DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED RULES

The Department of Financial and Professional Regulation is posting these proposed rules in an effort to make the public aware of possible changes that may have an impact on the profession.

The general public may submit written comments to the Department during the first 45 day public comment period. Any suggested changes will be considered by the Department and the appropriate Board.

These proposed rules were published in the October 28, 2016 Illinois Register. The 45 day comment period will end December 12, 2016.

Please submit written comments to Craig Cellini as stated in the attached notice.

THESE PROPOSED CHANGES ARE NOT IN EFFECT AT THIS TIME AND THE ADOPTED RULES MAY DIFFER FROM THOSE ORIGINALLY PUBLISHED.

1) **Heading of the Part:** Clinical Psychologist Licensing Act

2) **Code Citation:** 68 Ill. Adm. Code 1400

3) **Section Numbers:**

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1400.EXHIBIT A New Section


5) A Complete Description of the Subjects and Issues Involved: This rulemaking implements the provisions of Public Act 98-668. It creates a new license for prescribing psychologists, specifies educational requirements for licensure as a prescribing psychologist, addresses the delegation of prescriptive authority by a physician through collaborative agreements and adds references to prescribing psychologists throughout the Act as appropriate. It also makes several technical/non-substantive updates.

First, this rulemaking repeals all of the original Part 1400 and replaces it with a “New” Part 1400 that incorporates the new prescribing psychologist rules by creating subparts. Subpart A is for general provisions applicable to both clinical psychologist and prescribing psychologist licenses, Subpart B is for clinical psychologists, Subpart C is for prescribing psychologists and Exhibit A is a sample collaborative agreement for prescribing psychologists.

Section 1400.10 creates a new Definitions section not in the original Part that includes terms defined in the Act.

Section 1400.20 (Renewals) clarifies that both clinical psychologist and prescribing psychologist licenses expire on September 30 of each even number year.

Section 1400.30 (Restoration) adds requirements for prescribing psychologist licenses, by mirroring the current requirements for clinical psychologist licenses.

Section 1400.40 (Fees) incorporates fees for prescribing psychologist license applications, renewals, restoration, and for optional approval of a clinical rotation program.

Section 1400.60 (Continuing Education) includes the additional 24 hours of pharmacology continuing education a prescribing psychologist must complete for renewal of the license, pursuant to Section 4.2(c)(2) of the Act. This Section is also amended to standardize the requirements for waiver of continuing education requirements with the waiver requirements specified in the Department’s continuing education rules for other professions.
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Section 1400.200 (Licensure Qualifications) is a new section not in the original Part 1400 that implements the prescribing psychologist licensure requirements under Section 4.2(a). Language from Section 4.2(a) is incorporated into this Section. Section 4.2(a)(3) of the Act requires the Department to determine a National Certifying Exam by rule; this Section specifies that the examination is the Psychopharmacology Examination for Psychologists.

Section 1400.210 (Application for a License on the Basis of Examination) for prescribing psychologists is another new section not in the original Part 1400 that is intended to mirror Section 120 (Application for Examination) for clinical psychologists. This Section specifies exactly what must be submitted to the Department in order to apply for a prescribing psychologist license.

Section 1400.220 (Clinical Rotations) is another new section not in the original Part 1400 that implements the clinical rotation training requirements of Section 4.2(a)(C) of the Act, which requires the Department to set certain standards for approval of these clinical rotation programs by rule. This Section also states that a program may apply for program pre-approval in accordance with the following Section.

Section 1400.230 (Clinical Rotation Program Approval) allows a clinical rotation program to apply for approval of its program by the Department. This Section specifies exactly what must be submitted to the Department in order to apply for program approval. It also addresses the timeline during which a program must cure any deficiencies in its application for approval. Further, it identifies reasons that the Department may withdraw approval of a program, and allows for a hearing at the discretion of the Department. Finally, this Section clarifies that an approved program that seeks to modify its program may seek re-approval by submitting a new application and fee.

Section 1400.240 (Written Collaborative Agreements) is another new section not in the original Part 1400 that implements the collaborative agreement requirements under Section 4.3 of the Act. It also requires that all prescriptions signed by a prescribing psychologist shall indicate the name of the collaborating physician. The language in this requirement is identical to the language requiring that all prescriptions signed by an advance practice nurse shall indicate the name of the collaborating physician, under the Nurse Practice Act (68 Ill. Adm. Code 1300.430(e)).

Section 1400.260 (Endorsement for Prescribing Psychologists) is another new section not in the original Part 1400 that is created to implement the endorsement requirements of Section 4.5 of the Act.
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EXHIBIT A (Sample Written Collaborative Agreement) is another new section not in the original Part 1400 that is created to provide an example collaborative agreement for prescribing psychologists and collaborating physicians. The language in this EXHIBIT A is similar to that of EXHIBIT A (Sample Written Collaborative Agreement) in the rules for administration of the Nurse Practice Act (68 Ill. Adm. Code 1300).

6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: None

7) Will this proposed rulemaking replace any emergency rulemaking currently in effect? No

8) Does this rulemaking contain an automatic repeal date? No

9) Does this proposed rulemaking contain incorporations by reference? No

10) Are there any other rulemakings pending on this Part? No

11) Statement of Statewide Policy Objectives (if applicable): This rulemaking has no impact on local governments.

12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to comment on this proposed rulemaking may submit written comments no later than 45 days after the publication of this Notice.

    Department of Financial and Professional Regulation
    Attention: Craig Cellini
    320 West Washington, 3rd Floor
    Springfield IL  62786

    217/785-0813
    Fax #: 217/557-4451

    All written comments received within 45 days after this issue of the Illinois Register will be considered.

13) Initial Regulatory Flexibility Analysis:
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A) Types of small businesses, small municipalities and not for profit corporations affected: Licensed clinical psychologists will be affected.

B) Reporting, bookkeeping or other procedures required for compliance: None

C) Types of professional skills necessary for compliance: Clinical psychology skills are required for licensure.

14) Regulatory Agenda on which this rulemaking was summarized: January 2016

The full text of the Proposed Rule begins on the next page:
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TITLE 68: PROFESSIONS AND OCCUPATIONS
CHAPTER VII: DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS

PART 1400
CLINICAL PSYCHOLOGIST LICENSING ACT

SUBPART A: GENERAL

Section
1400.10 Definitions
1400.20 Renewals
1400.30 Restoration
1400.40 Fees
1400.50 Unethical, Unauthorized, or Unprofessional Conduct
1400.60 Continuing Education
1400.70 Granting Variances

SUBPART B: CLINICAL PSYCHOLOGIST

1400.100 Licensure Qualifications
1400.110 Experience Defined
1400.120 Application for Examination
1400.130 Examination
1400.140 Endorsement for Clinical Psychologists

SUBPART C: PRESCRIBING PSYCHOLOGIST

1400.200 Licensure Qualifications
1400.210 Application for a License on the Basis of Examination
1400.220 Clinical Rotations
1400.230 Clinical Rotation Program Approval
1400.240 Written Collaborative Agreements
1400.250 Prescribing Authority
1400.260 Endorsement for Prescribing Psychologists

1400.EXHIBIT A Sample Written Collaborative Agreement

AUTHORITY: Implementing the Clinical Psychologist Licensing Act [225 ILCS 15] and authorized by Section 2105-15(7) of the Civil Administrative Code of Illinois [20 ILCS

SUBPART A: GENERAL

Section 1400.10 Definitions

"Act" means Clinical Psychologist Licensing Act [225 ILCS 15].

"Board" means the Clinical Psychologists Licensing and Disciplinary Board appointed by the Secretary.

"Collaborating physician" means a physician licensed to practice medicine in all of its branches in Illinois who generally prescribes medications for the treatment of mental health disease or illness to his or her patients in the normal course of his or her clinical medical practice.

"Department" means the Department of Financial and Professional Regulation. (Section 2 of the Act)

"Director" means the Director of the Division of Professional Regulation with the authority delegated by the Secretary.
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"Division" means the Department of Financial and Professional Regulation-Division of Professional Regulation with the authority delegated by the Secretary.

