5th Sub. S.B. 89

CANNABIS-BASED MEDICINE AMENDMENTS

HOUSE COMMITTEE AMENDMENTS

AMENDMENT 2

MARCH 7, 2016 9:48 AM

Representative **Raymond P. Ward** proposes the following amendments:

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1. Page 31, Lines 926 through 938:
   926
                  { (6) "Expanded CBM" means the same as that term is defined in Section 58-37-3.6. }
  927
                  {<del>-(7)-</del>}
                            (6) "Inventory control system" means the system described in Section 4-42-103.
  928
                  {<del>-(8)-</del>}
                            (7) "Medical cannabis card" means a card that is issued to an individual by the
  929
          Department of Health under Section 26-58-201.
  930
                            (8) "Medical Cannabis Restricted Account" means the account created in Section
                  {<del>-(9)</del>-}
  931
          26-58-105.
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                             (9) "Physician" means an individual who:
                  {<del>(10)</del>}
  933
                (a) is licensed to practice:
                (i) medicine, under Title 58, Chapter 67, Utah Medical Practice Act; or
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  935
                (ii) osteopathic medicine, under Title 58, Chapter 68, Utah Osteopathic Medical
  936
          Practice Act; and
  937
                (b) complies with Section 58-67-807 or 58-68-807.
  938
                             (10) "Qualifying illness" means a condition described in Subsection 58-38a-203.1(1).
                  {<del>(11)</del>}
    Page 34, Lines 1020 through 1022:
  1020
                (i) {(A)} suffers from a qualifying illness, including the type of qualifying illness; and
  1021
                  {<del>-(B)</del>-}
                             (ii) may benefit from treatment with cannabis-based medicine; {-or-}
  1022
                  { (ii) qualifies for expanded CBM under Section 26-58-205; }
3. Page 37, Line 1130 through Page 40, Line 1210:
  1130
                              { Expanded CBM access --- } Physician training --- Cannabis-based
                26-58-205.
  1131
          medicine { specialist }
           (1) The Division of Occupational and Professional Licensing, in coordination with the department,
          shall develop and require, by rule made in accordance with Title 63G, Chapter 3, Utah Administrative
          Rulemaking Act, training for a physician in cannabis-based medicine.
                The Division of Occupational and Professional Licensing shall issue a certification to a physician
          that completes the training described in Subsection (1).
  1132
                  { (1) As used in this section:
  1133
                (a) "Cannabis-based medicine specialist" means a physician with a cannabis-based
          medicine specialist certification issued by the division under Subsection (7).
 1134
                (b) "Division" means the Division of Occupational and Professional Licensing within
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1136	the Department of Commerce.
1137	(c) "Group 1 physician" means a physician who may recommend expanded CBM to a
1138	patient under Subsection (4).
1139	(d) "Group 2 physician" means a physician who may recommend expanded CBM to a
1140	patient under Subsection (5).
1141	(2) An individual with a medical cannabis card may not purchase expanded CBM at a
1142	CBM dispensary unless the individual's physician recommends expanded CBM to the
1143	individual in compliance with this section.
1144	(3) A physician may not recommend expanded CBM to an individual except in
1145	compliance with this section.
1146	(4) In addition to the requirements of this chapter, a physician with a group 1
1147	certification from the division may recommend expanded CBM to a patient if:
1148	(a) (i) the physician is board certified in hematology or oncology; and
1149	(ii) the patient is being actively treated for a diagnosed malignancy or is being provided
1150	palliative care for an incurable malignancy;
1151	(b) (i) the physician is a hospice director who, after a face-to-face evaluation with the
1152	patient, determines that the patient has six months or less to live; and
1153	(ii) the patient is being actively treated by a licensed hospice care provider;
1154	(c) (i) the physician is an infectious disease specialist; and
1155	(ii) the patient is diagnosed with HIV- or AIDS-associated anorexia and wasting
1156	syndrome; or
1157	(d) (i) the physician is a state-certified cannabis-based medicine specialist who is
1158	board-certified in pain management, internal medicine, or pediatrics; and
1159	(ii) the patient is has an incurable, catastrophic, or rare condition.
1160	(5) In addition to the requirements of this chapter, a physician with a group 2
1161	certification from the division may recommend expanded CBM to a patient if:
1162	(a) (i) the physician is board certified in neurology; and
1163	(ii) the patient is diagnosed with multiple sclerosis, epilepsy, ALS, or peripheral
1164	neuropathy;
1165	(b) (i) the physician is board certified in infectious disease; and
1166	(ii) the patient is diagnosed with HIV- or AIDS-peripheral neuropathy;
1167	(c) (i) the physician is a board certified pain specialist; and
1168	(ii) the patient is diagnosed with chronic pain, failed back syndrome, or neuropathic
1169	pain; or
1170	(d) (i) the physician is board certified in gastroenterology; and
1171	(ii) the patient is diagnosed with intractable nausea.
1172	(6) The division shall issue, to a physician who completes training in cannabis-based
1173	medicine developed by the division in coordination with the department and required by the
1174	division by rule made in accordance with Title 63G Chapter 3, Utah Administrative
1175	Rulemaking Act:

