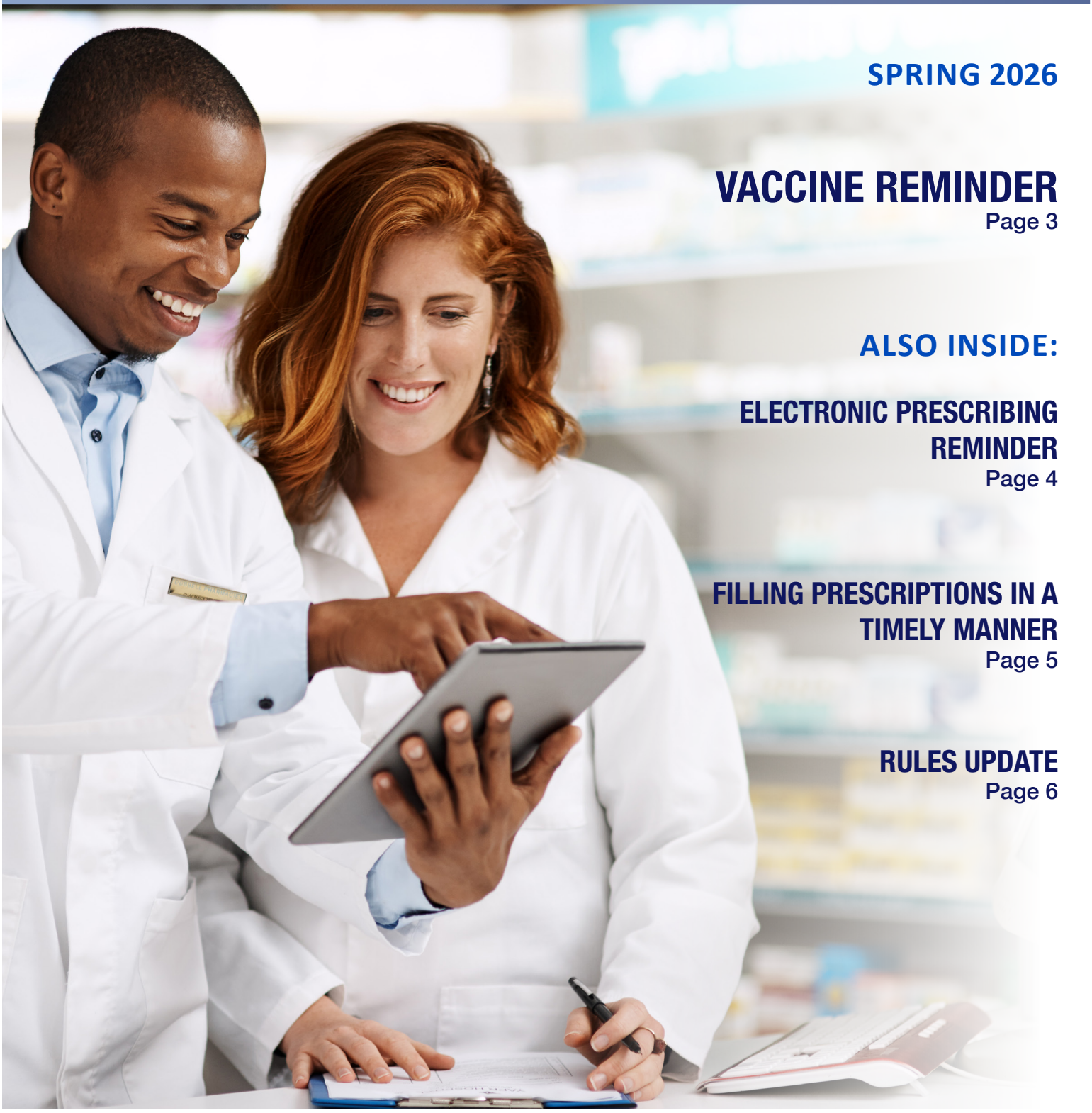
COMPLIANCE CAPSULE *with*

IDFPR

Quarterly Newsletter

Illinois Department of Financial and Professional Regulation



SPRING 2026

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VACCINE REMINDER

As a licensed healthcare professional with the Illinois Department of Financial and Professional Regulation (IDFPR), this reminder is being provided to ensure you have the Illinois Department of Public Health's (IDPH) immunization recommendations for the 2025-26 respiratory virus season.

