



# Opioid Alternative Pilot Program Physician Information



# Opioid Alternative Pilot Program

- Implements the provisions of P.A. 100-1114
- Creates a new program allowing qualifying patients access to medical cannabis
  - Opioid Alternative Pilot Program (OAPP) is separate and distinct from the Medical Cannabis Patient Program (MCCPP) which is limited to patients diagnosed with a qualifying debilitating medical conditions
  - Eligible patients have a current prescription for an opioid, OR patient could be prescribed an opioid based on generally accepted standards of care
- Offers physicians an additional approach to treatment for patients with chronic or acute conditions

# Opioid Alternative Pilot Program

## General Provisions

- Qualifying patients
  - Patient has a current prescription for an opioid, OR patient could be prescribed an opioid based on generally accepted standards of care
  - Must be 21 or older at the time of registration
  - No caregiver provisions for OAPP
  - Cannot have a Commercial Driver's License or School Bus Permit
  - Cannot change dispensary during 90-day registration period
- Once the patient registers, the OAPP registration is valid for 90 days

# Opioid Alternative Pilot Program

## General Provisions

- All registered patients are limited to 2.5 ounces of medical cannabis every 14-days. No waiver for the allowable amount
- No dual registration in OAPP and MCPP
  - Patients with a qualifying debilitating condition may apply for MCPP
- After 90-day registration period, qualifying patients can register again with the submission of another physician certification

