

101ST GENERAL ASSEMBLY State of Illinois 2019 and 2020 HB3097

by Rep. Theresa Mah

SYNOPSIS AS INTRODUCED:

305 ILCS 5/12-4.52 new

Amends the Illinois Public Aid Code. Requires the Department of Human Services to develop in collaboration with an academic institution a program designed to provide prescribing physicians under the medical assistance program with an evidence-based, non-commercial source of the latest objective information about pharmaceuticals. Provides that the prescriber education program shall consist of a web-based curriculum and an academic educator outreach and shall contract with clinical pharmacists to provide scheduled visits with prescribing physicians to update them on the latest research concerning medication usage and new updates on disease states in an unbiased manner. Provides that education provided under the prescriber education program shall include disease-based educational modules on the treatment of chronic non-cancer pain, diabetes, hypertension, and other specified diseases and that such modules shall be reviewed and updated on an annual or as-needed basis. Provides that additional resources provided under the prescribing education program shall include, but not be limited to: (i) a drug information response center available to prescribing physicians that provides thorough and timely in-depth answers to any questions a prescribing physician may have within 48 hours after a question is received; and (ii) information on drug utilization trends within individual and group practices.

LRB101 00211 KTG 45213 b

FISCAL NOTE ACT MAY APPLY

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1 AN ACT concerning public aid.

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

- Section 5. The Illinois Public Aid Code is amended by adding Section 12-4.52 as follows:
- 6 (305 ILCS 5/12-4.52 new)
- 7 <u>Sec. 12-4.52</u>. Prescriber education.
- (a) The Department of Human Services shall develop in 8 9 collaboration with an academic institution a program designed to provide prescribing physicians under the medical assistance 10 program with an evidence-based, non-commercial source of the 11 12 latest objective information about pharmaceuticals. Information shall be presented to prescribing physicians by 13 14 specially trained pharmacists, nurses, or other health professionals to assist prescribing physicians in making 15 16 appropriate therapeutic recommendations.
 - (b) The prescriber education program shall consist of 2 components: a web-based curriculum and an academic educator outreach. The program shall contract with clinical pharmacists to provide scheduled visits with prescribing physicians to update them on the latest research concerning medication usage and new updates on disease states in an unbiased manner.
- 23 (c) Education provided under the prescriber education

| program | m snall include, but not be limited to, disease-based |
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| educat | ional modules on the treatment of chronic non-cancer |
| pain, | diabetes, hypertension, hyperlipidemia, respiratory |
| syncyt | ial virus, and nicotine dependence. New modules may be |
| create | d periodically as needed and existing module content |
| shall } | be reviewed and updated on an annual or as-needed basis. |
| Educat | ional modules provided under the program shall provide |
| prescr | ibing physicians with continuing medical education |
| credit | <u>.</u> |
| <u>(d</u> |) Additional resources provided under the prescriber |
| educat | ion program shall include, but not be limited to, the |
| follow | ing: |
| | (1) a drug information response center available to |
| pre | escribing physicians that provides thorough and timely |
| <u>in</u> · | -depth answers to any questions a prescribing physician |
| <u>ma'</u> | y have within 48 hours after a question is received; and |
| | (2) information on drug utilization trends within |

individual and group practices.