

1 AN ACT concerning professional regulation.

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

4 Section 5. The Pharmacy Practice Act is amended by changing
5 Section 4 as follows:

6 (225 ILCS 85/4) (from Ch. 111, par. 4124)

7 (Section scheduled to be repealed on January 1, 2018)

8 Sec. 4. Exemptions. Nothing contained in any Section of
9 this Act shall apply to, or in any manner interfere with:

10 (a) the lawful practice of any physician licensed to
11 practice medicine in all of its branches, dentist, podiatrist,
12 veterinarian, or therapeutically or diagnostically certified
13 optometrist within the limits of his or her license, or prevent
14 him or her from supplying to his or her bona fide patients such
15 drugs, medicines, or poisons as may seem to him appropriate;

16 (b) the sale of compressed gases;

17 (c) the sale of patent or proprietary medicines and
18 household remedies when sold in original and unbroken packages
19 only, if such patent or proprietary medicines and household
20 remedies be properly and adequately labeled as to content and
21 usage and generally considered and accepted as harmless and
22 nonpoisonous when used according to the directions on the
23 label, and also do not contain opium or coca leaves, or any

1 compound, salt or derivative thereof, or any drug which,
2 according to the latest editions of the following authoritative
3 pharmaceutical treatises and standards, namely, The United
4 States Pharmacopoeia/National Formulary (USP/NF), the United
5 States Dispensatory, and the Accepted Dental Remedies of the
6 Council of Dental Therapeutics of the American Dental
7 Association or any or either of them, in use on the effective
8 date of this Act, or according to the existing provisions of
9 the Federal Food, Drug, and Cosmetic Act and Regulations of the
10 Department of Health and Human Services, Food and Drug
11 Administration, promulgated thereunder now in effect, is
12 designated, described or considered as a narcotic, hypnotic,
13 habit forming, dangerous, or poisonous drug;

14 (d) the sale of poultry and livestock remedies in original
15 and unbroken packages only, labeled for poultry and livestock
16 medication;

17 (e) the sale of poisonous substances or mixture of
18 poisonous substances, in unbroken packages, for nonmedicinal
19 use in the arts or industries or for insecticide purposes;
20 provided, they are properly and adequately labeled as to
21 content and such nonmedicinal usage, in conformity with the
22 provisions of all applicable federal, state and local laws and
23 regulations promulgated thereunder now in effect relating
24 thereto and governing the same, and those which are required
25 under such applicable laws and regulations to be labeled with
26 the word "Poison", are also labeled with the word "Poison"

1 printed thereon in prominent type and the name of a readily
2 obtainable antidote with directions for its administration;

3 (f) the delegation of limited prescriptive authority by a
4 physician licensed to practice medicine in all its branches to
5 a physician assistant under Section 7.5 of the Physician
6 Assistant Practice Act of 1987. This delegated authority under
7 Section 7.5 of the Physician Assistant Practice Act of 1987
8 may, but is not required to, include prescription of controlled
9 substances, as defined in Article II of the Illinois Controlled
10 Substances Act, in accordance with a written supervision
11 agreement ~~guidelines~~; and

12 (g) The delegation of prescriptive authority by a physician
13 licensed to practice medicine in all its branches or a licensed
14 podiatrist to an advanced practice nurse in accordance with a
15 written collaborative agreement under Sections ~~Section~~ 65-35
16 and 65-40 of the Nurse Practice Act. ~~This authority, which is~~
17 ~~delegated under Section 65-40 of the Nurse Practice Act, may~~
18 ~~but is not required to include the prescription of Schedule~~
19 ~~III, IV, or V controlled substances as defined in Article II of~~
20 ~~the Illinois Controlled Substances Act.~~

21 (Source: P.A. 95-639, eff. 10-5-07.)

22 Section 10. The Physician Assistant Practice Act is amended
23 by changing Sections 4, 7.5, and 21 as follows:

24 (225 ILCS 95/4) (from Ch. 111, par. 4604)

1 (Section scheduled to be repealed on January 1, 2018)

2 Sec. 4. In this Act:

3 1. "Department" means the Department of Financial and
4 Professional Regulation.

5 2. "Secretary" means the Secretary of Financial and
6 Professional Regulation.

7 3. "Physician assistant" means any person not a physician
8 who has been certified as a physician assistant by the National
9 Commission on the Certification of Physician Assistants or
10 equivalent successor agency and performs procedures under the
11 supervision of a physician as defined in this Act. A physician
12 assistant may perform such procedures within the specialty of
13 the supervising physician, except that such physician shall
14 exercise such direction, supervision and control over such
15 physician assistants as will assure that patients shall receive
16 quality medical care. Physician assistants shall be capable of
17 performing a variety of tasks within the specialty of medical
18 care under the supervision of a physician. Supervision of the
19 physician assistant shall not be construed to necessarily
20 require the personal presence of the supervising physician at
21 all times at the place where services are rendered, as long as
22 there is communication available for consultation by radio,
23 telephone or telecommunications within established guidelines
24 as determined by the physician/physician assistant team. The
25 supervising physician may delegate tasks and duties to the
26 physician assistant. Delegated tasks or duties shall be

1 consistent with physician assistant education, training, and
2 experience. The delegated tasks or duties shall be specific to
3 the practice setting and shall be implemented and reviewed
4 under a written supervision agreement ~~guidelines~~ established
5 by the physician or physician/physician assistant team. A
6 physician assistant, acting as an agent of the physician, shall
7 be permitted to transmit the supervising physician's orders as
8 determined by the institution's by-laws, policies, procedures,
9 or job description within which the physician/physician
10 assistant team practices. Physician assistants shall practice
11 only in accordance with a written supervision agreement ~~within~~
12 ~~the established guidelines.~~

13 4. "Board" means the Medical Licensing Board constituted
14 under the Medical Practice Act of 1987.