"Secretary" means the Secretary of the Department of Financial and Professional Regulation. (Section 2 of the Act)

Section 1400.20  Renewals

a) Every clinical psychologist and prescribing psychologist license issued under the Act shall expire on September 30 of each even-numbered year. The holder of a license may renew the license during the month preceding the expiration date by paying the required fee.

b) It is the responsibility of each licensee to notify the Division of any change of address. Failure to receive a renewal form from the Division shall not constitute an excuse for failure to pay the renewal fee or to renew a license.

Section 1400.30  Restoration

a) A person seeking restoration of a clinical psychologist or prescribing psychologist license that has lapsed or been on inactive status for less than 5 years shall have it restored upon payment of the required fees specified in Section 1400.40. Individuals restoring will be required to submit proof of having met the continuing education requirements of Section 1400.60. Continuing education must be completed during the 24 months preceding application for restoration.

b) A person seeking restoration of his/her clinical psychologist license that has lapsed or been on inactive status for more than 5 years shall file a completed application, on forms supplied by the Division, with the required fee set forth in Section 1400.40. The applicant shall also be required to:

1) Submit certification of current licensure from another jurisdiction and verification of active practice in that jurisdiction;

2) Submit proof of one year of study completed within the past 5 years in an approved educational program in accordance with Section 1400.100;

3) Submit verification of 6 months of full-time supervised experience, as described in Section 1400.110(a); or
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4) Pass the examination set forth in Section 1400.130.

c) A person seeking restoration of his/her prescribing psychologist license that has lapsed or been on inactive status for more than 5 years shall file a completed application, on forms supplied by the Division, with the required fee set forth in Section 1400.40. The applicant shall also be required to:

1) Submit certification of current licensure from another jurisdiction and verification of active practice in that jurisdiction;

2) Submit proof of one year of study completed within the past 5 years in an approved educational program in accordance with Section 1400.200(b); or

3) Pass the examination set forth in Section 1400.200(c).

d) When the accuracy of any submitted documentation, or the relevance or sufficiency of the course work or experience, is questioned by the Division, because of discrepancies or conflicts in information, the need for further clarification, and/or missing information, the person seeking restoration of his license will be requested:

1) to provide such information as may be necessary; and/or

2) to:

A) explain the relevance or sufficiency during an oral interview; or

B) appear for additional oral interviews before the Board when the information available to the Board is insufficient to evaluate the individual's current competency to practice under the Act.

e) Upon the recommendation of the Board and approval of the Director, an applicant shall have his/her license restored.

Section 1400.40 Fees

The following fees shall be paid to the Department and are not refundable:

a) Application Fees
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1) The fee for application for a license by examination or acceptance of examination as a clinical psychologist is $50. In addition, applicants for an examination shall be required to pay, either to the Department or to the designated testing service, a fee covering the cost of determining an applicant's eligibility and providing the examination. Failure to appear for the examination on the scheduled date, at the time and place specified, after the applicant's application for examination has been received and acknowledged by the Department or the designated testing service, shall result in the forfeiture of the examination fee.

2) The fee for application for a license by examination or acceptance of examination as a prescribing psychologist is $150.

3) The application fee for a license as a clinical psychologist or a prescribing psychologist certified or licensed under the laws of another jurisdiction is $100.

4) The application fee for a license as an association or partnership to practice clinical psychology is $50.

5) The fee for application as a continuing education sponsor is $500. State colleges, State universities and State agencies are exempt from payment of this fee.

6) The fee for application as an approved clinical rotation program for prescribing psychologists is $1,000.

b) Renewal Fees

1) The fee for the renewal of a clinical psychologist license shall be calculated at the rate of $80 per year.

2) The fee for the renewal of a prescribing psychologist license shall be calculated at the rate of $150 per year.

3) The fee for renewal as a continuing education sponsor is $250 for the renewal period.

c) General Fees
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1) The fee for the restoration of a clinical psychologist or prescribing psychologist license other than from inactive status is $50 plus payment of all lapsed renewal fees.

2) The fee for the issuance of a duplicate license, for the issuance of a replacement license, for a license that has been lost or destroyed or for the issuance of a license with a change of name or address, other than during the renewal period, is $20. No fee is required for name and address changes on Division records when no duplicate license is issued.

3) The fee for a certification of a licensee's record for any purpose is $20.

4) The fee for a wall certificate showing licensure shall be the actual cost of producing the certificate.

5) The fee for a roster of persons licensed as clinical psychologists or prescribing psychologists in this State shall be the actual cost of producing such a roster.

Section 1400.50 Unethical, Unauthorized, or Unprofessional Conduct

The Division may suspend or revoke a license, refuse to issue or renew a license or take other disciplinary action, based upon its finding of unethical, unauthorized or unprofessional conduct (Section 15(7) of the Act), which is interpreted to include, but is not limited to, the following acts or practices:

a) Practicing or offering to practice beyond one's competency (for example, providing services or using techniques for which one is not qualified by education, training and experience);

b) Revealing facts, data or information relating to a client or examinee, except as allowed under Section 5 of the Act or under the Mental Health and Developmental Disabilities Confidentiality Act [740 ILCS 110]. The release of information with the expressed consent of the client as provided for in Section 6 of the Act is interpreted to mean that the psychologist, prior to the release of the information, obtained written consent and made certain that the client understood the possible uses or distributions of the information. Case history material may be used for teaching or research purposes or in textbooks or other literature, provided that proper precautions are taken to conceal the identity of the clients or examinees involved;
c) Making gross or deliberate misrepresentations or misleading claims as to his/her professional qualifications or of the efficacy or value of his/her treatments or remedies, or those of another practitioner;

d) Failing to inform prospective research subjects or their authorized representative fully of potential serious after effects of the research or failing to remove the after effects as soon as the design of the research permits;

e) Refusing to divulge to the Division, upon request, techniques or procedures used in his/her professional activities;

f) Directly or indirectly giving to or receiving from any person, firm or corporation any fee, commission, rebate or other form of compensation for any professional services not actually rendered;

g) Impersonating another person holding a psychology license or allowing another person to use his/her license;

h) The commission of any dishonest, corrupt or fraudulent act that is substantially related to the functions or duties of a psychologist providing services or supervising psychological services;

i) The commission of any act of sexual misconduct, sexual abuse or sexual relations with one's client, patient, student supervisee or ex-client within 24 months after termination of treatment;

j) Submission of fraudulent claims for services to any health insurance company or health service plan or third party payor;

k) Pursuant to Section 15(7) of the Act, the Division hereby incorporates by reference the "Ethical Principles of Psychologists and Code of Conduct". American Psychological Association, 750 First Street NE, Washington DC 20002, American Psychologist, June 1, 2010, with no later amendments or editions.

Section 1400.60 Continuing Education

a) Continuing Education (CE) Hours Requirements
1) In order to renew a license, a clinical psychologist shall be required to complete 24 hours of continuing education. At least 3 of the 24 hours must include content related to the ethical practice of clinical psychology.

2) In order to renew a prescribing psychologist license, a prescribing psychologist shall also be required to complete 20 hours of continuing education on the subject of pharmacology. This requirement shall be in addition to the 24 hours of CE required to renew a clinical psychologist license.

3) A prerenewal period is the 24 months proceeding September 30 of each even-numbered year.

4) One CE hour shall equal one clock hour of attendance. After completion of the initial CE hour, credit may be given in one-half hour increments.

5) A renewal applicant shall not be required to comply with CE requirements for the first renewal of an Illinois license.

6) Clinical psychologists licensed in Illinois but residing and practicing in other states shall comply with the CE requirement set forth in this Section.

7) CE credit hours used to satisfy the CE requirements of another jurisdiction may be applied to fulfill the CE requirements of the State of Illinois.

b) Approved Continuing Education

1) CE hours shall be earned by verified attendance (e.g., certificate of attendance or certificate of completion) at, or participation in, a program or course (program) that is offered or sponsored by an approved continuing education sponsor who meets the requirements set forth in subsection (c), except for those activities described in this subsection (b).

