
SYNOPSIS AS INTRODUCED:

New Act
720 ILCS 550/11 rep.
720 ILCS 550/15 rep.

Creates the Compassionate Use of Medical Cannabis Pilot Program Act. Provides that the Department of Public Health shall issue a registry identification card to a qualified patient with a debilitating medical condition that allows the patient to possess no more than 2 ounces of dried usable cannabis and 6 cannabis plants, no more than 3 of which can be mature cannabis plants. Provides for the registration by the Department of Public Health of medical cannabis organizations to dispense cannabis to qualified patients and caregivers. Contains provisions regarding: prohibitions and penalties; discrimination; addition of debilitating conditions or treatments; determinations; notifications; registration of compassion centers and safety compliance facilities; confidentiality; verification; reports; rules; educational materials; enforcement; and other matters. Provides that the Act is repealed 3 years after its effective date. Amends the Cannabis Control Act to repeal provisions relating to research with cannabis. Contains a severability provision.

LRB097 09494 RLC 49631 b

CORRECTIONAL
BUDGET AND
IMPACT NOTE ACT
MAY APPLY

FISCAL NOTE ACT
MAY APPLY

A BILL FOR

*LRB09709494RLC49631b*
AN ACT concerning cannabis.

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

Section 1. Short title. This Act may be cited as the Compassionate Use of Medical Cannabis Pilot Program Act.

Section 5. Findings.

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

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

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

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

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

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

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

Section 10. Definitions. The following terms, as used in
this Act, shall have the meanings set forth in this Section:

(a) "Adequate supply" means an amount of cannabis possessed
by a qualified patient or collectively possessed by a qualified
patient and the qualified patient's primary caregiver that is
determined by rule of the Department to be no more than
reasonably necessary to ensure the uninterrupted availability
of cannabis for a period of 60 days and that is derived solely
from an intrastate source. Until the Department determines what
constitutes a 60-day supply of medicine, patients shall be
presumed to be in compliance with this Act if they possess no
more than 2 ounces of dried usable cannabis and 6 cannabis
plants, no more than 3 of which can be mature cannabis plants.
As used in this subsection (a), "mature cannabis plant" means a
female cannabis plant that meets one or more of the following
criteria: (1) has observable flowers or buds, (2) is at least
12 inches in height, or (3) is at least 12 inches in diameter.

(b) "Cannabis" has the meaning given that term in Section 3
of the Cannabis Control Act.
(c) "Cardholder" means a qualifying patient or a designated caregiver who has been issued and possesses a valid registry identification card.

(d) "Debilitating medical condition" means one or more of the following:

(1) 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, or the treatment of these conditions;

(2) a chronic or debilitating disease or medical condition or its treatment that produces one or more of the following: cachexia or wasting syndrome; seizures, including but not limited to those characteristic of epilepsy; or severe and persistent muscle spasms, including but not limited to those characteristic of multiple sclerosis;

(3) a debilitating disease or medical condition or its treatment that produces intractable pain, which is severe, debilitating pain that did not respond to other reasonable medical efforts for a reasonable period of time, including cases where other treatment options produced serious side effects;

(4) a debilitating disease or medical condition or its treatment that produces severe, debilitating nausea that did not respond to other reasonable medical efforts for a
reasonable period of time, including cases where other
treatment options produced serious side effects; or
(5) any other debilitating medical condition or its
treatment added by the Department, as provided for in
subsection (a) of Section 10.
(e) "Department" means the Department of Public Health or
its successor agency.
(f) "Designated caregiver" means a person who:
(1) is at least 21 years of age;
(2) has agreed to assist with a patient's medical use
of cannabis;
(3) has not been convicted of an excluded offense; and
(4) assists no more than one qualifying patient with
their medical use of cannabis.
(g) "Enclosed, locked facility" means a closet, room,
greenhouse, building, or other enclosed area equipped with
locks or other security devices that permit access only by the
cardholder allowed to cultivate the plants or, in the case of a
registered medical cannabis organization, the medical cannabis
organization agents working for the registered medical
cannabis organization.
(h) "Excluded offense" means:
(1) a violent crime defined in Section 3 of the Rights
of Crime Victims and Witnesses Act, that was classified as
a felony in the jurisdiction where the person was
convicted; or
(2) a violation of a state or federal controlled substance law that was classified as a felony in the jurisdiction where the person was convicted, except that the Department shall waive this restriction if the person demonstrates to the Department's satisfaction that his or her conviction was for the possession, cultivation, transfer, or delivery of a reasonable amount of cannabis intended for medical use. This exception shall not apply if the conviction was under State law and involved a violation of an existing medical cannabis law.

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

(j) "Medical use" means the acquisition; administration; cultivation; or manufacture in an enclosed, locked facility; delivery; possession; transportation; transfer; transportation; or use of cannabis or paraphernalia relating to the administration of cannabis to treat or alleviate a registered qualifying patient's debilitating medical condition or symptoms associated with the patient's debilitating medical condition. It does not include cultivation by a visiting qualifying patient or cultivation by a registered designated caregiver or registered qualifying patient who is not designated as being allowed to cultivate.

(k) "Physician" means a doctor of medicine or doctor of
osteopathy licensed under the Medical Practice Act of 1987 to practice medicine in all its branches who has the authority to prescribe drugs to humans under Article III of the Illinois Controlled Substances Act. It does not include a dentist. In relation to a visiting qualifying patient, "physician" means a person who is licensed with authority to prescribe drugs to humans in the state of the patient's residence.

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

(m) "Registered medical cannabis organization" means an entity registered pursuant to Section 65 that acquires, possesses, cultivates, manufactures, delivers, transfers, transports, sells, supplies, or dispenses cannabis, paraphernalia, or related supplies and educational materials to registered qualifying patients.

(n) "Registered safety compliance facility" means an entity registered under Section 70 by the Department to provide one or more of the following services:

(1) testing cannabis produced for medical use for potency and contaminants; and

(2) training cardholders and prospective medical cannabis organization agents. The training may include, but need not be limited to, information related to one or more of the following:

(A) the safe and efficient cultivation,
harvesting, packaging, labeling, and distribution of cannabis;

(B) security and inventory accountability procedures; and

(C) up-to-date scientific and medical research findings related to medical cannabis.

(o) "Registry identification card" means a document issued by the Department that identifies a person as a registered qualifying patient or registered designated caregiver.

(p) "Safety compliance facility agent" means a principal officer, board member, employee, or agent of a registered safety compliance facility who is 21 years of age or older and has not been convicted of an excluded offense.

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

(r) "Verification system" means a phone or Web-based system established and maintained by the Department that is available to law enforcement personnel and medical cannabis organization agents on a 24-hour basis for verification of registry identification cards.