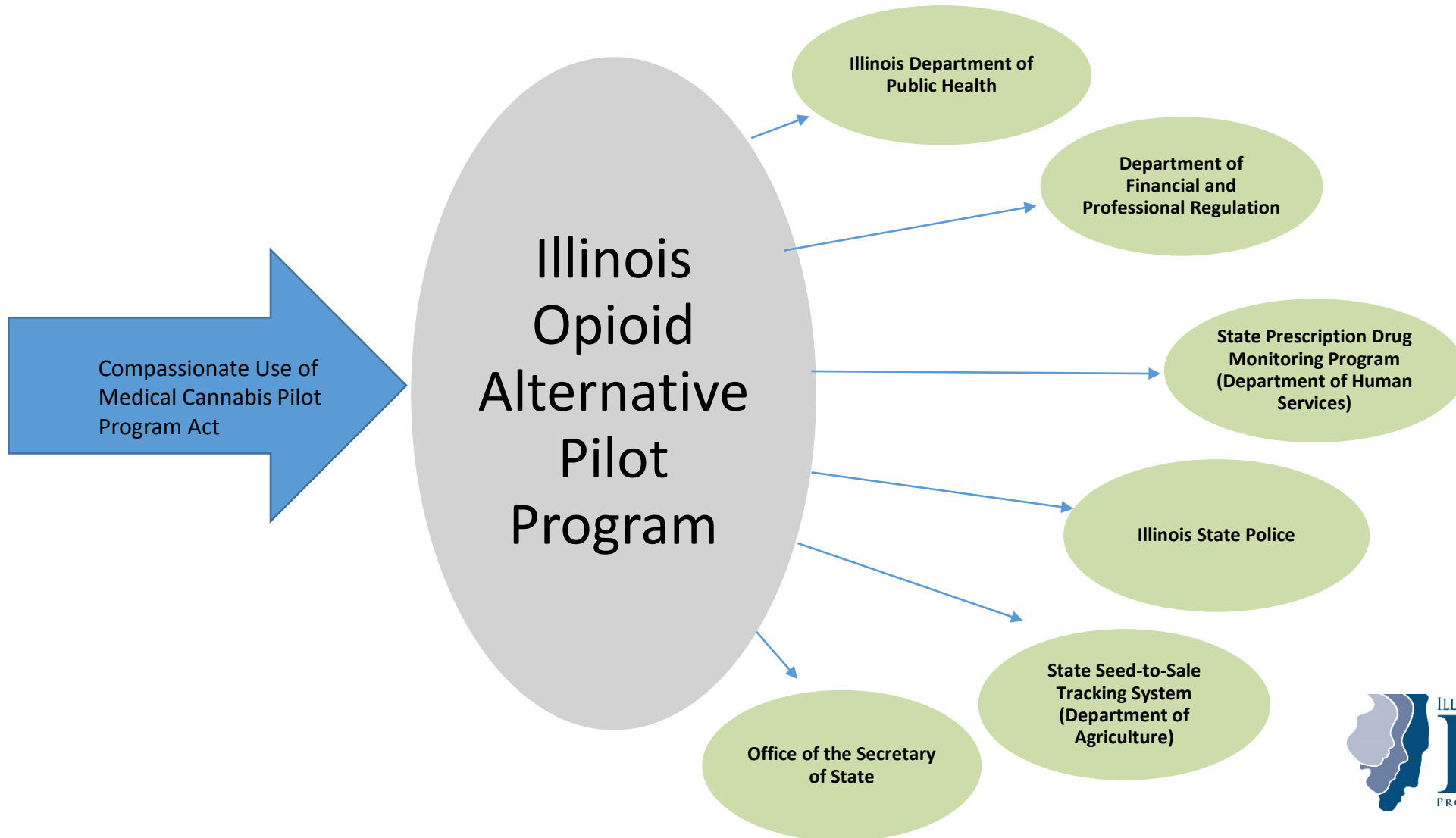
# Opioid Alternative Pilot Program

## OAPP v MCPP

- Physician certification
  - MCPP – paper certification document provided to patient by physician
  - OAPP – on-line submission of certification in secure Illinois Cannabis Tracking System
- Registration period
  - MCPP – patient may register for a 1-, 2-, or 3-year enrollment period
  - OAPP – registration period limited to 90-days
- Fees
  - MCPP - \$100 for a one-year registration card
  - OAPP - \$10 for every 90 day period

# Opioid Alternative Pilot Program

## State Agency Partners



# Opioid Alternative Pilot Program

## Non-state Partners and Stakeholders

- Licensed MDs and DOs
  - Must be licensed to practice in Illinois and hold a valid Illinois Controlled Substances License at the time of issuing the Physician Certification
- Licensed Dispensaries
  - Qualifying patient may visit a licensed dispensary to register for OAPP
  - Sale of medical cannabis to registered patients
- Certified Local Health Departments
  - Qualifying patient may visit a LHD to register for OAPP
  - Physician education about OAPP

# Opioid Alternative Pilot Program

## Qualifying Patient Requirements

- Patient has a current prescription for an opioid OR patient could be prescribed an opioid based on generally accepted standards of care
- Physician agrees that medical cannabis is a viable treatment option
- Patient must be 21 years old or older at the time of registration
- No caregiver provision for OAPP
- Cannot have a Commercial Driver's License or School Bus Permit



# Opioid Alternative Pilot Program

## Physician Requirements

- Doctor of medicine or osteopathy who has a current, valid Illinois license under the Medical Practice Act of 1987, and has a current, valid Illinois controlled substances license
- Bona-fide physician-patient relationship with the qualifying patient. The relationship may not be limited to issuing a written certification for the patient or a consultation simply for that purpose
- Complies with generally accepted standards of medical practice, applicable State and federal rules specific to physician practice

# Opioid Alternative Pilot Program

## Physician Requirements

The physician must:

- Have responsibility for the ongoing care and treatment of the qualifying patient
- Complete an in-person, full assessment of the patient's medical history and current medical condition, including a physical examination, not more than 30 days prior to submission of the certification
- Complete an assessment of the patient's medical history, including reviewing medical records from other treating physicians from the previous 12 months

# Opioid Alternative Pilot Program

## Physician Requirements

A physician shall not:

- Accept, solicit, or offer any form of remuneration from or to a qualifying patient, cultivation center, dispensing organization, including each principle officer, board member, agent and employee
- Offer a discount or any other item of value to a patient who uses or agrees to use a particular primary caregiver, or dispensing organization to obtain medical cannabis
- Conduct a in person physical examination of a patient for purposes of completing a Physician Certification at a location where medical cannabis is sold or distributed, or at the address of a principal officer, agency, employee, or a medical cannabis organization

# Opioid Alternative Pilot Program

## Physician Requirements

A physician shall not:

- Hold a direct or indirect economic interest in a cultivation center or dispensing organization if he or she recommends the use of medical cannabis to qualified patients or is in a partnership with a physician who recommends medical cannabis
- Serve on the board of directors or as an employee of a cultivation center or dispensing organization
- Refer patients to a cultivation center or a dispensary
- Advertise in a cultivation center or dispensing organization

# Opioid Alternative Pilot Program

## Physician Requirements

A physician may:

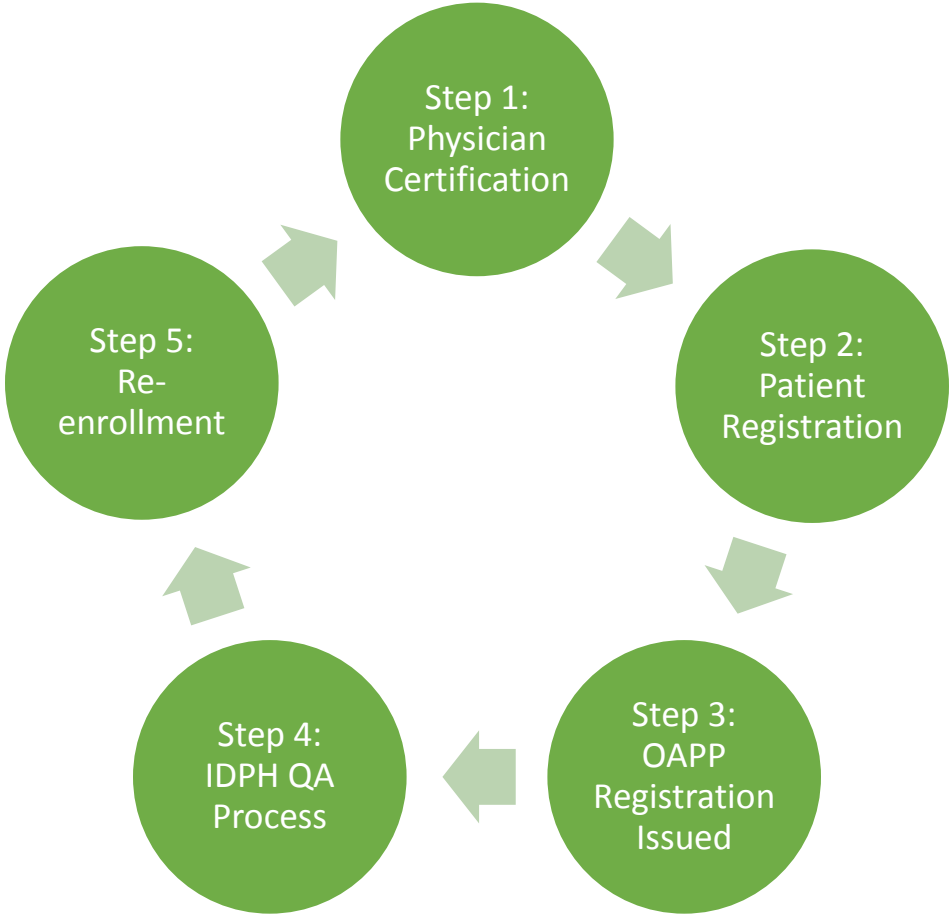
- Accept payment from a patient for the fee associated with the in-person physical examination required prior to issuing the written certification for the qualifying patient, including billing health insurance for an office visit
- Revoke the certification of a qualifying patient if:
  - the patient ceases to require an opioid for treatment for their disease or condition
  - the bona-fide physician-patient relationship ceases, or
  - the physician believes continued use of medical cannabis would result in contraindication with the patient's other medication.

# Opioid Alternative Pilot Program

## Illinois Cannabis Tracking System

- **Illinois Cannabis Tracking System** is the software physicians and qualifying patients will use to register for OAPP
- Secure on-line system
  - The physician will enter the Physician Certification
  - The patient registers and selects his/her Physician Certification to complete the registration process
  - Once registered, the patient receives an immediate electronic “registry card” to permit access to a medical cannabis dispensary for 90 days
  - Registration may be repeated every 90 days by the physician and the patient

# Opioid Alternative Pilot Program Registration Process



# Opioid Alternative Pilot Program Physician Certification

- Entire process will be on-line
- Physician will be required to register with the IDPH OAPP
  - Verification of license credentials
  - Secure Physician PIN # for submission of PCs
- PC must be submitted before a qualifying patient can complete their registration for OAPP
- Once submitted by the physician, the patient has 30 days to apply for the program and use PC
- If the physician determines the registered patient should continue in OAPP, a new PC can be entered within 30 days of expiration
  - In-person office visit is required; no telemedicine





# Opioid Alternative Pilot Program Illinois Cannabis Tracking System

Already have an account?  
Sign in below.

**Username**

**Password**

**Sign In**

By signing in to this system you are agreeing to the stated security policy.

[Reset Password or Unlock Account](#)

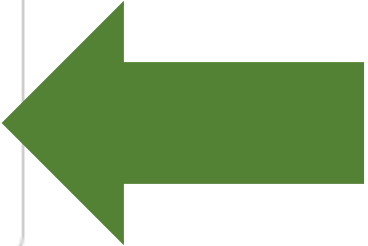
[Forgot Username](#)

New user?