2) A maximum of 18 CE credits per renewal period may be earned for completion of distance-learning courses or programs that are offered by an approved sponsor who meets the requirements set forth in subsection (c). Examples of distance-learning courses include, but are not limited to, first class mail, magazines, email, message boards, websites and webinars. Each distance-learning CE course shall include an examination.
3) CE credit may be earned through postgraduate training programs (e.g., extern, residency or fellowship programs) or completion of graduate level psychology related courses that are a part of the curriculum of a college, university or graduate school. Courses that are part of the curriculum of a university, college or other educational institution shall be allotted CE credit at the rate of 15 CE hours for each semester hour or 10 CE hours for each quarter hour of school credit awarded. Courses that are audited shall not satisfy the requirements of this Section.

4) CE credit may be earned for verified teaching in the field of psychology in an accredited college, university or graduate school and/or as an instructor of CE programs given by approved sponsors. Credit will be applied at the rate of 1.5 hours for every hour taught and only for the first presentation of the program (i.e., credit shall not be allowed for repetitious presentations of the same program). A maximum of 10 hours of CE credit may be obtained in this category per prerenewal period.

c) Approved CE Sponsors and Programs

1) Sponsor, as used in this Section, shall mean:

A) American Psychological Association or its affiliates;

B) National Register of Health Service Psychologists;

C) Association of State and Provincial Psychology Boards or the National Register of Health Service Psychologists;

D) American Medical Association or its affiliates;

E) Illinois Psychological Association or its affiliates;

F) Any regionally accredited school, college or university, or any State agency;

G) Any other person, firm or association that has been preapproved and authorized by the Division pursuant to subsection (c)(2) to coordinate and present CE courses and programs.
2) An entity seeking approval as a CE sponsor pursuant to subsection (c)(1)(G) shall submit an application, on forms supplied by the Division, along with the fee set forth in Section 1400.40. (State agencies, State colleges and State universities in Illinois shall be exempt from paying this fee.) The application shall include:

A) Certification:

i) That all programs offered by the sponsor for CE credit shall comply with the criteria in subsection (c)(3) and all other criteria in this Section;

ii) That the sponsor shall be responsible for verifying full-time continuous attendance at each program and provide a certificate of attendance as set forth in subsection (c)(8);

iii) That, upon request by the Division, the sponsor shall submit evidence (e.g., certificate of attendance or course material) as is necessary to establish compliance with this Section. Evidence shall be required when the Division has reason to believe that there is not full compliance with the statute and this Part and that this information is necessary to ensure compliance;

B) A copy of a sample program with faculty, course materials and syllabi.

3) All programs shall:

A) Contribute to the advancement, extension and enhancement of the professional skills and scientific knowledge of the licensee in the practice of clinical psychology;

B) Foster the enhancement of general or specialized clinical psychology practice and values;

C) Be developed and presented by persons with education and/or experience in the subject matter of the program;
D) Specify the course objectives, course content and teaching methods to be used; and

E) Specify the number of CE hours that may be applied to fulfilling the Illinois CE requirements for license renewal.

4) Each CE program shall provide a mechanism for evaluation of the program and instructor by the participants. The evaluation may be completed on site immediately following the program presentation or an evaluation questionnaire may be distributed to participants to be completed and returned by mail. The sponsor and the instructor, together, shall review the evaluation outcome and revise subsequent programs accordingly.

5) An approved sponsor may subcontract with individuals and organizations to provide approved programs. All advertising, promotional materials, and certificates of attendance must identify the licensed sponsor and the sponsor's license number. The presenter of the program may also be identified, but should be identified as a presenter. When a licensed sponsor subcontracts with a presenter, the licensed sponsor retains all responsibility for monitoring attendance, providing certificates of attendance and ensuring the program meets all of the criteria established by the Act and this Part, including the maintenance of records.

6) All programs given by approved sponsors shall be open to all licensed clinical psychologists and not be limited to members of a single organization or group.

7) To maintain approval as a sponsor pursuant to subsection (c)(2), each sponsor shall submit to the Division by September 30 of each even-numbered year a renewal application, the fee set forth in Section 1400.40 and a list of courses and programs offered within the last 24 months. The list shall include a brief description, location, date and time of each course given by the sponsor and by any subcontractor.

8) Certification of Attendance. It shall be the responsibility of a sponsor to provide each participant in a program with a certificate of attendance or participation. The sponsor's certificate of attendance shall contain:

A) The name, address and license number of the sponsor;
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B) The name and address of the participant;

C) A brief statement of the subject matter;

D) The number of hours attended in each program;

E) The date and place of the program; and

F) The signature of the sponsor or person responsible for the CE program.

9) The sponsor shall maintain attendance records for not less than 5 years.

10) The sponsor shall be responsible for assuring that no renewal applicant receives CE credit for time not actually spent attending the program.

11) Upon the failure of a sponsor to comply with any of the requirements of this Section, the Division, after notice to the sponsor and hearing before and recommendation by the Board (see 68 Ill. Adm. Code 1110), shall thereafter refuse to accept for CE credit attendance at or participation in any of that sponsor's CE programs until the Division receives assurances of compliance with this Section.

12) Notwithstanding any other provision of this Section, the Division or Board may evaluate any sponsor of any approved CE program at any time to ensure compliance with requirements of this Section.

d) Certification of Compliance with CE Requirements

1) Each renewal applicant shall certify, on the renewal application, full compliance with the CE requirements set forth in this Section.

2) The Division may require additional evidence demonstrating compliance with the CE requirements (e.g., certificate of attendance). This additional evidence shall be required in the context of the Division's random audit. It is the responsibility of each renewal applicant to retain or otherwise produce evidence of compliance for the previous 8 years.
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3) When there appears to be a lack of compliance with CE requirements, an applicant shall be notified in writing and may request an interview with the Board. At that time the Board may recommend that steps be taken to begin formal disciplinary proceedings as required by Section 10-65 of the Illinois Administrative Procedure Act [5 ILCS 100/10-65].

e) Continuing Education Earned in Other Jurisdictions

1) If a licensee has earned or is seeking CE hours offered in another jurisdiction not given by an approved sponsor for which the licensee will be claiming credit toward full compliance in Illinois, the applicant shall submit an individual program approval request form, along with a $25 processing fee, prior to participation in the program or within 90 days after expiration of the license. The Board shall review and recommend approval or disapproval of the program using the criteria set forth in subsection (c)(3).

2) If a licensee fails to submit an out-of-state CE approval form within the required time frame, late approval may be obtained by submitting the approval request form with the $25 processing fee plus a $50 per CE hour late fee not to exceed $300. The Board shall review and recommend approval or disapproval of the program using the criteria set forth in subsection (c)(3).

f) Restoration of Nonrenewed License. Upon satisfactory evidence of compliance with CE requirements, the Division shall restore the license upon payment of the fee required by Section 1400.40.

g) Waiver of CE Requirements

1) Any renewal applicant seeking renewal of a license without having fully complied with these CE requirements shall file with the Division a renewal application, along with the required fee, a statement setting forth the facts concerning noncompliance, a request for waiver of the CE requirements on the basis of these facts and, if desired, a request for an interview before the Board. A request for waiver shall be made prior to the renewal date. If the Division finds, upon the written recommendation of the Board and from the affidavit or any other evidence submitted, that extreme hardship has been shown for granting a waiver, the Division shall
waive enforcement of CE requirements for the renewal period for which the applicant has applied.

2) Extreme hardship shall be determined on an individual basis by the Board and be defined as an inability to devote sufficient hours to fulfilling the CE requirements during the applicable prerenewal period because of:

   A) Full-time service in the armed forces of the United States of America during a substantial part of the prerenewal period;
   
   B) A temporary incapacitating illness documented by a statement from a currently licensed physician. A second, consecutive request for a CE waiver pursuant to this subsection (g)(2)(B) shall be prima facie proof that the renewal applicant has a physical or mental illness, including, but not limited to, deterioration through the aging process or loss of abilities and skills that results in the inability to practice clinical psychology with reasonable judgment, skill or safety, in violation of Section 15(15) of the Act and shall be grounds for denial of the renewal or other discipline;
   
   C) Temporary undue hardship (e.g., prolonged hospitalization, being disabled and unable to practice clinical psychology on a temporary basis).

3) If an interview is requested at the time the request for waiver is filed with the Division, the renewal applicant shall be given at least 20 days written notice of the date, time and place of the interview by certified mail, return receipt requested.