A number of helpful guides and resources can be found on your profession's webpage on the IDFPR website, idfpr.illinois.gov. They can also be found at the direct links below:

Vaccination Publications from IDPH

Fall 2025 Vaccine FAQs from IDPH

Immunization Recommendations for the 2025-2026 Respiratory Virus Season

Recomendaciones de vacunación para la temporada de virus respiratorios 2025-2026

Pharmacy Practice Act Update effective December 2, 2025 (Public Act 104-0439):

The Illinois Pharmacy Practice Act definitions were amended to allow pharmacists to administer vaccines to patients 3 years of age and older pursuant to a valid prescription or standing order by a physician licensed to practice medicine in all its branches.

NOTIFICATION TO THE DEPARTMENT

Required notifications to the Department, such as DEA 106 reports, requests for approval of a pharmacy remodel, disciplinary action, or licensed employee termination notification should be submitted via the Reporting link found on the Pharmacy homepage: Email for Reporting

ELECTRONIC PRESCRIBING REMINDER

The Illinois Controlled Substance Act (720 ILCS 570/311.6) was amended to include requirements and exceptions for mandatory electronic prescriptions that became effective in January 2024. See Public Act 103-0425. IDFPR does not issue waivers and pharmacies are not required to keep track of written prescriptions from prescribers. Important points in the rule include:

- An electronic prescription is not required when:
  - Prescribers have obtained a hardship waiver from the mandatory electronic prescription requirements.
  - There is a temporary technological or electrical failure that prevents an electronic prescription from being issued.
  - The prescription is for a drug that the practitioner reasonably determines would be impractical for the patient to obtain in a timely manner if prescribed by an electronic data transmission prescription and the delay would adversely impact the patient's medical condition.
  - The prescription is for an individual who:
- Resides in a nursing or assisted living facility.
- Is receiving hospice or palliative care.
- Is receiving care at an outpatient renal dialysis facility and the prescription is related to the care provided.
- Is receiving care through the United States Department of Veterans Affairs.
- Is incarcerated in a state, detained, or confined in a correctional facility.
  - The prescription prescribes a drug under a research protocol.
  - The prescription is a non-patient specific prescription dispensed under a standing order, approved protocol for drug therapy, collaborative drug management, or comprehensive medication management, or in response to a public health emergency or other circumstance in which the practitioner may issue a nonpatient specific prescription.
  - The prescription is issued when the prescriber and dispenser are the same entity.
  - The prescription is issued for a compound prescription containing two or more compounds.

- The prescription is issued by a licensed veterinarian within two years after the effective date of the amendatory Act of the 103rd General Assembly.
- Prior to January 1, 2029, the practitioner does not prescribe more than 150 controlled substance prescriptions during a 12-month period. After January 1, 2029, the practitioner prescribes not prescribe more than 50 controlled substance prescriptions in a 12-month period. Pharmacists' Responsibility:
    - Any pharmacist who dispenses in good faith based upon a valid prescription that is not prescribed electronically may be exempt from any disciplinary action. A pharmacist is not required to ensure or responsible for ensuring the prescriber's compliance under subsection (b) of 720 ILCS 570/311.6, nor may any other entity or organization require a pharmacist to ensure the prescriber's compliance with that subsection.
    - If a pharmacist believes that a paper prescription is valid and written in good faith the pharmacist may fill the paper prescription.

When prescribers renew their licenses, they will be required to complete an attestation if they have a waiver and upload proof of the waiver obtained from the Centers for Medicare and Medicaid Services.

FILLING PRESCRIPTIONS IN A TIMELY MANNER

The Department has seen an increase in the number of complaints related to pharmacies not filling prescriptions in a timely manner. Once a prescription is accepted at the pharmacy it must be filled in a timely manner per 1330.500(f).

RULES UPDATE

The following rules became effective 1/1/2026. Changes/additions noted in RED

Section 1330.20 Fees

a) Registration as a Pharmacy Technician, Student Pharmacist or Certified Pharmacy Technician

1) The fee for application for a certificate of registration as a pharmacy technician, student pharmacist, or certified pharmacy technician is $50.

