Prescribing and Dispensing Profile

Illinois

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NAMSDL
National Alliance for Model State Drug Laws

Schedule II Prescribing Limitations (not related to pain clinics)

Schedule II substances may only be dispensed on the written prescription of a practitioner

- May be dispensed on the oral prescription of a practitioner in an emergency
  - Oral prescription must include a statement by the practitioner of the circumstances constituting the emergency
  - Must deliver a written prescription to the pharmacy within seven days
- May be dispensed on the faxed prescription of a practitioner if:
  - It is for direct administration to a patient by certain methods
  - It is for a patient in a hospice program, long term care facility, or skilled nursing facility

Schedule II prescriptions shall not be issued for more than a 30 day supply and shall be valid for up to 90 days after the date of issuance

- Physicians may issue multiple prescriptions (3 sequential 30-day supplies) for the same Schedule II substance, authorizing up to a 90 day supply
  - Each separate prescription must be issued for a legitimate medical purpose by an individual physician acting in the usual course of professional practice
  - The individual physician must provide written instructions on each prescription indicating the earliest date on which a pharmacy may fill that prescription

Schedule II prescriptions may not be filled more than seven days after the date of issue and may not be refilled

Schedule III, IV and V Prescribing Limitations (not related to pain clinics)

Schedule III—V prescriptions may be dispensed upon a written, faxed, or oral prescription

Schedule V substances shall not be distributed or dispensed for other than a medical purpose and not for the purpose of evading this act, and then:

- Only personally by a person registered to dispense Schedule V substances and then only to his or her patients
- Only personally by a pharmacist, and then only to a person over 21 years of age who has identified himself or herself to the pharmacist by means of two positive documents of identification
- The dispenser shall record the name and address of the purchaser, the name and quantity of the product, the date and time of the sale, and the dispenser's signature
- No person shall purchase or be dispensed more than 120 milliliters or more than 120 grams of any Schedule V substance which contains codeine, dihydrocodeine, or any salts thereof, or ethylmorphine, or any salts thereof, in any 96 hour period; the purchaser shall sign a form, approved by the Department of Financial and Professional Regulation, attesting that he or she has not purchased any Schedule V controlled substances within the immediately preceding 96 hours

Schedule III – V prescriptions shall not be filled or refilled more than six months after originally written or refilled more than five times unless renewed, in writing, by the prescriber

Miscellaneous Prescribing/Dispensing Requirements

Any person licensed to practice medicine in all of its branches shall be authorized to purchase legend drugs and to dispense such legend drugs in the regular course of practicing medicine

- Except when dispensing a manufacturers' sample or other legend drugs in a maximum 72 hour supply, persons licensed under the Act shall maintain a book or file of prescriptions
- Prior to dispensing to a patient, the physician shall offer a written prescription to the patient which the patient may elect to have filled by the physician or any licensed pharmacy

Prescriptions must contain the following information:

- Name and address of patient
- Name, address, and federal registry number of prescriber
- Date and signature of prescriber
- Drug name, strength, dosage, and form
- Quantity to be dispensed

Prescribing/Dispensing Limitations for Dentists

No separate statutes or regulations related to prescribing and dispensing limitations for dentists.

Prescribing/Dispensing Limitations for Optometrists

Optometrists may prescribe Schedule III – V controlled substances, limited to analgesic agents

- Limited to an amount sufficient to treat the patient for up to 72 hours

With the exception of dihydrocodeinone (hydrocodone) with one or more active, non-narcotic ingredients, optometrists may not prescribe Schedule II substances

- Limited to an amount sufficient to treat the patient for up to 72 hours
- Such formulations must have been reclassified as Schedule II by federal regulation, otherwise may not be prescribed

Pain Clinic/Pain Management Regulations

No specific statutes or regulations identified.

Training or Education Requirements or Recommendations for Practitioners who Prescribe or Dispense Controlled Substances

No specific statutes or regulations identified.

Medical Marijuana or Controlled Substances Therapeutic Research Program Provisions

This section deals only with the conditions that qualify a patient for the use of medical marijuana or a therapeutic research program and the attendant physician responsibilities. For complete information on state medical marijuana and therapeutic research programs, please visit the NAMSDL website at www.namsdl.org.

Debilitating medical condition means:

- Cancer, glaucoma, positive status for human immunodeficiency virus, acquired immune deficiency syndrome, hepatitis C, amyotrophic lateral sclerosis, Crohn's disease, agitation of Alzheimer's disease, cachexia/wasting syndrome, muscular dystrophy, severe fibromyalgia, spinal cord disease, including but not limited to arachnoiditis, Tarlov cysts, hydromyelia, syringomyelia, Rheumatoid arthritis, fibrous dysplasia, spinal cord injury, traumatic brain injury and post-concussion syndrome, Multiple Sclerosis, Arnold-Chiari malformation and Syringomyelia, Spinocerebellar Ataxia (SCA), Parkinson's, Tourette's, Myoclonus, Dystonia, Reflex Sympathetic Dystrophy, RSD (Complex Regional Pain Syndromes Type I), Causalgia, CRPS (Complex Regional Pain Syndromes Type II), Neurofibromatosis, Chronic Inflammatory Demyelinating Polyneuropathy, Sjogren's syndrome, Lupus, Interstitial Cystitis, Myasthenia Gravis, Hydrocephalus, nail-patella syndrome, residual limb pain, seizures (including those characteristic of epilepsy), or the treatment of these conditions

