

[Fourth Reprint]

SENATE COMMITTEE SUBSTITUTE FOR
SENATE, Nos. 10 and 2426

STATE OF NEW JERSEY
218th LEGISLATURE

ADOPTED NOVEMBER 26, 2018

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator NICHOLAS P. SCUTARI

District 22 (Middlesex, Somerset and Union)

Senator DECLAN J. O'SCANLON, JR.

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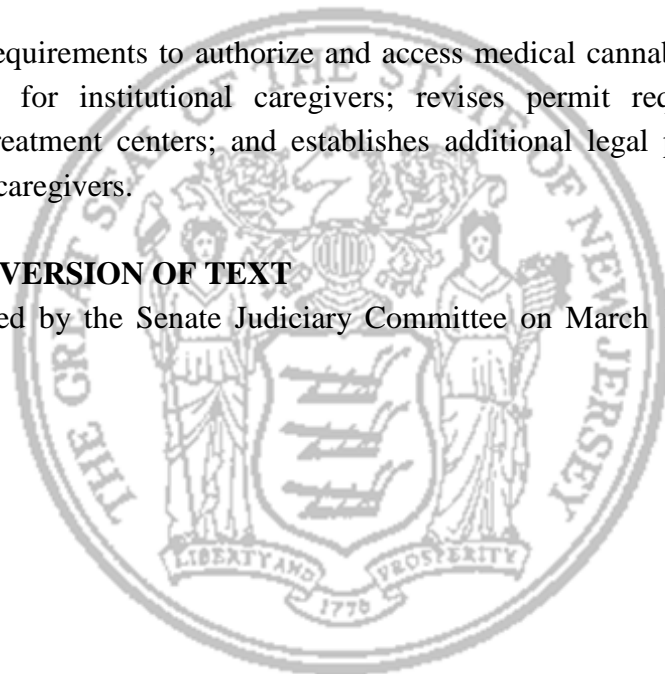
Senators Gopal, Singleton and Codey

SYNOPSIS

Revises requirements to authorize and access medical cannabis; establishes requirements for institutional caregivers; revises permit requirements for alternative treatment centers; and establishes additional legal protections for patients and caregivers.

CURRENT VERSION OF TEXT

As reported by the Senate Judiciary Committee on March 18, 2019, with amendments.



(Sponsorship Updated As Of: 5/17/2019)

1 **AN ACT** concerning medical cannabis, revising various parts of the
2 statutory law, and supplementing P.L.2009, c.307.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:

6

7 1. Section 1 of P.L.2009, c.307 (C.24:6I-1) is amended to read
8 as follows:

9 1. This act shall be known and may be cited as the **["New**
10 **Jersey]** "Jake Honig Compassionate Use Medical **["Marijuana]**
11 Cannabis Act."

12

13 2. Section 2 of P.L.2009, c.307 (C.24:6I-2) is amended to read
14 as follows:

15 2. The Legislature finds and declares that:

16 a. Modern medical research has discovered a beneficial use for
17 **["marijuana]** cannabis in treating or alleviating the pain or other
18 symptoms associated with certain **["debilitating]** medical conditions,
19 as found by the National Academy of Sciences' Institute of
20 Medicine in March 1999 **[";"]** .

21 b. According to the U.S. Sentencing Commission and the
22 Federal Bureau of Investigation, 99 out of every 100 **["marijuana]**
23 cannabis arrests in the country are made under state law, rather than
24 under federal law. Consequently, changing state law will have the
25 practical effect of protecting from arrest the vast majority of
26 seriously ill people who have a medical need to use **["marijuana]**
27 cannabis **[";"]** .

28 c. Although federal law currently prohibits the use of
29 **["marijuana]** cannabis, the laws of Alaska, Arkansas, California,
30 Colorado, Connecticut, Delaware, Florida, Hawaii, Illinois, Maine,
31 Maryland, Massachusetts, Michigan, Minnesota, Montana, Nevada,
32 New Hampshire, New Mexico, New York, North Dakota, Ohio,
33 Oregon, Pennsylvania, Rhode Island, Vermont, **["and"]** Washington,
34 West Virginia, and the District of Columbia permit the use of
35 **["marijuana]** cannabis for medical purposes, and in Arizona doctors
36 are permitted to prescribe **["marijuana]** cannabis. New Jersey joins
37 this effort for the health and welfare of its citizens **[";"]** .

38 d. States are not required to enforce federal law or prosecute
39 people for engaging in activities prohibited by federal law;
40 therefore, compliance with this act does not put the State of New
41 Jersey in violation of federal law **["; and"]** .

EXPLANATION – Matter enclosed in bold-faced brackets **["thus"]** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹ Senate floor amendments adopted December 17, 2018.

² Senate floor amendments adopted January 31, 2019.

³ Senate floor amendments adopted March 14, 2019.

⁴ Senate SJU committee amendments adopted March 18, 2019.

1 e. Compassion dictates that a distinction be made between
2 medical and non-medical uses of **【marijuana】** cannabis. Hence, the
3 purpose of this act is to protect from arrest, prosecution, property
4 forfeiture, and criminal and other penalties, those patients who use
5 **【marijuana】** cannabis to alleviate suffering from **【debilitating】**
6 qualifying medical conditions, as well as their **【physicians】** health
7 care practitioners, **【primary】** designated caregivers, institutional
8 caregivers, and those who are authorized to produce **【marijuana】**
9 cannabis for medical purposes.
10 (cf: P.L.2009, c.307, s.2)

11
12 3. Section 3 of P.L.2009, c.307 (C.24:6I-3) is amended to read as
13 follows:

14 3. As used in **【this act】** P.L.2009, c.307 (C.24:6I-1 et al.),
15 P.L.2015, c.158 (C.18A:40-12.22 et al.), and P.L. , c. (C.)
16 (pending before the Legislature as this bill):

17 “Academic medical center” means an entity located in New Jersey
18 that, on the effective date of P.L. , c. (C.) (pending before the
19 Legislature as this bill), has an addiction medicine faculty practice; has
20 a pain management faculty practice; has graduate medical training
21 programs accredited by the Accreditation Council for Graduate
22 Medical Education or the American Osteopathic Association in
23 primary care ²**【, family medicine, internal medicine,】² and medical**
24 specialties; is the principal teaching affiliate of a medical school based
25 in the State; and has the ability to conduct research related to medical
26 cannabis. If the entity is part of a system of health care facilities, the
27 entity shall not qualify as an academic medical center unless the health
28 care system is principally located within the State.

29 “Adverse employment action” means refusing to hire or employ an
30 individual, barring or discharging an individual from employment,
31 requiring an individual to retire from employment, or discriminating
32 against an individual in compensation or in any terms, conditions, or
33 privileges of employment.

34 ¹**【“Bona fide **【physician-patient】** practitioner-patient relationship”**
35 means a relationship in which the **【physician】** health care practitioner
36 has ongoing responsibility for the assessment, care, and treatment of a
37 patient's **【debilitating】** qualifying medical condition.】¹

38 “Cannabis” has the meaning given to “marihuana” in section 2 of
39 the “New Jersey Controlled Dangerous Substances Act,” P.L.1970,
40 c.226 (C.24:21-2).

41 **【“Certification” means a statement signed by a physician with**
42 whom a qualifying patient has a bona fide physician-patient
43 relationship, which attests to the physician's authorization for the
44 patient to apply for registration for the medical use of marijuana.】

45 “Clinical registrant” means an entity that has a written contractual
46 relationship with an academic medical center in the region in which it
47 has its principal place of business, which includes provisions whereby

1 the parties will engage in clinical research related to the use of medical
2 cannabis and the academic medical center or its affiliate will provide
3 advice to the entity regarding patient health and safety, medical
4 applications, ²and² dispensing and managing controlled dangerous
5 substances, among other areas.

6 “Commission” means the Cannabis Regulatory Commission
7 established pursuant to section 7 of P.L. , c. (C.) (pending
8 before the Legislature as Senate Bill No. 2703).

9 "Commissioner" means the Commissioner of Health.

10 **["Debilitating medical condition" means:**

11 (1) one of the following conditions, if resistant to conventional
12 medical therapy: seizure disorder, including epilepsy; intractable
13 skeletal muscular spasticity; post-traumatic stress disorder; or
14 glaucoma;

15 (2) one of the following conditions, if severe or chronic pain,
16 severe nausea or vomiting, cachexia, or wasting syndrome results from
17 the condition or treatment thereof: positive status for human
18 immunodeficiency virus; acquired immune deficiency syndrome; or
19 cancer;

20 (3) amyotrophic lateral sclerosis, multiple sclerosis, terminal
21 cancer, muscular dystrophy, or inflammatory bowel disease, including
22 Crohn's disease;

23 (4) terminal illness, if the physician has determined a prognosis of
24 less than 12 months of life; or

25 (5) any other medical condition or its treatment that is approved by
26 the department by regulation. **】**

27 “Common ownership or control” means:

28 (1) between two for-profit entities, the same individuals or entities
29 own and control more than 50 percent of both entities;

30 (2) between a nonprofit entity and a for-profit entity, a majority of
31 the directors, trustees, or members of the governing body of the
32 nonprofit entity directly or indirectly own and control more than 50
33 percent of the for-profit entity; and

34 (3) between two nonprofit entities, the same directors, trustees, or
35 governing body members comprise a majority of the voting directors,
36 trustees, or governing body members of both nonprofits.

37 "Department" means the Department of Health.

38 "Designated caregiver" means a resident of the State who:

39 (1) is at least 18 years old;

40 (2) has agreed to assist with a registered qualifying patient's
41 medical use of cannabis, is not currently serving as designated
42 caregiver for more than one other qualifying patient, and is not the
43 qualifying patient's health care practitioner;

44 (3) subject to the provisions of paragraph (2) of subsection c. of
45 section 4 of P.L.2009, c.307 (C.24:6I-4), has never been convicted of
46 possession or sale of a controlled dangerous substance, unless such
47 conviction occurred after the effective date of P.L.2009, c.307
48 (C.24:6I-1 et al.) and was for a violation of federal law related to

1 possession or sale of cannabis that is authorized under P.L.2009, c.307
2 (C.24:6I-1 et al.), P.L.2015, c.158 (C.18A:40-12.22 et al.), or P.L. ,
3 c. (C.) (pending before the Legislature as this bill);

4 (4) has registered with the commission pursuant to section 4 of
5 P.L.2009, c.307 (C.24:6I-4), and, except in the case of a designated
6 caregiver who is an immediate family member of the patient, has
7 satisfied the criminal history record background check requirement of
8 section 4 of P.L.2009, c.307 (C.24:6I-4); and

9 (5) has been designated as designated caregiver ¹[on the
10 qualifying patient's application or renewal for a registry identification
11 card] by the patient when registering or renewing a registration with
12 the commission¹ or in other written notification to the commission.

13 “Executive director” means the executive director of the Cannabis
14 Regulatory Commission established pursuant to section 7 of P.L. , c.
15 (C.) (pending before the Legislature as Senate Bill No. 2703).

16 “Health care facility” means a general acute care hospital, nursing
17 home, long term care facility, hospice care facility, ¹group home,
18 facility that provides services to persons with developmental
19 disabilities, behavioral health care facility,¹ or rehabilitation center.

20 “Health care practitioner” means a physician, advanced practice
21 nurse, or physician assistant licensed or certified pursuant to Title 45
22 of the Revised Statutes who:

23 (1) possesses active registrations to prescribe controlled dangerous
24 substances issued by the United States Drug Enforcement
25 Administration and the Division of Consumer Affairs in the
26 Department of Law and Public Safety; ¹and¹

27 (2) ¹[has a bona fide practitioner-patient relationship with the
28 patient; and

29 (3) ¹is the health care practitioner responsible for the ongoing
30 treatment of a patient's qualifying medical condition ⁴, the symptoms
31 of that condition, or the symptoms associated with the treatment of that
32 condition⁴ , provided, however, that the ongoing treatment shall not be
33 limited to the provision of authorization for a patient to use medical
34 cannabis or consultation solely for that purpose.

35 “Immediate family” means the spouse, civil union partner, child,
36 sibling, or parent of an individual, and shall include the siblings
37 ⁴[and] ⁴, parents ⁴, and children⁴ of the individual's spouse or civil
38 union partner, and the ⁴parents,⁴ spouses ⁴,⁴ or civil union partners of
39 the individual's ⁴parents,⁴ siblings ⁴,⁴ and children.

40 “Institutional caregiver” means a resident of the State who:

41 (1) is at least 18 years old;

42 (2) is an employee of a health care facility;

43 (3) is authorized, within the scope of the individual's professional
44 duties, to possess and administer controlled dangerous substances in
45 connection with the care and treatment of patients and residents
46 pursuant to applicable State and federal laws;

1 (4) is authorized by the health care facility employing the person to
2 assist registered qualifying patients who are patients or residents of the
3 facility with the medical use of cannabis, including, but not limited to,
4 obtaining medical cannabis for registered qualifying patients and
5 assisting registered qualifying patients with the administration of
6 medical cannabis;

7 (5) subject to the provisions of paragraph (2) of subsection c. of
8 section 4 of P.L.2009, c.307 (C.24:6I-4), has never been convicted of
9 possession or sale of a controlled dangerous substance, unless such
10 conviction occurred after the effective date of P.L.2009, c.307
11 (C.24:6I-1 et al.) and was for a violation of federal law related to
12 possession or sale of cannabis that is authorized under P.L.2009, c.307
13 (C.24:6I-1 et al.), P.L.2015, c.158 (C.18A:40-12.22 et al.), or P.L. ,
14 c. (C.) (pending before the Legislature as this bill); and

15 (6) has registered with the commission pursuant to section 4 of
16 P.L.2009, c.307 (C.24:6I-4).

17 “Integrated curriculum” means an academic, clinical, or research
18 program at an institution of higher education that is coordinated with a
19 medical cannabis cultivator, medical cannabis manufacturer, or
20 medical cannabis dispensary to apply theoretical ⁴**【principals】**
21 principles⁴ , practical experience, or both involving the cultivation,
22 manufacturing, dispensing, or medical use of cannabis to a specific
23 area of study, including, but not limited to, agriculture, biology,
24 business, chemistry, culinary studies, ecology, environmental studies,
25 health care, horticulture, technology, or any other appropriate area of
26 study or combined areas of study. Integrated curricula shall be subject
27 to approval by the commission and the Department of Education.

28 “Integrated curriculum permit” or “IC permit” means a permit
29 issued to a medical cannabis cultivator, medical cannabis
30 manufacturer, or medical cannabis dispensary that includes an
31 integrated curriculum approved by the commission and the
32 Department of Education.