2) The fee for the renewal of a certificate of registration as a pharmacy technician, student pharmacist or certified pharmacy technician shall be calculated at the rate of $35 per year.

b) License as a Pharmacist

1) The fee for application for a license as a pharmacist is $400.

3) The fee for a license as a registered pharmacist, registered or licensed under the laws of another state or territory of the United States, is $400.

4)The fee for the renewal of a license shall be calculated at the rate of $175 per year.

c) License as a Pharmacy

1) The fee for application for a license for a pharmacy under the Act is $600.

2) The fee for the renewal of a license for a pharmacy under the Act shall be calculated at the rate of $250 per year.

Section 1330.30 Unprofessional and Unethical Conduct

s) Failing to fully comply or respond to a Department subpoena within 60 days.

t) Committing any other act or omission that breaches the pharmacist's responsibility to a patient according to the accepted standard of care in pharmacy practice.

1330.80 Renewals

a) Every license issued under the Act, except the certificate of registration as a student pharmacist, shall expire on March 31 of each even-numbered year.

Every certificate of registration as a student pharmacist issued under the Act shall expire annually on March 31. The holder of a license or certificate of registration may renew the license or certificate during the 60 days preceding the expiration date by paying the required fee.

d) As required by Section 9 of the Act, registered pharmacy technicians shall be required to submit proof of certification as a certified pharmacy technician, proof of enrollment in a first professional degree program in pharmacy, or proof of enrollment in clinical training by a graduate of a foreign pharmacy program for the first renewal or restoration that occurs after the license has been issued for at least 2 years, regardless of whether the license has been active, inactive, or not renewed. This requirement does not apply to pharmacy technicians licensed prior to January 1, 2008. Failure to provide proof of certification results in non-renewal of the pharmacy technician's registration.

e) Certified pharmacy technicians must certify to having completed the continuing education requirements of Section 1330.230.

Section 1330.90 Restoration

d) A pharmacy technician seeking restoration of a license that is inactive or not renewed shall file an application for restoration including payment of the renewal fee and evidence of meeting the renewal requirements of Section 1330.80.

e) A pharmacy whose license has been expired for one year or more may not have its license restored but must apply for a new license and meet all requirements for licensure.

Section 1330.120 Administration of Tests and Therapeutics

a) Requirements

1) A pharmacist may administer and order tests or therapeutics to persons for the following conditions:

A) Influenza;

B) SARS-CoV-2;

C) Group A Streptococcus;

D) Respiratory syncytial virus;

E) Adult-stage head louse; and

F) Health conditions identified by a statewide public health emergency, as defined in the Illinois Emergency Management Agency Act.

2) A pharmacist may delegate the administrative and technical tasks of performing a test for the health conditions described in this Section to a pharmacy technician or student pharmacist acting under the supervision of the pharmacist. (Section 3(d)(17) of the Act).

3) Pharmacists shall practice in accordance with the professional standard of care, consistent with their education and training. When assuming new clinical responsibilities or engaging in specialized areas of practice, pharmacists shall possess the necessary knowledge and skills to provide safe, effective, and evidence-based care. Pharmacists may complete a course of training accredited by the Accreditation Council of Pharmacy Education (ACPE) to meet this requirement.

4) The pharmacist who is responsible for supervising the pharmacy student or pharmacy technician has the sole responsibility of evaluating the appropriateness of each test prior to its administration and shall maintain oversight of the process.

5) The pharmacist shall maintain a current Basic Life Support Certification for Healthcare Providers issued by the American Heart Association, the American Red Cross, the Health and Safety Institute, or an equivalent as determined by the Division.

6) Each pharmacy shall have available a current copy or electronic version of the current version of the guidelines of the Centers for Disease Control and Prevention, guidelines of the United States Preventive Services Task Force, or generally recognized evidence-based clinical guidelines.

7) The pharmacist shall ensure that any pharmacy technician or student pharmacist performing administration of testing, under their direct supervision, has been appropriately trained and is competent to perform the test safely and accurately, consistent with the standard of care and manufacturer instructions.

b) Patient Health History Intake Form

1) Prior to administering testing or therapeutics, a pharmacist shall have the patient complete a patient health history intake form for the purpose of performing a patient assessment.