15 5. "Disciplinary Board" means the Medical Disciplinary
16 Board constituted under the Medical Practice Act of 1987.

17 6. "Physician" means, for purposes of this Act, a person
18 licensed to practice medicine in all its branches under the
19 Medical Practice Act of 1987.

20 7. "Supervising Physician" means, for the purposes of this
21 Act, the primary supervising physician of a physician
22 assistant, who, within his specialty and expertise may delegate
23 a variety of tasks and procedures to the physician assistant.
24 Such tasks and procedures shall be delegated in accordance with
25 a written supervision agreement ~~within established guidelines.~~
26 The supervising physician maintains the final responsibility

1 for the care of the patient and the performance of the
2 physician assistant.

3 8. "Alternate supervising physician" means, for the
4 purpose of this Act, any physician designated by the
5 supervising physician to provide supervision in the event that
6 he or she is unable to provide that supervision. The Department
7 may further define "alternate supervising physician" by rule.

8 The alternate supervising physicians shall maintain all
9 the same responsibilities as the supervising physician.
10 Nothing in this Act shall be construed as relieving any
11 physician of the professional or legal responsibility for the
12 care and treatment of persons attended by him or by physician
13 assistants under his supervision. Nothing in this Act shall be
14 construed as to limit the reasonable number of alternate
15 supervising physicians, provided they are designated by the
16 supervising physician.

17 9. "Address of record" means the designated address
18 recorded by the Department in the applicant's or licensee's
19 application file or license file maintained by the Department's
20 licensure maintenance unit. It is the duty of the applicant or
21 licensee to inform the Department of any change of address, and
22 such changes must be made either through the Department's
23 website or by contacting the Department's licensure
24 maintenance unit.

25 (Source: P.A. 95-703, eff. 12-31-07.)

1 (225 ILCS 95/7.5)

2 (Section scheduled to be repealed on January 1, 2018)

3 Sec. 7.5. Prescriptions; written supervision agreements;
4 prescriptive authority.

5 (a) A written supervision agreement is required for all
6 physician assistants to practice in the State.

7 (1) A written supervision agreement shall describe the
8 working relationship of the physician assistant with the
9 supervising physician and shall authorize the categories
10 of care, treatment, or procedures to be performed by the
11 physician assistant. The written supervision agreement
12 shall be defined to promote the exercise of professional
13 judgment by the physician assistant commensurate with his
14 or her education and experience. The services to be
15 provided by the physician assistant shall be services that
16 the supervising physician is authorized to and generally
17 provides to his or her patients in the normal course of his
18 or her clinical medical practice. The written supervision
19 agreement need not describe the exact steps that a
20 physician assistant must take with respect to each specific
21 condition, disease, or symptom but must specify which
22 authorized procedures require the presence of the
23 supervising physician as the procedures are being
24 performed. The supervision relationship under a written
25 supervision agreement shall not be construed to require the
26 personal presence of a physician at all times at the place

1 where services are rendered. Methods of communication
2 shall be available for consultation with the supervising
3 physician in person or by telecommunications in accordance
4 with established written guidelines as set forth in the
5 written supervision agreement.

6 (2) The written supervision agreement shall be
7 adequate if a physician does each of the following:

8 (A) Participates in the joint formulation and
9 joint approval of orders or guidelines with the
10 physician assistant and he or she periodically reviews
11 such orders and the services provided patients under
12 such orders in accordance with accepted standards of
13 medical practice and physician assistant practice.

14 (B) Meets in person with the physician assistant at
15 least once a month to provide supervision.

16 (3) A copy of the signed, written supervision agreement
17 must be available to the Department upon request from both
18 the physician assistant and the supervising physician.

19 (4) A physician assistant shall inform each
20 supervising physician of all written supervision
21 agreements he or she has signed and provide a copy of these
22 to any supervising physician upon request.

23 (b) A supervising physician may, but is not required to,
24 delegate prescriptive authority to a physician assistant as
25 part of a written supervision agreement. This authority may,
26 but is not required to, include prescription of, selection of,

1 orders for, administration of, storage of, acceptance of
2 samples of, and dispensing over the counter medications, legend
3 drugs, medical gases, and controlled substances categorized as
4 Schedule III through V controlled substances, as defined in
5 Article II of the Illinois Controlled Substances Act, and other
6 preparations, including, but not limited to, botanical and
7 herbal remedies. The supervising physician must have a valid,
8 current Illinois controlled substance license and federal
9 registration with the Drug Enforcement Agency to delegate the
10 authority to prescribe controlled substances. ~~A supervising~~
11 ~~physician may delegate limited prescriptive authority to a~~
12 ~~physician assistant. This authority may, but is not required~~
13 ~~to, include prescription and dispensing of legend drugs and~~
14 ~~legend controlled substances categorized as Schedule III, IV,~~
15 ~~or V controlled substances, as defined in Article II of the~~
16 ~~Illinois Controlled Substances Act, as delegated in the written~~
17 ~~guidelines required by this Act.~~

18 (1) To prescribe Schedule III, IV, or V controlled
19 substances under this Section, a physician assistant must
20 obtain a mid-level practitioner controlled substances
21 license. Medication orders issued by a physician assistant
22 shall be reviewed periodically by the supervising
23 physician.