4) Any renewal applicant who, prior to the expiration date of the license, submits a request for a waiver, in whole or in part, pursuant to the provisions of this Section, shall be deemed to be in good standing until the final decision on the application is made by the Division.

Section 1400.70 Granting Variances

a) The Director may grant variances from this Part in individual cases when he/she finds that:

1) The provision from which the variance is granted is not statutorily
mandated;

2) No party will be injured by the granting of the variance; and

3) The rule from which the variance is granted would, in the particular case, be unreasonable or unnecessarily burdensome.

b) The Director shall notify the Board of the granting of the variance, and the reasons for granting the variance, at the next meeting of the Board.

SUBPART B: CLINICAL PSYCHOLOGIST

Section 1400.100  Licensure Qualifications

An individual applying for licensure as a clinical psychologist pursuant to the Clinical Psychologist Licensing Act [225 ILCS 15] (the Act) shall meet the following educational/experience requirements of subsection (a), (b) or (c).

a) In accordance with Section 10(3)(a) of the Act, the individual shall be a graduate of a doctoral program in clinical, school or counseling psychology accredited by the American Psychological Association or approved by the National Register of Health Service Psychologists and shall complete 2 years of supervised clinical, school or counseling psychology experience in accordance with Section 1400.110(a) and (d), one of which shall be an internship and one of which shall be postdoctoral. (Section 10(3)(a) of the Act)

b) In accordance with Section 10(3)(b) of the Act, the individual shall be a graduate of a doctoral program that is equivalent to a clinical, school or counseling psychology program and shall complete 2 years of supervised clinical, school or counseling psychology experience in accordance with Section 1400.110(a) and (d), one of which shall be an internship and one of which shall be postdoctoral.

1) In determining equivalent programs, the following minimum standards shall be met:

A) The program is from a regionally accredited university, college or school;

B) The program constitutes the university, college or school's clinical, school or counseling psychology program as certified by the dean
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of the institution and includes a practicum as defined in Section 1400.110(b). (If there is an additional clinical, school or counseling program that exists under the clinical, school or counseling psychology name, the applicant shall apply under Section 10(5) of the Act and subsection (c) of this Section.);

C) The program, wherever administratively housed, must be clearly identified and labeled as a psychology program. The program must specify in institutional catalogues and brochures its intent to educate and train psychologists;

D) The program is an organizational entity within the institution;

E) The program has an integrated, organized sequence of study;

F) The program has an identifiable core psychology faculty on site and a psychologist responsible for the program;

G) The program has an identifiable body of students who are matriculated in that program for a degree;

H) The program encompasses a minimum of 3 academic years of full-time graduate study;

I) The program has a one year residence. Residence requires interaction with psychology faculty and other matriculated psychology students. One year's residence or its equivalent is defined as follows:

   i) 30 semester hours taken on a full-time or part-time basis at the institution, accumulated within 24 months; or

   ii) A minimum of 350 hours of student-faculty contact involving face-to-face individual or group courses or seminars accumulated within 18 months. The educational meetings must include both faculty-student and student-student interaction, be conducted by the psychology faculty of the institution at least 90% of the time, be fully documented by the institution, and relate substantially to the program and course content. The institution must
clearly document how the applicant's performance is assessed and evaluated.

2) The applicant's program shall include the following 7 core content areas:

A) Scientific and professional ethics in psychology, which include the standards set forth in Section 1400.50(k);

B) Biological basis of behavior such as physiological psychology, comparative psychology, neuropsychology, sensation and perception, psychopharmacology;

C) Cognitive-affective basis of behavior such as learning, thinking, motivation, emotion;

D) Social basis of behavior such as social psychology, group processes, organizational and systems theory;

E) Individual differences that include instruction in theories of normal and abnormal personality functioning;

F) Assessment that includes instruction in clinical interviewing and the administration, scoring and interpretation of psychological test batteries for the diagnosis of mental abilities and personality functioning;

G) Treatment modalities that include instruction in the theory and application of a diverse range of psychological interventions for the treatment of mental, emotional, behavioral or nervous disorders. (Section 10(3)(b) of the Act)

In accordance with Section 10(5) of the Act, the individual shall be a graduate of a doctoral psychology program or a graduate of a doctoral program that is psychological in nature; complete a course in each of the 7 core content areas listed in subsection (b)(2); complete a practicum in accordance with Section 1400.110(a) and (b); complete an internship or equivalent supervised clinical experience in accordance with Section 1400.110(a) and (c); and complete 2 years of supervised clinical psychology experience in accordance with Section 1400.110(a) and (d), one of which must be postdoctoral. (Section 10(3)(c) of the Act)
1) The applicant's doctoral program shall meet the following requirements:

A) The program is accredited by the Association of State and Provincial Psychology Boards or the National Register of Health Service Psychologists and is not a designated clinical or counseling psychology program; or

B) The program is psychological in nature as determined by the Division upon the recommendation of the Board. In determining what program is psychological in nature, the Board shall consider:

i) A program that is from a regionally accredited institution of higher education;

ii) A program, wherever administratively housed, that is clearly identified and labeled as offering psychology programs. The program must specify in institutional catalogues and brochures its intent to educate and train psychologists;

iii) A program that is an organizational entity within the institution;

iv) A program that has an integrated, organized sequence of study;

v) A program that has an identifiable core psychology faculty on site and a psychologist responsible for the program;

vi) A program that has an identifiable body of students who are matriculated in that program for a degree;

vii) A program that encompasses a minimum of 3 academic years of full-time graduate study;

viii) A program that has a one year residence. Residence requires interaction with psychology faculty and other matriculated psychology students. One year's residence or its equivalent is defined as follows:
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- 30 semester hours taken on a full-time or part-time basis at the institution accumulated within 24 months; or

- A minimum of 350 hours of student-faculty contact involving face-to-face individual or group courses or seminars accumulated within 18 months. The educational meetings must include both faculty-student and student-student interaction, be conducted by the psychology faculty of the institution at least 90% of the time, be fully documented by the institution, and relate substantially to the program and course content. The institution must clearly document how the applicant’s performance is assessed and evaluated.

2) The applicant shall complete a course in each of the following 7 core content areas:

A) Scientific and professional ethics in psychology set forth in Section 1400.50(k);

B) Biological basis of behavior such as physiological psychology, comparative psychology, neuropsychology, sensation and perception, psychopharmacology;

C) Cognitive-affective basis of behavior such as learning, thinking, motivation, emotion;

D) Social basis of behavior such as social psychology, group processes, organizational and systems theory;

E) Individual differences that include instruction in theories of normal and abnormal personality functioning;

F) Assessment that includes instruction in clinical interviewing and the administration, scoring and interpretation of psychological test batteries for the diagnosis of mental abilities and personality functioning;
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G) Treatment modalities that include instruction in the theory and application of a diverse range of psychological interventions for the treatment of mental, emotional, behavioral or nervous disorders. (Section 10(3)(b) of the Act)

d) For the purposes of this Section, course shall be defined as an integrated, organized didactic sequence of study that encompasses a minimum of one school term. No independent study courses may be used to satisfy the 7 core content areas set forth in Section 10(3)(b) of the Act and subsections (b)(2) and (c)(2) of this Section.

e) Remediation of Deficiencies

1) Individuals who are deficient in any of the 7 core content areas may complete any one or all of these courses in a clinical, school or counseling psychological program accredited by the American Psychological Association, approved by the National Register of Health Service Psychologists or a program approved in accordance with subsection (b).

2) Individuals who are deficient in the practicum, internship or equivalent supervised clinical experience, or clinical experience, requirements may obtain this experience in accordance with the standards set forth in Section 1400.110.

3) The applicant will be required to submit proof to the Division that he/she has completed such a course and/or the experience. Documentation shall include, but not be limited to, curriculum/course syllabus, transcripts, practicum and program materials; internship handbook/brochures and course materials; and internship training plan.

4) The deficiencies may be completed at any time.

Section 1400.110 Experience Defined

The following sets forth standards for practicums, internships or equivalent supervised experience and the 2 years of supervised experience required for licensure as a clinical psychologist pursuant to Section 10 of the Act and Section 1400.100 of this Part:

a) Practicums, internships or equivalent supervised experience and the 2 years of
supervised experience:

1) Shall be experience obtained after enrollment in a doctoral psychology program.