A) The patient health history intake form shall include, at a minimum, basic patient information, including patient contact information, emergency contact information, history of past and present illness, current medications, allergies, and patient consent.

B) Based upon the results of the patient assessment, the pharmacist shall use their professional and clinical judgment to determine when a patient should be referred to the patient's physician or other appropriate health care provider in lieu of providing testing or therapeutics.

2) Based on the pharmacists professional and clinical judgment, a referral may be issued following an initial or follow-up assessment, directing the patient to a qualified health care provider for further evaluation, diagnosis, or treatment. All referrals under this subsection must be provided in writing and include information advising the patient to seek follow-up care from a health care provider.

3) Pharmacists shall advise patients to consult with the patient's physician or other appropriate health care provider if their symptoms persist, worsen, or involve physical manifestations, or if a test comes back as inconclusive or the treatment plan is unclear. This disclosure must be documented and signed by the patient or guardian.

4) "Therapeutics" are limited to medications approved by the Food and Drug Administration for the treatment of health conditions as described in subsection (a)(1) as established in generally recognized evidence-based clinical guidelines. "Therapeutics" does not include controlled substances.

c) Recordkeeping and Reporting

1) The pharmacist shall maintain appropriate records related to the administration of a test or prescribed therapeutics, including but not limited to:

A) Information collected under subsection (b);

B) Name of the test or therapeutic administered and the date administered;

C) Name and address of the patient's primary health care provider named by the patient, if known; and

D) Name or unique identifier of the administering pharmacist, pharmacy technician, or student pharmacist.

2) The pharmacist shall inform the patient's healthcare provider, if known,

within a timely manner after a therapeutic has been dispensed.

Section 1330.210 Pharmacy Technician Training

7) The administrative and technical tasks of performing a test as provided

Section 3(d)(17) of the Act.

Section 1330.215 Minimum Standards for Approved Work Experience Pharmacy Technician Certification

d) Curriculum must include didactic and practical experience for each area of instruction. A minimum of 100 hours must be applied toward the didactic portion of the training.

Section 1330.230 Continuing Education ("CE") for Certified Pharmacy Technicians

1) Number of Hours of CE Required

A) Each person who applies for renewal of a license as a certified pharmacy technician shall complete 20 hours of CE during the 24 months preceding the expiration date of the license, in accordance with Section 9.5 of the Act.

Section 1330.500 Community Pharmacy Services

3) An invoice is required for all pharmacy-to-pharmacy drug transfers.

Section 1330.510 Telepharmacy

b) 4) Unless staffed by an onsite pharmacist, a pharmacist at the home pharmacy must verify each prescription before it leaves the remote site.

b) 11) A remote dispensing site must maintain a log with the date and time when a pharmacist is working onsite.

c) 7) The site shall have an area for patient consultation exclusive of any waiting area.

f) 2) The pharmacist is required to talk to you, over an audio/visual link, each time you pick up a new prescription.

Section 1330.520 Offsite Institutional Pharmacy Services

a) Pharmacies that are not located in the facilities they serve and whose primary purpose is to provide services to patients or residents of facilities licensed under the Nursing Home Care Act, the Hospital Licensing Act, the University of Illinois Hospital Act, the Ambulatory Surgical Treatment Center Act, or the Illinois Department of Human Services shall, in addition to any other requirements of the Act and this Part, comply with this Section.

g) 1) An after-hour cabinet, which is a locked cabinet or other enclosure located outside of the pharmacy area containing a minimal supply of the most frequently required medication, may be utilized provided that only personnel specifically authorized by the institution in which the pharmacy is located may obtain access and it is sufficiently secure to deny access to unauthorized persons. After-hour cabinets shall only be used in the absence of a pharmacist. When medication is removed from the cabinet or enclosure, a valid practitioner's order authorizing the removal of the medication shall be placed in the cabinet or enclosure. A log shall be maintained within the cabinet or enclosure and authorized personnel removing medication shall indicate on the log the signature of the authorized personnel removing the medication, the name of the medication removed, the strength (if applicable), the quantity removed and the time of removal. An automated dispensing and storage system may be used as an after-hours cabinet. This use shall be in compliance with Section 1330.680.