24 (2) The supervising physician shall file with the
25 Department notice of delegation of prescriptive authority
26 to a physician assistant and termination of delegation,

1 specifying the authority delegated or terminated. Upon
2 receipt of this notice delegating authority to prescribe
3 Schedule III, IV, or V controlled substances, the physician
4 assistant shall be eligible to register for a mid-level
5 practitioner controlled substances license under Section
6 303.05 of the Illinois Controlled Substances Act. Nothing
7 in this Act shall be construed to limit the delegation of
8 tasks or duties by the supervising physician to a nurse or
9 other appropriately trained personnel.

10 (3) In addition to the requirements of subsection (b)
11 of this Section, a supervising physician may, but is not
12 required to, delegate authority to a physician assistant to
13 prescribe Schedule II controlled substances, if all of the
14 following conditions apply:

15 (A) No more than 5 Schedule II controlled
16 substances by oral dosage may be delegated.

17 (B) Any delegation must be controlled substances
18 that the supervising physician prescribes.

19 (C) Any prescription must be limited to no more
20 than a 30-day oral dosage, with any continuation
21 authorized only after prior approval of the
22 supervising physician.

23 (c) Nothing in this Act shall be construed to limit the
24 delegation of tasks or duties by a physician to a licensed
25 practical nurse, a registered professional nurse, or other
26 persons. The Department shall establish by rule the minimum

1 ~~requirements for written guidelines to be followed under this~~
2 ~~Section.~~

3 (Source: P.A. 90-116, eff. 7-14-97; 90-818, eff. 3-23-99.)

4 (225 ILCS 95/21) (from Ch. 111, par. 4621)

5 (Section scheduled to be repealed on January 1, 2018)

6 Sec. 21. Grounds for disciplinary action.

7 (a) The Department may refuse to issue or to renew, or may
8 revoke, suspend, place on probation, censure or reprimand, or
9 take other disciplinary or non-disciplinary action with regard
10 to any license issued under this Act as the Department may deem
11 proper, including the issuance of fines not to exceed \$10,000
12 for each violation, for any one or combination of the following
13 causes:

14 (1) Material misstatement in furnishing information to
15 the Department.

16 (2) Violations of this Act, or the rules adopted under
17 this Act.

18 (3) Conviction of or entry of a plea of guilty or nolo
19 contendere to any crime that is a felony under the laws of
20 the United States or any state or territory thereof or that
21 is a misdemeanor of which an essential element is
22 dishonesty or that is directly related to the practice of
23 the profession.

24 (4) Making any misrepresentation for the purpose of
25 obtaining licenses.

1 (5) Professional incompetence.

2 (6) Aiding or assisting another person in violating any
3 provision of this Act or its rules.

4 (7) Failing, within 60 days, to provide information in
5 response to a written request made by the Department.

6 (8) Engaging in dishonorable, unethical, or
7 unprofessional conduct, as defined by rule, of a character
8 likely to deceive, defraud, or harm the public.

9 (9) Habitual or excessive use or addiction to alcohol,
10 narcotics, stimulants, or any other chemical agent or drug
11 that results in a physician assistant's inability to
12 practice with reasonable judgment, skill, or safety.

13 (10) Discipline by another U.S. jurisdiction or
14 foreign nation, if at least one of the grounds for
15 discipline is the same or substantially equivalent to those
16 set forth in this Section.

17 (11) Directly or indirectly giving to or receiving from
18 any person, firm, corporation, partnership, or association
19 any fee, commission, rebate or other form of compensation
20 for any professional services not actually or personally
21 rendered.

22 (12) A finding by the Disciplinary Board that the
23 licensee, after having his or her license placed on
24 probationary status has violated the terms of probation.

25 (13) Abandonment of a patient.

26 (14) Willfully making or filing false records or

1 reports in his or her practice, including but not limited
2 to false records filed with state agencies or departments.

3 (15) Willfully failing to report an instance of
4 suspected child abuse or neglect as required by the Abused
5 and Neglected Child Reporting Act.

6 (16) Physical illness, or mental illness or impairment
7 that results in the inability to practice the profession
8 with reasonable judgment, skill, or safety, including, but
9 not limited to, deterioration through the aging process or
10 loss of motor skill.

11 (17) Being named as a perpetrator in an indicated
12 report by the Department of Children and Family Services
13 under the Abused and Neglected Child Reporting Act, and
14 upon proof by clear and convincing evidence that the
15 licensee has caused a child to be an abused child or
16 neglected child as defined in the Abused and Neglected
17 Child Reporting Act.

18 (18) (Blank).

19 (19) Gross negligence resulting in permanent injury or
20 death of a patient.

21 (20) Employment of fraud, deception or any unlawful
22 means in applying for or securing a license as a physician
23 assistant.

24 (21) Exceeding the authority delegated to him or her by
25 his or her supervising physician in a written supervision
26 agreement ~~guidelines~~ ~~established~~ ~~by~~ ~~the~~

1 ~~physician/physician assistant team.~~

2 (22) Immoral conduct in the commission of any act, such
3 as sexual abuse, sexual misconduct or sexual exploitation
4 related to the licensee's practice.