2) Shall involve the practice of clinical psychology as defined in Section 2(5) of the Act. Illustrative tasks are: assessing, diagnosing and treating individuals with mental, emotional, behavioral or nervous disorders or conditions, or individuals with developmental disabilities.

3) Shall not be limited to repetitious and routine tasks that, although involving psychological activities, are at the pre-professional level. Tasks illustrative of pre-professional experience are: administering and scoring structured tests; conducting standardized interviews; collecting data; academic guidance counseling; and assisting in a laboratory or teaching situation.

4) Shall not be supervised experience in which the supervisor receives monetary payment or other considerations from the supervisee or in which the supervisor is hired by or otherwise employed by the supervisee.

b) Practicum. In addition to the requirements set forth in subsection (a), the applicant's practicum (externship or clerkship) shall:

1) Be a part of the coursework in the doctoral program or be an equivalent 400 hours of coursework or training completed with a grade of satisfactory or better in a new area of competence approved by the Board prior to initiating the training.

2) Involve the applicant in direct clinical psychology services to the client.

3) Provide for personal supervision by a licensed clinical psychologist, licensed psychologist who is engaged in the practice of clinical psychology or a person possessing the educational and experience qualifications necessary for licensure under the Act. However, failure of the licensing examination disqualifies one as a supervisor.

4) Be performed pursuant to the order, control and full professional responsibility of the supervisor, who shall meet with the applicant face-to-face for a minimum of 40 hours.
5) Be a minimum of 400 hours in duration. This 400 hours does not have to take place in a single setting.

6) Not count toward the 2 years of supervised experience required for licensure.

7) Clearly delineate between practicum, internship and supervised work experience, using identifiable dates at the time of application.

c) Internship. To meet the requirements of internship in accordance with Section 1400.100 or equivalent supervised clinical experience in an organized health care setting pursuant to Section 10(3)(c) of the Act and Section 1400.100(c) of this Part, the internship or clinical experience may include both paid and unpaid experience obtained by the applicant and shall, in addition to the requirements set forth in subsection (a):

1) Be an organized pre-planned training program (in contrast to supervised experience or on the job training) designed to provide the applicant with a pre-planned, programmed sequence of training experiences that includes documented goals and objectives. The primary focus and purpose is assuring breadth and quality of training.

2) Include a minimum of one hour per week of regularly scheduled, face-to-face individual supervision with the specific intent of dealing with health services rendered directly by the applicant. There must also have been at least 2 additional hours per week in learning activities such as case conferences, including cases in which the intern was actively involved; seminars dealing with clinical issues; co-therapy with a staff person, including discussion; group supervision; and additional individual supervision.

3) Involve the applicant in direct clinical psychology services to the client (defined in Section 2 of the Act) as a part of the training experience.

4) Be under the individual and personal supervision of a licensed clinical psychologist or a licensed psychologist who is engaged in clinical psychology whose license is active and in good standing (i.e., no disciplinary action in accordance with Section 15 of the Act).
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5) Be performed pursuant to the order, control and full professional responsibility of the supervisor.

6) Include a minimum of 1750 hours completed within 24 months. The 1750 hours may not be completed in less than 50 weeks regardless of the number of hours worked per week.

A) Full-time experience shall be at least 35 hours per week and shall be obtained in a single setting during a minimum of 6 months.

B) Part-time experience will only be counted if it is 18 hours or more per week during a minimum of 9 months and is in a single setting.

7) Be post-practicum (post-clerkship or post-externship) level.

8) Be evaluated by the supervisor as satisfactory or better.

9) If experience takes place in a work setting, be distinct from the regular work duties of the applicant and the internship or equivalent clinical experience.

d) Clinical Experience. To meet the experience requirements of Section 10 of the Act, the experience may include both paid and unpaid experience obtained by the applicant and shall, in addition to the requirements set forth in subsection (a):

1) Contain/include clinical psychology experience, at least one year of which must be post-doctoral. Practicum experience may not be counted toward fulfilling the 2 years of supervised experience.

A) A year of experience is defined as 1750 hours obtained in not less than 50 weeks and completed within a 36 month period.

B) Full-time work experience must be obtained in a single setting for a minimum of 6 months with at least 35 hours per week.

C) Part-time experience will only be counted if it is 18 hours or more a week during a minimum of 9 months and is in a single setting.

D) Post-doctoral experience may begin upon completion of degree requirements for the doctoral degree, if verification of the date of
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completion of the degree requirement, when different from the date of graduation, is certified to the Division by the appropriate administrative official of the applicant's educational institution.

2) Be personally and individually supervised by a licensed clinical psychologist or a licensed psychologist who is engaged in the practice of clinical psychology whose license is active and in good standing (i.e., no disciplinary action in accordance with Section 15 of the Act). The experience must be performed pursuant to the order, control and full professional responsibility of the supervisor.

3) Be evaluated by the supervisor as satisfactory or better.

4) Be obtained prior to the date of the examination. Applicants completing the required experience after the examination date will be considered for the next examination. All supervised experience completed prior to the application date must be listed on the application in order to be considered.

5) Include a minimum of one hour per week of regularly scheduled, face-to-face individual supervision with the specific intent of dealing with health services rendered directly by the applicant.

Section 1400.120 Application for Examination

a) An applicant shall file an application on forms supplied by the Division prior to an examination date. The application shall include:

1) Certification of receipt of a doctoral degree as defined in Section 1400.100 and official transcripts from the applicant's doctoral program. Submission of official transcripts shall be for the purpose of verifying participation in the educational program;

2) Professional experience reference forms verifying the length, exact time, number of hours per week and description of functions of the applicant's employment and that the experience was obtained pursuant to Section 1400.110. All experience information shall be submitted at the time of application. References shall be completed by the person who supervised the applicant pursuant to Section 1400.110; and
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3) The required fee set forth in Section 1400.40.

b) In addition to the documents listed in subsection (a), candidates applying under Section 1400.100(b) and (c) shall submit documentation, as required in Section 1400.100(b) and (c), of the practicum and internship training.

c) Applicants who are graduates from educational institutions outside the United States shall provide, in addition to those requirements listed in subsections (a) and (b), a certified translation of all documents submitted in any language other than English.

d) In addition, the applicant shall cause to be sent directly to the Division certification of the date of completion of degree requirements, if different from the date of the awarding of the degree, by the certifying educational administration official, for computation of post-doctoral experience as provided for in Section 1400.110.

e) Each application shall be reviewed on an individual basis by the Board in accordance with this Section.

f) When the accuracy of any submitted documentation, or the relevance or sufficiency of the course work or experience, is questioned by the Division or the Board because of lack of information, discrepancies or conflicts in information given, or a need for clarification, the applicant seeking a license will be requested to:

1) Provide such information as may be necessary; and/or

2) Appear for oral interviews before the Board.

g) Upon recommendation by the Board and approval by the Division, the applicant shall be notified of eligibility to sit for the examination or notified of the reasons for denial of the application.

Section 1400.130 Examination

a) The required examination shall be the Examination for Professional Practice in Psychology (EPPP) developed by the Association of State and Provincial Psychology Boards (ASPPB).
b) The minimum passing grade on the examination shall be the passing score set by the testing entity.

c) The Division will accept proof of completion of the EPPP taken in another jurisdiction with the passing score set by the testing entity. That proof must be forwarded directly to the Division from the testing service.

d) The Division will accept, in lieu of passage of the examination specified in subsection (a), passage of the examination in clinical or counseling psychology of the American Board of Professional Psychology.

