eligible to receive a registry identification card. 7 (b-5) (Blank). If a person was convicted of a felony under 8 9 the Cannabis Control Act or a similar provision of a local 10 ordinance or of a law of another jurisdiction, and the action 11 warranting that felony is no longer considered a felony after the effective date of this amendatory Act of the 99th General 12 13 Assembly, that person shall be eligible to receive a registry identification card. 14 15 (c) The Department of Public Health may deny an application 16 or renewal for a designated caregiver chosen by a qualifying patient whose registry identification card was granted only if: 17 (1) the designated caregiver does not meet the 18 requirements of subsection (i) of Section 10; 19 20 (2) the applicant did not provide the information required; 21 22 (3) the prospective patient's application was denied;
 - 23 (4) the designated caregiver previously had a registry
 24 identification card revoked; or
 - (5) the applicant or the designated caregiver provided
 false or falsified information; or.

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(6) violated any requirement of this Act.

(d) (Blank). The Department of Public Health through the 2 Department of State Police shall conduct a background check of 3 4 the prospective qualifying patient and designated caregiver in 5 order to carry out this Section. The Department of State Police shall charge a fee for conducting the criminal history record 6 check, which shall be deposited in the State Police Services 7 Fund and shall not exceed the actual cost of the record check. 8 Each person applying as a qualifying patient or a designated 9 10 caregiver shall submit a full set of fingerprints to the 11 Department of State Police for the purpose of obtaining a State and federal criminal records check. These fingerprints shall be 12 13 checked against the fingerprint records now and hereafter, to the extent allowed by law, filed in the Department of State 14 15 Police and Federal Bureau of Investigation criminal history 16 records databases. The Department of State Police shall furnish, following positive identification, all Illinois 17 conviction information to the Department of Public Health. The 18 Department of Public Health may waive the submission of a 19 20 qualifying patient's complete fingerprints based on (1) the severity of the patient's illness and (2) the inability of the 21 qualifying patient to supply those fingerprints, provided that 22 a complete criminal background check is conducted by the 23 Department of State Police prior to the issuance of a registry 24 25 identification card.

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(e) The Department of Public Health shall notify the

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qualifying patient who has designated someone to serve as his or her designated caregiver if a registry identification card will not be issued to the designated caregiver.

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

8 (Source: P.A. 98-122, eff. 1-1-14; 98-1172, eff. 1-12-15; 9 99-697, eff. 7-29-16.)

10 (410 ILCS 130/75)

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

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

14 (a) The following notifications and Department of Public15 Health responses are required:

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

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

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

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

(b) When a cardholder notifies the Department of Public 7 8 Health of items listed in subsection (a), but remains eligible 9 under this Act, the Department of Public Health shall issue the 10 cardholder a new registry identification card with a new random 11 alphanumeric identification number within 15 business days of receiving the updated information and a fee as specified in 12 13 Department of Public Health rules. If the person notifying the Department of Public Health is a registered qualifying patient, 14 15 Department shall also issue his or her registered the 16 designated caregiver, if any, a new registry identification card within 15 business days of receiving the updated 17 18 information.

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

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(d) A cardholder who fails to make a notification to the

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Department of Public Health that is required by this Section is subject to a civil infraction, punishable by a penalty of no more than \$150.

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

9 (f) If the registered qualifying patient's certifying 10 physician notifies the Department in writing that either the registered qualifying patient has ceased to suffer from a 11 medical condition, 12 debilitating that the bona fide physician-patient relationship has terminated, or 13 that 14 continued use of medical cannabis would result in 15 contraindication with the patient's other medication, the card 16 shall become null and void. However, the registered qualifying patient shall have 15 days to destroy his or her remaining 17 18 medical cannabis and related paraphernalia.

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

20 (410 ILCS 130/130)

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

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

(a) The Department of Financial and Professional
 Regulation shall implement the provisions of this Section by

1 rule.

2 (b) A dispensing organization shall maintain operating 3 documents which shall include procedures for the oversight of 4 the registered dispensing organization and procedures to 5 ensure accurate recordkeeping.

6 (c) A dispensing organization shall implement appropriate 7 security measures, as provided by rule, to deter and prevent 8 the theft of cannabis and unauthorized entrance into areas 9 containing cannabis.

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

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

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

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(g) The area in a dispensing organization where medical

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cannabis is stored can only be accessed by dispensing organization agents working for the dispensing organization, Department of Financial and Professional Regulation staff performing inspections, law enforcement or other emergency personnel, and contractors working on jobs unrelated to medical cannabis, such as installing or maintaining security devices or performing electrical wiring.

8 (h) A dispensing organization may not dispense more than 9 2.5 ounces of cannabis to a registered qualifying patient, 10 directly or via a designated caregiver, in any 14-day period 11 unless the qualifying patient has a Department of Public 12 Health-approved quantity waiver.

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

(1) that the registry identification card presented tothe registered dispensing organization is valid;

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

(3) that the dispensing organization is the designated
 dispensing organization for the registered qualifying
 patient who is obtaining the cannabis directly or via his

1	or her designated caregiver; and
2	(4) that the registered qualifying patient has not
3	exceeded his or her adequate supply.
4	(i-5) A dispensing organization may dispense medical
5	cannabis to an Opioid Alternative Pilot Program participant
6	under Section 62 and to a person presenting proof of
7	provisional registration under Section 55. Before dispensing
8	medical cannabis, the dispensing organization shall comply
9	with the requirements of Section 62 or Section 55, whichever is
10	applicable, and verify the following:
11	(1) that the written certification presented to the
12	registered dispensing organization is valid and an
13	original document;
14	(2) that the person presenting the written
15	certification is the person identified on the written
16	certification; and
17	(3) that the participant has not exceeded his or her
18	adequate supply.
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 (1) 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 to the unlawful possession of cannabis, the Department of 12 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 proper with regard to the registration of any person issued 17 under this Act to operate a dispensing organization or act as a 18 dispensing organization agent, including imposing fines not to 19 20 exceed \$10,000 for each violation, for any violations of this Act and rules adopted in accordance with this Act. 21 The 22 procedures for disciplining а registered dispensing 23 be determined by rule. All final organization shall 24 administrative decisions of the Department of Financial and 25 Professional Regulation are subject to judicial review under the Administrative Review Law and its rules. 26 The term

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"administrative decision" is defined as in Section 3-101 of the
 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;

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

(3) the nature of the debilitating medical conditionsof the qualifying patients;

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

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(5) the number of physicians providing written 1 certifications for qualifying patients; and 2 (6) the number of registered medical cannabis 3 4 cultivation centers or registered dispensing 5 organizations;-(7) the number of Opioid Alternative Pilot Program 6 7 participants. (Source: P.A. 98-122, eff. 1-1-14; revised 11-8-17.) 8 9 Section 99. Effective date. This Act takes effect upon

10 becoming law.".