(s) "Visiting qualifying patient" means a person who:

(1) has been diagnosed with a debilitating medical
condition;

(2) possesses a valid registry identification card, or
its equivalent, that was issued pursuant to the laws of
another state, district, territory, commonwealth, insular
possession of the United States, or country recognized by
the United States that allows the person to use cannabis
for medical purposes in the jurisdiction of issuance; and

(3) is not a resident of Illinois and has been visiting
Illinois for 30 days or less or who has been a resident of
Illinois for less than 30 days.

(t) "Written certification" means a document dated and
signed by a physician, stating (1) that in the physician's
professional opinion the patient is likely to receive
therapeutic or palliative benefit from the medical use of
cannabis to treat or alleviate the patient's debilitating
medical condition or symptoms associated with the debilitating
medical condition; (2) that the qualifying patient has a
debilitating medical condition and specifying what
debilitating medical condition the qualifying patient has; and
(3) that the patient is under the physician's care for the
debilitating medical condition. A written certification shall
be made only in the course of a bona fide physician-patient
relationship, after the physician has completed an assessment
of the qualifying patient's medical history and a physical
exam.
Section 15. Protections for the medical use of cannabis.

(a) A registered qualifying patient shall not be subject to arrest, prosecution, or denial of any right or privilege, including but not limited to civil penalty or disciplinary action by an occupational or professional licensing board or bureau, for the medical use of cannabis in accordance with this Act, if the registered qualifying patient possesses an amount of cannabis that does not exceed an "adequate supply" as defined in subsection (a) of Section 10 of this Act of usable cannabis.

(b) A registered designated caregiver shall not be subject to arrest, prosecution, or denial of any right or privilege, including but not limited to civil penalty or disciplinary action by an occupational or professional licensing board or bureau, for acting in accordance with this Act to assist a registered qualifying patient to whom he or she is connected through the Department’s registration process with the medical use of cannabis if the designated caregiver possesses an amount of cannabis that does not exceed an "adequate supply" as defined in subsection (a) of Section 10 of this Act of usable cannabis. It is the intent of this provision that the total amount possessed between the qualifying patient and caregiver shall not exceed the patient's "adequate supply" as defined in subsection (a) of Section 10 of this Act.

(c) All cannabis plants possessed pursuant to this Section must be kept in an enclosed, locked facility, unless they are...
being transported because the cardholder is moving, the registered qualifying patient has changed his or her designation of who can cultivate, or the plants are being given to someone allowed to possess them pursuant to this Act.

(d)(1) A visiting qualifying patient shall not be subject to arrest, prosecution, or denial of any right or privilege, including but not limited to civil penalty or disciplinary action by an occupational or professional licensing board or bureau, for the medical use of cannabis pursuant to this Act if the visiting qualifying patient does not possess more than an adequate supply of usable cannabis. A visiting qualifying patient may not cultivate cannabis.

(2) If a person in possession of no more than an adequate supply of usable cannabis claims to be a visiting qualifying patient, but the law enforcement agent is not able to verify the registry identification card or its equivalent or that the person has been in the State for 30 days or less, the agent may issue the visiting qualifying patient a summons for possession of cannabis. The summons shall be dismissed if the person demonstrates his or her status as a visiting qualifying patient.

(e) A registered qualifying patient, visiting qualifying patient, or registered designated caregiver shall not be subject to arrest, prosecution, or denial of any right or privilege, including but not limited to civil penalty or disciplinary action by a occupational or professional
licensing board or bureau, for:

(1) possession of cannabis that is incidental to medical use, but is not cannabis plants or usable cannabis as defined in this Act, such as seeds or stalks;

(2) selling, transferring, or delivering cannabis seeds produced by the registered qualifying patient, visiting qualifying patient, or registered designated caregiver to a registered medical cannabis organization, as long as the person transferring the seeds was allowed to cultivate cannabis plants under State law;

(3) transferring an amount of cannabis that is no greater than an adequate supply, as defined in subsection (a) of Section 10 to a registered safety compliance facility for testing; or

(4) giving cannabis to a registered qualifying patient, a registered medical cannabis organization, or a registered designated caregiver for a registered qualifying patient's medical use where nothing of value is transferred in return, or for offering to do the same, if the person giving the cannabis does not knowingly cause the recipient to possess more cannabis than is permitted by this Section.

(f)(1) There shall be a presumption that a qualifying patient is engaged in, or a designated caregiver is assisting with, the medical use of cannabis in accordance with this Act if the qualifying patient or designated caregiver:
(A) is in possession of a valid registry identification card; and

(B) is in possession of an amount of cannabis that does not exceed the amount allowed under subsection (a) of Section 10.

(2) The presumption may be rebutted by evidence that conduct related to cannabis was not for the purpose of treating or alleviating the qualifying patient's debilitating medical condition or symptoms associated with the debilitating medical condition in compliance with this Act.

(g) A physician shall not be 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 by the Medical Disciplinary Board or by any other occupational or professional licensing board or bureau, solely for providing written certifications 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 to treat or alleviate the patient's debilitating medical condition or symptoms associated with the debilitating medical condition, provided that nothing shall prevent a professional licensing board from sanctioning a physician for:

(1) issuing a written certification to a patient who is not under the physician's care for a debilitating medical condition, or
(2) failing to properly evaluate a patient's medical condition or otherwise violating the standard of care for evaluating medical conditions.

(h) No person may be subject to arrest, prosecution, or denial of any right or privilege, including but not limited to civil penalty or disciplinary action by an occupational or professional licensing board or bureau, solely for:

(1) selling cannabis paraphernalia to a cardholder upon presentation of an unexpired registry identification card in the recipient's name or to a medical cannabis organization agent or safety compliance facility agent upon presentation of an unexpired copy of the entity's registration certificate;

(2) being in the presence or vicinity of the medical use of cannabis as allowed under this Act; or

(3) assisting a registered qualifying patient with the act of administering cannabis. By way of illustration and not limitation, this includes by loading or lighting a vaporizer for a qualifying patient.

(i) A registered medical cannabis organization shall not be subject to prosecution; search or inspection, except by the Department pursuant to subsection (r) of Section 90; seizure; or penalty in any manner, or be denied any right or privilege, including but not limited to civil penalty or disciplinary action by a business licensing board or entity, for:

(1) acting pursuant to this Act and Department rules
to: acquire, possess, cultivate, manufacture, deliver, transfer, transport, supply, sell, or dispense cannabis or related supplies and educational materials to registered qualifying patients and visiting qualifying patients who have designated the medical cannabis organization to provide for them, to registered designated caregivers on behalf of the registered qualifying patients who have designated the registered medical cannabis organization, or to other registered medical cannabis organizations; or

(2) acting pursuant to this Act and Department rules to sell or transfer cannabis seeds to a person or entity allowed to possess cannabis for patients' medical use under the laws of Illinois or another state, country, territory, commonwealth, district, or insular possession.

