



## Official Newsjournal of the Illinois Council of Health-System Pharmacists

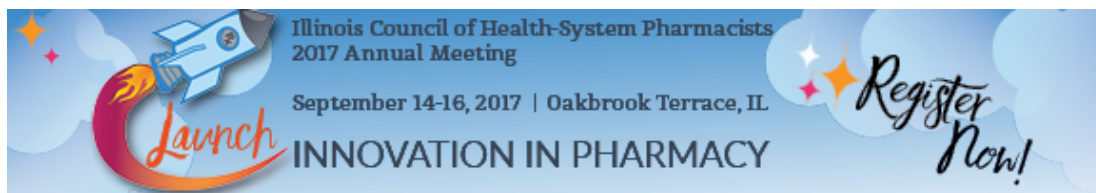
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## Government Affairs Report

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by Jim Owen and Scott Meyers

As you will see below, the list of bills we continue to monitor has grown much smaller and much more reasonable. There are still a few bad ones that we are hoping merely die on the vine (SB0642, SB0892, SB1607, SB2011, and HB2708) and a couple of reasonable ones we're expecting to get passed (SB0902, SB1546, SB1790, SB1944, HB2957, and HB3462).

We mentioned last month that the Pharmacy Practice Act sunset bills were amended to provide a two-year renewal so that a Task Force could sit down and really go over the current Act to see where improvements in patient safety can be made. The Task Force will most likely begin work as soon as this spring's legislative session is over. It will be an interesting process with a labor union at the table for the first time. We hope that reasonable compromises and accommodations can be made that do in fact, improve patient safety without creating burdensome statutes that are counterproductive to the advancement of pharmacist care and provider status for pharmacists. Only time will tell.

Oh, and in case you haven't heard, the State is still far from a budget. Current discussions indicate that if one is not accepted by the end of session, we probably won't get one until after the next election! In the meantime, the State burns as the General Assembly fiddles (around).

Below is a summary of currently active legislation (at the time of writing) and its status. We encourage you to talk to your legislators about these bills and health care in general over the summer and let them know you're always available to provide input from folks in the field!

Bill Number	Sponsor	Summary	Location	ICHP Position
SB0009	Hutchinson – Chicago, D	Creates the Sugar-Sweetened Beverage Tax Act. Imposes a tax on distributors of bottled sugar-sweetened beverages, syrups, or powders at the rate of \$0.01 per ounce of bottled sugar-sweetened beverages sold or offered for sale to a retailer for sale in the State to a consumer. Requires those distributors to obtain permits.	3 <sup>rd</sup> Reading in Senate	
SB0018	Cullerton - Chicago, D	Technical change to the Alcoholism and Other Drug Abuse and Dependency Act.	3 <sup>rd</sup> Reading in Senate	
SB0073 HB0239	Silverstein – Chicago, D	Amends the Illinois Food, Drug and Cosmetic Act. Adds provision concerning prescription drug price increases. Requires manufacturers of prescription drugs to notify State purchasers, health insurers, health care service plan providers, and pharmacy benefit managers of specified increases in drug prices at least 30 days before such	Human Services Comm.	