Section 1330.530 Onsite Institutional Pharmacy Services

e) 1) An after-hour cabinet, which is a locked cabinet or other enclosure located outside of the pharmacy area containing a minimal supply of the most frequently required medication, may be utilized provided that only personnel specifically authorized by the institution in which the pharmacy is located may obtain access and it is sufficiently secure to deny access to unauthorized persons. After-hour cabinets shall only be used in the absence of a pharmacist. When medication is removed from the cabinet or enclosure, a valid practitioner's order authorizing the removal of the medication shall be placed in the cabinet or enclosure.

Section 1330.570 Outpatient Clinic Pharmacy Services

a) Outpatient Clinic Pharmacies are defined as those pharmacies not located in or servicing patients of a facility licensed as defined in Section 1330.520(a), whether located in a health care facility or another location that provides outpatient treatment or care.

1) An outpatient is an ambulatory patient who comes to an outpatient clinic to receive health care services related to the objectives of the outpatient clinic and departs within 24 hours.

2) An outpatient drug order is defined as an order written by a medical practitioner engaged in the practice of that clinic and ordered for services received in that clinic in conjunction with health care services related to the objectives of that clinic.

b) Contracting Services. Outpatient clinic pharmacies may contract with outpatient clinics to provide pharmacy services. The contract must define the scope of pharmacy services to be provided and delineate the specific duties and responsibilities of each party.

c) Investigational new drugs, authorized by the U.S. Food and Drug Administration, shall be dispensed pursuant to a valid drug order of the principal physician-investigator or the principal physician-investigator's authorized clinician. All investigational drugs shall be stored in and dispensed from the pharmacy and shall be identified with the following information:

1) Name of drug and strength (if applicable);

2) Beyond use date;

3) Reference code to identify source and lot number;

4) A label indicating "For Investigational Use Only"; and

5) Name and location of the patient. Those institutions or facilities utilizing unit-dose and medication cart system may identify the name of the patient and the patient's location on the outside of the bin of the medication cart, when those carts are filled by the pharmacy.

d) The pharmacist-in-charge of the outpatient clinic pharmacy or their pharmacist designee may, in the best interest of the patients served, establish one or more lists of the kind and quantity of drugs to be kept in one or more automatic dispensing machines at all times within the outpatient clinic. A copy of the list of items stored in automatic dispensing machines must be kept by the pharmacist-in-charge or his/her pharmacist designee.

e) Staffing of the Pharmacy

1) Each outpatient clinic pharmacy shall be directed by a pharmacist-in-charge, who is knowledgeable in and thoroughly familiar with the specialized functions of outpatient clinic pharmacy.

2) The pharmacist-in-charge shall ensure that all staff shall be adequately trained. The pharmacist-in-charge shall develop and implement written policies and procedures to specify the duties to be performed by eachemployee.

3) All functions and activities of pharmacy technicians shall be personally and directly supervised by an adequate number of licensed pharmacists to ensure that all such functions and activities are performed competently.

4) The pharmacist-in-charge shall meet the requirements of Section 1330.660 in addition to the following:

A) The pharmacist-in-charge of an outpatient clinic pharmacy shall be assisted by a sufficient number of additional pharmacists and personnel, as may be required to operate the pharmacy competently, safely, and to meet the needs of the patients of the clinic facility.

B) Establishment and supervision of the method and manner for storage, dispensing and safekeeping of pharmaceuticals in all areas of the outpatient clinic, including maintenance of security provisions to be used when the pharmacy is closed.

C) The development and implementation of a procedure to be utilized in the event of a drug recall that can be readily activated to assure that all drugs included on the recall are returned to the pharmacy for proper disposition.

f) Recordkeeping Requirements

1) Every drug order filled shall contain the name, initials or other unique identifier of the pharmacist (and pharmacy technician if one is used) who fills or refills the drug order, or the name, initials or other unique identifier may be recorded on another appropriate, uniformly maintained and readily retrievable record that indicates, at least, the following information:

A) The name and dosage form of the drug;

B) The date of filling or refilling; and

C) The quantity dispensed.