To create an account and register, click the Patient Registration, Physician Registration, Caregiver Registration or Dispensary button below.

**Patient Registration**

**Physician Registration**



Illinois Cannabis Tracking System



# Opioid Alternative Pilot Program Physician Registration in ICTS

**Registration Type**  
Physician

By signing in to this system you are agreeing to follow the stated security policy. [Website usage policy](#)

**User Information**

---

Direct Email Address (The email address entered here should be your direct email address that no one else besides you has access to. Do not enter an email address that is shared with other providers or office staff)

First Name

Middle Initial

Last Name

Username



# Opioid Alternative Pilot Program Physician Registration in ICTS



Doctor Smith, thank you for registering with the Illinois Cannabis Tracking System.

Once your request is processed you will receive an email with a temporary password.

[Click here](#) to log into the Illinois Cannabis Tracking System

By signing in to this system you are agreeing to follow the stated security policy.  
[Website usage policy](#)

# Opioid Alternative Pilot Program Physician Registration in ICTS

**From:** [Administrator Email](#)  
**To:** [DPH.DebilitatingConditions](#)  
**Subject:** [External] Illinois Physician User Registration  
**Date:** Monday, January 21, 2019 10:51:12 AM

---

Doctor Smith,

Thank you for registering with Illinois Cannabis Tracking System.

Below is your login information.

**Username:** OAPPDOC

**Password:** cmj7UHeE!tsN - *Please type into Password field; do not cut and paste.*

[Click here](#) to log into the Illinois Cannabis Tracking System.



# Opioid Alternative Pilot Program Physician Registration in ICTS

[Sign Out](#)

**Password has expired. Please change your password to continue using this system.**

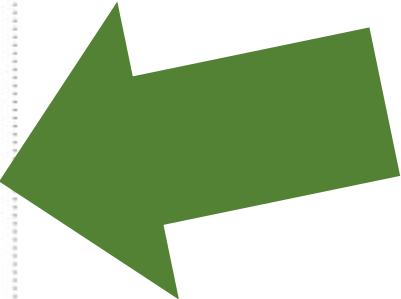
**Password should be at least eight characters long and must contain combination of letters, numbers and special characters, and should be different from your last 10 passwords.**

Current password

New password

Confirm Password

[Change Password](#)



# Opioid Alternative Pilot Program

## Completing a PC in ICTS

My Account Change Role Sign Out Help Illinois Cannabis Tracking System 0.4.1 - OAPPDOC (Physician)

Profile  
INBOX  
Password  
Preferences

Welcome Doctor

**SYSTEM DASHBOARD MESSAGE**

- Welcome to the Illinois Opioid Alternative Pilot Program
- To create a new physician certification, select your name below under "Tracking Inbox", and select the "Certification" tab.

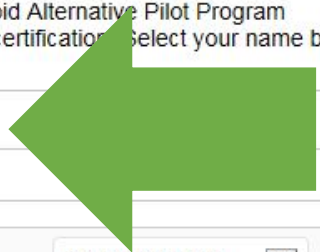
[Physician Certifications](#)

Tracking Inbox : Physician All Assignments Column Filters (OFF)

Physician Status	First Name	Last Name	License Number	License Expiration Date	IL Controlled Substances License Number	IL Controlled Substances License Expiration Date	National Provider ID Number
Active	Doctor	Smith	0361234567	06/30/2020	336123456	06/30/2020	1234567890

MY PAGES

- No saved pages.



# Opioid Alternative Pilot Program

## Completing a PC in ICTS

HOME **TRACKING INBOX**

Tracking Inbox » Physician » Certification Listing »

Physician Address Phone **Certification** Physician Notifications

Last Name: Smith  
First Name: Doctor

**Assignment:** Physician

To create a new Physician Certification, click "New" and complete the form.  
To view, amend, or revoke an existing Physician Certification, click on the appropriate record below.