33 **【“Marijuana” has the meaning given in section 2 of the “New**
34 **Jersey Controlled Dangerous Substances Act,” P.L.1970, c.226**
35 **(C.24:21-2).】**

36 “Medical **【marijuana】** cannabis alternative treatment center” or
37 “alternative treatment center” means an organization **【approved】**
38 issued a permit by the **【department】** commission to **【perform activities**
39 necessary to provide registered qualifying patients with usable
40 marijuana and related paraphernalia in accordance with the provisions
41 of this act】 operate as a medical cannabis cultivator, medical cannabis
42 manufacturer, medical cannabis dispensary, or clinical registrant. This
43 term shall include the organization's officers, directors, board
44 members, and employees.

45 “Medical cannabis cultivator” means an organization holding a
46 permit issued by the commission that authorizes the organization to:
47 possess and cultivate cannabis and deliver, transfer, transport,

1 distribute, supply, and sell medical cannabis and related supplies to
2 other medical cannabis cultivators and to medical cannabis
3 manufacturers and medical cannabis dispensaries, as well as to plant,
4 cultivate, grow, and harvest medical cannabis for research purposes.
5 A medical cannabis cultivator permit shall not authorize the permit
6 holder to manufacture, produce, or otherwise create medical cannabis
7 products, or to deliver, transfer, transport, distribute, supply, sell, or
8 dispense medical cannabis, medical cannabis products, paraphernalia,
9 or related supplies to qualifying patients, designated caregivers, or
10 institutional caregivers.

11 “Medical cannabis dispensary” means an organization issued a
12 permit by the commission that authorizes the organization to: purchase
13 or obtain medical cannabis and related supplies from medical cannabis
14 cultivators; purchase or obtain medical cannabis products and related
15 supplies from medical cannabis manufacturers; purchase or obtain
16 medical cannabis, medical cannabis products, and related supplies and
17 paraphernalia from other medical cannabis dispensaries; deliver,
18 transfer, transport, distribute, supply, and sell medical cannabis and
19 medical cannabis products to other medical cannabis dispensaries ²[,]
20 ;² and possess, display, deliver, transfer, transport, distribute, supply,
21 sell, and dispense medical cannabis, medical cannabis products,
22 paraphernalia, and related supplies to qualifying patients, designated
23 caregivers, and institutional caregivers. A medical cannabis
24 dispensary permit shall not authorize the permit holder to cultivate
25 medical cannabis or to produce, manufacture, or otherwise create
26 medical cannabis products.

27 “Medical cannabis manufacturer” means an organization issued a
28 permit by the commission that authorizes the organization to: purchase
29 or obtain medical cannabis and related supplies from a medical
30 cannabis cultivator; purchase or obtain medical cannabis products
31 from another medical cannabis manufacturer; produce, manufacture,
32 or otherwise create medical cannabis products; and possess, deliver,
33 transfer, transport, distribute, supply, and sell medical cannabis
34 products and related supplies to other medical cannabis manufacturers
35 and to medical cannabis dispensaries. A medical cannabis
36 manufacturer permit shall not authorize the permit holder to cultivate
37 medical cannabis or to deliver, transfer, transport, distribute, supply,
38 sell, or dispense medical cannabis, medical cannabis products,
39 paraphernalia, or related supplies to qualifying patients, designated
40 caregivers, or institutional caregivers.

41 "Medical use of **【marijuana】** cannabis" means the acquisition,
42 possession, transport, or use of **【marijuana】** cannabis or paraphernalia
43 by a registered qualifying patient as authorized by **【this act】** P.L.2009,
44 c.307 (C.24:6I-1 et al.), P.L.2015, c.158 (C.18A:40-12.22 et al.), and
45 P.L. , c. (C.) (pending before the Legislature as this bill).

1 "Minor" means a person who is under 18 years of age and who has
2 not been married or previously declared by a court or an administrative
3 agency to be emancipated.

4 "Paraphernalia" has the meaning given in N.J.S.2C:36-1.

5 "Pediatric specialist" means a physician who is a board-certified
6 pediatrician or pediatric specialist, or an advanced practice nurse or
7 physician assistant who is certified as a pediatric specialist by an
8 appropriate professional certification or licensing entity.

9 **["Physician" means a person licensed to practice medicine and**
10 **surgery pursuant to Title 45 of the Revised Statutes with whom the**
11 **patient has a bona fide physician-patient relationship and who is the**
12 **primary care physician, hospice physician, or physician responsible for**
13 **the ongoing treatment of a patient's debilitating medical condition,**
14 **provided, however, that the ongoing treatment shall not be limited to**
15 **the provision of authorization for a patient to use medical marijuana or**
16 **consultation solely for that purpose.**

17 "Primary caregiver" or "caregiver" means a resident of the State
18 who:

- 19 a. is at least 18 years old;
- 20 b. has agreed to assist with a registered qualifying patient's
21 medical use of marijuana, is not currently serving as primary caregiver
22 for another qualifying patient, and is not the qualifying patient's
23 physician;
- 24 c. has never been convicted of possession or sale of a controlled
25 dangerous substance, unless such conviction occurred after the
26 effective date of this act and was for a violation of federal law related
27 to possession or sale of cannabis that is authorized under this act;
- 28 d. has registered with the department pursuant to section 5 of this
29 act, and has satisfied the criminal history record background check
30 requirement of section 5 of this act; and
- 31 e. has been designated as primary caregiver on the qualifying
32 patient's application or renewal for a registry identification card or in
33 other written notification to the department. **】**

34 ²"Primary care" means the practice of family medicine, general
35 internal medicine, general pediatrics, general obstetrics, or
36 gynecology.²

37 "Qualifying medical condition" means seizure disorder, including
38 epilepsy; intractable skeletal muscular spasticity; post-traumatic stress
39 disorder; glaucoma; positive status for human immunodeficiency
40 virus; acquired immune deficiency syndrome; cancer; amyotrophic
41 lateral sclerosis; multiple sclerosis; muscular dystrophy; inflammatory
42 bowel disease, including Crohn's disease; terminal illness, if the
43 patient has a prognosis of less than 12 months of life; anxiety;
44 migraine; Tourette's syndrome; dysmenorrhea; chronic pain; ²opioid
45 use disorder;² or any other medical condition or its treatment that is
46 approved by the commission.

1 "Qualifying patient" or "patient" means a resident of the State who
2 has been **provided with a certification** authorized for the medical use
3 of cannabis by a **physician** health care practitioner ¹**pursuant to a**
4 **bona fide physician-patient practitioner-patient relationship**¹.

5 **["Registry identification card"]** "Registration with the
6 commission"¹ means ¹**a document issued by the department**
7 **commission that identifies**¹ a person ¹has met the qualification
8 requirements for, and has been registered by the commission¹ as ^{1,1} a
9 registered qualifying patient **or primary**, designated caregiver, or
10 institutional caregiver. ¹The commission shall establish appropriate
11 means for health care practitioners, health care facilities, medical
12 cannabis dispensaries, law enforcement, schools, facilities providing
13 behavioral health services or services for persons with developmental
14 disabilities, and other appropriate entities to verify an individual's
15 status as a registrant with the commission.¹

16 "Terminally ill" means having an illness or condition with a
17 prognosis of less than 12 months of life.

18 "Usable **marijuana** cannabis" means the dried leaves and flowers
19 of **marijuana** cannabis, and any mixture or preparation thereof, and
20 does not include the seeds, stems, stalks, or roots of the plant.

21 (cf: P.L.2016, c.53, s.1)

22
23 4. Section 4 of P.L.2009, c.307 (C.24:6I-4) is amended to read as
24 follows:

25 4. a. The **department** commission shall establish a registry of
26 qualifying patients and their **primary** designated caregivers ¹**,** and
27 shall issue a registry identification card, which shall be valid for two
28 years, to a qualifying patient and **primary** each designated caregiver
29 for the patient, if applicable, who submits **and shall establish a means**
30 of identifying and verifying the registration status of patients and
31 designated caregivers who are registered with the commission.
32 Registration with the commission shall be valid for two years. A
33 patient or designated caregiver shall be registered with the commission
34 upon submitting¹ the following, in accordance with regulations
35 adopted by the **department** commission:

36 (1) **a certification that meets the requirements of section 5 of this**
37 **act** documentation of a health care practitioner's authorization ⁴**for**
38 **the patient**⁴ for the medical use of cannabis;

39 (2) an application or renewal fee, which may be based on a sliding
40 scale as determined by the **commissioner** executive director;

41 (3) the name, address, and date of birth of the patient and each
42 designated caregiver, as applicable; and

43 (4) the name, address, and telephone number of the patient's
44 **physician** health care practitioner.

45 Each qualifying patient may concurrently have up to two
46 designated caregivers. A qualifying patient may petition the

1 commission for approval to concurrently have more than two
2 designated caregivers, which petition shall be approved if the
3 commission finds that allowing the patient additional designated
4 caregivers is necessary to meet the patient's treatment needs and is
5 consistent with the provisions of P.L.2009, c.307 (C.24:6I-1 et al.).

6 The commission shall establish a registry of institutional caregivers
7 and shall ¹issue a registry identification card, which shall be valid for
8 one year, to an institutional caregiver who submits] establish a means
9 of identifying and verifying the registration status of institutional
10 caregivers who are registered with the commission. Registration with
11 the commission shall be valid for one year. An institutional caregiver
12 shall be registered with the commission upon submitting¹ the name,
13 address, and telephone number of the institutional caregiver and of the
14 health care facility at which the individual will be serving as
15 institutional caregiver and a certification that meets the requirements
16 of subsection h. of this section. The application or renewal fee for the
17 institutional caregiver shall be paid by the health care facility at which
18 the institutional caregiver will be serving as institutional caregiver. An
19 institutional caregiver shall not be limited in the number of qualifying
20 patients for whom the institutional caregiver may serve as institutional
21 caregiver at one time, provided that each qualifying patient served by
22 the institutional caregiver is a current patient or resident at the health
23 care facility at which the institutional caregiver is authorized to serve
24 as institutional caregiver, and the number of qualifying patients served
25 by the institutional caregiver is commensurate with the institutional
26 caregiver's ability to fully meet the treatment and related needs of each
27 qualifying patient and attend to the institutional caregiver's other
28 professional duties at the health care facility without jeopardizing the
29 health or safety of any patient or resident at the facility.

30 b. Before ¹issuing a registry identification card] registering an
31 individual¹, the [department] commission shall verify the information
32 contained in the application or renewal form submitted pursuant to this
33 section. In the case of a [primary] designated or institutional
34 caregiver, the [department] commission shall provisionally approve
35 an application pending the results of a criminal history record
36 background check, if the caregiver otherwise meets the requirements
37 of [this act] P.L.2009, c.307 (C.24:6I-1 et al.). The [department]
38 commission shall approve or deny an application or renewal ¹and
39 complete the registration process for successful applicants¹ within 30
40 days of receipt of the completed application or renewal ¹], and shall
41 issue a registry identification card within five days of approving the
42 application or renewal¹. The [department] commission may deny an
43 application or renewal only if the applicant fails to provide the
44 information required pursuant to this section, or if the [department]
45 commission determines that the information was incorrect or falsified
46 or does not meet the requirements of [this act] P.L.2009, c.307

1 (C.24:6I-1 et al.). Denial of an application shall be a final agency
2 decision, subject to review by the Superior Court, Appellate Division.

3 c. (1) The **【commissioner】** executive director shall require each
4 applicant seeking to serve as a **【primary】** designated or institutional
5 caregiver to undergo a criminal history record background check;
6 except that no criminal history record background check shall be
7 required for an applicant seeking to serve as a designated caregiver if
8 the applicant is an immediate family member of the patient, and no
9 criminal history record background check shall be required for an
10 applicant seeking to serve as an institutional caregiver if the applicant
11 completed a criminal history record background check as a condition
12 of professional licensure or certification. The **【commissioner】**
13 executive director is authorized to exchange fingerprint data with and
14 receive criminal history record background information from the
15 Division of State Police and the Federal Bureau of Investigation
16 consistent with the provisions of applicable federal and State laws,
17 rules, and regulations. The Division of State Police shall forward
18 criminal history record background information to the **【commissioner】**
19 executive director in a timely manner when requested pursuant to the
20 provisions of this section.

21 An applicant seeking to serve as a **【primary】** designated or
22 institutional caregiver who is required to complete a criminal history
23 record background check pursuant to this section shall submit to being
24 fingerprinted in accordance with applicable State and federal laws,
25 rules, and regulations. No check of criminal history record
26 background information shall be performed pursuant to this section
27 unless the applicant has furnished **【his】** the applicant's written consent
28 to that check. An applicant who is required to complete a criminal
29 history record background check pursuant to this section who refuses
30 to consent to, or cooperate in, the securing of a check of criminal
31 history record background information shall not be considered for
32 inclusion in the registry as a **【primary】** designated or institutional
33 caregiver ¹【or issuance of an identification card】¹. An applicant shall
34 bear the cost for the criminal history record background check,
35 including all costs of administering and processing the check.

36 (2) The **【commissioner】** executive director shall not approve an
37 applicant seeking to serve as a **【primary】** designated or institutional
38 caregiver who is required to complete a criminal history record
39 background check pursuant to this section if the criminal history
40 record background information of the applicant reveals a disqualifying
41 conviction. For the purposes of this section, a disqualifying conviction
42 shall mean a conviction of a crime involving any controlled dangerous
43 substance or controlled substance analog as set forth in chapter 35 of
44 Title 2C of the New Jersey Statutes except paragraph (4) of subsection
45 a. of N.J.S.2C:35-10, or any similar law of the United States or of any
46 other state.

1 (3) Upon receipt of the criminal history record background
2 information from the Division of State Police and the Federal Bureau
3 of Investigation, the **[commissioner]** executive director shall provide
4 written notification to the applicant of **[his]** the applicant's
5 qualification or disqualification for serving as a **[primary]** designated
6 or institutional caregiver.

7 If the applicant is disqualified because of a disqualifying
8 conviction pursuant to the provisions of this section, the conviction
9 that constitutes the basis for the disqualification shall be identified in
10 the written notice.

11 (4) The Division of State Police shall promptly notify the
12 **[commissioner]** executive director in the event that an individual who
13 was the subject of a criminal history record background check
14 conducted pursuant to this section is convicted of a crime or offense in
15 this State after the date the background check was performed. Upon
16 receipt of that notification, the **[commissioner]** executive director
17 shall make a determination regarding the continued eligibility of the
18 applicant to serve as a **[primary]** designated or institutional caregiver.