2) The pharmacist-in-charge shall maintain or have access to the following records for at least 5 years or as otherwise required by law:

A) Records of drug orders;

B) Records of packaging, bulk compounding or manufacturing; and

C)Records of actions taken pursuant to drug recalls.

g) Labeling Requirements

1) All medication repackaged by the pharmacy for future use inside the institution or facility and not intended for immediate dispensing to a specific patient shall be identified as follows:

A) Single dose or multi-dose drugs, except sterile solutions to which a drug has been added, shall be labeled with:

i) Brand and/or generic name;

ii) Strength (if applicable);

iii) Beyond use date; and

iv) Reference code to identify source and lot number.

B) Sterile solutions to which drugs have been added shall contain on

the outer label:

i) Name, concentration and volume of the base sterile solution;

ii) Name and strength of drugs added;

iii) Beyond use date and time of the admixture; and

iv)Reference code to identify source and lot number of drugs added.

2) All medication prepared by the pharmacy for immediate dispensing to a specific patient or resident in the institution or facility shall be identified as follows:

A) Single dose or multi-dose drugs, except parenteral solutions to which a drug has been added, shall be identified with:

i) Brand and/or generic name; and

ii) Strength (if applicable).

B) Sterile solutions to which drugs have been added shall be identified with:

i) Name, concentration and volume of the base sterile solution;

ii) Name and strength of drugs added; and

iii) Beyond use date and time of the admixture.

3) All medication dispensed to a specific patient in the institution shall be dispensed in a container identified with the name of the patient and the patient's location. Those outpatient clinics utilizing a unit-dose and medication cart system may identify the name of the patient and the patient's location on the outside of the bin of the medication cart, when those carts are filled by the pharmacy.

h) Storage. Pharmacies licensed under this Part shall comply with Sections 1330.600, 1330.610, 1330.630, and 1330.680.

Section 1330.610 Pharmacy Structural/Equipment Standards

a) Notification shall be submitted to the Division that an existing pharmacy will be remodeled. Approval is required prior to initiation of any remodel.

Section 1330.660 Pharmacist-in-Charge

f) Within 30 days after a change of a pharmacist-in-charge, the Division shall be notified in writing by the departing pharmacist-in-charge and the pharmacy license holder

g) 3) The pharmacy license holder is equally responsible for ensuring that inventory is completed.

h) The inventory described in subsection (g) shall constitute, for the purpose of this Section, the closing inventory of the departing pharmacist-in-charge and the initial inventory of the incoming pharmacist-in-charge. This inventory record shall be preserved in the pharmacy for a period of 5 years.

i) Failure on the part of a pharmacy to provide notification of a change in pharmacist-in-charge required in subsection (f) shall be grounds for denying an application or renewal application for a pharmacy license or for disciplinary action against a pharmacy.

l) Records shall be retained as provided for in Section 18 of the Act. Invoices for all legend drugs and controlled substances shall be maintained for a period of 5 years either on site or at a central location where records are readily retrievable. Invoices shall be maintained on site for at least one year from the date of the invoice.

Section 1330.680 Automated Dispensing and Storage Systems

d) An automated dispensing and storage system is authorized for use in any licensed hospital, long-term care facility, facilities serviced by an outpatient clinic pharmacy, or hospice residence ("facility"). For all nonresident pharmacies, the pharmacist-in-charge and all pharmacy personnel who provide services while physically present at a facility located in Illinois must be licensed in Illinois. In addition to compliance with all other provisions in this Section, an automated dispensing and storage system shall comply with the following:

Section 1330.700 Patient Counseling

a) Upon receipt of a new or refill prescription, a prospective drug regimen review or drug utilization evaluation shall be performed. Prior to dispensing a prescription to a new patient, a new drug to an existing patient, or a medication that has had a change in the dose, strength, route of administration or directions for use, the pharmacist, or a student pharmacist directed and supervised by the pharmacist, shall provide verbal counseling to the patient or patient's agent on pertinent medication information. An offer to counsel shall be made on all other prescriptions. Counseling may include without limitation:

Section 1330.770 Centralized Prescription Filling

d) Pharmacies that engage in central fill pharmacy practice shall, in addition to any other requirements of the Act and this Part, comply with this Section.

e) For the purpose of this Section, the following definitions apply:

1) "Central Fill Pharmacy" means a pharmacy that prepares prescription drug orders for dispensing for one or more originating pharmacies.