(j) A medical cannabis organization agent shall not be subject to prosecution, search, or penalty in any manner, or be denied any right or privilege, including but not limited to civil penalty or disciplinary action by a business licensing board or entity, for working or volunteering for a registered medical cannabis organization pursuant to this Act and Department rules, including to perform the actions listed under subsection (i).

(k) A person or entity who is allowed to possess cannabis for one or more patients' medical use under the laws of Illinois or another state, country, territory, commonwealth, district, or insular possession shall not be 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 by a business or occupational or
professional licensing board or bureau, for transferring or
selling cannabis seeds to a registered qualifying patient,
registered primary caregiver, or registered medical cannabis
organization.

(l) A common carrier or agent of a common carrier may
transport cannabis, cannabis seeds, and related equipment to
persons who are exempted from criminal penalties under State
law for possessing cannabis for one or more patients' medical
use.

(m) A registered safety compliance facility and safety
compliance facility agents acting on behalf of a registered
safety compliance facility shall not be subject to prosecution;
search, except by the Department pursuant to subsection (r) of
Section 90; seizure; or penalty in any manner, or be denied any
right or privilege, including but not limited to civil penalty
or disciplinary action by a business or occupational or
professional licensing board or entity, solely for acting in
accordance with this Act and Department rules to provide the
following services:

(1) acquiring or possessing cannabis obtained from
registered cardholders or registered medical cannabis
organizations;

(2) returning the cannabis to the same registered
cardholders or registered medical cannabis organizations;

(3) transporting cannabis that was produced by registered cardholders and registered medical cannabis organizations to or from those registered cardholders and registered medical cannabis organizations;

(4) cultivating, manufacturing, and possessing cannabis for training and analytical testing;

(5) the production or sale of educational materials related to medical cannabis;

(6) the production, sale, or transportation of equipment or materials other than cannabis to registered medical cannabis organizations or cardholders, including lab equipment and packaging materials, that are used by registered medical cannabis organizations and cardholders;

(7) testing of medical cannabis samples, including for potency and contamination;

(8) providing training to cardholders and prospective medical cannabis organization agents, provided that only cardholders and persons who have proven they are medical cannabis organization agents may be allowed to possess or cultivate cannabis and any possession or cultivation of cannabis must occur on the location registered with the Department; and

(9) receiving compensation for actions exempted from State criminal penalties under State law under this Section.
(n) Any cannabis, cannabis paraphernalia, licit property, or interest in licit property that is possessed, owned, or used in connection with the medical use of cannabis as allowed under this Act, or acts incidental to such use, shall not be seized or forfeited. This Act shall not prevent the seizure or forfeiture of cannabis exceeding the amounts allowed under this Act, nor shall it prevent seizure or forfeiture if the basis for the action is unrelated to the cannabis that is possessed, manufactured, transferred, or used pursuant to this Act.

(o) Mere possession of, or application for, a registry identification card or registration certificate shall not constitute probable cause or reasonable suspicion, nor shall it be used to support the search of the person, property, or home of the person possessing or applying for the registry identification card. The possession of, or application for, a registry identification card shall not preclude the existence of probable cause if probable cause exists on other grounds.

(p) For the purposes of Illinois State law, the consumption or use of medical cannabis by a registered qualifying patient and the medical use of cannabis by a cardholder or registered medical cannabis organization shall be considered lawful as long as it is in accordance with this Act.

Section 20. Limitations and penalty.

(a) This Act shall not permit any person to engage in, and does not prevent the imposition of any civil, criminal, or
other penalties for engaging in, the following conduct:

(1) Undertaking any task under the influence of cannabis, when doing so would constitute negligence or professional malpractice;

(2) Possessing cannabis, or otherwise engaging in the medical use of cannabis:
   (A) in a school bus;
   (B) on the grounds of any preschool or primary or secondary school; or
   (C) in any correctional facility.

(3) Smoking cannabis:
   (A) on any form of public transportation; or
   (B) in any public place.

(4) Operating, navigating, or being in actual physical control of any motor vehicle, aircraft, or motorboat while under the influence of cannabis, except that a registered qualifying patient or visiting qualifying patient shall not be considered to be under the influence of cannabis solely because of the presence of metabolites or components of cannabis that appear in insufficient concentration to cause impairment.

(5) Using cannabis if that person does not have a debilitating medical condition.

(6) Allowing any person who is not allowed to use cannabis under this Act to use cannabis that a cardholder is allowed to possess pursuant to this Act.
(7) Transferring cannabis to any person who is not allowed to possess cannabis under this Act.

(b) Nothing in this Act shall be construed to prevent the arrest or prosecution of a registered qualifying patient for reckless driving or driving under the influence of cannabis where probable cause exists.

(c) This Act shall in no way limit an employer's ability to discipline an employee for ingesting cannabis in the workplace or for working while under the influence of cannabis. This Act shall in no way limit an employer's ability to discipline an employee for failing a drug test if failing to do so would put the employer in violation of federal law or cause it to lose a federal contract or funding.

(d) Fraudulent representation to a law enforcement official of any fact or circumstance relating to the medical use of cannabis to avoid arrest or prosecution is a petty offense punishable by a fine of up to $1,000, which shall be in addition to any other penalties that may apply for making a false statement or for the use of cannabis other than use undertaken pursuant to this Act.

(e) Any person who fraudulently represents a medical condition to a physician or fraudulently provides material misinformation to a physician in order to obtain written certification is guilty of a petty offense punishable by a fine of up to $1,000.
Section 25. Discrimination prohibited.

(a)(1) No school, employer, or landlord may refuse to enroll or lease to, or otherwise penalize, a person solely for his or her status as a registered qualifying patient or a registered designated caregiver, unless failing to do so would put the school, employer, or landlord in violation of federal law or unless failing to do so would cause it to lose a monetary or licensing-related benefit under federal law or regulations. This shall not prevent a landlord from prohibiting the cultivation of cannabis on leased premises or from prohibiting the smoking of cannabis on the premises.

(2) For the purposes of medical care, including organ transplants, a registered qualifying patient's authorized use of cannabis in accordance with this Act shall be considered the equivalent of the authorized use of any other medication used at the direction of a physician, and shall not constitute the use of an illicit substance or otherwise disqualify a qualifying patient from needed medical care.

(b) A person otherwise entitled to custody of or visitation or parenting time with a minor shall not be denied such a right, and there shall be no presumption of neglect or child endangerment, for conduct allowed under this Act, unless the person's actions in relation to cannabis were such that they created an unreasonable danger to the safety of the minor as established by clear and convincing evidence.