		<p>increase and the cost of specified new prescription drugs 3 days before the commercial availability of a new drug approved by the U.S. Food and Drug Administration or within 3 days after approval by the U.S. Food and Drug Administration if the new drug will be made commercially available within 3 days of such approval. Provides that within 30 days after such notifications, prescription drug manufacturers shall report specified information to the Department of Public Health and requires the Department to publish such information on its website. Provides that failure to report such information to specified entities shall result in a specified administrative penalty. Provides that the Department may adopt rules and issue guidance to implement these provisions and shall be responsible for enforcing these provisions. Contains provisions concerning the confidentiality of pricing information. Repeals provisions concerning prescription drug price increases on January 1, 2022. Effective immediately.</p>		
SB0625	Martinez – Chicago, D	<p>Amends the Regulatory Sunset Act. Extends the repeal of the Nurse Practice Act from January 1, 2018 to January 1, 2028. Amends the Nurse Practice Act. Defines "focused assessment", "full practice authority", "oversight", and "postgraduate advanced practice nurse". Changes references of "advanced practice nurse" and "APN" to "advanced practice registered nurse" and "APRN" throughout the Act. Replaces provisions regarding nursing delegation with provisions that prohibit specified actions. Provides other guidelines for delegation of nursing activities and medication administration. Makes changes to education program requirements, qualifications for licensure, the scope of practice, and continuing education for LPN and RN licensees. Provides that a written collaborative agreement is required for all postgraduate advanced practice registered nurses until specific requirements have been met. Provides that postgraduate advanced practice registered nurses may enter into written collaborative agreements with collaborating advanced practice registered nurses or physicians (rather than collaborating physicians or podiatric physicians). In provisions concerning prescriptive authority for postgraduate advanced practice registered nurses, sets forth the requirements for postgraduate advanced practice registered nurses to have prescriptive authority and the limitations of such authority. Makes changes to provisions concerning the grounds for disciplinary action under the Act. Requires the Department of Public Health to prepare a report regarding the moneys appropriated from the Nursing Dedicated and Professional Fund to the Department of Public Health for nursing scholarships. Makes other changes. Effective immediately.</p>	3 <sup>rd</sup> Reading in the Senate	Neutral
SB0636	Link – Gurnee, D	<p>Amends the Pharmacy Practice Act. Provides that the Act shall not apply to, or in any manner interfere with, the sale or distribution of dialysate, drugs, or devices necessary to perform home renal dialysis for patients</p>	Health Care Licenses Committee in the House	

		with chronic kidney failure, provided that certain conditions are met. Effective immediately.		
SB0642	Steans – Steans, D	Amends the Nurse Practice Act. In provisions concerning scope of practice, written collaborative agreements, temporary practice with a collaborative agreement, prescriptive authority with a collaborative agreement, titles, advertising, continuing education, and reports relating to professional conduct and capacity, changes references of "advanced practice nurse" and "APN" to "advanced practice registered nurse" and "APRN". Provides that a written collaborative agreement is required for all postgraduate advanced practice registered nurses until specific requirements have been met. Provides that postgraduate advanced practice registered nurses may enter into written collaborative agreements with collaborating advanced practice registered nurses or physicians (rather than collaborating physicians or podiatric physicians). In provisions concerning prescriptive authority for postgraduate advanced practice registered nurses, sets forth the requirements for postgraduate advanced practice registered nurses to have prescriptive authority and the limitations of such authority. Defines "full practice authority" and provides requirements for it to be granted to an advanced practice registered nurse. Removes provisions concerning advanced practice nursing in hospitals, hospital affiliates, or ambulatory surgical treatment centers, except the provision for anesthesia services and the provision requiring advanced practice registered nurses to provide services in accordance with other Acts. Makes other changes. Effective immediately.	3 <sup>rd</sup> Reading in the Senate.	Oppose
SB0680	Althoff – McHenry, R	Amends the Safe Pharmaceutical Disposal Act. Provides that used, expired, or unwanted pharmaceuticals collected by a city, village, or municipality under the Act may be destroyed in a drug destruction device by a law enforcement agency. Amends the Environmental Protection Act. Expands the definition of "drug evidence" in the provision for drug destruction by a law enforcement agency to include any used, expired, or unwanted pharmaceuticals collected under the Safe Pharmaceutical Disposal Act.	Rules Committee in the House	
SB0772	Martinez – Chicago, D	Amends the Regulatory Sunset Act by extending the repeal date of the Podiatric Medical Practice Act of 1987 from January 1, 2018 to January 1, 2028. Amends the Podiatric Medical Practice Act of 1987. Defines "email address of record" and "address of record". Provides that all applicants and licensees shall provide a valid address and email address, which shall serve as the address and email address of record, and shall inform the Department of Financial and Professional Regulation of any change of address or email address through specified means. Makes changes in provisions concerning the Podiatric Medical Licensing Board, grounds for disciplinary action, appointment of a hearing officer, and certification of records. Provides provisions concerning confidentiality of information collected by the Department in the course of an examination or	Rules Comm. in the House	