19 (5) Notwithstanding the provisions of paragraph (2) of this
20 subsection **[b. of this section]** to the contrary, no applicant shall be
21 disqualified from serving as a **[registered primary]** designated or
22 institutional caregiver on the basis of any conviction disclosed by a
23 criminal history record background check conducted pursuant to this
24 section if the individual has affirmatively demonstrated to the
25 **[commissioner]** executive director clear and convincing evidence of
26 rehabilitation. In determining whether clear and convincing evidence
27 of rehabilitation has been demonstrated, the following factors shall be
28 considered:

29 (a) the nature and responsibility of the position which the
30 convicted individual would hold, has held, or currently holds;

31 (b) the nature and seriousness of the crime or offense;

32 (c) the circumstances under which the crime or offense occurred;

33 (d) the date of the crime or offense;

34 (e) the age of the individual when the crime or offense was
35 committed;

36 (f) whether the crime or offense was an isolated or repeated
37 incident;

38 (g) any social conditions which may have contributed to the
39 commission of the crime or offense; and

40 (h) any evidence of rehabilitation, including good conduct in
41 prison or in the community, counseling or psychiatric treatment
42 received, acquisition of additional academic or vocational schooling,
43 successful participation in correctional work-release programs, or the
44 recommendation of those who have had the individual under their
45 supervision.

46 d. **[A registry identification card]** A verification of registration
47 issued by the commission¹ shall contain the following information:

1 (1) (a) in the case of ¹[a registry identification card for]¹ a
2 patient or designated caregiver ¹registration¹, the name, address, and
3 date of birth of the patient and **[primary]** each designated caregiver, if
4 applicable; and

5 (b) in the case of an institutional caregiver, the caregiver's name
6 and date of birth and the name and address of the health care facility at
7 which the caregiver is serving as institutional caregiver;

8 (2) the expiration date of the ¹[registry identification card]
9 registration¹;

10 (3) photo identification of the ¹[cardholder] registrant¹; and

11 (4) such other information that the **[department]** commission may
12 specify by regulation.

13 e. (1) A patient who has been ¹[issued a registry identification
14 card] registered by the commission¹ shall notify the **[department]**
15 commission of any change in the patient's name, address, or
16 **[physician]** health care practitioner or change in status of the patient's
17 **[debilitating]** qualifying medical condition, within 10 days of such
18 change, or the **[registry identification card]** patient's registration shall
19 be deemed null and void.

20 (2) A **[primary]** designated caregiver who has been ¹[issued a
21 registry identification card] registered by the commission¹ shall notify
22 the **[department]** commission of any change in the caregiver's name or
23 address within 10 days of such change, or the ¹[registry identification
24 card] caregiver's registration¹ shall be deemed null and void.

25 (3) An institutional caregiver who has been ¹[issued a registry
26 identification card] registered by the commission¹ shall notify the
27 commission of any change in the caregiver's name, address,
28 employment by a health care facility at which the caregiver is
29 registered to serve as institutional caregiver, or authorization from the
30 health care facility to assist qualifying patients with the medical use of
31 cannabis, within 10 days of such change, or the ¹[registry
32 identification card] caregiver's registration¹ shall be deemed null and
33 void and the individual shall be deemed ineligible to serve as an
34 institutional caregiver for a period of not less than one year.

35 f. The **[department]** commission shall maintain a confidential list
36 of the persons ¹[to whom it has issued registry identification cards]
37 registered with the commission¹. Individual names and other
38 identifying information on the list, and information contained in any
39 application form, or accompanying or supporting document shall be
40 confidential, and shall not be considered a public record under
41 P.L.1963, c.73 (C.47:1A-1 et seq.) **[or]** ¹, P.L.2001, c.404 (C.47:1A-5
42 et al.), or the common law concerning access to government records,
43 and shall not be disclosed except to:

44 (1) authorized employees of the **[department]** commission and the
45 Division of Consumer Affairs in the Department of Law and Public

1 Safety as necessary to perform official duties of the [department]
2 commission and the division, as applicable; and
3 (2) authorized employees of State or local law enforcement
4 agencies, only as necessary to verify that a person who is engaged in
5 the suspected or alleged medical use of [marijuana] cannabis is
6 lawfully ¹[in possession of a registry identification card] registered
7 with the commission¹.
8 g. Applying for ¹[or receiving a registry card] registration or
9 being registered by the commission¹ does not constitute a waiver of
10 the qualifying patient's [patient-physician] practitioner-patient
11 privilege.
12 h. An applicant seeking to serve as an institutional caregiver shall
13 submit with the application a certification executed by the director or
14 administrator of the health care facility employing the applicant
15 attesting that:
16 (1) the facility has authorized the applicant to assist registered
17 qualifying patients at the facility with the medical use of cannabis,
18 including obtaining medical cannabis from a medical cannabis
19 dispensary and assisting registered qualifying patients with the
20 administration of medical cannabis;
21 (2) the facility has established protocols and procedures and
22 implemented security measures to ensure that⁴any medical cannabis
23 obtained by an institutional caregiver that is transported by the
24 caregiver to the facility is transported in a safe and secure manner that
25 prevents theft, diversion, adulteration, and access by unauthorized
26 individuals, and that⁴any medical cannabis present at the facility is
27 stored in a safe and secure manner that prevents theft, diversion,
28 adulteration, and access by unauthorized individuals;
29 (3) the facility has established protocols and procedures to review
30 the medications and treatment plans of registered qualifying patients at
31 the facility to ensure that the patient's medical use of cannabis will not
32 result in adverse drug interactions, side effects, or other complications
33 that could significantly jeopardize the health or safety of the patient;
34 (4) the facility will not charge a registered qualifying patient for
35 medical cannabis obtained on the registered qualifying patient's behalf
36 in an amount that exceeds the actual cost of the medical cannabis, plus
37 any reasonable costs incurred in acquiring the medical cannabis;
38 (5) the facility has established protocols and procedures
39 concerning whether, and to what extent, designated caregivers are
40 permitted to assist registered qualifying patients with the medical use
41 of cannabis while at the facility; and
42 (6) the facility will promptly notify the executive director in the
43 event that:
44 (a) an institutional caregiver registered with the commission
45 pursuant to this section ceases to be employed by the facility or ceases
46 to be authorized by the facility to assist registered qualifying patients
47 with the medical use of cannabis, in which case, upon receipt of the

1 notification, the executive director shall immediately revoke the
2 institutional caregiver's registration; or

3 (b) an institutional caregiver registered with the commission
4 pursuant to this section, who completed a criminal history record
5 background check as a condition of professional licensure or
6 certification, is convicted of a crime or offense in this State after the
7 date the criminal history background check was performed, in which
8 case, upon receipt of that notification, the executive director shall
9 make a determination regarding the continued eligibility of the
10 applicant to serve as an institutional caregiver.

11 Nothing in this section shall be deemed to require any facility to
12 authorize any employee of the facility to serve as an institutional
13 caregiver or to issue a certification that meets the requirements of this
14 subsection.

15 (cf: P.L.2009, c.307, s.4)

16

17 5. (New section) a. A health care practitioner shall not be
18 required to be listed publicly in any medical cannabis practitioner
19 registry as a condition of authorizing patients for the medical use of
20 cannabis.

21 b. When authorizing a qualifying patient who is a minor for the
22 medical use of cannabis, if the treating health care practitioner is
23 not a pediatric specialist, the treating health care practitioner shall,
24 prior to authorizing the patient for the medical use of cannabis,
25 obtain written confirmation from a health care practitioner who is a
26 pediatric specialist establishing, in that health care practitioner's
27 professional opinion, and following an examination of the minor
28 patient or review of the minor patient's medical record, that the
29 minor patient is likely to receive therapeutic or palliative benefits
30 from the medical use of cannabis to treat or alleviate symptoms
31 associated with the patient's qualifying medical condition. If the
32 treating health care practitioner is a pediatric specialist, no
33 additional written confirmation from any other health care
34 practitioner shall be required as a condition of authorizing the
35 patient for the medical use of cannabis.

36 c. No authorization for the medical use of cannabis may be
37 issued by a health care practitioner to the practitioner's own self or
38 to a member of the practitioner's immediate family.

39 d. The commission shall establish a process to allow medical
40 cannabis to be dispensed to a patient who has been authorized for
41 the medical use of cannabis and who has initiated the process of
42 registering with the commission pursuant to section 4 of P.L.2009,
43 c.307 (C.24:6I-4), but whose registration has not been completed or
44 subject to other final action by the commission. A patient may be
45 dispensed medical cannabis in quantities of up to a two-week
46 supply during the pendency of the patient's registration, after which
47 time the patient may be dispensed medical cannabis in an amount
48 consistent with the requirements of section 10 of P.L.2009, c.307

1 (C.24:6I-10). The commission shall impose such restrictions on
2 access to medical cannabis pursuant to this subsection as shall be
3 necessary to protect against fraud, abuse, and diversion.
4

5 6. (New section) a. Except as provided in subsection b. of this
6 section, no health care practitioner who has authorized a patient for
7 the medical use of cannabis pursuant to P.L.2009, c.307 (C.24:6I-1
8 et al.) within the past 90 days, and no member of such health care
9 practitioner's immediate family, shall be an interest holder in, or
10 receive any form of direct or indirect compensation from, any
11 medical cannabis cultivator, medical cannabis manufacturer,
12 medical cannabis dispensary, or clinical registrant.

13 b. Nothing in subsection a. of this section shall be construed to
14 prevent a health care practitioner from serving on the governing
15 board of a medical cannabis cultivator, medical cannabis
16 manufacturer, medical cannabis dispensary, or clinical registrant, or
17 on the medical advisory board of a medical cannabis cultivator,
18 medical cannabis manufacturer, medical cannabis dispensary, or
19 clinical registrant established pursuant to section 15 of
20 P.L. , c. (C.) (pending before the Legislature as this bill),
21 or from receiving a reasonable stipend for such service, provided
22 that:

23 (1) the stipend does not exceed the stipend paid to any other
24 member of the governing board or medical advisory board for
25 serving on the board; and

26 (2) the amount of the stipend is not based on patient volumes at
27 any medical cannabis dispensary or clinical registrant or on the
28 number of authorizations for the medical use of cannabis issued by
29 the health care practitioner pursuant to P.L.2009, c.307 (C.24:6I-1
30 et al.).

31 c. A health care practitioner, or an immediate family member
32 of a health care practitioner, who applies to be an owner, director,
33 officer, or employee of a medical cannabis cultivator, medical
34 cannabis manufacturer, medical cannabis dispensary, or clinical
35 registrant, or who otherwise seeks to be an interest holder in, or
36 receive any form of direct or indirect compensation from, a medical
37 cannabis cultivator, medical cannabis manufacturer, medical
38 cannabis dispensary, or clinical registrant, shall certify that the
39 health care practitioner has not authorized a patient for the medical
40 use of cannabis pursuant to P.L.2009, c.307 (C.24:6I-1 et al.) within
41 the 90 days immediately preceding the date of the application.

42 d. A person who violates subsection a. of this section shall be
43 guilty of a crime of the fourth degree.
44

45 7. (New section) a. An individual who is registered as a
46 qualifying patient in another state or jurisdiction within the United
47 States that authorizes the medical use of cannabis shall be
48 considered a registered qualifying patient for the purposes of

1 P.L.2009, c.307 (C.24:6I-1 et al.) for a period of up to six months,
2 provided that the individual possesses both ¹【a valid patient registry
3 card】 proof of registration in,¹ and a valid photo identification card
4 issued by ¹,¹ the other state or jurisdiction. During the six month
5 period, the individual shall be authorized to possess and use
6 medical cannabis and engage in such other conduct related to
7 medical cannabis in New Jersey as is consistent with the
8 requirements of P.L.2009, c.307 (C.24:6I-1 et al.) and the laws of
9 the state or jurisdiction ¹【that issued the patient’s registry card】 in
10 which the patient is registered¹, except that medical cannabis shall
11 not be dispensed to the individual unless a health care practitioner
12 licensed in New Jersey issues written instructions for the individual
13 that meet the requirements of section 10 of P.L.2009, c.307
14 (C.24:6I-10). No individual shall be authorized to acquire, possess,
15 use, or engage in other conduct in connection with medical cannabis
16 in New Jersey pursuant to a medical cannabis registration from
17 another State or jurisdiction for more than six months unless the
18 individual registers with the commission as a qualifying patient
19 pursuant to section 4 of P.L.2009, c.307 (C.24:6I-4).

20 b. An individual who is registered as a designated caregiver in
21 another state or jurisdiction within the United States that authorizes
22 the medical use of cannabis shall be considered a designated
23 caregiver for the purposes of P.L.2009, c.307 (C.24:6I-1 et al.) for a
24 period of up to six months, provided that the individual is in
25 possession of both ¹【a valid registry card】 proof of registration in,¹
26 and a valid photo identification card issued by ¹,¹ the other state or
27 jurisdiction. During the six month period, the individual shall be
28 authorized to assist a registered qualifying patient with the medical
29 use of cannabis and engage in such other conduct in connection
30 with medical cannabis in New Jersey as is consistent with the
31 requirements of P.L.2009, c.307 (C.24:6I-1 et al.) and the laws of
32 the state or jurisdiction ¹【that issued the caregiver’s registry card】
33 in which the caregiver is registered¹, except that medical cannabis
34 shall not be dispensed to the individual on behalf of a registered
35 qualifying patient unless a health care practitioner licensed in New
36 Jersey issues written instructions for the registered qualifying
37 patient that meet the requirements of section 10 of P.L.2009, c.307
38 (C.24:6I-10). No individual shall be authorized to assist a registered
39 qualifying patient with the medical use of cannabis or engage in
40 other conduct in connection with medical cannabis in New Jersey
41 pursuant to a medical cannabis registration from another State or
42 jurisdiction for more than six months unless the individual registers
43 with the commission as a designated caregiver pursuant to section 4
44 of P.L.2009, c.307 (C.24:6I-4).

45 c. The commission shall seek to enter into reciprocity
46 agreements with other states and jurisdictions within the United
47 States that authorize the medical use of cannabis.