5 (23) Violation of the Health Care Worker Self-Referral
6 Act.

7 (24) Practicing under a false or assumed name, except
8 as provided by law.

9 (25) Making a false or misleading statement regarding
10 his or her skill or the efficacy or value of the medicine,
11 treatment, or remedy prescribed by him or her in the course
12 of treatment.

13 (26) Allowing another person to use his or her license
14 to practice.

15 (27) Prescribing, selling, administering,
16 distributing, giving, or self-administering a drug
17 classified as a controlled substance (designated product)
18 or narcotic for other than medically-accepted therapeutic
19 purposes.

20 (28) Promotion of the sale of drugs, devices,
21 appliances, or goods provided for a patient in a manner to
22 exploit the patient for financial gain.

23 (29) A pattern of practice or other behavior that
24 demonstrates incapacity or incompetence to practice under
25 this Act.

26 (30) Violating State or federal laws or regulations

1 relating to controlled substances or other legend drugs.

2 (31) Exceeding the ~~limited~~ prescriptive authority
3 delegated by the supervising physician or violating the
4 written supervision agreement ~~guidelines~~ delegating that
5 authority.

6 (32) Practicing without providing to the Department a
7 notice of supervision or delegation of prescriptive
8 authority.

9 (b) The Department may, without a hearing, refuse to issue
10 or renew or may suspend the license of any person who fails to
11 file a return, or to pay the tax, penalty or interest shown in
12 a filed return, or to pay any final assessment of the tax,
13 penalty, or interest as required by any tax Act administered by
14 the Illinois Department of Revenue, until such time as the
15 requirements of any such tax Act are satisfied.

16 (c) The determination by a circuit court that a licensee is
17 subject to involuntary admission or judicial admission as
18 provided in the Mental Health and Developmental Disabilities
19 Code operates as an automatic suspension. The suspension will
20 end only upon a finding by a court that the patient is no
21 longer subject to involuntary admission or judicial admission
22 and issues an order so finding and discharging the patient, and
23 upon the recommendation of the Disciplinary Board to the
24 Secretary that the licensee be allowed to resume his or her
25 practice.

26 (d) In enforcing this Section, the Department upon a

1 showing of a possible violation may compel an individual
2 licensed to practice under this Act, or who has applied for
3 licensure under this Act, to submit to a mental or physical
4 examination, or both, as required by and at the expense of the
5 Department. The Department may order the examining physician to
6 present testimony concerning the mental or physical
7 examination of the licensee or applicant. No information shall
8 be excluded by reason of any common law or statutory privilege
9 relating to communications between the licensee or applicant
10 and the examining physician. The examining physicians shall be
11 specifically designated by the Department. The individual to be
12 examined may have, at his or her own expense, another physician
13 of his or her choice present during all aspects of this
14 examination. Failure of an individual to submit to a mental or
15 physical examination, when directed, shall be grounds for
16 suspension of his or her license until the individual submits
17 to the examination if the Department finds, after notice and
18 hearing, that the refusal to submit to the examination was
19 without reasonable cause.

20 If the Department finds an individual unable to practice
21 because of the reasons set forth in this Section, the
22 Department may require that individual to submit to care,
23 counseling, or treatment by physicians approved or designated
24 by the Department, as a condition, term, or restriction for
25 continued, reinstated, or renewed licensure to practice; or, in
26 lieu of care, counseling, or treatment, the Department may file

1 a complaint to immediately suspend, revoke, or otherwise
2 discipline the license of the individual. An individual whose
3 license was granted, continued, reinstated, renewed,
4 disciplined, or supervised subject to such terms, conditions,
5 or restrictions, and who fails to comply with such terms,
6 conditions, or restrictions, shall be referred to the Secretary
7 for a determination as to whether the individual shall have his
8 or her license suspended immediately, pending a hearing by the
9 Department.

10 In instances in which the Secretary immediately suspends a
11 person's license under this Section, a hearing on that person's
12 license must be convened by the Department within 30 days after
13 the suspension and completed without appreciable delay. The
14 Department shall have the authority to review the subject
15 individual's record of treatment and counseling regarding the
16 impairment to the extent permitted by applicable federal
17 statutes and regulations safeguarding the confidentiality of
18 medical records.

19 An individual licensed under this Act and affected under
20 this Section shall be afforded an opportunity to demonstrate to
21 the Department that he or she can resume practice in compliance
22 with acceptable and prevailing standards under the provisions
23 of his or her license.

24 (Source: P.A. 95-703, eff. 12-31-07.)

25 Section 15. The Illinois Controlled Substances Act is

1 amended by changing Sections 102 and 303.05 as follows:

2 (720 ILCS 570/102) (from Ch. 56 1/2, par. 1102)

3 Sec. 102. Definitions. As used in this Act, unless the
4 context otherwise requires:

5 (a) "Addict" means any person who habitually uses any drug,
6 chemical, substance or dangerous drug other than alcohol so as
7 to endanger the public morals, health, safety or welfare or who
8 is so far addicted to the use of a dangerous drug or controlled
9 substance other than alcohol as to have lost the power of self
10 control with reference to his addiction.