**+ New** Print CSV Column Filters (OFF) ▶

Page 1 of 1 >> Display 20 per page Refresh Displaying 1 - 4 of 4

Physician Certification Number	Last 4 of SSN	Patient Last Name	Patient First Name	Certification Status	Exam Date	Expiration Date	Prescription
PC-2019-000066	9999	Pressley	Elvis	Eligible	01/15/2019		has a prescription for an opioid
PC-2019-000067	1234	Curie	Marie	Eligible	01/18/2019		has a prescription for an opioid
PC-2019-000068	0212	Lincoln	Abraham	Eligible	01/10/2019		could be prescribed an opioid based on generally accepted standards of care
PC-2019-000069	4567	Roosevelt	Franklin	Eligible	01/21/2019		could be prescribed an opioid based on generally accepted standards of care

# Opioid Alternative Pilot Program

## Completing a PC in ICTS

Physician

Address

Phone

**Certification**

Physician Notifications

**To create a new Physician Certification, complete the fields below, enter your PIN and electronic signature, and click "Save"**

**To update or correct a Physician Certification, click "Edit" below, make any changes as necessary and click "Save"**

**To revoke a Physician Certification, click "Edit" below, change the "Certification Status" to "Revoked" and click "Save"**

**IMPORTANT:** Before you click "Save" verify the patient name, social security number, and date of birth are entered correctly. Inaccurate information results in processing delays for the patient.

Physician Certification Number

Last four of Patient's SSN

R

Patient Last Name

R

Patient First Name

R

Patient DOB

(mm/dd/yyyy) R

Date of In-Person Physical Exam


(mm/dd/yyyy) R

I have checked the prescription drug monitoring system so ensure patient hasn't obtained medical cannabis through another physician

Yes  No R



# Opioid Alternative Pilot Program


Privacy Policy - Contact Us

Log Out
Welcome Page
Back

## Prescription Monitoring Program: Patient Search

Prescriptions are sent to the ILPMP by the end of the next business day. It may take additional days before the prescriptions are viewable.  
**If not all of the table prints properly, try resizing to a smaller text using the built in resizer.**  
 If you have any questions or cannot find a certain record, please call (217) 524-1311



Click on the patient's last name for full prescription information

\*\*\* HIPAA WARNING \*\*\*

HIPAA and all confidentiality and disclosure provisions of Illinois Law cover the information contained in this database



Click to Resize Text

### Previous Opioid Overdose

Hospital discharge data has been added to the PMP to show that your patient may have had an opioid overdose. ILPMP is providing this data for informational purposes only and in hopes in guiding clinicians to the most prudent therapies for patients under their care. Please verify that this is the patient you searched on.

Last Name	First Name	Zip	Date of Birth	OverdoseDate
Holmes	Sherlock	61544	1954-01-06	1/1/2017

### Naloxone Administration

Naloxone EMS usage has been added to the ILPMP database to allow clinicians to have the most complete information available. Usage indicates that a patient was administered naloxone and may have been involved in an overdose or rescue situation. ILPMP is providing this data for informational purposes only and in hopes of guiding clinicians to the most prudent therapies for patients under their care. Below is a list of patients that had the same search criteria. Please verify that the results shown below are your patient.

Last Name	First Name	Street Address	City	Zip	Date of Birth	Date Administered	Zip code of administration
Holmes	Sherlock	221B Baker Street	London	60602	1/6/1954	2017-01-01	60602

### Medical Cannabis Program

Below is a list of patients that had the same search criteria. Please verify that the results shown below are your patient.

Last Name	First Name	Street Address	City	State	Zip	Date of Birth	license Status	Possession Limit	Effective Date	Expiration Date
holmes	sherlock	401 North 4th street	springfield	IL	62702	1/6/1954	QP	2.50	11/12/2018	11/29/2019

Sort by Patient Name | Sort by Date Dispensed | Sort by Drug | Sort by Date of Birth

Last Name	First Name	Street Address	City	State	Zip	Date of Birth	Date Filled	Label Name	Strength	Metric Qty/Days Supply	Payment Type ?	Pharmacy Name/ City	Prescriber Name
holmes	sherlock	401 North 4th street	Springfield	IL	62702	1/6/1954	1/23/2019	AMBIEN CR	6.25MG	30/30	Medicare	Hillsboro Corner apothecary/ Hillsboro	Watson, John

Showing page 1 of 1 pages

# Opioid Alternative Pilot Program

## Completing a PC in ICTS

The qualifying patient for whom this physician certification is being completed (check one):

- has a prescription** for an opioid
- could be prescribed an opioid** based on generally accepted standards of care

The qualifying patient's condition involves (check one):

- Chronic** (constant or intermittent pain lasting for more than 3 to 6 months, or persisting beyond the course of an acute disease, or after tissue healing is complete)
- Acute** (pain lasting less than 3 months)

# Opioid Alternative Pilot Program

## Completing a PC in ICTS

The qualifying patient is diagnosed with and is currently undergoing treatment for the following for which an opioid has been prescribed or could be prescribed based on generally accepted standards of care (check all that apply):