- 1 8. Section 6 of P.L.2009, c.307 (C.24:6I-6) is amended to read
2 as follows:
- 3 6. a. The provisions of N.J.S.2C:35-18 shall apply to any
4 qualifying patient, **[primary]** designated caregiver, **[alternative**
5 **treatment center, physician]** institutional caregiver, health care
6 facility, medical cannabis cultivator, medical cannabis
7 manufacturer, medical cannabis dispensary, health care practitioner,
8 academic medical center, clinical registrant, testing laboratory, or
9 any other person acting in accordance with the provisions of
10 P.L.2009, c.307 (C.24:6I-1 et al.) **[or]** , P.L.2015, c.158 (C.18A:40-
11 12.22 et al.), or P.L. , c. (C.) (pending before the
12 Legislature as this bill).
- 13 b. A qualifying patient, **[primary]** designated caregiver,
14 **[alternative treatment center, physician]** institutional caregiver,
15 health care facility, medical cannabis cultivator, medical cannabis
16 manufacturer, medical cannabis dispensary, health care practitioner,
17 academic medical center, clinical registrant, testing laboratory, or
18 any other person acting in accordance with the provisions of
19 P.L.2009, c.307 (C.24:6I-1 et al.) **[or]** , P.L.2015, c.158 (C.18A:40-
20 12.22 et al.), or P.L. , c. (C.) (pending before the
21 Legislature as this bill) shall not be subject to any civil or
22 administrative penalty, or denied any right or privilege, including,
23 but not limited to, civil penalty or disciplinary action by a
24 professional licensing board, related to the medical use of
25 **[marijuana]** cannabis as authorized under P.L.2009, c.307 (C.24:6I-
26 1 et al.) **[or]** , P.L.2015, c.158 (C.18A:40-12.22 et al.),
27 or P.L. , c. (C.) (pending before the Legislature as this
28 bill).
- 29 c. ¹**[Possession of]** Registration with the commission¹, or
30 application for ¹registration by the commission¹, ¹**[a registry**
31 **identification card]**¹ shall not alone constitute probable cause to
32 search the person or the property of the ¹**[person possessing or**
33 **applying for the registry identification card]** registrant or
34 applicant¹, or otherwise subject the person or **[his]** the person's
35 property to inspection by any governmental agency.
- 36 d. The provisions of section 2 of P.L.1939, c.248 (C.26:2-82),
37 relating to destruction of **[marijuana]** cannabis determined to exist
38 by the **[department]** commission, shall not apply if a qualifying
39 patient **[or primary]**, designated caregiver, or institutional caregiver
40 ¹**[has in his possession a registry identification card]** is registered
41 with the commission¹ and ¹is in possession of¹ no more than the
42 maximum amount of usable **[marijuana]** cannabis that may be
43 obtained in accordance with section 10 of P.L.2009, c.307 (C.24:6I-
44 10).
- 45 e. No person shall be subject to arrest or prosecution for
46 constructive possession, conspiracy, or any other offense for simply

1 being in the presence or vicinity of the medical use of **【marijuana】**
2 cannabis as authorized under P.L.2009, c.307 (C.24:6I-1 et al.)
3 **【or】**, P.L.2015, c.158 (C.18A:40-12.22 et al.), or P.L. _____,
4 c. (C. _____) (pending before the Legislature as this bill).

5 f. No custodial parent, guardian, or person who has legal
6 custody of a qualifying patient who is a minor shall be subject to
7 arrest or prosecution for constructive possession, conspiracy, or any
8 other offense for assisting the minor in the medical use of
9 **【marijuana】** cannabis as authorized under P.L.2009, c.307 (C.24:6I-
10 1 et al.) **【or】**, P.L.2015, c.158 (C.18A:40-12.22 et al.), or
11 P.L. _____, c. (C. _____) (pending before the Legislature as this bill).

12 g. For the purposes of medical care, including organ
13 transplants, a qualifying patient's authorized use of medical
14 cannabis in accordance with the provisions of P.L.2009, c.307
15 (C.24:6I-1 et al.), P.L.2015, c.158 (C.18A:40-12.22 et al.), and
16 P.L. _____, c. (C. _____) (pending before the Legislature as this bill),
17 shall be considered equivalent to the authorized use of any other
18 medication used at the direction of a health care practitioner, and
19 shall not constitute the use of an illicit substance or otherwise
20 disqualify a qualifying patient from needed medical care.

21 h. No public or private school or institution of higher education
22 may refuse to enroll a person based solely on the person's status as
23 a **【registry identification cardholder】** registrant with the
24 commission¹, unless failing to do so would result in the school or
25 institution losing a monetary or licensing-related benefit granted
26 pursuant to federal law. No public or private school or institution
27 of higher education shall be penalized or denied any benefit under
28 State law solely on the basis of enrolling a person who is **【a**
29 registry identification cardholder**】** registered with the commission¹.

30 i. No person shall refuse to rent, lease, or sublease any real
31 property or part or portion thereof, or discriminate in the terms,
32 conditions, or privileges of the rental or lease of any real property
33 or part or portion thereof or in the furnishing of facilities or services
34 in connection therewith, based solely on the status of the
35 prospective tenant as a **【registry identification cardholder】**
36 registrant with the commission¹, unless failing to do so would
37 result in the person losing a monetary or licensing-related benefit
38 granted pursuant to federal law. No such person shall be penalized
39 or denied any benefit under State law solely on the basis of renting
40 or leasing real property to a person who is **【a registry identification**
41 cardholder**】** registered with the commission¹.

42 j. No person shall be denied, or subject to adverse action in
43 connection with, any license, certification, or permit issued
44 pursuant to State law solely based on the person's status as a
45 **【registry identification cardholder】** registrant with the
46 commission¹, unless issuance or continuance of the license,
47 certification, or permit would result in the licensing or permitting

1 agency losing federal certification, federal funding, or other
2 benefits granted pursuant to federal law.

3 k. (1) Unless failing to do so would result in the health care
4 facility losing a monetary or licensing-related benefit granted
5 pursuant to federal law, a health care facility that employs or
6 maintains a professional affiliation with a health care practitioner
7 shall not take adverse employment action against the health care
8 practitioner or otherwise limit, restrict, or terminate a professional
9 affiliation with the health care practitioner solely based on the
10 health care practitioner engaging in conduct authorized under
11 P.L.2009, c.307 (C.24:6I-1 et al.) and P.L. , c. (C.)
12 (pending before the Legislature as this bill), including, but not
13 limited to, authorizing patients for the medical use of cannabis,
14 issuing written instructions pursuant to section 10 of P.L.2009,
15 c.307 (C.24:6I-10), and consulting with patients regarding the use
16 of medical cannabis to treat the patient's qualifying medical
17 condition.

18 (2) No health care facility shall be penalized or denied any
19 benefit under State law solely on the basis of employing or
20 maintaining a professional affiliation with a health care practitioner
21 who engages in conduct authorized under P.L.2009, c.307 (C.24:6I-
22 1 et al.) and P.L. , c. (C.) (pending before the Legislature
23 as this bill).

24 l. Unless failing to do so would result in the insurer or
25 insurance association losing a monetary or licensing-related benefit
26 granted pursuant to federal law, an insurer or insurance association
27 authorized to issue medical malpractice liability insurance in New
28 Jersey shall not deny coverage to a health care practitioner, increase
29 the amount of premiums or deductibles under the policy, or charge
30 any additional fees in connection with the policy, solely based on
31 the health care practitioner engaging in conduct authorized under
32 P.L.2009, c.307 (C.24:6I-1 et al.) or P.L. , c. (C.) (pending
33 before the Legislature as this bill), including, but not limited to,
34 authorizing qualifying patients for the medical use of cannabis,
35 issuing written instructions pursuant to section 10 of P.L.2009,
36 c.307 (C.24:6I-10), and consulting with patients regarding the use
37 of medical cannabis to treat a qualifying medical condition. No
38 insurer or insurance association shall be penalized or denied any
39 benefit under State law solely on the basis of providing medical
40 malpractice liability insurance to a health care practitioner who
41 engages in conduct authorized under P.L.2009, c.307 (C.24:6I-
42 1 et al.) or P.L. , c. (C.) (pending before the Legislature as
43 this bill).

44 m. A person's status as a registered qualifying patient, a
45 designated or institutional caregiver, or an owner, director, officer,
46 or employee of a medical cannabis cultivator, medical cannabis
47 manufacturer, medical cannabis dispensary, or clinical registrant
48 shall not constitute the sole grounds for entering an order that

1 restricts or denies custody of, or visitation with, a minor child of the
2 person.

3 ¹n. (1) No health care facility shall be penalized or denied any
4 benefit under State law solely for permitting or prohibiting the
5 handling, administration, usage, or storage of medical cannabis,
6 provided that the facility's policies related to medical cannabis are
7 consistent with all other facility policies concerning medication
8 handling, administration, usage, or storage.

9 (2) No health care facility shall be penalized or denied any
10 benefit under State law solely for prohibiting the smoking of
11 medical cannabis on facility property in accordance with the
12 facility's smoke free policy.¹

13 (cf: P.L.2015, c.158, s.4)

14

15 9. (New section) a. It shall be unlawful to take any adverse
16 employment action against an employee who is a registered qualifying
17 patient based solely on the employee's status as a ¹**【registry**
18 **identification cardholder】** registrant with the commission¹.

19 b. (1) If an employer has a drug testing policy and an employee or
20 job applicant tests positive for cannabis, the employer shall offer the
21 employee or job applicant an opportunity to present a legitimate
22 medical explanation for the positive test result, and shall provide
23 written notice of the right to explain to the employee or job applicant.

24 (2) Within three working days after receiving notice pursuant to
25 paragraph (1) of this subsection, the employee or job applicant may
26 submit information to the employer to explain the positive test result,
27 or may request a confirmatory retest of the original sample at the
28 employee's or job applicant's own expense. As part of an employee's
29 or job applicant's explanation for the positive test result, the employee
30 or job applicant may present an authorization for medical cannabis
31 issued by a health care practitioner, ¹**【a registry identification card】**
32 proof of registration with the commission¹, or both.

33 c. Nothing in this section shall be deemed to:

34 (1) restrict an employer's ability to prohibit, or take adverse
35 employment action for, the possession or use of intoxicating
36 substances during work hours ⁴or on the premises of the workplace
37 outside of work hours⁴; or

38 (2) require an employer to commit any act that would cause the
39 employer to be in violation of federal law, that would result in a loss of
40 a licensing-related benefit pursuant to federal law, or that would result
41 in the loss of a federal contract or federal funding.

42 d. No employer shall be penalized or denied any benefit under
43 State law solely on the basis of employing a person who is ¹**【a registry**
44 **identification cardholder】** registered with the commission¹.

1 10. Section 7 of P.L.2009, c.307 (C.24:6I-7) is amended to read as
2 follows:

3 7. a. (1) The **【department】** commission shall accept applications
4 from entities for permits to operate as **【alternative treatment centers**
5 and may charge a reasonable fee for the issuance of a permit under this
6 section**】** medical cannabis cultivators, medical cannabis
7 manufacturers, and medical cannabis dispensaries.

8 (2) (a) For a period of 18 months after the effective date of P.L. ,
9 c. (C.) (pending before the Legislature as this bill):

10 (i) an applicant may concurrently hold a medical cannabis
11 cultivator permit and a medical cannabis manufacturer permit, but
12 shall not be authorized to hold a medical cannabis dispensary permit;
13 and

14 (ii) an applicant who holds a medical cannabis dispensary permit
15 shall not be authorized to concurrently hold a medical cannabis
16 cultivator permit or a medical cannabis manufacturer permit.

17 (b) Commencing 18 months after the effective date of P.L. ,
18 c. (C.) (pending before the Legislature as this bill), a permit
19 holder shall be authorized to concurrently hold a medical cannabis
20 cultivator permit, a medical cannabis manufacturer permit, and a
21 medical cannabis dispensary permit, provided that no permit holder
22 shall be authorized to concurrently hold more than one permit of each
23 type. The permit holder may submit an application for a permit of any
24 type that the permit holder does not currently hold prior to the
25 expiration of the 18 month period described in subparagraph (a) of this
26 paragraph, provided that no permit shall be awarded to the permit
27 holder during the 18 month period if issuance of the permit would
28 violate the restrictions set forth in subparagraph (a) of this paragraph
29 concerning the types of permits that may be concurrently held during
30 the 18 month period.

31 (c) The provisions of subparagraph (a) of this paragraph shall not
32 apply to any alternative treatment center that was issued a permit prior
33 to the effective date of P.L. , c. (C.) (pending before the
34 Legislature as this bill), to any alternative treatment center that was
35 issued a permit after the effective date of P.L. , c. (C.)
36 (pending before the Legislature as this bill) pursuant to an application
37 submitted prior to the effective date of P.L. , c. (C.) (pending
38 before the Legislature as this bill), or to one of the six alternative
39 treatment centers issued a permit pursuant to section 11 of P.L. , c.
40 (C.) (pending before the Legislature as this bill) that are expressly
41 exempt from the provisions of ⁴**【subsection】** subparagraph⁴ (a) of this
42 paragraph, which alternative treatment centers shall be deemed to
43 concurrently hold a medical cannabis cultivator permit, a medical
44 cannabis manufacturer permit, and a medical cannabis dispensary
45 permit, and shall be authorized to engage in any conduct authorized
46 pursuant to those permits in relation to the cultivation, manufacturing,
47 and dispensing of medical cannabis. In addition, an alternative
48 treatment center that was issued a permit prior to the effective date of

1 P.L. , c. (C.) (pending before the Legislature as this bill), an
 2 alternative treatment center that was issued a permit after the effective
 3 date of P.L. , c. (C.) (pending before the Legislature as this
 4 bill) pursuant to an application submitted prior to the effective date of
 5 P.L. , c. (C.) (pending before the Legislature as this bill), and
 6 the six alternative treatment center permits issued pursuant to section
 7 11 of P.L. , c. (C.) (pending before the Legislature as this bill)
 8 that are expressly exempt from the provisions of subparagraph (a) of
 9 this paragraph shall, upon the effective date of P.L. , c. (C.)
 10 (pending before the Legislature as Senate Bill No. 2703), be deemed to
 11 either hold a Class 3 Cannabis Wholesaler license or¹ concurrently
 12 hold a Class 1 Cannabis Grower license, a Class 2 Cannabis Processor
 13 License, a Class 3 Cannabis Wholesaler¹ license, and a Class 4
 14 Cannabis Retailer¹ license, plus an additional Class 4
 15 Cannabis Retailer¹ license for each satellite dispensary that
 16 was approved pursuant to an application submitted prior to³ or within
 17 18 months after³ the effective date of P.L. , c. (C.) (pending
 18 before the Legislature as this bill)⁴, subject to the requirements of
 19 subparagraph (d) of this paragraph⁴. In no case may an
 20 alternative treatment center holding a Class 3 Cannabis Wholesaler
 21 license concurrently hold a Class I Cannabis Grower license, Class 2
 22 Cannabis Processor license, or Class 4 Cannabis Retailer license; and
 23 in no case may an alternative treatment center holding a Class 1
 24 Cannabis Grower license, a Class 2 Cannabis Processor license, a
 25 Class 4 Cannabis Retailer license, or any combination thereof,
 26 concurrently hold a Class 3 Cannabis Wholesaler license. An¹
 27 alternative treatment center issued an adult use cannabis license
 28 pursuant to this subparagraph¹ shall be authorized to use the same
 29 premises for all activities authorized under P.L.2009, c.307 (C.24:6I-1
 30 et al.) and P.L. , c. (C.) (pending before the Legislature as
 31 Senate Bill No. 2703) without being required to establish or maintain
 32 any physical barriers or separations between operations related to the
 33 medical use of cannabis and operations related to adult use cannabis,
 34 provided that the alternative treatment center shall be required to
 35 certify to the commission that the alternative treatment center has
 36 sufficient quantities of medical cannabis and medical cannabis
 37 products available to meet the reasonably anticipated treatment needs
 38 of registered qualifying patients as a condition of selling¹ engaging
 39 in activities related to the growing, producing, wholesaling, or retail
 40 sale of¹ adult use cannabis at retail¹, as applicable¹.