11 (b) "Administer" means the direct application of a
12 controlled substance, whether by injection, inhalation,
13 ingestion, or any other means, to the body of a patient,
14 research subject, or animal (as defined by the Humane
15 Euthanasia in Animal Shelters Act) by:

16 (1) a practitioner (or, in his presence, by his
17 authorized agent),

18 (2) the patient or research subject at the lawful
19 direction of the practitioner, or

20 (3) a euthanasia technician as defined by the Humane
21 Euthanasia in Animal Shelters Act.

22 (c) "Agent" means an authorized person who acts on behalf
23 of or at the direction of a manufacturer, distributor, or
24 dispenser. It does not include a common or contract carrier,
25 public warehouseman or employee of the carrier or warehouseman.

1 (c-1) "Anabolic Steroids" means any drug or hormonal
2 substance, chemically and pharmacologically related to
3 testosterone (other than estrogens, progestins, and
4 corticosteroids) that promotes muscle growth, and includes:

- 5 (i) boldenone,
- 6 (ii) chlorotestosterone,
- 7 (iii) chostebol,
- 8 (iv) dehydrochlormethyltestosterone,
- 9 (v) dihydrotestosterone,
- 10 (vi) drostanolone,
- 11 (vii) ethylestrenol,
- 12 (viii) fluoxymesterone,
- 13 (ix) formebulone,
- 14 (x) mesterolone,
- 15 (xi) methandienone,
- 16 (xii) methandranone,
- 17 (xiii) methandriol,
- 18 (xiv) methandrostenolone,
- 19 (xv) methenolone,
- 20 (xvi) methyltestosterone,
- 21 (xvii) mibolerone,
- 22 (xviii) nandrolone,
- 23 (xix) norethandrolone,
- 24 (xx) oxandrolone,
- 25 (xxi) oxymesterone,
- 26 (xxii) oxymetholone,

1 (xxiii) stanolone,
2 (xxiv) stanozolol,
3 (xxv) testolactone,
4 (xxvi) testosterone,
5 (xxvii) trenbolone, and
6 (xxviii) any salt, ester, or isomer of a drug or
7 substance described or listed in this paragraph, if
8 that salt, ester, or isomer promotes muscle growth.

9 Any person who is otherwise lawfully in possession of an
10 anabolic steroid, or who otherwise lawfully manufactures,
11 distributes, dispenses, delivers, or possesses with intent to
12 deliver an anabolic steroid, which anabolic steroid is
13 expressly intended for and lawfully allowed to be administered
14 through implants to livestock or other nonhuman species, and
15 which is approved by the Secretary of Health and Human Services
16 for such administration, and which the person intends to
17 administer or have administered through such implants, shall
18 not be considered to be in unauthorized possession or to
19 unlawfully manufacture, distribute, dispense, deliver, or
20 possess with intent to deliver such anabolic steroid for
21 purposes of this Act.

22 (d) "Administration" means the Drug Enforcement
23 Administration, United States Department of Justice, or its
24 successor agency.

25 (e) "Control" means to add a drug or other substance, or
26 immediate precursor, to a Schedule under Article II of this Act

1 whether by transfer from another Schedule or otherwise.

2 (f) "Controlled Substance" means a drug, substance, or
3 immediate precursor in the Schedules of Article II of this Act.

4 (g) "Counterfeit substance" means a controlled substance,
5 which, or the container or labeling of which, without
6 authorization bears the trademark, trade name, or other
7 identifying mark, imprint, number or device, or any likeness
8 thereof, of a manufacturer, distributor, or dispenser other
9 than the person who in fact manufactured, distributed, or
10 dispensed the substance.

11 (h) "Deliver" or "delivery" means the actual, constructive
12 or attempted transfer of possession of a controlled substance,
13 with or without consideration, whether or not there is an
14 agency relationship.

15 (i) "Department" means the Illinois Department of Human
16 Services (as successor to the Department of Alcoholism and
17 Substance Abuse) or its successor agency.

18 (j) "Department of State Police" means the Department of
19 State Police of the State of Illinois or its successor agency.

20 (k) "Department of Corrections" means the Department of
21 Corrections of the State of Illinois or its successor agency.

22 (l) "Department of Professional Regulation" means the
23 Department of Professional Regulation of the State of Illinois
24 or its successor agency.

25 (m) "Depressant" or "stimulant substance" means:

26 (1) a drug which contains any quantity of (i)

1 barbituric acid or any of the salts of barbituric acid
2 which has been designated as habit forming under section
3 502 (d) of the Federal Food, Drug, and Cosmetic Act (21
4 U.S.C. 352 (d)); or

5 (2) a drug which contains any quantity of (i)
6 amphetamine or methamphetamine and any of their optical
7 isomers; (ii) any salt of amphetamine or methamphetamine or
8 any salt of an optical isomer of amphetamine; or (iii) any
9 substance which the Department, after investigation, has
10 found to be, and by rule designated as, habit forming
11 because of its depressant or stimulant effect on the
12 central nervous system; or

13 (3) lysergic acid diethylamide; or

14 (4) any drug which contains any quantity of a substance
15 which the Department, after investigation, has found to
16 have, and by rule designated as having, a potential for
17 abuse because of its depressant or stimulant effect on the
18 central nervous system or its hallucinogenic effect.

19 (n) (Blank).

20 (o) "Director" means the Director of the Department of
21 State Police or the Department of Professional Regulation or
22 his designated agents.