- Back or neck pain (not caused by injury/trauma)
- Cancer pain
- Chronic headaches or orofacial pain, including migraine
- Joint, neck, or back pain
- Injury or trauma-related pain, including burns
- Intractable pain
- Neuropathic or chronic nerve pain (pain caused by nerve damage)
- Musculoskeletal pain
- Pelvic pain
- Post-Operative Pain
- Visceral (pain originating in the internal organs)

# Opioid Alternative Pilot Program

## Completing a PC in ICTS

Physician PIN

R

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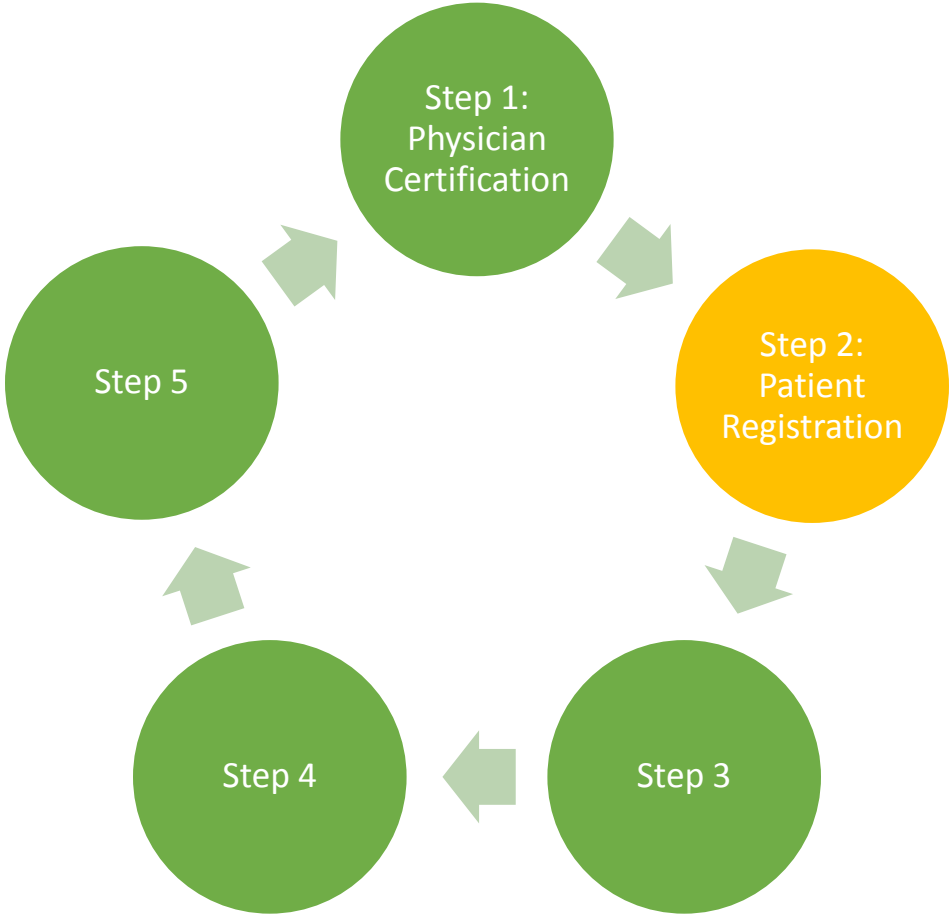
I hereby certify that I am a physician duly licensed in good standing to practice medicine in the state. I have a bona fide physician-patient relationship with the above-named patient in compliance with state law. I conducted this patient's personal physical examination in person and in a clinical setting, and did not use telemedicine to examine this patient. I have assessed this patient's medical history and current medical condition. I conclude that this patient may benefit from the medical use of cannabis. I do not have a financial interest related to a medical cannabis center. This assessment is not a prescription for the use of cannabis. In the event that I revoke this certification, I hereby certify that I no longer provide medical or care giving services to the above listed patient.

Physician Signature

R

Save

# Opioid Alternative Pilot Program Registration Process



# Opioid Alternative Pilot Program

## Patient Registration

- After in-person office visit, the qualifying patient is ready to enroll in OAPP
- Registration assistance at licensed dispensary or certified local health department
- If the physician has submitted a PC for the patient, it can be accessed at the time of registration

### Registration Type

Applicant

### User Information

Email Address

First Name

Last Name

Username

Register

Cancel

By signing in to this system you are agreeing to follow the stated security policy.  
[Website usage policy](#)

# Opioid Alternative Pilot Program Registration Process



# Opioid Alternative Pilot Program Patient Registration

- OAPP registered patient will receive an email with their registry card information
- No hard plastic registry cards will be printed for OAPP
- The patient must show their Medical Cannabis card each time at the dispensary.