2)"Originating Pharmacy" means a pharmacy wherein the prescription which will be filled by the central fill pharmacy is initially presented, entered into a computer system, data reviewed, and drug utilization review is completed.

f) A pharmacy may outsource prescription drug order dispensing to a central fill pharmacy provided the pharmacies:

1) Have the same owner or have a written contract which outlines the services to be provided, the responsibilities and accountabilities of each pharmacy, and the manner in which the pharmacies will comply with federal and state laws, rules, and regulations; and

2) Share a common electronic file or have appropriate technology to allow access to sufficient information necessary or required to dispense or process a prescription drug order.

g) Policies and Procedures. A policy and procedure manual as it relates to centralized filling shall be maintained at both the originating and central fill pharmacies and be available for inspection. The manual shall:

1) Outline the responsibilities of each of the pharmacies;

2) Include a list of the names, addresses, telephone numbers, and all license/registration numbers of the pharmacies involved in centralized prescription dispensing;

3) Designate the types of medications that may and may not be filled by the central fill pharmacy; and

4) Include policies and procedures for:

A) Notification to patients;

B) Protecting the confidentiality and integrity of patient information;

C) Communicating orders from the originating pharmacy to the central fill pharmacy;

D) Dispensing prescription drug orders when the dispensed order is not received or the patient comes in before the order is received;

E) Complying with federal and state laws and regulations;

F) Operating a continuous quality improvement program for pharmacy services designed to objectively and systematically monitor and evaluate the quality and appropriateness of patient care, pursue opportunities to improve patient care, and resolve identified problems;

G) Annually reviewing the written policies and procedures and documenting such review; and

H) Process and documentation for return of product to the central fill pharmacy from the originating pharmacy. No drug delivered directly to the patient may be returned except in cases where a medication error has occurred.

h) Recordkeeping

1) Each pharmacy shall comply with all the laws and rules relating to the maintenance of records and be able to produce an audit trail identifying the responsible pharmacist in the dispensing process and all prescriptions dispensed by the pharmacy.

2) The originating pharmacy shall maintain records, in addition to the prescription drug order, which indicate:

A) The date the request for dispensing was transmitted to the central fill pharmacy;

B) The date the dispensed prescription was received by the originating pharmacy, including the method of delivery and the name of the person accepting delivery;

C) Name, address, license number, and the unique identifier of the central fill pharmacy;

D) Date prescription was returned to the central fill pharmacy.

3)The central fill pharmacy shall maintain records, in addition to the prescription drug order, which indicate:

A) The date the prescription was shipped to the originating pharmacy for the patient;

B) Name and address where the prescription was shipped;

C) Method of delivery;

D) Name, address, and license number of originating pharmacy;

E) Date of receipt of returned product

i) Delivery of Medications

1) A community central fill pharmacy may deliver medications for an originating pharmacy to the patient or patient's agent under the following conditions:

A) The pharmacies are under the same ownership or have a written contract specifying the services to be provided by each pharmacy, including delivery services to the patient or patient's agent;

B) The pharmacies shall have a pharmacist available a minimum of 40 hours per week, either in person or via telephone, to provide patient counseling;

C) The pharmacies shall include a telephone number that allows the patient to reach a pharmacist for the purposes of counseling. The telephone number shall not incur a cost to the caller; and

D) The central fill pharmacy shall only deliver via carrier to the patient or patient's agent those medications which could have been delivered via carrier by the originating pharmacy;

2) An institutional central fill pharmacy may only deliver medications to the originating pharmacy.

j) The originating pharmacy is responsible for the patient consultation and transfer requirements.

k) Nothing in this Section shall be construed as requiring a nonresident pharmacy that outsources drug order dispensing to a central fill pharmacy to hold an Illinois pharmacy license, provided that the nonresident pharmacy does not physically ship, mail or deliver prescription drugs or device directly to a patient or patient's agent in this state.

CONTACT US

Have questions? Call IDFPR at 1-888-473-4858.

State of Illinois
Illinois Department of Financial and Professional Regulation

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