(c) No school, landlord, or employer may be penalized or
denied any benefit under State law for enrolling, leasing to, or employing a cardholder.

Section 30. Addition of debilitating medical conditions. Any citizen may petition the Department to add debilitating conditions or treatments to the list of debilitating medical conditions listed in subsection (d) of Section 10. The Department shall consider petitions in the manner required by Department regulation, including public notice and hearing. The Department shall approve or deny a petition within 180 days of its submission. The approval or denial of any petition is a final decision of the Department, subject to judicial review. Jurisdiction and venue are vested in the Circuit Court.

Section 35. Acts not required; acts not prohibited.

(a) Nothing in this Act may be construed to require:

(1) a government medical assistance program or private health insurer to reimburse a person for costs associated with the medical use of cannabis;

(2) any person or establishment in lawful possession of property to allow a guest, client, customer, or other visitor to smoke cannabis on or in that property; or

(3) an employer to allow the ingestion of cannabis in any workplace or to allow any employee to work while under the influence of cannabis, except that a registered qualifying patient shall not be considered to be under the
influence of cannabis solely because of the presence of metabolites or components of cannabis that appear in insufficient concentration to cause impairment.

(b) Nothing in this Act prohibits an employer from disciplining an employee for ingesting cannabis in the workplace or working while under the influence of cannabis.

Section 40. Registration of qualifying patients and designated caregivers.

(a) The Department shall issue registry identification cards to qualifying patients who submit the following, in accordance with the Department's rules:

1. a written certification, on a form developed by the Department and issued by a physician, within 90 days immediately preceding the date of an application;
2. any documentation or information reasonably required by the Department to confirm that the physician and patient have a bona fide physician-patient relationship, that the qualifying patient is in the physician's care for his or her debilitating medical condition, and to substantiate the patient's diagnosis;
3. the application or renewal fee;
4. the name, address, and date of birth of the qualifying patient, except that if the applicant is homeless no address is required;
5. the name, address, and telephone number of the
(6) the name, address, and date of birth of the designated caregiver, if any, chosen by the qualifying patient;

(7) the name of the registered medical cannabis organization the qualifying patient designates, if any;

(8) if the qualifying patient designates a designated caregiver, a designation as to whether the qualifying patient or designated caregiver will be allowed under State law to possess and cultivate cannabis plants for the qualifying patient's medical use;

(9) a statement signed by the qualifying patient, pledging not to divert cannabis to anyone who is not allowed to possess cannabis pursuant to this Act; and

(10) a signed statement from the designated caregiver, if any, agreeing to be designated as the patient's designated caregiver and pledging not to divert cannabis to anyone who is not allowed to possess cannabis pursuant to this Act.

(b) The application for qualifying patients' registry identification cards shall ask whether the patient would like the Department to notify him or her of any clinical studies needing human subjects for research on the medical use of cannabis. The Department shall notify interested patients if it is notified of studies that will be conducted in the United States.
Section 45. Issuance of registry identification cards.

(a) Except as provided in subsection (b), the Department shall:

   (1) Verify the information contained in an application or renewal submitted pursuant to this Act, and approve or deny an application or renewal, within 20 days of receiving a completed application or renewal application.

   (2) Issue registry identification cards to a qualifying patient and his or her designated caregiver, if any, within 5 days of approving the application or renewal.

   (3) Enter the registry identification number of the registered medical cannabis organization the patient designates into the verification system.

(b) The Department shall not issue a registry identification card to a qualifying patient who is younger than 18 years of age unless:

   (1) the qualifying patient's physician has explained the potential risks and benefits of the medical use of cannabis to the custodial parent or legal guardian with responsibility for health care decisions for the qualifying patient; and

   (2) the custodial parent or legal guardian with responsibility for health care decisions for the qualifying patient consents in writing to:

      (A) allow the qualifying patient's medical use of
cannabis;

(B) serve as the qualifying patient's designated caregiver; and

(C) control the acquisition of the cannabis, the dosage, and the frequency of the medical use of cannabis by the qualifying patient.

Section 50. Denial of registry identification cards.

(a) The Department may deny an application or renewal of a qualifying patient's registry identification card only if the applicant:

(1) did not provide the required information and materials;

(2) previously had a registry identification card revoked;

(3) did not meet the requirements of this Act; or

(4) provided false or falsified information.

(b) The Department may deny an application or renewal for a designated caregiver chosen by a qualifying patient whose registry identification card was granted only if:

(1) the designated caregiver does not meet the requirements of subsection (f) of Section 10;

(2) the applicant did not provide the information required;

(3) the prospective patient's application was denied;

(4) the designated caregiver previously had a registry
identification card revoked; or

(5) the applicant or the designated caregiver provided false or falsified information.

(c) The Department may conduct a background check of the prospective designated caregiver in order to carry out this provision.

(d) The Department shall notify the qualifying patient who has designated someone to serve as his or her designated caregiver if a registry identification card will not be issued to the designated caregiver.

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

Section 55. Registry identification cards.

(a) Registry identification cards shall contain all of the following:

(1) The name of the cardholder;

(2) A designation of whether the cardholder is a designated caregiver or qualifying patient;

(3) The date of issuance and expiration date of the registry identification card;

(4) A random 10-digit alphanumeric identification number, containing at least four numbers and at least four letters, that is unique to the cardholder;
(5) A clear designation as to whether the cardholder will be allowed under State law to possess the cannabis plants for the qualifying patient's medical use, which shall be determined based solely on the qualifying patient's preference;

(6) If the cardholder is a designated caregiver, the random 10-digit alphanumeric identification number of the qualifying patient the designated caregiver is receiving the registry identification card to assist;

(7) A photograph of the cardholder, if the Department's rules require one; and

(8) The phone number or Web address for the verification system.

(b) Except as provided in this subsection, the expiration date shall be one year after the date of issuance. If the physician stated in the written certification that the qualifying patient would benefit from cannabis until a specified earlier date, then the registry identification card shall expire on that date.

(c) The Department may, at its discretion, electronically store in the card any or all of the information listed in subsection (a), along with the address and date of birth of the cardholder, to allow it to be read by law enforcement agents.

Section 60. Notifications to Department and responses; civil penalty.
(a) The following notifications and Department responses are required:

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

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

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

(4) When a registered qualifying patient changes his or her preference as to who may cultivate cannabis for the qualifying patient, the qualifying patient must notify the Department. The plants may not be transferred until the registered qualifying patient receives confirmation from the Department, at which time there shall be a 15-day period in which the plants may be transferred.

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

(b) When a cardholder notifies the Department of items listed in subsection (a), but remains eligible under this Act,
the Department shall issue the cardholder a new registry identification card with a new random 10-digit alphanumeric identification number within 10 days of receiving the updated information and a $20 fee. If the person notifying the Department is a registered qualifying patient, the Department shall also issue his or her registered designated caregiver, if any, a new registry identification card within 10 days of receiving the updated information.