23 (p) "Dispense" means to deliver a controlled substance to
24 an ultimate user or research subject by or pursuant to the
25 lawful order of a prescriber, including the prescribing,
26 administering, packaging, labeling, or compounding necessary

1 to prepare the substance for that delivery.

2 (q) "Dispenser" means a practitioner who dispenses.

3 (r) "Distribute" means to deliver, other than by
4 administering or dispensing, a controlled substance.

5 (s) "Distributor" means a person who distributes.

6 (t) "Drug" means (1) substances recognized as drugs in the
7 official United States Pharmacopoeia, Official Homeopathic
8 Pharmacopoeia of the United States, or official National
9 Formulary, or any supplement to any of them; (2) substances
10 intended for use in diagnosis, cure, mitigation, treatment, or
11 prevention of disease in man or animals; (3) substances (other
12 than food) intended to affect the structure of any function of
13 the body of man or animals and (4) substances intended for use
14 as a component of any article specified in clause (1), (2), or
15 (3) of this subsection. It does not include devices or their
16 components, parts, or accessories.

17 (t-5) "Euthanasia agency" means an entity certified by the
18 Department of Professional Regulation for the purpose of animal
19 euthanasia that holds an animal control facility license or
20 animal shelter license under the Animal Welfare Act. A
21 euthanasia agency is authorized to purchase, store, possess,
22 and utilize Schedule II nonnarcotic and Schedule III
23 nonnarcotic drugs for the sole purpose of animal euthanasia.

24 (t-10) "Euthanasia drugs" means Schedule II or Schedule III
25 substances (nonnarcotic controlled substances) that are used
26 by a euthanasia agency for the purpose of animal euthanasia.

1 (u) "Good faith" means the prescribing or dispensing of a
2 controlled substance by a practitioner in the regular course of
3 professional treatment to or for any person who is under his
4 treatment for a pathology or condition other than that
5 individual's physical or psychological dependence upon or
6 addiction to a controlled substance, except as provided herein:
7 and application of the term to a pharmacist shall mean the
8 dispensing of a controlled substance pursuant to the
9 prescriber's order which in the professional judgment of the
10 pharmacist is lawful. The pharmacist shall be guided by
11 accepted professional standards including, but not limited to
12 the following, in making the judgment:

13 (1) lack of consistency of doctor-patient
14 relationship,

15 (2) frequency of prescriptions for same drug by one
16 prescriber for large numbers of patients,

17 (3) quantities beyond those normally prescribed,

18 (4) unusual dosages,

19 (5) unusual geographic distances between patient,
20 pharmacist and prescriber,

21 (6) consistent prescribing of habit-forming drugs.

22 (u-1) "Home infusion services" means services provided by a
23 pharmacy in compounding solutions for direct administration to
24 a patient in a private residence, long-term care facility, or
25 hospice setting by means of parenteral, intravenous,
26 intramuscular, subcutaneous, or intraspinal infusion.

1 (v) "Immediate precursor" means a substance:

2 (1) which the Department has found to be and by rule
3 designated as being a principal compound used, or produced
4 primarily for use, in the manufacture of a controlled
5 substance;

6 (2) which is an immediate chemical intermediary used or
7 likely to be used in the manufacture of such controlled
8 substance; and

9 (3) the control of which is necessary to prevent,
10 curtail or limit the manufacture of such controlled
11 substance.

12 (w) "Instructional activities" means the acts of teaching,
13 educating or instructing by practitioners using controlled
14 substances within educational facilities approved by the State
15 Board of Education or its successor agency.

16 (x) "Local authorities" means a duly organized State,
17 County or Municipal peace unit or police force.

18 (y) "Look-alike substance" means a substance, other than a
19 controlled substance which (1) by overall dosage unit
20 appearance, including shape, color, size, markings or lack
21 thereof, taste, consistency, or any other identifying physical
22 characteristic of the substance, would lead a reasonable person
23 to believe that the substance is a controlled substance, or (2)
24 is expressly or impliedly represented to be a controlled
25 substance or is distributed under circumstances which would
26 lead a reasonable person to believe that the substance is a

1 controlled substance. For the purpose of determining whether
2 the representations made or the circumstances of the
3 distribution would lead a reasonable person to believe the
4 substance to be a controlled substance under this clause (2) of
5 subsection (y), the court or other authority may consider the
6 following factors in addition to any other factor that may be
7 relevant:

8 (a) statements made by the owner or person in control
9 of the substance concerning its nature, use or effect;

10 (b) statements made to the buyer or recipient that the
11 substance may be resold for profit;

12 (c) whether the substance is packaged in a manner
13 normally used for the illegal distribution of controlled
14 substances;

15 (d) whether the distribution or attempted distribution
16 included an exchange of or demand for money or other
17 property as consideration, and whether the amount of the
18 consideration was substantially greater than the
19 reasonable retail market value of the substance.

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

25 Nothing in this subsection (y) prohibits the dispensing or
26 distributing of noncontrolled substances by persons authorized

1 to dispense and distribute controlled substances under this
2 Act, provided that such action would be deemed to be carried
3 out in good faith under subsection (u) if the substances
4 involved were controlled substances.

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

10 (y-1) "Mail-order pharmacy" means a pharmacy that is
11 located in a state of the United States, other than Illinois,
12 that delivers, dispenses or distributes, through the United
13 States Postal Service or other common carrier, to Illinois
14 residents, any substance which requires a prescription.