		investigation. Makes other changes. Effective immediately		
SB0892	Tracy – Quincy, R	Amends the Illinois Controlled Substances Act. Provides that the Department of Human Services may release information received by the central repository to select representatives of the Department of Children and Family Services through the indirect online request process. Provides that access shall be established by the Prescription Monitoring Program Advisory Committee by rule.	Rules Comm. in the House	
SB0902	Righter – Mattoon, R	Replaces everything after the enacting clause. Reinserts the introduced bill with the following changes: In provisions amending the Regulatory Sunset Act, provides that the repeal date of the Pharmacy Practice is extended to January 1, 2020 (rather than January 1, 2028). Further amends the Pharmacy Practice Act. Creates the Collaborative Pharmaceutical Task Force to discuss how to further advance the practice of pharmacy in a manner that recognizes the needs of specified interests. Provides for the voting and non-voting membership of the Task Force. Provides that the Department of Financial and Professional Regulation shall provide administrative support to the Task Force. Provides that the Task Force shall meet at least monthly. Provides that no later than September 1, 2019, voting members of the Task Force shall vote on recommendations concerning the certain standards. Provides that no later than November 1, 2019, the Department, in direct consultation with the Task Force, shall propose rules for adoption that are consistent with the Task Force's recommendations, or recommend legislation to the General Assembly, concerning the certain standards. Repeals provisions concerning the Task Force on November 1, 2020. Effective immediately.	Rules Committee in the House	
SB1546 same as HB2957	Mulroe – Chicago, D	Amends the Illinois Insurance Code. Provides that every policy of accident and health insurance amended, delivered, issued, or renewed after the effective date of the amendatory Act that provides coverage for prescription drugs shall provide for synchronization of prescription drug refills on at least one occasion per insured per year provided that certain conditions are met. Requires insurers to provide prorated daily cost-sharing rates when necessary. Makes conforming changes in the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, the School Code, the Health Maintenance Organization Act, the Limited Health Services Organization Act, the Voluntary Health Services Plan Act, and the Illinois Public Aid Code. Effective immediately.	3 <sup>rd</sup> Reading in the Senate	
SB1585	Martinez – Chicago, D	Amends the Regulatory Sunset Act. Extends the repeal date of the Physician Assistant Practice Act of 1987 from January 1, 2018 to January 1, 2028. Amends the Physician Assistant Practice Act of 1987. Reorganizes the Act by adding titles and renumbering provisions. Replaces references to "supervising physicians" with references to "collaborating physicians" throughout the Act. Replaces references to "supervision agreement" with	2 <sup>nd</sup> Reading in the House	