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

(d) A cardholder who fails to make a notification to the Department that is required by this Section is subject to a civil infraction, punishable by a penalty of no more than $150.

(e) A registered qualifying patient shall notify the Department before changing his or her designated registered medical cannabis organization and pay a $20 fee. The Department must, within 5 business days of receiving the notification, update the registered qualifying patient's entry in the identification registry system to reflect the change in designation and notify the patient that the change has been processed.

(f) If the registered qualifying patient's certifying
physician notifies the Department in writing that either the
registered qualifying patient has ceased to suffer from a
debilitating medical condition or that the physician no longer
believes the patient would receive therapeutic or palliative
benefit from the medical use of cannabis, the card shall become
null and void. However, the registered qualifying patient shall
have 15 days to dispose of his or her cannabis.

Section 65. Registration of compassion centers.

(a) Medical cannabis organizations may only operate if they
have been issued a valid registration certificate from the
Department. When applying for a medical cannabis organization
registration certificate, the applicant shall submit the
following in accordance with Department rules:

(1) A $15,000 application fee, $14,000 of which shall
be refunded if the application is not granted.

(2) The proposed legal name of the medical cannabis
organization.

(3) The proposed physical address of the medical
cannabis organization and the proposed physical address of
any additional locations where cannabis will be
cultivated, harvested, packaged, labeled, or otherwise
prepared for distribution by the medical cannabis
organization.

(4) The name, address, and date of birth of each
principal officer and board member of the medical cannabis
organization, provided that all such individuals shall be
at least 21 years of age.

(5) Any instances in which a business or not-for-profit
that any of the prospective board members managed or served
on the board of was convicted, fined, censured, or had a
registration or license suspended or revoked in any
administrative or judicial proceeding.

(6) Proposed operating by-laws that include procedures
for the oversight of the medical cannabis organization and
procedures to ensure accurate record keeping and security
measures that are in accordance with the rules issued by
the Department pursuant to this Act. The by-laws shall
include a description of the enclosed, locked facility
where medical cannabis will be grown, cultivated,
harvested, packaged, labeled, or otherwise prepared for
distribution by the medical cannabis organization.

(7) Any information required by the Department to
evaluate the applicant pursuant to the competitive bidding
process described in subsection (b).

(b) The Department shall evaluate applications for medical
cannabis organization registration certificates using an
impartial and numerically scored competitive bidding process
developed by the Department in accordance with this Act. The
registration considerations shall consist of the following
criteria:

(1) The suitability of the proposed location or
locations, including compliance with any local zoning laws and the geographic convenience to patients from throughout the State of Illinois to medical cannabis organizations if the applicant were approved.

(2) The principal officer and board members' character and relevant experience, including any training or professional licensing related to medicine, pharmaceuticals, natural treatments, botany, or medical cannabis cultivation and preparation and their experience running businesses or not-for-profits.

(3) The proposed medical cannabis organization's plan for operations and services, including its staffing and training plans, whether it has sufficient capital to operate, and its ability to provide an adequate supply of medical cannabis to the registered patients in the State.

(4) The sufficiency of the applicant's plans for record keeping.

(5) The sufficiency of the applicant's plans for safety, security, and the prevention of diversion, including proposed locations and security devices employed.

(6) The applicants plan for making medical cannabis available on an affordable basis to registered qualifying patients enrolled in Medicaid or receiving Supplemental Security Income or Social Security Disability Insurance.

(7) The applicant's plan for safe and accurate
packaging and labeling of medical cannabis, including the applicant's plan for ensuring that all medical cannabis is free of contaminants.

(c) No later than one year after the effective date of this Act, provided that at least 25 applications have been submitted, the Department shall issue medical cannabis organization registration certificates to the 25 highest-scoring applicants. If fewer than 25 applications have been submitted, the Department shall issue medical cannabis organization registration certificates to all qualified applicants.

(d) No later than 18 months after the effective date of this Act, the Department shall issue registration certifications to at least 25 of the highest-scoring applicants not already awarded a registration certificate, provided a sufficient number of additional applications have been submitted. If fewer than 25 additional applications have been submitted, the Department shall issue medical cannabis organization registration certificates to all qualified applicants. If the Department determines, after considering stakeholders' input collected pursuant to subsection (e) of Section 110, that additional medical cannabis organizations are needed to meet the needs of registered qualifying patients throughout the State, the Department shall issue registration certificates to the corresponding number of applicants who score the highest. When awarding the second and any subsequent
set of applications, the Department shall ensure that there is at least one medical cannabis organization in each of the State police districts that has a qualified applicant.

(e)(1) At any time after 19 months after the effective date of this Act that the number of outstanding and valid registered medical cannabis organization certificates is lower than either 50 or the number the Department has determined are needed to meet the needs of patients, whichever is greater, the Department shall accept applications for medical cannabis organizations and issue registration certificates to the corresponding number of additional applicants who score the highest.

(2) Notwithstanding subsections (c), (d), and (e), an application for a medical cannabis organization registration certificate must be denied if any of the following conditions are met:

   (A) the applicant failed to submit the materials required by this Section, including if the applicant's plans do not satisfy the security, oversight, or recordkeeping rules issued by the Department;

   (B) the applicant would not be in compliance with local zoning regulations issued in accordance with Section 80;

   (C) the applicant does not meet the requirements of Section 90;

   (D) one or more of the prospective principal officers or board members has been convicted of an excluded offense;
(E) one or more of the prospective principal officers
or board members has served as a principal officer or board
member for a registered medical cannabis organization that
has had its registration certificate revoked; and
(F) one or more of the principal officers or board
members is younger than 21 years of age.

(f) After a medical cannabis organization is approved, but
before it begins operations, it shall submit its physical
address if the address was not finalized when it applied.

(g) When issuing a medical cannabis organization
registration certificate, the Department shall also issue a
renewable registration certificate with an identification
number.

Section 70. Registration and certification of safety
compliance facilities.

(a) When applying for a safety compliance facility
registration certificate, an applicant shall submit the
following in accordance with Department rules:

(1) A $10,000 application fee, $9,000 of which shall be
refunded if the application is not granted;
(2) the proposed legal name of the safety compliance
facility;
(3) the proposed physical address of the safety
compliance facility;
(4) the name, address, and date of birth of each
principal officer and board member of the safety compliance facility, provided that all such individuals shall be at least 21 years of age;

(5) any instances in which a business or not-for-profit that any of the prospective board members managed or served on the board of was convicted, fined, censured, or had a registration or license suspended or revoked in any administrative or judicial proceeding; and

(6) any information required by the Department to evaluate the applicant pursuant to the competitive bidding process described in subsection (b).