41 (d) No entity may be issued or concurrently hold more than one
 42 medical cannabis cultivator permit, one medical cannabis
 43 manufacturer permit, or one medical cannabis dispensary permit at one
 44 time, and no medical cannabis dispensary shall be authorized to
 45 establish a satellite location on or after the effective date of P.L. , c
 46 (C.) (pending before the Legislature as this bill), except that an
 47 alternative treatment center that was issued a permit prior to the

1 effective date of P.L. , c. (C.) (pending before the Legislature
2 as this bill) or that was issued a permit after the effective date of P.L. ,
3 c. (C.) (pending before the Legislature as this bill) pursuant to
4 an application submitted prior to the effective date of P.L. , c.
5 (C.) (pending before the Legislature as this bill) shall be
6 authorized to maintain any satellite dispensary that was approved
7 pursuant to an application submitted prior to ³or within 18 months
8 after³ the effective date of P.L. , c. (C.) (pending before the
9 Legislature as this bill). ⁴**3**An alternative treatment center that was
10 issued a permit after the effective date of P.L. , c. (C.)
11 (pending before the Legislature as this bill) pursuant to an application
12 submitted prior to the effective date of P.L. , c. (C.) (pending
13 before the Legislature as this bill) shall be authorized to establish and
14 maintain one additional satellite dispensary upon an application to and
15 approval by the commission, which approval shall not be unreasonably
16 withheld.³】 The six alternative treatment centers issued permits
17 pursuant to section 11 of P.L. , c. (C.) (pending before the
18 Legislature as this bill) that are expressly exempt from the provisions
19 of subparagraph (a) of this paragraph shall be authorized to establish
20 and maintain up to one satellite dispensary location, provided that the
21 satellite dispensary was approved pursuant to an application submitted
22 within 18 months after the effective date of P.L. , c. (C.)
23 (pending before the Legislature as this bill).⁴

24 (e) No entity issued a medical cannabis cultivator, medical
25 cannabis manufacturer, or medical cannabis dispensary permit may
26 concurrently hold a clinical registrant permit issued pursuant to section
27 13 of P.L. , c. (C.) (pending before the legislature as this bill),
28 and no entity issued a clinical registrant permit pursuant to section 13
29 of P.L. , c. (C.) (pending before the Legislature as this bill)
30 may concurrently hold a medical cannabis cultivator permit, a medical
31 cannabis manufacturer permit, or a medical cannabis dispensary
32 permit.

33 (3) The **】department】 commission shall seek to ensure the**
34 availability of a sufficient number of **】alternative treatment centers】**
35 medical cannabis cultivators, medical cannabis manufacturers, and
36 medical cannabis dispensaries throughout the State, pursuant to need,
37 including at least two each in the northern, central, and southern
38 regions of the State. **】The first two centers issued a permit in each**
39 region shall be nonprofit entities, and centers subsequently**】 Medical**
40 cannabis cultivators, medical cannabis manufacturers, and medical
41 cannabis dispensaries issued permits pursuant to this section may be
42 nonprofit or for-profit entities.

43 **】An alternative treatment center**】****

44 (4) The commission shall periodically evaluate whether the
45 number of medical cannabis cultivator, medical cannabis
46 manufacturer, and medical cannabis dispensary permits issued are
47 sufficient to meet the needs of qualifying patients in the State, and

1 shall make requests for applications and issue such additional permits
2 as shall be necessary to meet those needs. The types of permits
3 requested and issued, and the locations of any additional permits that
4 are authorized, shall be in the discretion of the executive director based
5 on the needs of qualifying patients in the State.

6 (5) (a) A medical cannabis cultivator shall be authorized to:
7 acquire a reasonable initial and ongoing inventory, as determined by
8 the [department] commission, of [marijuana] cannabis seeds or
9 seedlings and paraphernalia [.] ; possess, cultivate, plant, grow,
10 harvest, [process, display, manufacture,] and package medical
11 cannabis, including prerolled forms, for any authorized purpose,
12 including, but not limited to, research purposes; and deliver, transfer,
13 transport, distribute, supply, or sell [, or dispense] medical
14 [marijuana] cannabis [, or] and related supplies to any medical
15 cannabis cultivator, medical cannabis manufacturer, medical cannabis
16 dispensary, or clinical registrant in the State. In no case shall a
17 medical cannabis cultivator or clinical registrant operate or be located
18 on land that is valued, assessed or taxed as an agricultural or
19 horticultural use pursuant to the "Farmland Assessment Act of 1964,"
20 P.L.1964, c.48 (C.54:4-23.1 et seq.).

21 (b) A medical cannabis manufacturer shall be authorized to:
22 purchase or obtain medical cannabis from any medical cannabis
23 cultivator, medical cannabis manufacturer, or clinical registrant in the
24 State; possess and utilize medical cannabis in the manufacture,
25 production, and creation of medical cannabis products; and deliver,
26 transfer, transport, supply, or sell medical cannabis products and
27 related supplies to any medical cannabis manufacturer, medical
28 cannabis dispensary, or clinical registrant in the State.

29 (c) A medical cannabis dispensary shall be authorized to: purchase
30 or acquire medical cannabis from any medical cannabis cultivator,
31 medical cannabis dispensary, or clinical registrant in the State and
32 medical cannabis products and related supplies from any medical
33 cannabis manufacturer, medical cannabis dispensary, or clinical
34 registrant in the State; purchase or acquire paraphernalia from any
35 legal source; and distribute, supply, sell, or dispense medical cannabis,
36 medical cannabis products, paraphernalia, and related supplies to
37 qualifying patients or their [primary] designated or institutional
38 caregivers who are registered with the [department] commission
39 pursuant to section 4 of [this act] P.L.2009, c.307 (C.24:6I-4). [An
40 alternative treatment center]

41 (6) A medical cannabis cultivator shall not be limited in the
42 number of strains of medical [marijuana] cannabis cultivated, and a
43 medical cannabis manufacturer shall not be limited in the number or
44 type of medical cannabis products manufactured, produced, or created.
45 A medical cannabis manufacturer may package, and a medical
46 cannabis dispensary may directly dispense [marijuana] medical
47 cannabis and medical cannabis products to qualifying patients and

1 their designated and institutional caregivers in any authorized form.
2 Authorized forms shall include dried form, oral lozenges, topical
3 formulations, transdermal form, sublingual form, tincture form, or
4 edible form, or any other form as authorized by the **【commissioner】**
5 executive director. Edible form shall include tablets, capsules, drops
6 or syrups, oils, and any other form as authorized by the
7 **【commissioner】 executive director.** **【Edible forms shall be available**
8 only to qualifying patients who are minors.

9 Applicants for authorization as nonprofit alternative treatment
10 centers shall be subject to all applicable State laws governing nonprofit
11 entities, but**】**

12 (7) Nonprofit medical cannabis cultivators, medical cannabis
13 manufacturers, and medical cannabis dispensaries need not be
14 recognized as a 501(c)(3) organization by the federal Internal Revenue
15 Service.

16 b. The **【department】** commission shall require that an applicant
17 provide such information as the **【department】** commission determines
18 to be necessary pursuant to regulations adopted pursuant to **【this act】**
19 P.L.2009, c.307 (C.24:6I-1 et al.).

20 c. A person who has been convicted of a crime of the first,
21 second, or third degree under New Jersey law or of a crime involving
22 any controlled dangerous substance or controlled substance analog as
23 set forth in chapter 35 of Title 2C of the New Jersey Statutes except
24 paragraph (4) of subsection a. of N.J.S.2C:35-10, or any similar law of
25 the United States or any other state shall not be issued a permit to
26 operate as **【an alternative treatment center】** a medical cannabis
27 cultivator, medical cannabis manufacturer, medical cannabis
28 dispensary, or clinical registrant or be a director, officer, or employee
29 of **【an alternative treatment center】** a medical cannabis cultivator,
30 medical cannabis manufacturer, medical cannabis dispensary, or
31 clinical registrant, unless such conviction occurred after the effective
32 date of **【this act】** P.L.2009, c.307 (C.24:6I-1 et al.) and was for a
33 violation of federal law relating to possession or sale of **【marijuana】**
34 cannabis for conduct that is authorized under **【this act】** P.L.2009,
35 c.307 (C.24:6I-1 et al.), P.L.2015, c.158 (C.18A:40-12.22 et al.), or
36 P.L. , c. (C.) (pending before the Legislature as this bill).

37 d. (1) The **【commissioner】** executive director shall require each
38 applicant seeking a permit to operate as **【an alternative treatment**
39 **center】** ¹, to be a director, officer, or employee of, or to be an investor
40 in,¹ a medical cannabis cultivator, medical cannabis manufacturer,
41 medical cannabis dispensary, or clinical registrant to undergo a
42 criminal history record background check, except that no criminal
43 history record background check shall be required for an ¹**【applicant】**
44 individual¹ who holds less than a five percent investment interest in
45 the medical cannabis cultivator, medical cannabis manufacturer,
46 medical cannabis dispensary, or clinical registrant or who is a member

1 of a group that holds less than a 20 percent investment interest in the
2 medical cannabis cultivator, medical cannabis manufacturer, medical
3 cannabis dispensary, or clinical registrant where no member of the
4 group holds more than a five percent interest in the total group
5 investment interest, and the ¹【applicant】 individual or group¹ lacks the
6 authority to make controlling decisions regarding medical cannabis
7 cultivator, medical cannabis manufacturer, medical cannabis
8 dispensary, or clinical registrant operations.

9 In the event that an individual who is exempt from the criminal
10 history record background check requirement of this section
11 subsequently acquires an investment interest of five percent or more in
12 the medical cannabis cultivator, medical cannabis manufacturer,
13 medical cannabis dispensary, or clinical registrant, or a group that is
14 exempt from the criminal history record background check
15 requirement of this section subsequently acquires an investment
16 interest of 20 percent or more in the medical cannabis cultivator,
17 medical cannabis manufacturer, medical cannabis dispensary, or
18 clinical registrant or any member of the group acquires more than a
19 five percent interest in the total group investment interest, or the
20 individual or group gains the authority to make controlling decisions
21 regarding medical cannabis cultivator, medical cannabis manufacturer,
22 medical cannabis dispensary, or clinical registrant operations, the
23 individual or the members of the group, as applicable, shall notify the
24 commission and shall complete a criminal history record background
25 check ¹and provide all information as may be required by the
26 commission¹ no later than 30 days after the date that such change
27 occurs, or any permit issued to the individual or group shall be
28 revoked and the individual or group shall be deemed ineligible to hold
29 any ownership or investment interest in a medical cannabis cultivator,
30 medical cannabis manufacturer, medical cannabis dispensary, or
31 clinical registrant for a period of two years, commencing from the date
32 of revocation.

33 For purposes of this section, the term "applicant" shall include any
34 owner, director, officer, or employee of 【an alternative treatment
35 center】 ¹, and any investor in, ¹ a medical cannabis cultivator, medical
36 cannabis manufacturer, medical cannabis dispensary, or clinical
37 registrant ¹, but shall not include any individual or group that is
38 exempt from the criminal history record background check
39 requirements of this section, which individuals and groups shall not be
40 required to complete any portion of an initial or renewal permit
41 application unless the individual or group subsequently becomes
42 subject to the criminal history record background check requirement as
43 provided in this section, in which case the individual or group shall be
44 required to provide all information as may be required by the
45 commission within 30 days of the change or any permit issued to the
46 individual or group shall be revoked and the individual or group shall
47 be deemed ineligible to hold any ownership or investment interest in a

1 medical cannabis cultivator, medical cannabis manufacturer, medical
2 cannabis dispensary, or clinical registrant for a period of two years,
3 commencing from the date of revocation¹. The **【commissioner】**
4 executive director is authorized to exchange fingerprint data with and
5 receive criminal history record background information from the
6 Division of State Police and the Federal Bureau of Investigation
7 consistent with the provisions of applicable federal and State laws,
8 rules, and regulations. The Division of State Police shall forward
9 criminal history record background information to the **【commissioner】**
10 executive director in a timely manner when requested pursuant to the
11 provisions of this section.

12 An applicant who is required to undergo a criminal history record
13 background check pursuant to this section shall submit to being
14 fingerprinted in accordance with applicable State and federal laws,
15 rules, and regulations. No check of criminal history record
16 background information shall be performed pursuant to this section
17 unless the applicant has furnished **【his】** the applicant's written consent
18 to that check. An applicant who is required to undergo a criminal
19 history record background check pursuant to this section who refuses
20 to consent to, or cooperate in, the securing of a check of criminal
21 history record background information shall not be considered for a
22 permit to operate, or authorization to be employed at ¹or to be an
23 investor in¹, 【an alternative treatment center】 a medical cannabis
24 cultivator, medical cannabis manufacturer, medical cannabis
25 dispensary, or clinical registrant. An applicant shall bear the cost for
26 the criminal history record background check, including all costs of
27 administering and processing the check.

28 (2) The **【commissioner】** executive director shall not approve an
29 applicant for a permit to operate, or authorization to be employed at
30 ¹or to be an investor in¹, 【an alternative treatment center】 a medical
31 cannabis cultivator, medical cannabis manufacturer, medical cannabis
32 dispensary, or clinical registrant if the criminal history record
33 background information of the applicant reveals a disqualifying
34 conviction as set forth in subsection c. of this section.

35 (3) Upon receipt of the criminal history record background
36 information from the Division of State Police and the Federal Bureau
37 of Investigation, the **【commissioner】** executive director shall provide
38 written notification to the applicant of **【his】** the applicant's
39 qualification for or disqualification for a permit to operate or be a
40 director, officer, or employee of **【an alternative treatment center】** ¹, or
41 an investor in,¹ a medical cannabis cultivator, medical cannabis
42 manufacturer, medical cannabis dispensary, or clinical registrant.