Section 1400.140  Endorsement for Clinical Psychologist

a) Any person who is currently licensed in another state or territory of the United States or a foreign country desiring to obtain a license as a licensed clinical psychologist pursuant to Section 11 of the Act shall file an application with the Division, on forms provided by the Division, that shall include:

1) A certification from the jurisdiction of original licensure and any other jurisdiction in which the applicant is or has ever been licensed, stating:

   A) The date of issuance of the applicant's license;

   B) The basis of licensure and a description of the examination by which the applicant was licensed, if any; and

   C) Whether the records of the licensing authority contain any record of disciplinary action taken or pending;

2) Certification of graduation from a psychology program, as defined in Section 1400.100, and official transcripts from the applicant's doctoral program. Submission of official transcripts shall be for the purpose of verifying participation in the educational program;

3) Professional experience reference forms verifying the length, exact time, number of hours per week and description of functions of the applicant's employment and that the experience was obtained pursuant to Section 1400.110. All experience information shall be submitted at the time of application. References shall be completed by the person who supervised the applicant under Section 1400.110; and
4) The required fee specified in Section 1400.40.

b) An individual applying under subsection (a) may satisfy the requirements of subsections (a)(2) and (a)(3) by submitting proof that the licensing standards of his or her original jurisdiction were substantially equivalent to those of Illinois as of the date of his/her licensure in that jurisdiction. The Division, upon recommendations of the Board, has determined that the following shall be proof of substantial equivalence:

1) A valid Certificate of Professional Qualification in Psychology (CPQ) issued by the Association of State and Provincial Psychology Boards if a doctoral degree was conferred in the areas of clinical or counseling psychology; or

2) For an individual who is currently credentialed by the National Register of Health Service Psychologists, evidence of having an active licensing and practicing psychology independently at the doctoral level for a minimum of 5 years.

c) Any person currently licensed in the United States or Canada desiring to obtain a license as a licensed clinical psychologist under the provisions for senior psychologists who have been licensed for at least 20 years (see Section 11(b)(1) of the Act) shall file an application with the Division that shall include:

1) A certification from the jurisdiction of original licensure and any other jurisdiction in which the applicant is or has ever been licensed, stating:

   A) The date of issuance of the applicant’s license and the level of licensure;

   B) The basis of licensure and a description of the examination by which the applicant was licensed, if any;

   C) If multiple levels of practice are licensed, that the license is at the highest level of practice in that jurisdiction; and

   D) Whether the records of the licensing authority contain any record of disciplinary action taken or pending;
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2) Proof that the applicant has been actively and lawfully licensed to practice clinical psychology in another state or Canada for at least 20 consecutive years and that his or her licenses have never been disciplined by another state or Canada. An applicant whose license has been disciplined by another jurisdiction shall not be eligible nor shall the applicant be issued a license pursuant to this subsection (c); however, the applicant's credentials may be reviewed pursuant to subsection (a) or by examination;

3) Verification of a doctoral degree in psychology from a college, university or school that was regionally accredited in the jurisdiction in which it is located by a body recognized by the Council for Higher Education Accreditation (or on of its predessor organizations) at the time the degree was granted and an official transcript; and

4) The required fee specified in Section 1400.40.

d) Each application shall be reviewed on an individual basis by the Board in accordance with this Section. The Division or Board may request from the applicant a copy of the Act and rules from the state of original licensure that were in effect at the time of licensure.

e) When the accuracy of any submitted documentation, or the relevance or sufficiency of the course work or experience, is questioned by the Division or the Board, because of lack of information, discrepancies or conflicts in information given or a need for clarification, the applicant seeking a license will be requested to:

1) Provide such information as may be necessary; and/or

2) Appear for oral interviews before the Board.

f) Upon recommendation of the Board and approval by the Division, the applicant shall be notified of eligibility to sit for the examination, issued a license by endorsement, or notified of the reasons for denial of the application.

SUBPART C: PRESCRIBING PSYCHOLOGIST

Section 1400.200  Licensure Qualifications
a) An individual applying for licensure as a prescribing psychologist pursuant to the Act shall meet the following educational/experience requirements pursuant to Section 4.2 of the Act:

1) Hold a current license to practice clinical psychology in Illinois.

2) Successfully complete the following minimum educational and training requirements either during the doctoral program required for licensure as a clinical psychologist, or at any other time in an undergraduate or master's level program accredited by a regional accrediting body recognized by the Council for Higher Education Accreditation:

   A) Specific minimum undergraduate biomedical prerequisite coursework, consisting of at least 3 semester credit hours per semester or quarter hours-equivalent, including but not limited to the following subject areas:

      i) Medical Terminology (class or proficiency);
      
      ii) Chemistry or Biochemistry with lab (2 semesters);
      
      iii) Human Physiology (one semester);
      
      iv) Human Anatomy (one semester);
      
      v) Anatomy and Physiology (one semester);
      
      vi) Microbiology with lab (one semester);
      
      vii) General Biology for science majors or Cell and Molecular Biology (one semester).

   B) A minimum of 60 semester credit hours or quarter hours-equivalent of didactic coursework that includes, but is not limited to, the following 10 subject areas. A minimum of 3 credit hours must be completed in each of the following 10 subject areas.

      i) Pharmacology;
      
      ii) Clinical Psychopharmacology;
iii) Clinical Anatomy and Integrated Science;
iv) Patient Evaluation;
v) Advanced Physical Assessment;
vi) Research Methods;
vii) Advanced Pathophysiology;
viii) Diagnostic Methods;
ix) Problem Based Learning; and
x) Clinical and Procedural Skills.

C) A full-time practicum of at least 14 months supervised clinical training of at least 36 credit hours, including a research project, as set forth in Section 1400.220; and

3) Achieve a passing score on the Psychopharmacology Examination for Psychologists (PEP). A passing score is that required by the PEP, administered by the American Psychological Association's College of Professional Psychology, or its successor organizations.

b) For the purposes of this Section, the Board has determined that graduate level coursework satisfies the requirements of subsection (b).

Section 1400.210 Application for a License on the Basis of Examination

a) An applicant shall file an application on forms supplied by the Division. The application shall include:

1) Submission of official transcripts documenting completion of the minimum biomedical prerequisite coursework as set forth in Section 1400.200(a)(2)(A);

2) Submission of official transcripts documenting completion of the didactic coursework set forth in Section 1400.200(a)(2)(B);
3) Proof of the successful completion of the examination set forth in Section 1400.200(a)(3). Scores shall be submitted to the Division directly from the testing entity; and

4) The required fee set forth in Section 1400.40.

b) When the accuracy of any submitted documentation, or the relevance or sufficiency of the course work or experience is questioned by the Division or the Board because of lack of information, discrepancies or conflicts in information given, or a need for clarification, the applicant seeking a license will be requested to:

1) Provide such information as may be necessary; and/or

2) Appear for oral interviews before the Board.

c) Upon recommendation by the Board and approval by the Division, the applicant shall be notified of eligibility to sit for the examination or notified of the reasons for denial of the application.

Section 1400.220 Clinical Rotations

a) Applicants shall complete a full-time practicum including at least 14 months supervised clinical training of at least 36 credit hours, including a research project. During the clinical rotation program, students shall complete rotations in the following areas:

1) Emergency Medicine;

2) Family Medicine;

3) Geriatrics;

4) Internal Medicine;

5) Obstetrics and Gynecology;

6) Pediatrics;
7) Psychiatry; 

8) Surgery; and 

9) One elective of the program participant's choice. (Section 4.2(a)(2)(C) of the Act) 

b) The clinical rotation training shall be completed either within the parameters of an American Psychological Association (APA) or equivalent approved doctoral program or pre-doctoral program, or during a post-doctoral master's program in clinical psychopharmacology. The training program must be housed in an institution that is accredited by a regional accrediting body recognized by the Council for Higher Education Accreditation. The clinical rotation program shall meet the following requirements: 

1) All program faculty and preceptors must hold an active physician and surgeon, advanced practice nurse, or prescribing psychologist license. Program faculty and preceptors must be sufficient in number and be qualified through academic and clinical experience to provide enrolled participants with sufficient attention, instruction and supervised practice experiences necessary to acquire the knowledge and competencies required to meet the objectives of the program. 

2) A program must have access to adequate labs and clinical medical rotation sites for participants. A program must assure that clinical support services, including pharmacy, clinical laboratory and diagnostic imaging, are readily available to participants on clinical rotations. Clinical support staff must be available in numbers sufficient that participants are not expected to serve as replacements for staff. 

3) In order to be considered a full-time practicum, the program must require a minimum of 20 clock-hours of rotations per week and require all 36 credits of rotations to be completed within a minimum of 14 months and maximum of 28 months after the participant begins his/her rotations. To earn 36 hours of clinical rotation training credits, a participant must complete a minimum of 1,620 clock-hours of clinical rotation training. 