		<p>references to "collaborative agreement" throughout the Act. Adds provisions concerning continuing education. In provisions concerning grounds for disciplinary action, provides that the Department of Financial and Professional Regulation may refuse to issue or renew a physician assistant license or discipline a licensee for willfully or negligently violating a patient's confidentiality, except as required by law, or failing to provide copies of medical records as required by law. Amends various Acts to conform references and terminology. Makes other changes. Effective immediately.</p>		
SB1607	Bush – Grayslake, D	<p>Senate Amendment 1 - Replaces everything after the enacting clause. Amends the Illinois Controlled Substances Act. Before issuing a prescription for a Schedule II, III, IV, or V controlled substance, a prescriber or his or her designee shall access the prescription monitoring program to determine compliance with the pharmacy and medication shopping provisions of the Act. Provides that within one year of the effective date of the bill, the Department shall adopt rules requiring all Electronic Health Records Systems to interface with the Prescription Monitoring Program application program on or before January 1, 2021 to ensure that all providers have access to specific patient records during the treatment of their patients. These rules shall also address the electronic integration of pharmacy records with the Prescription Monitoring Program to allow for faster transmission of the information required under the Act. Provides that the Department shall establish actions to be taken if a prescriber's Electronic Health Records System does not effectively interface with the Prescription Monitoring Program within the required timeline. Provides that the Department of Human Services, in consultation with the Advisory Committee, shall adopt rules allowing licensed prescribers or pharmacists who have registered to access the Prescription Monitoring Program to authorize a designee to consult the Prescription Monitoring Program on their behalf. The rules shall include reasonable parameters concerning a practitioner's authority to authorize a designee, and the eligibility of a person to be selected as a designee.</p> <p><b>Senate Floor Amendment No. 2</b></p> <p>Restores language of the law that when a person has been identified as having 3 or more prescribers or 3 or more pharmacies, or both, that do not utilize a common electronic file for controlled substances within the course of a continuous 30-day period, the Prescription Monitoring Program may (rather than shall) issue an unsolicited report to the prescribers, dispensers, and their designees informing them of the potential medication shopping.</p>	3 <sup>rd</sup> Reading in the Senate.	
SB1790	Stadelman – Rockford, D	<p><b>Senate Floor Amendment No. 2</b></p> <p>Replaces everything after the enacting clause. Amends the Pharmacy Practice Act. Provides that a pharmacist may exercise professional judgment to dispense an</p>	3 <sup>rd</sup> Reading in the House	Support as amended

		emergency supply of medication for a chronic disease or condition if the pharmacist is unable to obtain refill authorization from the prescriber when certain conditions are met. Provides that the emergency supply must be limited to the amount needed for the emergency period as determined by the pharmacist but the amount shall not exceed a 30-day supply. Effective immediately		
SB1944	Nybo – Lombard, R	Senate Amendment 1 Replaces everything after the enacting clause. Amends the Hypodermic Syringes and Needles Act. Provides that a person who is at least 18 years of age may purchase from a pharmacy and have in his or her possession up to 100 (rather than 20) hypodermic syringes or needles. Provides that a pharmacist may sell up to 100 (rather than 20) sterile hypodermic syringes or needles to a person who is at least 18 years of age. Provides that a prescriber (rather than a licensed physician) may direct a patient under his or her immediate charge to have in possession any of the hypodermic syringes and needles permitted by the Act. Deletes provision that the Illinois Department of Public Health must develop educational materials and make copies of the educational materials available to pharmacists. Deletes provision that pharmacists must make these educational materials available to persons who purchase syringes and needles as authorized under the Act. Permits an electronic order for the hypodermic syringes and needles. Defines "prescriber".	Rules Comm. in the House	Support as amended
SB2011	Bivins – Dixon, R	Amends the Illinois Controlled Substances Act. Provides that a registered pharmacist filling a prescription for an opioid substance listed in Schedule II may dispense the prescribed substance in a lesser quantity than the recommended full quantity indicated on the prescription if requested by the patient provided that the prescription complies with the requirements of the Act. Provides that the remaining quantity in excess of the quantity requested by the patient shall be void. Provides that if the dispensed quantity is less than the recommended full quantity, the pharmacist or his or her designee shall, within a reasonable time following a reduction in quantity but not more than 7 days, notify the prescribing practitioner of the quantity actually dispensed. Provides that nothing in this provision shall be interpreted to conflict with or supersede any other requirement established in the Act for a prescription of an opiate substance or any requirements or conditions for drug substitutions established in the Act. Effective immediately.  Senate Amendment 1 - Provides that when issuing a prescription for an opiate to a patient 18 years of age or older for outpatient use for the first time, a practitioner may not issue a prescription for more than a 7-day supply. A practitioner may not issue an opiate prescription to a person under 18 years of age for more than a 7-day supply at any time and shall discuss with the parent or guardian of the person under 18 years of age the risks associated with opiate use and the reasons why the prescription is necessary. Provides that	3 <sup>rd</sup> Reading in the Senate	Oppose