43 If the applicant is disqualified because of a disqualifying
44 conviction pursuant to the provisions of this section, the conviction
45 that constitutes the basis for the disqualification shall be identified in
46 the written notice.

1 (4) The Division of State Police shall promptly notify the
2 **【commissioner】** executive director in the event that an individual who
3 was the subject of a criminal history record background check
4 conducted pursuant to this section is convicted of a crime or offense in
5 this State after the date the background check was performed. Upon
6 receipt of that notification, the **【commissioner】** executive director
7 shall make a determination regarding the continued eligibility to
8 operate or be a director, officer, or employee of **【an alternative**
9 **treatment center】** ¹, or an investor in,¹ a medical cannabis cultivator,
10 medical cannabis manufacturer, medical cannabis dispensary, or
11 clinical registrant.

12 (5) Notwithstanding the provisions of subsection **【b.】** c. of this
13 section to the contrary, the **【commissioner】** executive director may
14 offer provisional authority for an applicant to be an owner, director,
15 officer, or employee of 【an alternative treatment center】 ¹, or an
16 investor in,¹ a medical cannabis cultivator, medical cannabis
17 manufacturer, medical cannabis dispensary, or clinical registrant for a
18 period not to exceed three months if the applicant submits to the
19 **【commissioner】** executive director a sworn statement attesting that the
20 person has not been convicted of any disqualifying conviction
21 pursuant to this section.

22 (6) Notwithstanding the provisions of subsection **【b.】** c. of this
23 section to the contrary, no applicant to be an owner, director, officer,
24 or employee of 【an alternative treatment center】 ¹, or an investor in,¹ a
25 medical cannabis cultivator, medical cannabis manufacturer, medical
26 cannabis dispensary, or clinical registrant shall be disqualified on the
27 basis of any conviction disclosed by a criminal history record
28 background check conducted pursuant to this section if the individual
29 has affirmatively demonstrated to the **【commissioner】** executive
30 director clear and convincing evidence of rehabilitation. In
31 determining whether clear and convincing evidence of rehabilitation
32 has been demonstrated, the following factors shall be considered:

33 (a) the nature and responsibility of the position which the
34 convicted individual would hold, has held, or currently holds;

35 (b) the nature and seriousness of the crime or offense;

36 (c) the circumstances under which the crime or offense occurred;

37 (d) the date of the crime or offense;

38 (e) the age of the individual when the crime or offense was
39 committed;

40 (f) whether the crime or offense was an isolated or repeated
41 incident;

42 (g) any social conditions which may have contributed to the
43 commission of the crime or offense; and

44 (h) any evidence of rehabilitation, including good conduct in
45 prison or in the community, counseling or psychiatric treatment
46 received, acquisition of additional academic or vocational schooling,
47 successful participation in correctional work-release programs, or the

1 recommendation of those who have had the individual under their
2 supervision.

3 e. The **department** commission shall issue a permit to **a person**
4 **to** operate **as an alternative treatment center** or be an owner,
5 director, officer, or employee of ¹, or an investor in,¹ a medical
6 cannabis cultivator, medical cannabis manufacturer, or medical
7 cannabis dispensary if the **department** commission finds that issuing
8 such a permit would be consistent with the purposes of **this act**
9 P.L.2009, c.307 (C.24:6I-1 et al.) and the requirements of this section
10 and section 11 of P.L. , c. (C.) (pending before the Legislature
11 as this bill) are met **and the department has verified the information**
12 **contained in the application. The department shall approve or deny an**
13 **application within 60 days after receipt of a completed application**.
14 The denial of an application shall be considered a final agency
15 decision, subject to review by the Appellate Division of the Superior
16 Court. **The department may suspend or revoke a permit to operate as**
17 **an alternative treatment center for cause, which shall be subject to**
18 **review by the Appellate Division of the Superior Court** An initial
19 permit to operate a medical cannabis cultivator, medical cannabis
20 manufacturer, or medical cannabis dispensary issued on or after the
21 effective date of P.L. , c. (C.) (pending before the Legislature
22 as this bill) shall be valid for three years. Medical cannabis cultivator,
23 medical cannabis manufacturer, and medical cannabis dispensary
24 permits shall be renewable biennially.

25 f. A person who has been issued a permit pursuant to this
26 section , a conditional permit pursuant to section 11 of P.L. ,
27 c. (C.) (pending before the Legislature as this bill), or a clinical
28 registrant permit pursuant to section 13 of P.L. , c. (C.)
29 (pending before the Legislature as this bill) shall display the permit or
30 conditional permit at the front entrance to the premises of the
31 **alternative treatment center** permitted facility at all times when the
32 facility is engaged in conduct authorized pursuant to P.L.2009, c.307
33 (C.24:6I-1 et al.) involving medical cannabis, including, but not
34 limited to, the cultivating, manufacturing, or dispensing of medical
35 cannabis **marijuana is being produced, or dispensed to a registered**
36 **qualifying patient or the patient's primary caregiver**.

37 g. **An alternative treatment center** A medical cannabis
38 cultivator, medical cannabis manufacturer, medical cannabis
39 dispensary, or clinical registrant shall report any change in information
40 to the **department** commission not later than 10 days after such
41 change, or the permit shall be deemed null and void.

42 h. **An alternative treatment center may charge a registered**
43 **qualifying patient or primary caregiver for the reasonable costs**
44 **associated with the production and distribution of marijuana for the**
45 **cardholder** (1) Each medical cannabis cultivator shall maintain and
46 make available through its Internet website, if any, a standard price list

1 that shall apply to all medical cannabis sold by the medical cannabis
2 cultivator to other medical cannabis cultivators and to medical
3 cannabis manufacturers, medical cannabis dispensaries, and clinical
4 registrants, which prices shall be reasonable and consistent with the
5 actual costs incurred by the medical cannabis cultivator in connection
6 with cultivating the medical cannabis. The prices charged by the
7 medical cannabis cultivator shall not deviate from the prices indicated
8 on the facility's current price list.

9 (2) Each medical cannabis manufacturer shall maintain and make
10 available through its Internet website, if any, a standard price list that
11 shall apply to all medical cannabis products sold by the medical
12 cannabis manufacturer to other medical cannabis manufacturers and to
13 medical cannabis dispensaries and clinical registrants, which prices
14 shall be reasonable and consistent with the actual costs incurred by the
15 medical cannabis manufacturer in connection with producing the
16 medical cannabis product. The prices charged by the medical cannabis
17 manufacturer shall not deviate from the prices indicated on the
18 facility's current price list.

19 (3) Each clinical registrant shall maintain and make available
20 through its Internet website, if any, a standard price list that shall apply
21 to all medical cannabis sold by the clinical registrant to other clinical
22 registrants and to medical cannabis cultivators, medical cannabis
23 manufacturers, and medical cannabis dispensaries and to all medical
24 cannabis products sold by the clinical registrant to other clinical
25 registrants and to medical cannabis manufacturers and medical
26 cannabis dispensaries, which prices shall be reasonable and consistent
27 with the actual costs incurred by the clinical registrant in connection
28 with cultivating the medical cannabis or producing the medical
29 cannabis product. The prices charged by the clinical registrant shall
30 not deviate from the prices indicated on the clinical registrant's current
31 price list. Any prices a clinical registrant charges to a qualifying
32 patient, designated caregiver, or institutional caregiver for medical
33 cannabis, medical cannabis products, and related supplies and
34 paraphernalia shall be reasonable and consistent with the actual costs
35 incurred by the ⁴【medical cannabis dispensary】 clinical registrant⁴ in
36 connection with cultivating, producing, acquiring, or dispensing the
37 medical cannabis or medical cannabis product and related supplies and
38 paraphernalia. A clinical registrant may establish a written policy for
39 making medical cannabis available at a reduced price or without
40 charge to qualifying patients who have a demonstrated financial
41 hardship, as that term shall be defined by the commission by
42 regulation.

43 (4) Any prices a medical cannabis dispensary charges to another
44 medical cannabis dispensary or to a clinical registrant, qualifying
45 patient, designated caregiver, or institutional caregiver for medical
46 cannabis, medical cannabis products, and related supplies and
47 paraphernalia shall be reasonable and consistent with the actual costs
48 incurred by the medical cannabis dispensary in connection with

1 acquiring and selling, transferring, or dispensing the medical cannabis
2 or medical cannabis product and related supplies and paraphernalia. A
3 medical cannabis dispensary may establish a written policy for making
4 medical cannabis available at a reduced price or without charge to
5 qualifying patients who have a demonstrated financial hardship, as that
6 term shall be defined by the commission by regulation.

7 (5) A price list required under paragraphs (1), (2), or (3) of this
8 subsection may be revised no more than once per month, and each
9 medical cannabis cultivator, medical cannabis manufacturer, and
10 clinical registrant shall be responsible for ensuring that the
11 commission has a copy of the facility's current price list. A medical
12 cannabis cultivator, medical cannabis manufacturer, or clinical
13 registrant shall be liable to a civil penalty of \$1,000 for each sale that
14 occurs at a price that deviates from the entity's current price list, and to
15 a civil penalty of \$10,000 for each week during which the entity's
16 current price list is not on file with the commission. Any civil
17 penalties collected by the commission pursuant to this section shall be
18 used by the commission for the purposes of administering the State
19 medical cannabis program.

20 i. The **【commissioner】** executive director shall adopt regulations
21 to:

22 (1) require such written documentation of each delivery of
23 cannabis to, and pickup of cannabis for, a registered qualifying patient,
24 including the date and amount dispensed, to be maintained in the
25 records of the **【alternative treatment center】** medical cannabis
26 dispensary or clinical registrant, as the **【commissioner】** executive
27 director determines necessary to ensure effective documentation of the
28 operations of each **【alternative treatment center】** medical cannabis
29 dispensary or clinical registrant;

30 (2) monitor, oversee, and investigate all activities performed by
31 **【an alternative treatment center】** medical cannabis cultivators, medical
32 cannabis manufacturers, medical cannabis dispensaries, and clinical
33 registrants; **【and】**

34 (3) ensure adequate security of all facilities 24 hours per day **【,**
35 including production and retail locations,】 and security of all delivery
36 methods to registered qualifying patients; and

37 (4) establish thresholds for administrative action to be taken
38 against a medical cannabis cultivator, medical cannabis manufacturer,
39 medical cannabis dispensary, or clinical registrant and its employees,
40 officers, investors, directors, or governing board pursuant to
41 subsection m. of this section, including, but not limited to, specific
42 penalties or disciplinary actions that may be imposed in a summary
43 proceeding.

44 j. (1) Each medical cannabis cultivator, medical cannabis
45 manufacturer, medical cannabis dispensary, and clinical registrant
46 shall require the owners, directors, officers, and employees at the
47 permitted facility to complete at least eight hours of ongoing training

1 each calendar year. The training shall be tailored to the roles and
2 responsibilities of the individual's job function, and shall include
3 training on confidentiality and such other topics as shall be required by
4 the commission.

5 (2) Each medical cannabis dispensary and clinical registrant shall
6 consider whether to make interpreter services available to the
7 population served, including for individuals with a visual or hearing
8 impairment. The commission shall provide assistance to any medical
9 cannabis dispensary or clinical registrant that seeks to provide such
10 services in locating appropriate interpreter resources. A medical
11 cannabis dispensary or clinical registrant shall assume the cost of
12 providing interpreter services pursuant to this subsection.

13 k. ⁴[(1) A medical cannabis cultivator, medical cannabis
14 manufacturer, or medical cannabis dispensary that seeks to sell or
15 transfer its permit to another entity shall apply to the commission for
16 approval of the sale or transfer. The commission shall not approve the
17 sale or transfer of a permit until each applicant at the entity applying to
18 purchase or receive the transfer of the permit undergoes a criminal
19 history record background check pursuant to subsection d. of this
20 section and the commission finds that the sale or transfer of the permit
21 would be consistent with the purposes of P.L.2009, c.307 (C.24:6I-1 et
22 al.). The denial of an application to sell or transfer a medical cannabis
23 cultivator, medical cannabis manufacturer, or medical cannabis
24 dispensary permit shall be considered a final agency decision, subject
25 to review by the Appellate Division of the Superior Court.

26 (2) If a nonprofit medical cannabis cultivator, medical cannabis
27 manufacturer, or medical cannabis dispensary proposes to sell or
28 transfer its permit ¹and other assets¹ to a for-profit entity, its board of
29 directors may proceed with the sale or transfer upon receiving
30 approval for the sale or transfer from the commission pursuant to
31 paragraph (1) of this subsection. In the case of a nonprofit alternative
32 treatment center that was issued a permit prior to the effective date of
33 P.L. , c. (C.) (pending before the Legislature as this bill) or that
34 was issued a permit after the effective date of P.L. , c. (C.)
35 (pending before the Legislature as this bill) pursuant to an application
36 submitted prior to the effective date of P.L. , c. (C.) (pending
37 before the Legislature as this bill), any such transfer¹ The first six
38 alternative treatment centers issued permits following the effective
39 date of P.L.2009, c.307 (C.24:6I-1 et al.) shall be authorized to sell or
40 transfer such permit and other assets to a for-profit entity, provided
41 that: the sale or transfer is approved by the commission; each owner,
42 director, officer, and employee of, and investor in, the entity seeking to
43 purchase or receive the transfer of the permit, undergoes a criminal
44 history record background check pursuant to subsection d. of this
45 section, provided that nothing in this subsection shall be construed to
46 require any individual to undergo a criminal history record background
47 check if the individual would otherwise be exempt from undergoing a
48 criminal history record background check pursuant to subsection d. of

1 this section; the commission finds that the sale or transfer of the permit
2 would be consistent with the purposes of P.L.2009, c.307 (C.24:6I-1 et
3 al.); and no such sale or transfer shall be authorized more than one
4 year after the effective date of P.L. , c. (C.) (pending before
5 the Legislature as this bill). The sale or transfer of a permit pursuant
6 to this subsection⁴ shall not be subject to the requirements of the “New
7 Jersey Nonprofit Corporation Act,” N.J.S.15A:1-1 et seq., provided
8 that, prior to or at the time of the sale or transfer, all debts and
9 obligations of the nonprofit entity are either paid in full or assumed by
10 the for-profit entity purchasing or acquiring the permit, or a reserve
11 fund is established for the purpose of paying in full the debts and
12 obligations of the nonprofit entity¹, and the for-profit entity pays the
13 full value of all assets held by the nonprofit entity, as reflected on the
14 nonprofit entity’s balance sheet, in addition to the agreed-upon⁴ [and
15 commission-approved]⁴ price for the sale or transfer of the entity’s
16 alternative treatment center permit¹ .⁴ Until such time as the members
17 of the Cannabis Regulatory Commission are appointed and the
18 commission first organizes, the Department of Health shall have full
19 authority to approve a sale or transfer pursuant to this subsection. No
20 other entity holding a permit issued pursuant to this section or pursuant
21 to section 13 of P.L. , c. (C.) (pending before the Legislature
22 as this bill) shall be authorized to sell or transfer such permit to any
23 other entity at any time.⁴

24 1. No employee of any department, division, agency, board, or
25 other State, county, or local government entity involved in the process
26 of reviewing, processing, or making determinations with regard to
27 medical cannabis cultivator, medical cannabis manufacturer, medical
28 cannabis dispensary, or clinical registrant permit applications shall
29 have any direct or indirect financial interest in the cultivating,
30 manufacturing, or dispensing of medical cannabis or related
31 paraphernalia, or otherwise receive anything of value from an
32 applicant for a medical cannabis cultivator, medical cannabis
33 manufacturer, medical cannabis dispensary, or clinical registrant
34 permit in exchange for reviewing, processing, or making any
35 recommendations with respect to a permit application.