# Opioid Alternative Pilot Program

## Re-enrollment

- No more than 30 days before the expiration date of the OAPP registration, the patient may contact their physician for an appointment to review their continued participation in the program
- Re-enrollment requires:
  - Office Visit (in-person only, no telemedicine or call-in allowed)
  - New physician certification submitted on-line by doctor
  - Updated registration and \$10 co-payment
- Patients with a qualifying debilitating condition may choose to enroll in the traditional MCPP

# Opioid Alternative Pilot Program Implementation Timeline

- IDPH currently in design/build phase for ICTS
- Projected “go live” date is **January 31**

## January 2019

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>			<b>16</b>
<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>		<b>22</b>	<b>23</b>
<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>	<b>28</b>		

# Opioid Alternative Pilot Program Efforts Underway



## What do I need to apply for the OAPP?

Once you have visited your health care provider, your doctor will submit a physician certification to IDPH through a confidential website. Then, you will be ready to register for the Opioid Alternative Pilot Program. You may visit a licensed medical cannabis dispensary or a participating local health department for help with the on-line registration process.

You will need the following documents:

- Government-issued ID: current Illinois driver's license or state ID
- Proof of address which matches your driver's license or state ID (i.e., utility bill, voter's registration card, bank statement)
- 2" x 2" color passport photo
- Application fee – \$10 for each 90-day period. Only credit, pre-paid credit, or debit cards are accepted
- Select a dispensary

## Where Can I Learn More?

### About Us

The IDPH Office of Health Promotion, Medical Cannabis Registry Program implements and oversees the Medical Cannabis Pilot Program and the Opioid Alternative Pilot Program which both provide access to cannabis for medical use. Program-related materials including applications and physician education resources is available at <http://dph.illinois.gov/topics-services/prevention-wellness/medical-cannabis>.

### Contact Us

Phone: 1-855-636-3688

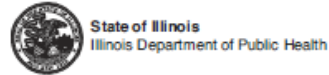
Email: [dph.medicalcannabis@illinois.gov](mailto:dph.medicalcannabis@illinois.gov)

Web: [www.dph.illinois.gov](http://www.dph.illinois.gov)



**Illinois Opioid Alternative Pilot Program**  
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Springfield, IL 62761

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**ILLINOIS OPIOID ALTERNATIVE  
PILOT PROGRAM:  
GUIDE FOR  
ELIGIBLE  
PATIENTS**

- OAPP Patient brochure
- Physician brochure
- Physician guide to on-line PC submission
- ICTS User Guide
- Evaluation Efforts
- BRFSS



# Opioid Alternative Pilot Program

Website address for the registration portal:

**UNDER CONSTRUCTION**  
**Content Will Be Available Soon**

# Opioid Alternative Pilot Program Questions?



Please enter your  
questions in the  
webinar chat.

Click on 

# Opioid Alternative Pilot Program

## Can a PC be amended in ICTS?

Certification Status

Eligible ▼

Amended Date

01/21/2019 📅 (mm/dd/yyyy)

Amend Reason

Updated Exam Date  
 Updated Patient SSN  
 Updated Patient DOB  
 Updated Patient Name  
 Updated Etiology

Amend Other Reason

Physician PIN

Ⓜ



# Opioid Alternative Pilot Program

## Can the physician revoke a PC in ICTS?

Certification Status

Amended Date

Amend Reason  Updated Exam Date  
 Updated Patient SSN  
 Updated Patient DOB  
 Updated Patient Name  
 Updated Etiology

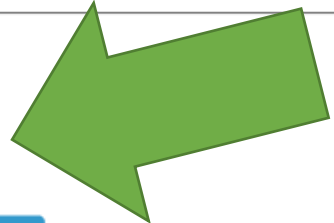
Amend Other Reason

Physician PIN

I hereby certify that I am a physician duly licensed in good standing to practice medicine in the state. I have a bona fide physician-patient relationship with the above-named patient in compliance with state law. I conducted this patient's personal physical examination in person and in a clinical setting, and did not use telemedicine to examine this patient. I have assessed this patient's medical history and current medical condition. I conclude that this patient may benefit from the medical use of cannabis. I do not have a financial interest related to a medical cannabis center. This assessment is not a prescription for the use of cannabis. In the event that I revoke this certification, I hereby certify that I no longer provide medical or care giving services to the above listed patient.

