

SB 121: Cannabis Amendments

Purpose of SB 121

As the suppliers worked towards establishing a functional medical cannabis supply, they had questions about how to best supply cannabis to those in need. This summary includes several of the improvements to the original cannabis bill.

Packaging

The original law only allowed cannabis to be dispensed in blister packs, which would increase cost and reduce potency. SB 121 allows cannabis to be dispensed in opaque containers. (lines 946-958)

Dosing Guidelines

Several concerns surfaced regarding qualified medical providers (QMP) recommending the amount of cannabis the patient needs (QMPs are not required to recommend amounts). These changes allow QMPs more flexibility in recommending cannabis with optional directions of use and broader dosing guidelines. (lines 843-847)

Patient Caps

One concern of initial legislation was that a small portion of QMPs would create a bottleneck for the large amount of the patients requesting medical cannabis. The current limit of patients to whom a QMP could recommend medical cannabis is 175 for a general practitioner and 300 for a specialist. These caps are expanded to 275 for a general practitioner and 600 for a specialist, and a previous provision allowing DOPL to incrementally increase the specialist cap is removed. (Lines 1395-1408)

Number of Growing Facilities

Recognizing the amount of money invested by different companies, SB 121 allows cannabis cultivation facilities to use up to two growing sites allowing growers to move from a temporary smaller first location to a more permanent second location. The allowable area of cannabis cultivated remains the same. (Lines 589-593)

How Cannabis can be grown

Recognizing the need for agricultural efficiency, vertical growing, or stacking, is permitted. A horizontal area of cannabis layered on top of another horizontal layer of cannabis counts toward the total growing area. (Lines 254-257 and 565-567)

Employment and Cannabis Testing Guidelines

SB 121 allows private employers to set their own guidelines regarding the enforcement of cannabis. (Lines 1519-1521) A public employee is not subject to an adverse employment action unless the employee is impaired and fails a drug test. (Lines 1481-1485)

Out of State Cannabis

In order to respect the investments of those who received cannabis licenses, medical cannabis cardholders are only protected if their medical cannabis has a label that shows it was purchased from a licensed, in-state, medical cannabis pharmacy. (Lines 1869-1873)

Independent Labs

The state is allowed to set up a testing lab. However, if two independent labs open the state will cease testing as long as the labs can meet market demand. (Lines 776-778)

International Research

Allows the Cannabinoid Product Board to review scientific research regarding medical cannabis use from other countries. (Lines 637-43)

Cannabis Database Privacy

Allows a QMP's employee to access the electronic verification system on the QMP's behalf (Lines 1036-1037 and 1097-1116).

Compassionate Use Board Meetings

Allows the Compassionate Use Board to close meetings because of potential HIPPA violations (Lines 2739-2741)

Telehealth

Recognizing that some patients may live in rural areas, after the QMP and patient's initial face-to-face visit, telehealth may be used to renew a medical cannabis recommendation. (Lines 1046-1050)

Department of Finance

The Division of Finance is required to validate financial institutions for access to an inventory control system. (Lines 320-326 and 337-356)

Medical Cannabis Devices

The Compassionate Use Board can approve the use of a medical cannabis device for vaping unprocessed cannabis. (Lines 1263-1266) Pharmacies may not sell cannabis devices to a minor without approval of the Compassionate Use Board. (Lines 2192-2195) A cannabis pharmacy can purchase a cannabis device from a vendor without a cannabis-related license. (Lines 2287-2289)

Expedition of Approvals

The Department of Health may establish criteria that allow qualifying petitions to the Compassionate Use Board to be expedited directly to the department for final approval or denial. (Lines 1281-1289)

Out of State Patient Purchases

An out of state patient may purchase cannabis after registering with the department of health, limited to two 21-day visitation periods per calendar year. (Lines 1722-1731)

Mandatory Production and Pharmacy Licensee Disclosure

Licensees must disclose an investigation or adverse legal action taken against them in another state within 14 days of the notice. (Lines 485-486, 2036-2057)

Pharmacy-to-pharmacy sales

A medical cannabis pharmacy can sell product to another medical cannabis pharmacy. (Lines 2143-2144)

Educational Events

This bill allows cannabis production establishments and medical cannabis pharmacies to host educational events, according to rules established by the Department of Agriculture and the Department of Health, respectively. (Lines 632-655 and 2355-2376)

Driving without impairment -- Metabolite

Due to the chemical nature of cannabis, trace amounts of cannabis can be detected in a person without the person being impaired. A cannabis metabolite must be a pharmacologically active for a criminal penalty to apply. (Lines 2550-2555)

Expungement of Criminal Records

A patient's prior possession of cannabis can be expunged if the patient had a qualifying illness and the cannabis was in an appropriate form and amount to treat the illness. (Lines 4185-4192 and 4335-4341)

Will QMPs be subject to federal prosecution for dispensing cannabis?

QMPs are allowed to recommend medical cannabis treatment. QMPs are not required to specify directions of use or dosing guidelines, and QMPs do not prescribe medical cannabis. Under existing law, QMPs are immunized from civil or criminal liability or licensure sanctions on the basis that they are recommending the use of a cannabis, which is federally illegal.