1176	(a) a group 1 certification; or	
1170	(a) a group 1 certification, or (b) a group 2 certification.	
1177	(7) (a) The division shall issue a cannabis-based medicine specialist certification to a	
1179	physician who completes training in cannabis-based medicine developed by the division in	
1179		
1181	coordination with the department and required by the division by rule made in accordance with	
1182	<u>Title 63G Chapter 3, Utah Administrative Rulemaking Act; and</u> (b) The division shall issue a cannabis-based medicine specialist certification to no	
1183	more than the greater of:	
1184	(i) one physician per 200,000 people in the state; or	
1185	(ii) two physicians in each health district as determined by the division.	
1186	(8) A group 1 physician may recommend expanded CBM to a patient if the patient:	
1187	(a) was referred to the group 1 physician by the patient's primary care physician; and	
1188	(b) has a condition the treatment of which the group 1 physician specializes in.	
1189	(9) A group 1 physician may recommend that a patient use expanded CBM with a	
1190	vaporizer:	
1191	(10) A cannabis-based medicine specialist may recommend expanded CBM to, and the	
1192	department may issue a medical cannabis card to, a patient who is less than 18 years old if:	
1193	(a) the cannabis-based medicine specialist is board certified in pediatrics; and	
1194	(b) the patient has an incurable, catastrophic, or rare condition.	
1195	(11) A group 2 physician may recommend expanded CBM to a patient if:	
1196	(a) the patient was referred to the group 2 physician by the patient's primary care	
1197	physician; and	
1198	(b) the group 2 physician recommends expanded CBM that is at least 50% cannabidiol	
1199	by weight.	
1200	(12) If a physician recommends treatment with expanded CBM to a patient under this	
1201	section:	
1202	(a) the physician shall submit the recommendation to the department via the electronic	
1203	verification system; and	
1204	(b) the department shall:	
1205	(i) designate, via the electronic verification system, that the patient is eligible to	
1206	purchase expanded CBM; and	
1207	(ii) issue the patient a unique type of medical cannabis card that:	
1208	(A) indicates that the patient is eligible to purchase expanded CBM; and	
1209	(B) is physically distinguishable from a medical cannabis card used by a patient who is	
1210	not eligible for expanded CBM.	
4. Page 44, Line 1356 through Page 45, Line 1372:		
1356	(1) As used in this section:	

(a) "Cannabis-based medicine" means { low-THC CBM or expanded CBM.

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- 1358 (b) "Expanded CBM" means a product intended for human ingestion that : (i) contains an extract or concentrate that is obtained from cannabis; {-and-} 1359 (ii) is prepared in a medicinal dosage form as required by Section 4-42-602 {--} 1360 ; and contains at least one gram of cannabidiol for every one gram of tetrahydrocannabinol. { (c) "Low-THC cannabis-based medicine" or "Low-THC CBM" means a product 1361 1362 intended for human ingestion that: (i) contains an extract or concentrate that: 1363 1364 (A) is obtained from cannabis; and 1365 (B) contains at least 10 grams of cannabidiol per one gram of tetrahydrocannabinol. 1366 (ii) is composed of less than 5% tetrahydrocannabinol by weight; 1367 (iii) is composed of at least 5% of cannabidiol by weight; and 1368 (iv) is prepared in a medicinal dosage form as required by Section 4-42-602. 1369 {-(d)-} (b) "Cannabis" means any part of the plant cannabis sativa, whether growing or not. (c) "Drug paraphernalia" means the same as that term is defined in Section 58-37a-3. 1370 {-(e)-} (d) "Tetrahydrocannabinol" means a substance derived from cannabis-based medicine 1371 {-(f)-} 1372 that meets the description in Subsection 58-37-4(2)(a)(iii)(AA).
- 5. Page 50, Lines 1528 through 1529:
 - 1528 (4) The committee's duties under this chapter do not include tobacco products as
 - defined in Section 59-14-102 or alcoholic beverages as defined in Section 32B-1-102.
 - (5)(a) The committee shall evaluate a petition from a physician under Section 58-67-807 or 58-68-807 to increase the physician's cannabis-based medicine patient dispensing limit to up to 250 patients at any given time.
 - (b) The committee shall approve a physician petition under Subsection (5)(a) if the physician demonstrates, to the satisfaction of committee, that:
 - (i) the physician's practice has unique characteristics that warrant allowing the physician to recomend cannabis to up to 250 of the physician's patients; and
 - (ii) the physician has established experience in cannabis-based medicine.
 - (c) <u>If the committee approves a physician petition under Subsection (5)(a), the committee shall notify the Division of Occupational and Professional Licensing of the committee's approval.</u>
- 6. Page 51, Lines 1566 through 1569:
 - 1566 (2) A physician who recommends cannabis-based medicine shall:
 - (a) except as provided in Subsection (6), recommend cannabis-based medicine to no more than amount of patients
 - 1568 determined by the Department of Health by rule made in accordance with Title 63G, Chapter 3,
 - 1569 <u>Utah Administrative Rulemaking Act</u> 100 patients at any given time ;
- 7. Page 52, Line 1590:

- (c) licensure sanctions under this chapter.
 - (6)(a) A physician may file a request with the Controlled Substances Advisory Committee created in Section 58-38a-201 to increase the physician's cannabis-based medicine patient dispensing limit.
 - (b) If the Controlled Substance Advisory and the division approve a physician petition, the physician may dispense cannabis-based medicine to a number of patients determined by the Controlled Substance Advisory Committee that is no more than 250.
- 8. Page 52, Lines 1600 through 1603:
 - 1600 (2) A physician who recommends cannabis-based medicine shall:
 - 1601 (a) except as provided in Subsection (6), recommend cannabis-based medicine to no more than amount of patients
 - 1602 determined by the Department of Health by rule made in accordance with Title 63G, Chapter 3,
 - 1603 <u>Utah Administrative Rulemaking Act</u>} <u>100 patients at any given time</u>;
- 9. Page 53, Line 1624:
 - (c) licensure sanctions under this chapter.
 - (6)(a) A physician may file a request with the Controlled Substances Advisory Committee created in Section 58-38a-201 to increase the physician's cannabis-based medicine patient dispensing limit.
 - (b) If the Controlled Substance Advisory and the division approve a physician petition, the physician may dispense cannabis-based medicine to a number of patients determined by the Controlled Substance Advisory Committee that is no more than 250.