4) The program must provide participants with experience in progressive responsibilities for patient management. Participants must be provided the opportunity to observe and demonstrate competence in skills necessary for
the assessment and treatment of mental disorders within a medical setting under supervision of a physician.

5) The program must assure that the volume and variety of clinical experiences provides for a sufficient number and distribution of appropriate experiences/cases for each participant to meet defined program expectations. Clinical rotations may be held in hospitals, hospital outpatient clinics, community mental health clinics and correctional facilities (Section 4.2(a)(2)(C) of the Act). The program must coordinate clinical sites and preceptors for program required rotations.

6) Program participants must be clearly identified as such to distinguish them from physicians, medical residents, APNs, prescribing psychologists, and other health care professionals and residents.

7) The program must conduct periodic, objective and documented formative evaluations of participants to assess their acquisition of knowledge, problem-solving skills and clinical competencies.

8) The program must define and maintain consistent and effective processes for the initial and ongoing evaluation of all sites and preceptors used for participants' clinical practice experiences.

c) The Department shall consider the standards set in the Accreditation Review Commission on Education for the Physician Assistant (Section 4.2(a)(2)(C) of the Act) in determining whether a program meets the requirements in subsection (b).

d) A program seeking pre-approval shall apply to the Department pursuant to Section 1400.230.

Section 1400.230 Clinical Rotation Program Approval

a) An institution seeking approval of a clinical rotation program under Section 1400.220 may apply for an approval of its program from the Department. An application for approval shall include:

1) Documentation demonstrating compliance with the standards set forth in Section 1400.220, including:
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A) curriculum vitae of program faculty;

B) a proposal for the clinical rotation program, including:
   i) program mission statement and objectives;
   ii) plan of organization;
   iii) proposed clinical rotations, including requisite and elective rotations and outlines and goals for each proposed rotation; and
   iv) evaluation plans for faculty and program participants; and

2) The fees required by Section 1400.40(a)(6).

b) If, upon review by the Department, an institution that has applied for approval pursuant to this Part fails to meet the requirements of this Part, the Department may issue a deficiency letter to the institution. The institution shall have 3 months to cure the deficiencies identified by the Department.

c) The Department may withdraw approval of a clinical rotation program for reasons that include, but are not limited to:
   1) Any actions that would constitute a violation of the Act or this Part;
   2) Fraud or dishonesty in applying for approval under this Part;
   3) Failure to continue to meet the criteria for a clinical rotation program under the Act and this Part;
   4) Failure to comply with a recommendation of the Board or Department following an investigation by the Department;
   5) Revocation of APA or other institutional approval by a regional accrediting body recognized by the Council for Higher Education Accreditation.

d) Upon written notification of withdrawal of approval by the Department, a clinical program may be granted a hearing at the discretion of the Department.
e) An institution seeking to modify a program approved under this Section may seek reapproval by submitting a new application and fee.

f) An individual applicant for a prescribing psychologist license who has graduated from a program approved under this Section must still demonstrate compliance with all licensure requirements set forth in the Act and this Part as of the date of application. Prescribing psychologist applicants who have graduated from an approved program may still be required by the Department to provide a transcript or other documents.

Section 1400.240 Written Collaborative Agreements

A written collaborative agreement is required for all prescribing psychologists practicing under a prescribing psychologist license issued pursuant to the Act. (Section 4.3(a) of the Act)

a) A written delegation of prescriptive authority by a collaborating physician may only include medications for the treatment of mental health disease or illness the collaborating physician generally provides to his/her patients in the normal course of his/her clinical practice. (Section 4.3(b) of the Act) The delegation of prescriptive authority should include authorization to order laboratory testing, imagery and medical tests necessary prior to prescribing medication during the period of prescribed medication and at the end of a period of prescribed medication. The collaborating physician must hold a valid current Illinois controlled substance license and federal registration to delegate authority to prescribe delegated controlled substances.

b) The collaborating physician shall file with the Department a notice of delegation of authority to prescribe any non-narcotic Schedule III through V controlled substances, the licensed prescribing psychologist shall be eligible to register for a mid-level practitioner controlled substance license under Section 303.5 of the Illinois Controlled Substances Act [720 ILCS 570]. (Section 4.3(c) of the Act)

c) Any delegation of Schedule III through V controlled substances shall identify the specific controlled substance by brand name or generic name. (Section 4.3(d)(1) of the Act)

d) A written collaborative agreement shall:
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1) Describe the working relationship between the prescribing psychologist and the collaborating physician and delegate prescriptive authority as provided in the Act. (Section 4.3(e) of the Act)

2) Promote the exercise of professional judgment by the prescribing psychologist in accordance with his/her training, education and experience. (Section 4.3(f) of the Act)

3) Provide methods and guidelines for communication between the collaborating physician and the prescribing psychologist, including in-person and telephonic communications. It is not necessary to provide for the personal presence of the collaborating physician at the place where services are rendered by the prescribing psychologist. (Section 4.3(g) of the Act)

4) Provide for adequate collaboration between the physician and prescribing psychologist, including provisions that the physician shall:

   A) participate in the joint formulation and joint approval of orders or guidelines with the prescribing psychologist and periodically review the prescribing psychologist's orders or guidelines and the services provided patients under the orders in accordance with accepted standards of medical practice and prescribing psychologist practice;

   B) collaborate and consult with the prescribing psychologist in person, either in the prescribing psychologist's physical presence or via real-time video conferencing, at least once a month for review of safety and quality clinical care or treatment;

   C) be available through telecommunications for consultation on medical problems, complications, emergencies, or patient referrals, as needed; and

   D) review medication orders of the prescribing psychologist no less than monthly, including review of laboratory tests and other tests as available. (Section 4.3(h) of the Act)
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5) Contain provisions detailing notice for termination or change of status involving a written collaborative agreement, except when the notice is given for just cause. (Section 4.3(i) of the Act)

e) If there is no employment relationship between the collaborating physician and prescribing psychologist, a written collaborative agreement should not restrict third-party payment sources accepted by the prescribing psychologist. (Section 4.3(e) of the Act)

f) A copy of a fully executed collaborative agreement shall be available to the Department within a reasonable time upon request to either the prescribing psychologist or the collaborating physician. (Section 4.3(j) of the Act)

g) A prescribing psychologist shall inform each collaborating physician of all collaborative agreements he/she has signed and provide copies of all collaborating agreements to each collaborating physician. (Section 4.3(l) of the Act)

h) No collaborating physician shall enter into more than 3 collaborative agreements with prescribing psychologists at the same time. (Section 4.3(m) of the Act)

Section 1400.250 Prescribing Authority

a) A prescribing psychologist may only prescribe medication pursuant to the provisions of the Act and this Part if the prescribing psychologist:

1) Continues to hold a current license to practice psychology in Illinois.

2) Completes the required continuing education annually in accordance with this Part.

3) Maintains a written collaborative agreement in accordance with Section 4.3 of the Act and Section 1400.240 of this Part. (Section 4.2 of the Act)

b) The following may not be included in any written delegation of prescriptive authority by a collaborating physician:

1) Patients who are less than 17 years of age or patients who are over 65 years of age. If a patient is 65 years of age, the prescribing psychologist
shall begin transferring care to a physician at least 3 months prior to the patient's 66th birthday to ensure continuity of care.

2) *Patients during pregnancy* who have disclosed they are pregnant, or who the prescribing psychologist discovers are pregnant.

3) *Patients* who have disclosed *serious medical conditions, such as heart disease, cancer, stroke or acute seizures and patients with developmental and intellectual disabilities*. If there is a question regarding whether a patient has disclosed any of the aforementioned medical conditions that should be considered serious and thus prevent the prescribing psychologist from prescribing medication, the prescribing psychologist should consult with the patient's treating physician or the collaborating physician who will determine whether the patient's condition should be considered a serious medical condition under this Section.

4) *Prescriptive authority for benzodiazepine Schedule III controlled substances*. (Section 4.3(b) of the Act)

5) *Prescriptive authority for any controlled substance to be delivered by injection*.

6) *Prescriptive authority for any Schedule II substance*.