(b) The Department shall evaluate applications for safety compliance facility registration certificates using an impartial and numerically scored competitive bidding process developed by the Department in accordance with this Act. The registration considerations shall consist of the following criteria:

(1) The proposed principal officers' and board members' relevant experience, including any training or professional licensing related to analytical testing, medicine, pharmaceuticals, natural treatments, botany, or medical cannabis cultivation, preparation, and testing and their experience running businesses or not-for-profits;

(2) The suitability of the proposed location, including compliance with any local zoning laws and the geographic convenience to cardholders and registered
medical cannabis organizations from throughout the State of Illinois to registered safety compliance facilities if the applicant were approved;

(3) The sufficiency of the applicant's plans for safety, security, and the prevention of diversion, including proposed locations and security devices employed; and

(4) The proposed safety compliance facility's plan for operations and services, including its staffing and training plans, and whether it has sufficient capital to operate.

(c) The Department shall issue at least 3 safety compliance facility registration certificates to the highest-scoring qualified applicants within one year of the effective date of this Act.

(d)(1) The Department may issue additional safety compliance facility registration certificates to the highest-scoring applicant or applicants. If the Department determines, after reviewing the report issued pursuant to subsection (e) of Section 110, that additional safety compliance facilities are needed to meet the needs of cardholders and registered medical cannabis organizations throughout the State, the Department shall issue registration certificates to the corresponding number of applicants who score the highest.

(2) Notwithstanding subsections (c) and (d), an
application for a safety compliance facility registration certificate must be denied if any of the following conditions are met:

(A) the applicant failed to submit the materials required by this Section, including if the plans do not satisfy the security, oversight, or recordkeeping rules issued by the Department;

(B) the applicant would not be in compliance with local zoning regulations issued in accordance with Section 80;

(C) the applicant does not meet the requirements of Section 90.

(D) one or more of the prospective principal officers or board members has been convicted of an excluded offense;

(E) one or more of the prospective principal officers or board members has served as a principal officer or board member for a registered safety compliance facility or registered medical cannabis organization that has had its registration certificate revoked; and

(F) one or more of the principal officers or board members is younger than 21 years of age.

(e) After a safety compliance facility is approved, but before it begins operations, it shall submit its physical address if the address was not finalized when it applied.

(f) When issuing a safety compliance facility registration certificate, the Department shall also issue a renewable registration certificate with an identification number. The
Department shall also provide the registered safety compliance facility with the contact information for the verification system.

Section 75. Compassion center and safety compliance facilities renewal. Registration certificates may be renewed every 2 years. The registered medical cannabis organization or registered safety compliance facility may submit a renewal application beginning 90 days prior to the expiration of its registration certificate. The Department shall grant a renewal application within 45 days of its submission if the following conditions are all satisfied:

(a) the registered medical cannabis organization or registered safety compliance facility submits a renewal application and the required renewal fee, which shall be refunded within 60 days if the renewal application is rejected;

(b) the Department has not suspended the registered medical cannabis organization or registered safety compliance facility's registration certificate for violations of this Act or rules adopted pursuant to this Act; and

(c) the inspections authorized by subsection (r) of Section 90 and the input the Department received from stakeholders pursuant to subsection (e) of Section 110 do not raise serious and credible concerns about the continued operation of the registered medical cannabis organization or registered safety compliance facility applying for renewal.
Section 80. Local ordinances. Nothing shall prohibit local
governments from enacting ordinances or regulations not in
conflict with this Act or with Department rules regulating the
time, place, and manner of registered medical cannabis
organization operations and registered safety compliance
facility operations, provided that no local government may
prohibit registered medical cannabis organization or
registered safety compliance facility operations altogether,
either expressly or through the enactment of ordinances or
regulations which make registered medical cannabis
organization and registered safety compliance facility
operation unreasonably impracticable in the jurisdiction.

Section 85. Compassion center and safety compliance
facility agents.

(a) Registered medical cannabis organizations and
registered safety compliance facilities shall conduct a
background check into the criminal history of every person
seeking to become a principal officer, board member, agent,
volunteer, or employee before the person begins working at the
registered medical cannabis organization or registered safety
compliance facility. A registered medical cannabis
organization may not employ any person who:

(1) was convicted of an excluded offense; or

(2) is under 21 years of age.
(b) A medical cannabis organization or safety compliance facility agent must have documentation when transporting cannabis on behalf of the registered safety compliance facility or registered medical cannabis organization that specifies the amount of cannabis being transported, the date the cannabis is being transported, the registry certificate number of the registered medical cannabis organization or registered safety compliance facility, and a contact number to verify that the cannabis is being transported on behalf of the registered medical cannabis organization or registered safety compliance facility.

Section 90. Requirements, prohibitions, and penalties.

(a) The operating documents of a registered medical cannabis organization shall include procedures for the oversight of the registered medical cannabis organization and procedures to ensure accurate recordkeeping.

(b) A registered medical cannabis organization and a registered safety compliance facility shall implement appropriate security measures to deter and prevent the theft of cannabis and unauthorized entrance into areas containing cannabis.

(c) A registered medical cannabis organization and a registered safety compliance facility may not be located within 500 feet of the property line of a pre-existing public or private preschool, elementary, or secondary school.
(d) A registered medical cannabis organization is prohibited from acquiring, possessing, cultivating, manufacturing, delivering, transferring, transporting, supplying, or dispensing cannabis for any purpose except to assist registered qualifying patients with the medical use of cannabis directly or through the qualifying patients' designated caregivers. This does not prevent a registered medical cannabis organization from selling or transferring cannabis to other medical cannabis organizations.

(e) All cultivation of cannabis for registered medical cannabis organizations must take place in an enclosed, locked location at the physical address or addresses provided to the Department during the registration process. The cultivation location can only be accessed by medical cannabis organization agents working for the registered medical cannabis organization, Department staff performing inspections, law enforcement or other emergency personnel, and contractors working on jobs unrelated to medical cannabis, such as installing or maintaining security devices or performing electrical wiring.

(f) A registered medical cannabis organization may not acquire usable cannabis or mature cannabis plants from any person other than another registered medical cannabis organization, a registered qualifying patient, or a registered designated caregiver. A registered medical cannabis organization is only allowed to acquire usable cannabis or
cannabis plants from a registered qualifying patient or a registered designated caregiver if the registered qualifying patient or registered designated caregiver receives no compensation for the cannabis. A medical cannabis organization may not obtain cannabis from outside the State of Illinois, except that a medical cannabis organization may purchase cannabis seeds outside of the State of Illinois once during its registration period.