15 (z) "Manufacture" means the production, preparation,
16 propagation, compounding, conversion or processing of a
17 controlled substance other than methamphetamine, either
18 directly or indirectly, by extraction from substances of
19 natural origin, or independently by means of chemical
20 synthesis, or by a combination of extraction and chemical
21 synthesis, and includes any packaging or repackaging of the
22 substance or labeling of its container, except that this term
23 does not include:

24 (1) by an ultimate user, the preparation or compounding
25 of a controlled substance for his own use; or

26 (2) by a practitioner, or his authorized agent under

1 his supervision, the preparation, compounding, packaging,
2 or labeling of a controlled substance:

3 (a) as an incident to his administering or
4 dispensing of a controlled substance in the course of
5 his professional practice; or

6 (b) as an incident to lawful research, teaching or
7 chemical analysis and not for sale.

8 (z-1) (Blank).

9 (aa) "Narcotic drug" means any of the following, whether
10 produced directly or indirectly by extraction from substances
11 of natural origin, or independently by means of chemical
12 synthesis, or by a combination of extraction and chemical
13 synthesis:

14 (1) opium and opiate, and any salt, compound,
15 derivative, or preparation of opium or opiate;

16 (2) any salt, compound, isomer, derivative, or
17 preparation thereof which is chemically equivalent or
18 identical with any of the substances referred to in clause
19 (1), but not including the isoquinoline alkaloids of opium;

20 (3) opium poppy and poppy straw;

21 (4) coca leaves and any salts, compound, isomer, salt
22 of an isomer, derivative, or preparation of coca leaves
23 including cocaine or ecgonine, and any salt, compound,
24 isomer, derivative, or preparation thereof which is
25 chemically equivalent or identical with any of these
26 substances, but not including decocainized coca leaves or

1 extractions of coca leaves which do not contain cocaine or
2 ecgonine (for the purpose of this paragraph, the term
3 "isomer" includes optical, positional and geometric
4 isomers).

5 (bb) "Nurse" means a registered nurse licensed under the
6 Nurse Practice Act.

7 (cc) (Blank).

8 (dd) "Opiate" means any substance having an addiction
9 forming or addiction sustaining liability similar to morphine
10 or being capable of conversion into a drug having addiction
11 forming or addiction sustaining liability.

12 (ee) "Opium poppy" means the plant of the species *Papaver*
13 *somniferum* L., except its seeds.

14 (ff) "Parole and Pardon Board" means the Parole and Pardon
15 Board of the State of Illinois or its successor agency.

16 (gg) "Person" means any individual, corporation,
17 mail-order pharmacy, government or governmental subdivision or
18 agency, business trust, estate, trust, partnership or
19 association, or any other entity.

20 (hh) "Pharmacist" means any person who holds a license or
21 certificate of registration as a registered pharmacist, a local
22 registered pharmacist or a registered assistant pharmacist
23 under the Pharmacy Practice Act.

24 (ii) "Pharmacy" means any store, ship or other place in
25 which pharmacy is authorized to be practiced under the Pharmacy
26 Practice Act.

1 (jj) "Poppy straw" means all parts, except the seeds, of
2 the opium poppy, after mowing.

3 (kk) "Practitioner" means a physician licensed to practice
4 medicine in all its branches, dentist, optometrist,
5 podiatrist, veterinarian, scientific investigator, pharmacist,
6 physician assistant, advanced practice nurse, licensed
7 practical nurse, registered nurse, hospital, laboratory, or
8 pharmacy, or other person licensed, registered, or otherwise
9 lawfully permitted by the United States or this State to
10 distribute, dispense, conduct research with respect to,
11 administer or use in teaching or chemical analysis, a
12 controlled substance in the course of professional practice or
13 research.

14 (ll) "Pre-printed prescription" means a written
15 prescription upon which the designated drug has been indicated
16 prior to the time of issuance.

17 (mm) "Prescriber" means a physician licensed to practice
18 medicine in all its branches, dentist, optometrist, podiatrist
19 or veterinarian who issues a prescription, a physician
20 assistant who issues a prescription for a ~~Schedule III, IV, or~~
21 ~~V~~ controlled substance in accordance with Section 303.05, a
22 written delegation, and a ~~the~~ written supervision agreement
23 ~~guidelines~~ required under Section 7.5 of the Physician
24 Assistant Practice Act of 1987, or an advanced practice nurse
25 with prescriptive authority delegated under Section 65-40 of
26 the Nurse Practice Act and in accordance with Section 303.05, a

1 written delegation, and a written collaborative agreement
2 under Section 65-35 of the Nurse Practice Act.

3 (nn) "Prescription" means a lawful written, facsimile, or
4 verbal order of a physician licensed to practice medicine in
5 all its branches, dentist, podiatrist or veterinarian for any
6 controlled substance, of an optometrist for a Schedule III, IV,
7 or V controlled substance in accordance with Section 15.1 of
8 the Illinois Optometric Practice Act of 1987, of a physician
9 assistant for a ~~Schedule III, IV, or V~~ controlled substance in
10 accordance with Section 303.05, a written delegation, and ~~a the~~
11 written supervision agreement ~~guidelines~~ required under
12 Section 7.5 of the Physician Assistant Practice Act of 1987, or
13 of an advanced practice nurse with prescriptive authority
14 delegated under Section 65-40 of the Nurse Practice Act who
15 issues a prescription for a ~~Schedule III, IV, or V~~ controlled
16 substance in accordance with Section 303.05, a written
17 delegation, and a written collaborative agreement under
18 Section 65-35 of the Nurse Practice Act.