36 m. In the event that a medical cannabis cultivator, medical
37 cannabis manufacturer, medical cannabis dispensary, or clinical
38 registrant fails to comply with any requirements set forth in P.L.2009,
39 c.307 (C.24:6I-1 et al.), P.L. , c. (C.) (pending before the
40 Legislature as this bill), or any related law or regulation, the
41 commission may invoke penalties or take administrative action against
42 the medical cannabis cultivator, medical cannabis manufacturer,
43 medical cannabis dispensary, or clinical registrant and its employees,
44 officers, investors, directors, or governing board, including, but not
45 limited to, assessing fines, referring matters to another State agency,
46 and suspending or terminating any permit held by the medical
47 cannabis cultivator, medical cannabis manufacturer, medical cannabis

1 dispensary, or clinical registrant. Any penalties imposed or
2 administrative actions taken by the commission pursuant to this
3 subsection may be imposed in a summary proceeding.

4 (cf: P.L.2013, c.160, s.2)

5
6 11. (New section) The commission shall, no later than 90 days
7 after the effective date of P.L. , c. (C.) (pending before the
8 Legislature as this bill) or upon adoption of rules and regulations as
9 provided in subsection c. of section 18 of P.L.2009, c.307 (C.24:6I-
10 16), whichever occurs first, begin accepting and processing
11 applications for new medical cannabis cultivator, medical cannabis
12 manufacturer, and medical cannabis dispensary permits.
13 Notwithstanding the provisions of subparagraph (a) of paragraph (2)
14 of subsection a. of section 7 of P.L.2009, c.307 (C.24:6I-7), the first
15 six alternative treatment center permits issued by the commission
16 pursuant to an application submitted on or after the effective date of
17 P.L. , c. (C.) (pending before the Legislature as this bill)
18 shall be deemed to concurrently hold a medical cannabis cultivator
19 permit, a medical cannabis manufacturer permit, and a medical
20 cannabis dispensary permit. Any permits issued by the commission
21 thereafter shall be subject to the provisions of subparagraph (a) of
22 paragraph (2) of subsection a. of section 7 of P.L.2009, c.307
23 (C.24:6I-7). The commission may establish nonrefundable
24 application fees for permit applications and permit fees for
25 successful applicants.

26 The commission shall make a determination as to any permit
27 application no later than 90 days after receiving the application,
28 which may include a determination that the commission reasonably
29 requires more time to adequately review the application. The
30 commission may issue a conditional permit to an applicant pending
31 the commission's final determination on the applicant's permit
32 application, provided the applicant submits a sworn statement
33 attesting that no person named in the permit application has been
34 convicted of any disqualifying conviction pursuant to subsection c.
35 of section 7 of P.L.2009, c.307 (C.24:6I-7) or that, if a person
36 named in the application has been convicted of a disqualifying
37 conviction, the person has or will submit evidence of rehabilitation.
38 The commission shall determine by regulation which permit
39 requirements are necessary for the issuance of a conditional permit
40 pursuant to this section and the scope of conduct authorized under a
41 conditional permit, and shall establish the terms, conditions, and
42 restrictions for such conditional permit as may be necessary and
43 appropriate.

44 The commission shall issue a permit to an approved applicant at
45 such time as the commission completes the application review
46 process and any mandatory inspections, and determines that the
47 applicant is in compliance with and is implementing the plans,
48 procedures, protocols, actions, or other measures set forth in the

1 applicant's permit application submitted pursuant to section 12 of
2 P.L. , c. (C.) (pending before the Legislature as this bill),
3 did maintain compliance with the terms, conditions, or restrictions
4 of a conditional permit issued to the applicant, if applicable, and is
5 otherwise in compliance with the requirements of P.L.2009, c.307
6 (C.24:6I-1 et al.) and P.L. , c. (C.) (pending before the
7 Legislature as this bill).

8

9 12. (New section) a. Each application for an initial three-year
10 medical cannabis cultivator permit, medical cannabis manufacturer
11 permit, and medical cannabis dispensary permit, and each
12 application for biennial renewal of such permit, shall be submitted
13 to the commission. A full, separate application shall be required for
14 each initial permit requested by the applicant and for each location
15 at which an applicant seeks to operate, regardless of whether the
16 applicant was previously issued, or currently holds, a medical
17 cannabis cultivator, medical cannabis manufacturer, medical
18 cannabis dispensary, or clinical registrant permit. Renewal
19 applications shall be submitted to the commission on a form and in
20 a manner as shall be specified by the commission no later than 90
21 days before the date the current permit will expire.

22 b. An initial permit application shall be evaluated according to
23 criteria to be developed by the commission. The commission shall
24 determine the point values to be assigned to each criterion, which
25 shall include bonus points for applicants who are residents of New
26 Jersey.

27 c. The criteria to be developed by the commission pursuant to
28 subsection b. of this section shall include, in addition to the criteria
29 set forth in subsections d. and e. of this section and any other
30 criteria developed by the commission, an analysis of the applicant's
31 operating plan, excluding safety and security criteria, which shall
32 include the following:

33 (1) In the case of an applicant for a medical cannabis cultivator
34 permit, the operating plan summary shall include a written
35 description concerning the applicant's qualifications for, experience
36 in, and knowledge of each of the following topics:

- 37 (a) State-authorized cultivation of medical cannabis;
- 38 (b) conventional horticulture or agriculture, familiarity with
39 good agricultural practices, and any relevant certifications or
40 degrees;
- 41 (c) quality control and quality assurance;
- 42 (d) recall plans;
- 43 (e) packaging and labeling;
- 44 (f) inventory control and tracking software or systems for the
45 production of medical cannabis;
- 46 (g) analytical chemistry and testing of medical cannabis;
- 47 (h) water management practices;
- 48 (i) odor mitigation practices;

- 1 (j) onsite and offsite recordkeeping;
- 2 (k) strain variety and plant genetics;
- 3 (l) pest control and disease management practices, including
- 4 plans for the use of pesticides, nutrients, and additives;
- 5 (m) waste disposal plans; and
- 6 (n) compliance with applicable laws and regulations.
- 7 (2) In the case of an applicant for a medical cannabis
- 8 manufacturer permit, the operating plan summary shall include a
- 9 written description concerning the applicant's qualifications for,
- 10 experience in, and knowledge of each of the following topics:
- 11 (a) State-authorized manufacture, production, and creation of
- 12 cannabis products using appropriate extraction methods, including
- 13 intended use and sourcing of extraction equipment and associated
- 14 solvents or intended methods and equipment for non-solvent
- 15 extraction;
- 16 (b) pharmaceutical manufacturing, good manufacturing
- 17 practices, and good laboratory practices;
- 18 (c) quality control and quality assurance;
- 19 (d) recall plans;
- 20 (e) packaging and labeling;
- 21 (f) inventory control and tracking software or systems for the
- 22 production of medical cannabis;
- 23 (g) analytical chemistry and testing of medical cannabis and
- 24 medical cannabis products and formulations;
- 25 (h) water management practices;
- 26 (i) odor mitigation practices;
- 27 (j) onsite and offsite recordkeeping;
- 28 (k) a list of product formulations or products proposed to be
- 29 manufactured with estimated cannabinoid profiles, if known,
- 30 including varieties with high cannabidiol content;
- 31 (l) intended use and sourcing of all non-cannabis ingredients
- 32 used in the manufacture, production, and creation of cannabis
- 33 products, including methods to verify or ensure the safety and
- 34 integrity of those ingredients and their potential to be or contain
- 35 allergens;
- 36 (m) waste disposal plans; and
- 37 (n) compliance with applicable laws and regulations.
- 38 (3) In the case of an applicant for a medical cannabis dispensary
- 39 permit, the operating plan summary shall include a written
- 40 description concerning the applicant's qualifications for, experience
- 41 in, and knowledge of each of the following topics:
- 42 (a) State-authorized dispensation of medical cannabis to
- 43 qualifying patients;
- 44 (b) healthcare, medicine, and treatment of patients with
- 45 qualifying medical conditions;
- 46 (c) medical cannabis product evaluation procedures;
- 47 (d) recall plans;
- 48 (e) packaging and labeling;

- 1 (f) inventory control and point-of-sale software or systems for
- 2 the sale of medical cannabis;
- 3 (g) patient counseling procedures;
- 4 (h) the routes of administration, strains, varieties, and
- 5 cannabinoid profiles of medical cannabis and medical cannabis
- 6 products;
- 7 (i) odor mitigation practices;
- 8 (j) onsite and offsite recordkeeping;
- 9 (k) compliance with State and federal patient privacy rules;
- 10 (l) waste disposal plans; and
- 11 (m) compliance with applicable laws and regulations.
- 12 d. The criteria to be developed by the commission pursuant to
- 13 subsection b. of this section shall include, in addition to the criteria
- 14 set forth in subsections c. and e. of this section and any other
- 15 criteria developed by the commission, an analysis of the following
- 16 factors, if applicable:
 - 17 (1) The applicant's environmental impact plan.
 - 18 (2) A summary of the applicant's safety and security plans and
 - 19 procedures, which shall include descriptions of the following:
 - 20 (a) plans for the use of security personnel, including
 - 21 contractors;
 - 22 (b) the experience or qualifications of security personnel and
 - 23 proposed contractors;
 - 24 (c) security and surveillance features, including descriptions of
 - 25 any alarm systems, video surveillance systems, and access and
 - 26 visitor management systems, along with drawings identifying the
 - 27 proposed locations for surveillance cameras and other security
 - 28 features;
 - 29 (d) plans for the storage of medical cannabis and medical
 - 30 cannabis products, including any safes, vaults, and climate control
 - 31 systems that will be utilized for this purpose;
 - 32 (e) a diversion prevention plan;
 - 33 (f) an emergency management plan;
 - 34 (g) procedures for screening, monitoring, and performing
 - 35 criminal history record background checks of employees;
 - 36 (h) cybersecurity procedures, including, in the case of an
 - 37 applicant for a medical cannabis dispensary permit, procedures for
 - 38 collecting, processing, and storing patient data, and the applicant's
 - 39 familiarity with State and federal privacy laws;
 - 40 (i) workplace safety plans and the applicant's familiarity with
 - 41 federal Occupational Safety and Health Administration regulations;
 - 42 (j) the applicant's history of workers' compensation claims and
 - 43 safety assessments;
 - 44 (k) procedures for reporting adverse events; and
 - 45 (l) a sanitation practices plan.
 - 46 (3) A summary of the applicant's business experience, including
 - 47 the following, if applicable:

- 1 (a) the applicant's experience operating businesses in highly-
2 regulated industries;
- 3 (b) the applicant's experience in operating alternative treatment
4 centers and related medical cannabis production and dispensation
5 entities under the laws of New Jersey or any other state or
6 jurisdiction within the United States; and
- 7 (c) the applicant's plan to comply with and mitigate the effects
8 of 26 U.S.C. s.280E on cannabis businesses, and for evidence that
9 the applicant is not in arrears with respect to any tax obligation to
10 the State.

11 In evaluating the experience described under subparagraphs (a),
12 (b), and (c) of this paragraph, the commission shall afford the
13 greatest weight to the experience of the applicant itself, controlling
14 owners, and entities with common ownership or control with the
15 applicant; followed by the experience of those with a 15 percent or
16 greater ownership interest in the applicant's organization; followed
17 by interest holders in the applicant's organization; followed by
18 other officers, directors, and bona fide full-time employees of the
19 applicant as of the submission date of the application.

20 (4) A description of the proposed location for the applicant's
21 site, including the following, if applicable:

22 (a) the proposed location, the surrounding area, and the
23 suitability or advantages of the proposed location, along with a
24 floor plan and optional renderings or architectural or engineering
25 plans;

26 (b) the submission of zoning approvals for the proposed
27 location, which shall consist of a letter or affidavit from appropriate
28 municipal officials that the location will conform to municipal
29 zoning requirements allowing for such activities related to the
30 cultivation, manufacturing, or dispensing of medical cannabis,
31 cannabis products, and related supplies as will be conducted at the
32 proposed facility; and

33 (c) the submission of proof of local support for the suitability of
34 the location, which may be demonstrated by a resolution adopted by
35 the municipality's governing body indicating that the intended
36 location is appropriately located or otherwise suitable for such
37 activities related to the cultivation, manufacturing, or dispensing of
38 medical cannabis, cannabis products, and related supplies as will be
39 conducted at the proposed facility.

40 Notwithstanding any other provision of this subsection, an
41 application shall be disqualified from consideration unless it
42 includes documentation demonstrating that the applicant will have
43 final control of the premises upon approval of the application,
44 including, but not limited to, a lease agreement, contract for sale,
45 title, deed, or similar documentation. In addition, if the applicant
46 will lease the premises, the application will be disqualified from
47 consideration unless it includes certification from the landlord that
48 the landlord is aware that the tenant's use of the premises will

1 involve activities related to the cultivation, manufacturing, or
2 dispensing of medical cannabis and medical cannabis products. An
3 application shall not be disqualified from consideration if the
4 application does not include the materials described in
5 subparagraphs (b) or (c) of this paragraph.

6 (5) A community impact, social responsibility, and research
7 statement, which may include, but shall not be limited to, the
8 following:

9 (a) a community impact plan summarizing how the applicant
10 intends to have a positive impact on the community in which the
11 proposed entity is to be located, which shall include an economic
12 impact plan, a description of outreach activities, and any financial
13 assistance or discount plans the applicant will provide to qualifying
14 patients and designated caregivers;

15 (b) a written description of the applicant's record of social
16 responsibility, philanthropy, and ties to the proposed host
17 community;

18 (c) a written description of any research the applicant has
19 conducted on the medical efficacy or adverse effects of cannabis
20 use and the applicant's participation in or support of cannabis-
21 related research and educational activities; and

22 (d) a written plan describing any research and development
23 regarding the medical efficacy or adverse effects of cannabis, and
24 any cannabis-related educational and outreach activities, which the
25 applicant intends to conduct if issued a permit by the commission.