(g) Before cannabis may be dispensed to a designated caregiver or a registered qualifying patient, a medical cannabis organization agent must determine that the individual is a current cardholder in the verification system and must verify each of the following:

(1) that the registry identification card presented to the registered medical cannabis organization is valid;

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

(3) that the registered medical cannabis organization is the designated medical cannabis organization for the registered qualifying patient who is obtaining the cannabis directly or via his or her designated caregiver.

(h)(1) Except as provided in clause (h)(2), a registered medical cannabis organization shall not dispense more than 2 ounces of cannabis to a registered qualifying patient, directly or via a designated caregiver, in any 14-day period.
(2) A registered medical cannabis organization may dispense more than 2 ounces of cannabis to a registered qualifying patient in a 14-day period if the registered qualifying patient or the registered qualifying patient's designated caregiver presents a signed statement from the registered qualifying patient's physician that the registered qualifying patient needs a specified greater amount in a 14-day period. A medical cannabis organization agent must verify the statement's authenticity with the physician's office. Each statement shall allow for a waiver from the limit specified in clause (h)(1) for no more than 90 days.

(3) A registered medical cannabis organization may not dispense more cannabis to a registered qualifying patient or the registered qualifying patient's designated caretaker at any one time than they are permitted to possess under the definition of "adequate supply" in subsection (a) of Section 10.

(4) Registered medical cannabis organizations shall ensure compliance with this limitation by maintaining internal, confidential records that include records specifying how much cannabis is being dispensed to the registered qualifying patient and whether it was dispensed directly to the registered qualifying patient or to the designated caregiver. Each entry must include the date and time the cannabis was dispensed.

(i) A registered medical cannabis organization or medical cannabis organization agent may only dispense cannabis to a
visiting qualifying patient if he or she possesses a valid Illinois registry identification card and if the procedures in subsections (g) and (h) are followed.

(j) A registered medical cannabis organization shall not share office space with, nor refer patients to, a physician.

(k) A physician shall not refer patients to a registered medical cannabis organization or registered designated caregiver, advertise in a registered medical cannabis organization, or, if the physician issues written certifications, hold any financial interest in a registered medical cannabis organization.

(l) No person who has been convicted of an excluded offense may be a medical cannabis organization agent or safety compliance facility agent.

(m) The Department may issue a civil fine of up to $3,000 for violations of this Section.

(n) The Department may suspend or revoke a registration certificate for serious or multiple violations of this Act and rules issued in accordance with this Act. A registered medical cannabis organization may continue to cultivate and possess cannabis plants during a suspension, but it may not dispense, transfer, or sell cannabis. If a medical cannabis organization registration certificate is revoked, the medical cannabis organization shall have 10 days to sell or give its cannabis away to other registered medical cannabis organizations.

(o) The suspension or revocation of a certificate is a
final Department action, subject to judicial review. Jurisdiction and venue for judicial review are vested in the Illinois Circuit Court.

(p) Any cardholder who sells cannabis to a person who is not allowed to possess cannabis for medical purposes under this Act shall have his or her registry identification card revoked and shall be subject to other penalties for the unauthorized sale of cannabis.

(q) The Department may revoke the registry identification card of any cardholder who knowingly commits multiple or serious violations of this Act.

(r) Registered medical cannabis organizations are subject to random inspection by Department rules. The Department shall give reasonable notice of an inspection under this paragraph.

Section 95. Confidentiality.

(a) The following information received and records kept by Department rules for purposes of administering this Act are confidential and exempt from the Freedom of Information Act, and not subject to disclosure to any individual or public or private entity, except as necessary for authorized employees of the Department to perform official duties pursuant to this Act:

   (1) Applications and renewals, their contents, and supporting information submitted by qualifying patients and designated caregivers, including information regarding their designated caregivers and physicians.
(2) Applications and renewals, their contents, and supporting information submitted by or on behalf of medical cannabis organizations and safety compliance facilities in compliance with this Act, including their physical addressees.

(3) The individual names and other information identifying persons to whom the Department has issued registry identification cards.

(4) Any dispensing information required to be kept under clause (h)(4) of Section 90 or Department rules shall identify cardholders and registered medical cannabis organizations by their registry identification numbers and not contain names or other personally identifying information.

(5) Any Department hard drives or other data-recording media that are no longer in use and that contain cardholder information must be destroyed. The Department shall retain a signed statement from a Department employee confirming the destruction.

(6) Data subject to this Section shall not be combined or linked in any manner with any other list or database and it shall not be used for any purpose not provided for in this Act.

(b) Nothing in this Section precludes the following:

(1) Department employees may notify law enforcement about falsified or fraudulent information submitted to the
Department if the employee who suspects that falsified or fraudulent information has been submitted conferred with his or her supervisor and both agree that circumstances exist that warrant reporting.

(2) If the employee conferred with his or her supervisor and both agree that circumstances exist that warrant reporting, Department employees may notify the Medical Disciplinary Board if there is reasonable cause to believe a physician:

(A) issued a written certification without a bona fide physician-patient relationship;

(B) issued a written certification to a person who was not under the physician's care for the debilitating medical condition; or

(C) failed to abide by the standard of care when evaluating medical conditions.

(3) The Department may notify State or local law enforcement about apparent criminal violations of this Act if the employee who suspects the offense has conferred with his or her supervisor and both agree that circumstances exist that warrant reporting.

(4) Medical cannabis organization agents may notify the Department of a suspected violation or attempted violation of this Act or the rules issued pursuant to it.

(5) The Department may verify registry identification cards pursuant to Section 100.
(6) The submission of the Section 105 report to the General Assembly.

(c) It shall be a Class B misdemeanor for any person, including an employee or official of the Department or another State agency or local government, to breach the confidentiality of information obtained pursuant to this Act.

Section 100. Registry identification and registration certificate verification.

(a) The Department shall maintain a confidential list of the persons to whom the Department has issued registry identification cards and their addresses, phone numbers, and registry identification numbers. This confidential list shall not be combined or linked in any manner with any other list or database, nor shall it be used for any purpose not provided for in this Act.

(b) Within 120 days of the effective date of this Act, the Department shall establish a verification system. The verification system must allow law enforcement personnel, medical cannabis organization agents, and safety compliance facility agents to enter a registry identification number to determine whether or not the number corresponds with a current, valid registry identification card. The system shall only disclose whether the identification card is valid; whether the cardholder is a registered qualifying patient or a registered designated caregiver; whether the cardholder is permitted to
cultivate under this Act; and the registry identification number of the registered medical cannabis organization designated to serve the registered qualifying patient who holds the card or the registry identification number of the patient who is assisted by the registered designated caregiver who holds the card.

(c) The Department shall, with a cardholder's written permission, confirm his or her status as a registered qualifying patient or registered designated caregiver to a landlord, employer, school, medical professional, or court.

Section 105. Annual reports.