		notwithstanding this provision, if, in the professional medical judgment of a practitioner, more than a 7-day supply of an opiate is required to treat the patient's acute medical condition or is necessary for the treatment of chronic pain management, pain associated with a cancer diagnoses, or for palliative care, then the practitioner may issue a prescription for the quantity needed to treat that acute medical condition, chronic pain, pain associated with a cancer diagnosis, or pain experienced while the patient is in palliative care. Provides that the condition triggering the prescription of an opiate for more than a 7-day supply shall be documented in the patient's medical record and the practitioner shall indicate that a non-opiate alternative was not appropriate to address the medical condition. Provides that these provisions do not apply to medications designed for the treatment of substance abuse or opioid dependence.		
HR0016	Gordon-Booth – Peoria, D	Urges Congress to pass legislation in support of the establishment of VA emergency prescription refill programs nationwide to ensure that, in emergency situations, veterans may receive medication directly from their local pharmacy and VA facility.	Place on Calendar Order of Resolutions.	
HR0030	Welch – Westchester, D	Designates October 2017 as "Zombie Preparedness Month" in the State of Illinois, and urges all Illinoisans to educate themselves about natural disasters and take steps to create a stockpile of food, water, and other emergency supplies that can last up to 72 hours.	Resolution Adopted.	
HR0059	Cassidy – Chicago, D	Recognizes the importance of improving awareness of self-care and the value it represents to the citizens of Illinois. Supports increased consumer empowerment through the development of new nonprescription medicines and the appropriate switch of certain prescription medicines to nonprescription. Acknowledges that over-the-counter medicines can greatly improve and reduce costs to the public health system. Encourages consumers, healthcare practitioners, policymakers and regulators to communicate the benefits of self-care. Recognizes February of 2017 as Self-Care Month in Illinois.	Place on Calendar Order of Resolutions	
HR0088	Flowers – Chicago, D	Urges the federal government to monitor the ever-increasing costs of prescription drugs and to take any necessary action to reduce the out-of-pocket expenses for those purchasing medications.	Resolution Adopted	
HR0116	McSweeney – Cary, R	Declares opposition to raising the sales taxes on food and drugs.	Revenue and Finance Comm. Sales and Other Taxes Subcomm.	
HB0313	Feigenholtz – Chicago, D	Amends the Regulatory Sunset Act. Extends the repeal of the Nurse Practice Act from January 1, 2018 to January 1, 2028. Amends the Nurse Practice Act. Defines "focused assessment", "full practice authority", "oversight", and "postgraduate advanced practice nurse". Changes references of "advanced practice nurse" and "APN" to "advanced practice registered nurse" and "APRN" throughout the Act. Replaces provisions	3 <sup>rd</sup> Reading in the Senate	Neutral as amended

		regarding nursing delegation with provisions that prohibit specified actions. Provides other guidelines for delegation of nursing activities and medication administration. Makes changes to education program requirements, qualifications for licensure, the scope of practice, and continuing education for LPN and RN licensees. Provides that a written collaborative agreement is required for all postgraduate advanced practice registered nurses until specific requirements have been met. Provides that postgraduate advanced practice registered nurses may enter into written collaborative agreements with collaborating advanced practice registered nurses or physicians (rather than collaborating physicians or podiatric physicians). In provisions concerning prescriptive authority for postgraduate advanced practice registered nurses, sets forth the requirements for postgraduate advanced practice registered nurses to have prescriptive authority and the limitations of such authority. Makes changes to provisions concerning the grounds for disciplinary action under the Act. Requires the Department of Public Health to prepare a report regarding the moneys appropriated from the Nursing Dedicated and Professional Fund to the Department of Public Health for nursing scholarships. Makes other changes. Effective immediately.		
HB0524	Wheeler – Crystal Lake, R	Amends the Safe Pharmaceutical Disposal Act. Provides that pharmaceuticals disposed of under the Act may be destroyed in a drug destruction device. Amends the Environmental Protection Act. Expands the definition of "drug evidence" to include any used, expired, or unwanted pharmaceuticals collected under the Safe Pharmaceutical Disposal Act. Effective immediately.	3 <sup>rd</sup> Reading in the Senate	
HB0706	Bellock – Westmont, R	Amends the Safe Pharmaceutical Disposal Act. Provides that in the absence of a police officer, State Police officer, coroner, or medical examiner at the scene of a death, a nurse or physician may dispose of unused medication found at the scene while engaging in the performance of his or her duties. Provides that anyone authorized to dispose of unused medications under the Act, and his or her employer, employees, or agents shall incur no civil liability, criminal liability, or professional discipline, except for willful or wanton misconduct, as a result of any injury arising from his or her good faith disposal or non-disposal of unused medication. Defines "nurse" and "physician". Amends the Medical Practice Act of 1987 and the Nurse Practice Act to make conforming changes. Effective immediately.	3 <sup>rd</sup> Reading in the Senate	
HB2531	Hammond – Macomb, R	Amends the Illinois Food, Drug and Cosmetic Act. Deletes provisions requiring manufacturers to provide the Director of Public Health with a notification containing product technical bioequivalence information no later than 60 days prior to specified generic drug product substitution. Effective immediately.	3 <sup>rd</sup> Reading in the Senate	
HB2534	Bourne – Litchfield, R	Amends the Illinois Controlled Substances Act. Requires that to be illegal a drug analog must not be approved by the United States Food and Drug Administration or, if	2 <sup>nd</sup> Reading in the Senate	