Physician is not subject to arrest, prosecution, or penalty in any manner, or denied any right or privilege, including but not limited to, civil penalty or disciplinary action, solely for providing a written certification or for otherwise stating that, in the physician's professional opinion, a patient is likely to receive therapeutic or palliative benefit from the medical use of cannabis, provided that nothing shall prevent a professional licensing board from sanctioning a physician for:

- Issuing a written certification for a patient not under the physician's care for a debilitating medical condition
- Failing to properly evaluate a patient's condition or otherwise violating the standard of care for evaluating medical conditions

A physician who certifies a debilitating medical condition for a qualifying patient shall comply with all of the following requirements:

- The physician shall be currently licensed to practice medicine and in good standing, and must hold a controlled substances license under the Illinois Controlled Substances Act
- Must have a bona fide physician-patient relationship with the qualifying patient which may not be limited to a certification for the patient or a consultation simply for that purpose
- Shall comply with the generally accepted standards of medical practice, the provisions of the Medical Practice Act of 1987, and all applicable rules
- Has responsibility for the ongoing care and treatment of the qualifying patient's debilitating condition, provided that the ongoing care and treatment shall not be limited to or for the primary purpose of certifying a debilitating medical condition or providing a consultation solely for that purpose

Medical Marijuana or Controlled Substances Therapeutic Research Program Provisions, cont'd.

- Has completed an in-person full assessment of the patient's medical history and current medical condition, including a personal physical examination, not more than 90 days prior to making the certification
  - Assessment shall include, but not be limited to, symptoms, signs, and diagnostic testing related to the patient's condition
  - The physical examination required by this act shall not be completed by remote means, including telemedicine
- Certifies that the qualifying patient is under the physician's care, either for the patient's primary care or for treatment of his/her debilitating medical condition or symptoms of a debilitating medical condition
- Confirms that s/he completed an assessment for the qualifying patient's medical history, including reviewing medical records from other treating physicians from the previous 12 months
- Explains the potential risks and benefits to the patient
- Physician shall maintain a record keeping system for all patients for whom the physician has recommended the medical use of cannabis which shall be accessible to and subject to review by the Department of Public Health and the Department of Financial and Professional Regulation upon request

A physician may not:

- Accept, solicit, or offer any form of remuneration from or to a qualifying patient, primary caregiver, 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
- Offer a discount of any other item of value to a qualifying patient who uses or agrees to use a particular primary caregiver or dispensing organization to obtain medical cannabis
- Conduct a personal physical examination of a patient for purposes of diagnosing a debilitating medical condition at a location where medical cannabis is sold or distributed or at the address of a principal officer, agent, or employee or a medical cannabis organization
- Hold a direct or indirect economic interest in a cultivation center or dispensing organization if he or she recommends the use of medical cannabis to qualified patients or is in a partnership or other fee or profit-sharing relationship with a physician who recommends medical cannabis, except for the limited purpose of performing a medical cannabis related research study
- Serve on the board of directors or as an employee of a cultivation center or dispensing organization
- Refer patients to a cultivation center, a dispensing organization, or a registered designated caregiver
- Advertise in a cultivation center or a dispensing organization

Written certifications must be issued within 90 days preceding the date of an application for a registry identification card

Medical Marijuana or Controlled Substances Therapeutic Research Program Provisions, cont'd.

In addition to records otherwise required to be kept, patient records for patients for whom a physician has written a certification for the use of medical cannabis shall include:

- The patient's name and the date or dates of visits and treatment
- The patient's medical history and updated health history
- Documented results of a full assessment of the patient's medical history, including review of medical records from other treating physicians from the previous 12 months
- A description of the patient's current medical condition
- Documented results of the physician's physical examination of the patient
- A treatment plan
- General consent for treatment
- List of the drugs prescribed, administered, and dispensed, and the quantity of the drugs
- Radiographs and diagnostic tests
- Patient financial and billing records
- The name of the physician or active personnel providing services
- Laboratory results

Hospitals and their pharmacies which have been registered and approved by the NCI and the DEA to use delta-9-THC in the treatment of cancer chemotherapy patients may be authorized to use delta-9-THC for such purposes in Illinois

Physician must submit a copy of the federal registration form with a cover letter to the department that:

- Indicates that physician's DEA control number
- His/her Illinois Controlled Substance number
- Agreement to comply with federal and state regulations and protocol concerning the use of THC
- Agrees to notify the department of disassociation with the research

Must obtain written informed consent from the patient prior to initiating treatment with delta-9-THC

Delta-9-THC may only be dispensed pursuant to a research order for the medication issued by the department

PMP Requirements for Mandatory Registration and Access

The PMP shall automatically create a log-in to the system when a prescriber or dispenser obtains or renews his or her controlled substance license

- The PMP shall send the prescriber or dispenser information regarding the inquiry system, including instructions on how to log into the system, instructions on how to use the system to promote effective clinical practice, and opportunities for continuing education for the prescribing of controlled substances as well as information regarding unsolicited reports

Patient Referral to Treatment

No specific statutes or regulations identified.

Board Guidelines

None.