(a) The Department shall submit to the General Assembly an annual report that does not disclose any identifying information about cardholders, registered medical cannabis organizations, or physicians, but does contain, at a minimum, all of the following information:

(1) the number of applications and renewals filed for registry identification cards;
(2) the number of qualifying patients and designated caregivers approved in each county;
(3) the nature of the debilitating medical conditions of the qualifying patients;
(4) the number of registry identification cards revoked for misconduct;
(5) the number of physicians providing written
certifications for qualifying patients; and

(6) the number of registered medical cannabis organizations.

Section 110. Department to issue rules and develop educational materials.

(a) By 90 days after the effective date of this Act, the Department shall adopt rules defining the quantity of cannabis that could reasonably be presumed to be a 60-day supply for qualifying patients.

(b) Not later than 120 days after the effective date of this Act, the Department shall promulgate rules:

(1) governing the manner in which the Department shall consider petitions from the public to add debilitating medical conditions or treatments to the list of debilitating medical conditions set forth in subsection (d) of Section 10 of this Act, including public notice of and an opportunity to comment in public hearings on the petitions;

(2) establishing the form and content of registration and renewal applications submitted under this Act, including a standard form for written certifications;

(3) governing the manner in which it shall consider applications for and renewals of registry identification cards, including developing separate requirements, fees, and applications for temporary registry identification
cards for visiting qualifying patients wishing to obtain cannabis from registered medical cannabis organizations; and

(4) governing the following matters related to registered medical cannabis organizations, with the goal of protecting against diversion and theft, without imposing an undue burden on the registered medical cannabis organizations or compromising the confidentiality of cardholders:

(A) oversight requirements for registered medical cannabis organizations;

(B) recordkeeping requirements for registered medical cannabis organizations;

(C) security requirements for registered medical cannabis organizations, which shall include that each registered medical cannabis organization location must be protected by a fully operational security alarm system;

(D) the competitive scoring process addressed in subsection (b) of Section 65; and

(E) procedures for suspending or terminating the registration certificates or registry identification cards of cardholders, registered medical cannabis organizations, and registered safety compliance facilities that commit multiple or serious violations of the provisions of this Act or the rules promulgated
pursuant to this Section.

(5) application and renewal fees for registry identification cards, and renewal fees for registered medical cannabis organization registration certificates, according to the following:

(A) the total fees collected must generate revenues sufficient to offset all expenses of implementing and administering this Act, except that fee revenue may be offset or supplemented by private donations;

(B) the Department may establish a sliding scale of patient application and renewal fees based upon a qualifying patient's household income;

(C) the Department may accept donations from private sources to reduce application and renewal fees; and

(D) registry identification card fees shall include an additional $3 per registry identification card, which shall be used to develop and disseminate educational information about the health risks associated with the abuse of cannabis and prescription medications.

(c) During the rule-making process and at least twice each year after the rules are issued, the Department shall make a good faith effort to consult with all stakeholders identified in the rule-making analysis as being impacted by
the rules. The Department may establish the stakeholders into an advisory task force, or it may consult with them individually. Stakeholders shall include, but are not limited to:

(1) at least 2 physicians, one of whom must have prior experience treating medical cannabis patients;

(2) at least 2 nurses, one of whom must have prior experience treating HIV/AIDS patients;

(3) at least 3 qualifying patients;

(4) a representative from the law enforcement community;

(5) the Director of State Police or his or her designee;

(6) a prosecuting attorney currently employed by the State of Illinois;

(7) a public defender currently employed by the State of Illinois;

(8) a defense attorney in private practice;

(9) a licensed phlebotomist;

(10) a horticulturist;

(11) a representative of the business community; and

(12) after the rules have been established, one board member or principal officer of a registered safety compliance facility.

(d) After consulting with the stakeholders, the Department shall recommend a policy to the General Assembly relating to
driving under the influence laws as they apply to registered
patients, including whether the presence of metabolites or
other components of cannabis should create a presumption of
driving under the influence, and, if so, what thresholds should
be established.

(e) Beginning 4 months after the issuance of the first
registrations for registered medical cannabis organizations
and at least every 6 months thereafter, the Department shall
solicit input, including from the stakeholders identified in
subsection (c) on the following:

(A) The ability of qualifying patients in all areas of
the State to obtain timely access to high-quality medical
cannabis.

(B) The effectiveness of the registered medical
cannabis organizations, individually and together, in
serving the needs of qualifying patients, including the
provision of educational and support services, the
reasonableness of their fees, whether they are generating
any complaints or security problems, and the sufficiency of
the number operating to serve the registered qualifying
patients of Illinois.

(C) The effectiveness of the registered safety
compliance facility or facilities, individually and
together, in serving the needs of cardholders and
registered medical cannabis organizations, including
whether a sufficient number are operating.
(D) The sufficiency of the regulatory and security safeguards contained in this Act and adopted by the Department to ensure that access to and use of cannabis cultivated is provided only to cardholders authorized for such purposes.

(E) Any recommended additions or revisions to the Department rules or this Act, including relating to security, safe handling, labeling, and nomenclature.

(F) Any research studies regarding health effects of medical cannabis for patients.

(g) The Department shall develop and disseminate educational information about the health risks associated with the abuse of cannabis and prescription medications, which shall be funded by the $3 fees generated from registry identification cards.

Section 115. Enforcement of this Act.

(a) If the Department fails to adopt rules to implement this Act within the times provided for in this Act, any citizen may commence an action in the Circuit Court to compel the Department to perform the actions mandated pursuant to the provisions of this Act.

(b) If the Department fails to issue a valid registry identification card in response to a valid application or renewal submitted pursuant to this Act within 30 days of its submission, the registry identification card shall be deemed
granted, and a copy of the registry identification application, including a valid written certification, or renewal shall be deemed a valid registry identification card.

(c) If at any time after the 140 days following the effective date of this Act the Department has not established a process for accepting and approving or denying applications, a notarized statement by a qualifying patient containing the information required in an application pursuant to Section 40, together with a valid written certification issued by a physician within 90 days immediately preceding the notarized statement, shall be deemed a valid registry identification card for all purposes under this Act.

Section 120. Penalty enhancements. Any registered qualifying patient or registered primary caregiver who distributes cannabis to someone who is not allowed to use cannabis is subject to a penalty enhancement of not more than 2 years in prison or a fine of not more than $2,000, or both, for abuse of the Compassionate Use of Medical Cannabis Pilot Program Act.

Section 121. Repeal of Act. This Act is repealed 3 years after its effective date.

(720 ILCS 550/11 rep.)

(720 ILCS 550/15 rep.)
Section 122. The Cannabis Control Act is amended by repealing Sections 11 and 15.

Section 123. Severability. The provisions of this Act are severable under Section 1.31 of the Statute on Statutes.