Physician Signature

Created By SMITH, DOCTOR  
Created Date 01/21/2019 12:43 PM  
Updated By SMITH, DOCTOR  
Updated Date 01/21/2019 04:17 PM



# Opioid Alternative Pilot Program

## Can the physician revoke a PC in ICTS?

Revocation Reason

Physician PIN

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I hereby certify that I am a physician duly licensed in good standing to practice medicine in the state. I have a bona fide physician-patient relationship with the above-named patient in compliance with state law. I conducted this patient's personal physical examination in person and in a clinical setting, and did not use telemedicine to examine this patient. I have assessed this patient's medical history and current medical condition. I conclude that this patient may benefit from the medical use of cannabis. I do not have a financial interest related to a medical cannabis center. This assessment is not a prescription for the use of cannabis. In the event that I revoke this certification, I hereby certify that I no longer provide medical or care giving services to the above listed patient.

Physician Signature

---

Created By	SMITH, DOCTOR
Created Date	01/21/2019 12:43 PM
Updated By	SMITH, DOCTOR
Updated Date	01/21/2019 04:17 PM

- New field opens asking for a revocation reason
  - The patient ceases to suffer from the condition
  - The physician/patient relationship has been terminated
  - The continued use of cannabis is contraindicated for the patient
- PIN number
- Physician signature



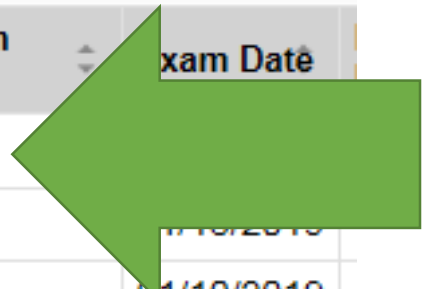
# Opioid Alternative Pilot Program

## Can the physician revoke a PC in ICTS?

+ New   Print   CSV   Column Filters (OFF) ▶

« < Page 1 of 1 > »   Display 20 per page   Refresh   Displaying 1 - 4 of 4

Physician Certification Number	Last 4 of SSN	Patient Last Name	Patient First Name	Certification Status	Exam Date
PC-2019-000066	9999	Pressley	Elvis	Revoked	
PC-2019-000067	1234	Curie	Marie	Eligible	01/10/2019
PC-2019-000068	0212	Lincoln	Abraham	Eligible	01/10/2019
PC-2019-000069	4567	Roosevelt	Franklin	Eligible	01/21/2019



# Opioid Alternative Pilot Program Questions?

Will patients who are prescribed buprenorphine or other recovery-related opioid treatment meds be allowed to use OAPP in conjunction with their current treatment?

*It is up to the physician to make a decision about whether medical cannabis can be a treatment alternative or a complement to the patient's current treatment. Physicians are not mandated to submit a physician certification on behalf of a patient if the use of medical cannabis is contraindicated for a patient.*

Since OAPP is sharing data with the Illinois PMP, will medical cannabis purchases made by patients show up on the PMP and be visible to anyone to see and track?

*The tracking of medical cannabis is maintained in a confidential tracking system and will not be available through the PMP. The PMP will receive data from the OAPP registry system which includes the patient's demographic information, information about the physician who issued the PC and data regarding the patient's diagnosis*

# Opioid Alternative Pilot Program Questions?

What is the minimum age allowed for patients trying to use OAPP?

*Patient eligibility for the OAPP is limited to those who are at least 21 years old at the time of registration.*

What happens if a patient on the OAPP picks up an opiate from a pharmacy? Do they get kicked out of the program?

*The law anticipates some patients will be dual users, meaning they will have a prescription for an opiate and their physician will certify them to participate in the OAPP. It is up to the physician to determine if this is appropriate for a patient's condition.*

Can a patient access OAPP if they enter in-patient rehab during the 90 day period?

*OAPP does not allow a caregiver to purchase or transport medical cannabis on behalf of a patient, therefore, a patient in an in-patient program may not be able to access medical cannabis because they cannot visit a dispensary. If the patient is remanded to in-patient treatment, the physician may consider whether revocation of the physician certification is warranted*

# Opioid Alternative Pilot Program

Would you like a webinar  
for your physician  
practice?

[dph.oapp@Illinois.gov](mailto:dph.oapp@Illinois.gov)

Website

[www.dph.Illinois.gov](http://www.dph.Illinois.gov)