		approved, it is not dispensed or possessed in accordance with State and federal law. Defines "controlled substance" to include a synthetic drug enumerated as a scheduled drug under the Act. Adds chemical structural classes of synthetic cannabinoids and piperazines to the list of Schedule I controlled substances. Includes certain substances approved by the FDA which are not dispensed or possessed in accordance with State or federal law and certain modified substances.		
HB2708	Demmer – Rochelle, R	Amends the Illinois Controlled Substances Act. Provides that the Department of Human Services may release information received by the central repository to select representatives of the Department of Children and Family Services through the indirect online request process. Provides that access shall be established by the Prescription Monitoring Program Advisory Committee by rule.	3 <sup>rd</sup> Reading in the Senate	
HB2957 same as SB1546	Fine – Glenview, D	Amends the Illinois Insurance Code. Provides that every policy of accident and health insurance amended, delivered, issued, or renewed after the effective date of the amendatory Act that provides coverage for prescription drugs shall provide for synchronization of prescription drug refills on at least one occasion per insured per year provided that certain conditions are met. Requires insurers to provide prorated daily cost-sharing rates when necessary. Makes conforming changes in the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, the School Code, the Health Maintenance Organization Act, the Limited Health Services Organization Act, the Voluntary Health Services Plan Act, and the Illinois Public Aid Code. Effective immediately.	3 <sup>rd</sup> Reading in the Senate	
HB3462	Zalewski – Riverside, D	Amends the Regulatory Sunset Act. Extends the repeal date of the Pharmacy Practice Act from January 1, 2018 to January 1, 2028. Amends the Pharmacy Practice Act. Provides that all applicants and licensees shall provide a valid address and email address, which shall serve as the address and email address of record, and shall inform the Department of Financial and Professional Regulation of any change of address or email address through specified means. Provides for the licensure (rather than registration) of registered pharmacy technicians, registered certified pharmacy technicians, and pharmacists, and makes conforming changes. Removes provision allowing each member of the State Board of Pharmacy to receive a per diem payment in an amount determined from time to time by the Secretary of Financial and Professional Regulation for attendance at meetings of the Board and conducting other official business of the Board. Changes references to "Director" to references to "Secretary" or "Department" throughout the Act. Eliminates the position of deputy pharmacy coordinator. Makes changes in provisions concerning definitions, duties of the Department, inactive status, pharmacists in charge, nonresident pharmacy licenses, record retention, automated pharmacy systems, remote	3 <sup>rd</sup> Reading in the Senate	Support as amended

		prescription processing, and discipline. Makes other changes. Effective immediately.		
	Support strongly			
	Monitor closely			
	Oppose strongly			

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