7) *Prescriptive authority for any narcotic drug as defined by Section 102 of the Illinois Controlled Substances Act*. (Section 4.3(d) of the Act)

c) *Any prescribing psychologist who writes a prescription for a controlled substance without having valid and appropriate authority may be fined by the Department not more than $50 per prescription and the Department may take any other disciplinary action provided for in the Act* that is reasonable and appropriate under the circumstances. (Section 4.3(d) of the Act)

d) All prescriptions written and signed by a prescribing psychologist shall indicate the name of the collaborating physician. The collaborating physician's signature is not required. The prescribing psychologist shall sign his/her own name.

Section 1400.260  Endorsement for Prescribing Psychologists

a) *Individuals who are licensed as medical or prescribing psychologists in another*
state may apply for an Illinois prescribing psychologist license by endorsement from that state, or acceptance of that state’s examination if they meet the requirements set forth in the Act and this Part, including proof of successful completion of the educational, testing and experience standards. If an applicant meets the requirements set forth in the Act and this Part, including educational, testing and experience standards, and pays all required fees, the applicant may not be required to take the examination otherwise required under the Act for licensure as a prescribing psychologist. (Section 4.5(a) of the Act)

b) Individuals who graduated from the Department of Defense Psychopharmacology Demonstration Project, or a similar program developed and operated under the auspices of any branch of the United States armed forces, may apply for an Illinois prescribing psychologist license by endorsement. Applicants from the Department of Defense Psychopharmacology Demonstration Project may not be required to take the examination otherwise required under the Act for licensure as a prescribing psychologist if they meet the requirements set forth in the Act and this Part, including educational, testing and experience standards, and pay all required fees. (Section 4.5(b) of the Act)

c) Individuals applying for licensure by endorsement must first obtain a clinical psychologist license in Illinois. (Section 4.5(c) of the Act)
Section 1400.EXHIBIT A  Sample Written Collaborative Agreement

A. PRESCRIBING PSYCHOLOGIST INFORMATION
1. NAME: ____________________________________________
2. ILLINOIS CLINICAL PSYCHOLOGIST LICENSE NUMBER: ____________________________
   ILLINOIS PRESCRIBING PSYCHOLOGIST NUMBER: ____________________________
3. PRACTICE SITES: (Attach List of Sites)
4. CONTACT NUMBER: ____________________________________________
   FACSIMILE NUMBER: ____________________________
   EMERGENCY CONTACT NUMBERS: (e.g., cell, pager, answering service)
   ____________________________
5. ATTACHMENTS (If applicable):
   Copies of Clinical and Prescribing Psychologist Licenses
   Copy of Certificate of Insurance
   Copies of other written collaborative agreements (if any)

B. COLLABORATING PHYSICIAN
1. NAME: ____________________________________________
2. ILLINOIS LICENSE NUMBER: ____________________________
3. PRACTICE AREA OR CONCENTRATION: ____________________________
4. BOARD CERTIFICATION (if any): ____________________________
5. CERTIFYING ORGANIZATION: ____________________________
C. PRESCRIBING PSYCHOLOGIST COLLABORATING PHYSICIAN WORKING RELATIONSHIP

1. WRITTEN COLLABORATIVE AGREEMENT REQUIREMENT

A written collaborative agreement is required for all prescribing psychologists practicing under a prescribing psychologist license.

The collaborating physician shall file with the Illinois Department of Financial and Professional Regulation (the "Department") notice of delegation of prescriptive authority and any termination of delegation. In addition, a copy of a fully executed collaborative agreement shall be available to the Department within a reasonable time upon request to either the prescribing psychologist or the collaborating physician. The prescribing psychologist shall inform the collaborating physician of all active collaborating agreements he/she has signed and provide the collaborating physician copies of all those collaborating agreements. The collaborating physician shall not enter into more than 3 collaborating agreements with prescribing psychologists at the same time.

2. SCOPE OF PRACTICE

Under this agreement, the prescribing psychologist will work in an active practice to deliver mental health care services to patients. This includes, but is not limited to, assessment and diagnosis, ordering diagnostic and therapeutic tests and procedures, ordering imagery, interpreting and using the results of diagnostic and therapeutic tests and procedures ordered by the prescribing psychologist or another health care professional and prescriptive authority. The prescribing psychologist will consult with the collaborating physician as outlined in Section 3 below.

3. COLLABORATION AND CONSULTATION
Collaboration and consultation shall be adequate if the collaborating physician:

(A) participates in the joint formulation and joint approval of orders or guidelines with the prescribing psychologist and periodically reviews those orders and the services provided patients under those orders in accordance with accepted standards of medical practice and prescribing psychologist practice;

(B) meets in person or in real-time video conferencing with the prescribing psychologist at least once a month to provide collaboration and consultation for review of safety and quality clinical care or treatment;

(C) is available through telecommunications for consultation on medical problems, complications and emergencies or for patient referral; and

(D) reviews medication orders of the prescribing psychologist no less than monthly, including review of laboratory tests and other tests as available.

Nothing in this agreement shall be construed to limit the authority of a prescribing psychologist to perform all duties authorized under the Clinical Psychologist Licensing Act.

The written collaborative agreement shall be for medications for the treatment of mental health disease or illness the collaborating physician generally provides to his or her patients in the normal course of clinical practice, with the exception of the following:

(A) Patients who are less than 17 years of age or patients who are over 65 years of age. If a patient is 65 years of age, the prescribing psychologist shall begin transferring care to a physician at least 3 months prior to the patient's 66th birthday.

(B) Patients who have disclosed they are pregnant, or who the prescribing psychologist otherwise discovers are pregnant.

(C) Patients who have disclosed serious medical conditions, such as heart disease, cancer, stroke or acute seizures, and patients with developmental and intellectual disabilities. If there is a question as to whether a patient has disclosed a medical condition that should be considered serious, and thus prevent the prescribing psychologist from prescribing medication, then the prescribing psychologist should consult with the collaborating
physician, who will determine whether the patient's condition should be considered a serious medical condition.

(D) Prescriptive authority for benzodiazepine Schedule III controlled substances.

(E) Prescriptive authority for any controlled substance to be delivered by injection.

(F) Prescriptive authority for any Schedule II substance.

(G) Prescriptive authority for any narcotic drug as defined by Section 102 of the Illinois Controlled Substances Act.

4. COMMUNICATION, CONSULTATION AND REFERRAL

The prescribing psychologist shall consult with the collaborating physician by telecommunication, real-time video conferencing or in person, as needed. In the absence of the designated collaborating physician, another physician shall be available for consultation, as designated by agreement between the collaborating physician and prescribing psychologist.

5. DELEGATION OF PRESCRIPTIVE AUTHORITY

As the collaborating physician, any prescriptive authority delegated to the prescribing psychologist is set forth in an attached document. As required by 225 ILCS 15/4.3(d)(1), any delegation of a Schedule III through V controlled substance shall identify the specific controlled substance by brand name or generic name.

Should the collaborating physician wish to terminate this agreement, he/she should provide at least 30 days written notice to the prescribing psychologist so that he/she has the opportunity to enter into a collaborating agreement with another qualified physician. If the collaborating physician has a change in his/her status that affects his/her ability to prescribe medications or act as a collaborating physician, he/she must notify the prescribing psychologist as soon as reasonably possible. The prescribing psychologist may terminate this agreement at any time upon written notice to the collaborating physician.

NOTE: THE PRESCRIBING PSYCHOLOGIST MAY ONLY PRESCRIBE CONTROLLED SUBSTANCES UPON RECEIPT OF AN ILLINOIS MID-LEVEL PRACTITIONER CONTROLLED SUBSTANCES LICENSE.
ILLINOIS REGISTER

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

NOTICE OF PROPOSED RULES

WE THE UNDERSIGNED AGREE TO THE TERMS AND CONDITIONS OF THIS WRITTEN COLLABORATIVE AGREEMENT.

___________________________________________________________________  ______________________________________________________________________
Collaborating Physician's                                              Prescribing Psychologist's
Signature/Date                                                          Signature/Date

___________________________________________________________________  ______________________________________________________________________
Physician's Typed Name                                                 Prescribing Psychologist's Typed Name