19 (oo) "Production" or "produce" means manufacture,
20 planting, cultivating, growing, or harvesting of a controlled
21 substance other than methamphetamine.

22 (pp) "Registrant" means every person who is required to
23 register under Section 302 of this Act.

24 (qq) "Registry number" means the number assigned to each
25 person authorized to handle controlled substances under the
26 laws of the United States and of this State.

1 (rr) "State" includes the State of Illinois and any state,
2 district, commonwealth, territory, insular possession thereof,
3 and any area subject to the legal authority of the United
4 States of America.

5 (ss) "Ultimate user" means a person who lawfully possesses
6 a controlled substance for his own use or for the use of a
7 member of his household or for administering to an animal owned
8 by him or by a member of his household.

9 (Source: P.A. 94-556, eff. 9-11-05; 95-242, eff. 1-1-08;
10 95-639, eff. 10-5-07; 95-689, eff. 10-29-07; 95-876, eff.
11 8-21-08.)

12 (720 ILCS 570/303.05)

13 Sec. 303.05. Mid-level practitioner registration.

14 (a) The Department of Financial and Professional
15 Regulation shall register licensed physician assistants and
16 licensed advanced practice nurses to prescribe and dispense
17 ~~Schedule III, IV, or V~~ controlled substances under Section 303
18 and euthanasia agencies to purchase, store, or administer
19 animal euthanasia drugs under the following circumstances:

20 (1) with respect to physician assistants ~~or advanced~~
21 ~~practice nurses,~~

22 (A) the physician assistant ~~or advanced practice~~
23 ~~nurse~~ has been delegated ~~prescriptive~~ authority to
24 prescribe any Schedule III through V controlled
25 substances by a physician licensed to practice

1 medicine in all its branches in accordance with Section
2 7.5 of the Physician Assistant Practice Act of 1987 or
3 Section 65-40 of the Nurse Practice Act; and the ~~(B)~~
4 ~~the physician assistant or advanced practice nurse~~ has
5 completed the appropriate application forms and has
6 paid the required fees as set by rule; or

7 (B) the physician assistant has been delegated
8 authority by a supervising physician licensed to
9 practice medicine in all its branches to prescribe or
10 dispense Schedule II controlled substances through a
11 written delegation of authority and under the
12 following conditions:

13 (i) no more than 5 Schedule II controlled
14 substances by oral dosage may be delegated;

15 (ii) any delegation must be of controlled
16 substances prescribed by the supervising
17 physician;

18 (iii) all prescriptions must be limited to no
19 more than a 30-day oral dosage, with any
20 continuation authorized only after prior approval
21 of the supervising physician;

22 (iv) the physician assistant must discuss the
23 condition of any patients for whom a controlled
24 substance is prescribed monthly with the
25 delegating physician; and

26 (v) the physician assistant must have

1 completed the appropriate application forms and
2 paid the required fees as set by rule; and
3 (2) with respect to advanced practice nurses,

4 (A) the advanced practice nurse has been delegated
5 authority to prescribe any Schedule III through V
6 controlled substances by a physician licensed to
7 practice medicine in all its branches or a podiatrist
8 in accordance with Section 65-40 of the Nurse Practice
9 Act. The advanced practice nurse has completed the
10 appropriate application forms and has paid the
11 required fees as set by rule; or

12 (B) the advanced practice nurse has been delegated
13 authority by a collaborating physician licensed to
14 practice medicine in all its branches to prescribe or
15 dispense Schedule II controlled substances through a
16 written delegation of authority and under the
17 following conditions:

18 (i) no more than 5 Schedule II controlled
19 substances by oral dosage may be delegated;

20 (ii) any delegation must be of controlled
21 substances prescribed by the collaborating
22 physician;

23 (iii) all prescriptions must be limited to no
24 more than a 30-day oral dosage, with any
25 continuation authorized only after prior approval
26 of the collaborating physician;

1 (iv) the advanced practice nurse must discuss
2 the condition of any patients for whom a controlled
3 substance is prescribed monthly with the
4 delegating physician; and

5 (v) the advanced practice nurse must have
6 completed the appropriate application forms and
7 paid the required fees as set by rule; or

8 (3) ~~(2)~~ with respect to animal euthanasia agencies, the

9 euthanasia agency has obtained a license from the

10 Department of Professional Regulation and obtained a

11 registration number from the Department.

12 (b) The mid-level practitioner shall only be licensed to

13 prescribe those schedules of controlled substances for which a

14 licensed physician or licensed podiatrist has delegated

15 prescriptive authority, except that an animal ~~a~~ euthanasia

16 agency does not have any prescriptive authority. A physician

17 assistant and an advanced practice nurse are prohibited from

18 prescribing medications and controlled substances not set

19 forth in the required written delegation of authority.

20 (c) Upon completion of all registration requirements,

21 physician assistants, advanced practice nurses, and animal

22 euthanasia agencies shall be issued a mid-level practitioner

23 controlled substances license for Illinois.

24 (Source: P.A. 95-639, eff. 10-5-07.)

25 Section 99. Effective date. This Act takes effect upon

26 becoming law.