26 In evaluating the information submitted pursuant to
27 subparagraphs (b) and (c) of this paragraph, the commission shall
28 afford the greatest weight to the experience of the applicant itself,
29 controlling owners, and entities with common ownership or control
30 with the applicant; followed by the experience of those with a 15
31 percent or greater ownership interest in the applicant's organization;
32 followed by interest holders in the applicant's organization;
33 followed by other officers, directors, and bona fide full-time
34 employees of the applicant as of the submission date of the
35 application.

36 (6) A workforce development and job creation plan, which may
37 include, but shall not be limited to a description of the applicant's
38 workforce development and job creation plan, which may include
39 information on the applicant's history of job creation and planned
40 job creation at the proposed facility; education, training, and
41 resources to be made available for employees; any relevant
42 certifications; and an optional diversity plan.

43 (7) A business and financial plan, which may include, but shall
44 not be limited to, the following:

45 (a) an executive summary of the applicant's business plan;

46 (b) a demonstration of the applicant's financial ability to
47 implement its business plan, which may include, but shall not be
48 limited to, bank statements, business and individual financial

1 statements, net worth statements, and debt and equity financing
2 statements; and

3 (c) a description of the applicant’s experience complying with
4 guidance pertaining to cannabis issued by the Financial Crimes
5 Enforcement Network under 31 U.S.C. s.5311 et seq., the federal
6 “Bank Secrecy Act”, which may be demonstrated by submitting
7 letters regarding the applicant’s banking history from banks or
8 credit unions that certify they are aware of the business activities of
9 the applicant, or entities with common ownership or control of the
10 applicant’s organization, in any state where the applicant has
11 operated a business related to medical cannabis. For the purposes
12 of this subparagraph, the commission shall consider only bank
13 references involving accounts in the name of the applicant or of an
14 entity with common ownership or control of the applicant’s
15 organization. An applicant who does not submit the information
16 described in this subparagraph shall not be disqualified from
17 consideration.

18 (8) Whether any of the applicant’s majority or controlling
19 owners were previously approved by the commission to serve as an
20 officer, director, principal, or key employee of an alternative
21 treatment center, provided any such individual served in that
22 capacity at the alternative treatment center for six or more months;

23 (9) Whether the applicant can demonstrate that its governance
24 structure includes the involvement of a school of medicine or
25 osteopathic medicine licensed and accredited in the United States,
26 or a general acute care hospital, ambulatory care facility, adult day
27 care services program, or pharmacy licensed in New Jersey,
28 provided that:

29 (a) the school, hospital, facility, or pharmacy has conducted or
30 participated in research approved by an institutional review board
31 related to cannabis involving the use of human subjects, except in
32 the case of an accredited school of medicine or osteopathic
33 medicine that is located and licensed in New Jersey;

34 (b) the school, hospital, facility, or pharmacy holds a profit
35 share or ownership interest in the applicant’s organization of 10
36 percent or more, except in the case of an accredited school of
37 medicine or osteopathic medicine that is located and licensed in
38 New Jersey; and

39 (c) the school, hospital, facility, or pharmacy participates in
40 major decision-making activities within the applicant’s
41 organization, which may be demonstrated by representation on the
42 board of directors of the applicant’s organization.

43 (10) The proposed composition of the applicant’s medical
44 advisory board established pursuant to section 15 of P.L. ,
45 c. (C.) (pending before the Legislature as this bill), if any.

46 (11) Any other information the commission deems relevant in
47 determining whether to grant a permit to the applicant.

1 e. In addition to the information to be submitted pursuant to
2 subsections c. and d. of this section, the commission shall require
3 all permit applicants, other than applicants issued a conditional
4 license, to submit an attestation signed by a bona fide labor
5 organization stating that the applicant has entered into a labor peace
6 agreement with such bona fide labor organization. The
7 maintenance of a labor peace agreement with a bona fide labor
8 organization shall be an ongoing material condition of maintaining
9 a medical cannabis cultivator, medical cannabis manufacturer, or
10 medical cannabis dispensary permit. The submission of an
11 attestation and maintenance of a labor peace agreement with a bona
12 fide labor organization by an applicant issued a conditional permit
13 pursuant to section 11 of P.L. , c. (C.) (pending before the
14 Legislature as this bill) shall be a requirement for final approval for
15 a permit; failure to enter into a collective bargaining agreement
16 within 200 days of the opening of a medical cannabis cultivator,
17 medical cannabis manufacturer, or medical cannabis dispensary
18 shall result in the suspension or revocation of such permit or
19 conditional permit. In reviewing initial permit applications, the
20 commission shall give priority to the following:

21 (1) Applicants that are party to a collective bargaining
22 agreement with a labor organization that currently represents, or is
23 actively seeking to represent cannabis workers in New Jersey.

24 (2) Applicants that are party to a collective bargaining
25 agreement with a labor organization that currently represents
26 cannabis workers in another state.

27 (3) Applicants that include a significantly involved person or
28 persons lawfully residing in New Jersey for at least two years as of
29 the date of the application.

30 (4) Applicants that submit an attestation affirming that they will
31 use best efforts to utilize union labor in the construction or retrofit
32 of the facilities associated with the permitted entity.

33 f. In reviewing an initial permit application, unless the
34 information is otherwise solicited by the commission in a specific
35 application question, the commission's evaluation of the application
36 shall be limited to the experience and qualifications of the
37 applicant's organization, including any entities with common
38 ownership or control of the applicant's organization, controlling
39 owners or interest holders in the applicant's organization, and the
40 officers, directors, and current full-time existing employees of the
41 applicant's organization. Responses pertaining to consultants,
42 independent contractors, applicants who are exempt from the
43 criminal history record background check requirements of section 7
44 of P.L.2009, c.307 (C.24:6I-7), and prospective or part-time
45 employees of the entity shall not be considered. Each applicant
46 shall certify as to the status of the individuals and entities included
47 in the application.

1 g. The commission shall develop policies and procedures to
2 promote and encourage full participation in the medical cannabis
3 industry by individuals from communities that have historically
4 experienced disproportionate harm under the State's cannabis
5 prohibition and enforcement laws, and to have a positive effect on
6 those communities. The commission shall conduct a disparity study
7 to determine whether race-based measures should be considered
8 when issuing permits pursuant to this section, and shall require that
9 at least ~~1[25]~~ 30¹ percent of the total number of new medical
10 cannabis cultivator permits, medical cannabis manufacturer permits,
11 and medical cannabis dispensary permits issued on or after the
12 effective date of P.L. , c. (C.) (pending before the
13 Legislature as this bill) are issued ~~1[to a qualified applicant that]~~ as
14 follows¹:

15 (1) 1[at least 15 percent of the total number of new medical
16 cannabis cultivator permits, medical cannabis manufacturer
17 permits, and medical cannabis dispensary permits issued on or after
18 the effective date of P.L. , c. (C.) (pending before the
19 Legislature as this bill) shall be issued to a qualified applicant that¹
20 has been certified as a minority business ~~1[or as a women's~~
21 ~~business]~~¹ pursuant to P.L.1986, c.195 (C.52:27H-21.18 et seq.);
22 and¹

23 (2) ~~1[has been certified as a veteran-owned business pursuant to~~
24 ~~P.L.2011, c.147 (C.52:32-49 et seq.);~~

25 (3) ~~]~~ at least 15 percent of the total number of new medical
26 cannabis cultivator permits, medical cannabis manufacturer
27 permits, and medical cannabis dispensary permits issued on or after
28 the effective date of P.L. , c. (C.) (pending before the
29 Legislature as this bill) shall be issued to a qualified applicant that
30 has been certified as a women's business pursuant to P.L.1986,
31 c.195 (C.52:27H-21.18 et seq.) or that¹ is a disabled-veterans'
32 business, as defined in section 2 of P.L.2015, c.116 (C.52:32-31.2)
33]; or

34 (4) has been certified by the United States Small Business
35 Administration or other issuing agency of the federal government as
36 a minority-owned business, women-owned business, or service-
37 disabled veteran-owned business]¹.

38 In selecting among applicants who meet these criteria, the
39 commission shall grant a higher preference to applicants with up to
40 two of the certifications described in this subsection.

41 h. The commission shall give special consideration to any
42 applicant that has entered into an agreement with an institution of
43 higher education to create an integrated curriculum involving the
44 cultivation, manufacturing, and dispensing of medical cannabis,
45 provided that the curriculum is approved by both the commission
46 and the Department of Education and the applicant agrees to
47 maintain the integrated curriculum in perpetuity. An integrated

1 curriculum permit shall be subject to revocation if the IC permit
2 holder fails to maintain or continue the integrated curriculum. In
3 the event that, because of circumstances outside an IC permit
4 holder's control, the IC permit holder will no longer be able to
5 continue an integrated curriculum, the IC permit holder shall notify
6 the commission and shall make reasonable efforts to establish a new
7 integrated curriculum with an institution of higher education,
8 subject to approval by the commission and the Department of
9 Education. If the IC permit holder is unable to establish a new
10 integrated curriculum within six months after the date the current
11 integrated curriculum arrangement ends, the commission shall
12 revoke the entity's IC permit, unless the commission finds there are
13 extraordinary circumstances that justify allowing the permit holder
14 to retain the permit without an integrated curriculum and the
15 commission finds that allowing the permit holder to retain the
16 permit would be consistent with the purposes of P.L.2009, c.307
17 (C.24:6I-1 et al.), in which case the IC permit shall convert to a
18 regular permit of the same type. The commission may revise the
19 application and permit fees or other conditions for an IC permit as
20 may be necessary to encourage applications for IC permits.

21 i. Application materials submitted to the commission pursuant
22 to this section shall not be considered a public record pursuant to
23 P.L.1963, c.73 ¹【, P.L.2001, c.404】¹ (C.47:1A-1 et ¹【al.】, or the
24 common law concerning access to public records】 seq.) or
25 P.L.2001, c.404 (C.47:1A-5 et al.)¹.

26 j. If the commission notifies an applicant that it has performed
27 sufficiently well on multiple applications to be awarded more than
28 one medical cannabis cultivator permit, more than one medical
29 cannabis manufacturer permit, or more than one medical cannabis
30 dispensary permit by the commission, the applicant shall notify the
31 commission, within seven business days after receiving such notice,
32 as to which permit it will accept. For any permit award declined by
33 an applicant pursuant to this subsection, the commission shall, upon
34 receiving notice from the applicant of the declination, award the
35 permit to the applicant for that permit type who, in the
36 determination of the commission, best satisfies the commission's
37 criteria while meeting the commission's determination of Statewide
38 need. If an applicant fails to notify the commission as to which
39 permit it will accept, the commission shall have the discretion to
40 determine which permit it will award to the applicant, based on the
41 commission's determination of Statewide need and other
42 applications submitted for facilities to be located in the affected
43 regions.

44
45 13. (New section) a. The commission shall issue clinical registrant
46 permits to qualified applicants that meet the requirements of this
47 section. In addition to any other requirements as the commission

1 establishes by regulation regarding application for and issuance of a
2 clinical registrant permit, each clinical registrant applicant shall:

3 (1) complete a criminal history record background check that
4 meets the requirements of subsection d. of section 7 of P.L.2009, c.307
5 (C.24:6I-7);

6 (2) submit to the commission any required application and permit
7 fees;

8 (3) submit to the commission written documentation of an existing
9 contract with an academic medical center that meets the requirements
10 of subsection c. of this section; and

11 (4) submit to the commission documentation that the applicant has
12 a minimum of \$15 million in capital.

13 b. The commission shall, no later than 90 days after the effective
14 date of P.L. , c. (C.) (pending before the Legislature as this
15 bill) or upon adoption of rules and regulations as provided in
16 subsection c. of section 18 of P.L.2009, c.307 (C.24:6I-16), whichever
17 occurs first, begin accepting and processing applications for four
18 clinical registrant permits. Thereafter, the commission shall accept
19 applications for and issue such additional clinical registrant permits as
20 it determines to be necessary and consistent with the provisions of
21 P.L.2009, c.307 (C.24:6I-1 et al.) and P.L. , c. (C.) (pending
22 before the Legislature as this bill). The commission shall make a
23 determination as to a clinical registrant permit application no later than
24 90 days after receiving the application, which may include a
25 determination that the commission reasonably requires more time to
26 adequately review the application.

27 c. A contract between a clinical registrant and an academic
28 medical center shall include a commitment by the academic medical
29 center, or its affiliate, to engage in clinical research related to the use
30 of medical cannabis in order to advise the clinical registrant
31 concerning patient health and safety, medical applications, and
32 dispensing and management of controlled substances, among other
33 areas. A clinical registrant issued a permit pursuant to this section
34 shall have a written contractual relationship with no more than one
35 academic medical center.

36 d. A clinical registrant issued a permit pursuant to this section
37 shall be authorized to engage in all conduct involving the cultivation,
38 processing, and dispensing of medical cannabis as is authorized for an
39 entity holding medical cannabis cultivator, medical cannabis
40 manufacturer, and medical cannabis dispensary permits pursuant to
41 P.L.2009, c.307 (C.24:6I-1 et al.) and P.L. , c. (C.) (pending
42 before the Legislature as this bill), including dispensing medical
43 cannabis and medical cannabis products to qualifying patients and
44 designated and institutional caregivers. The clinical registrant shall
45 additionally be authorized to engage in clinical research involving
46 medical cannabis using qualifying patients who consent to being part
47 of such research, subject to any restrictions established by the
48 commission.

1 e. A clinical registrant issued a permit pursuant to this section
2 may apply to the commission for a ¹Class 3 Cannabis Wholesaler
3 license or for a¹ Class 1 Cannabis Grower license, a Class 2 Cannabis
4 Processor ¹License, a Class 3 Cannabis Wholesaler¹ license, and a
5 Class 4 Cannabis ¹Retailer¹ license, and shall be authorized
6 to ¹concurrently hold one of each license type and¹ engage in any
7 activities authorized pursuant to ¹the ¹any such¹ license ¹issued,
8 provided that:

9 (1) a clinical registrant may concurrently hold a Class 1 Cannabis
10 Grower license, a Class 2 Cannabis Processor license, and a Class 4
11 Cannabis Retailer license;

12 (2) a clinical registrant that is issued a Class 3 Cannabis
13 Wholesaler license shall not be authorized to concurrently hold a Class
14 1 Cannabis Grower license, a Class 2 Cannabis Processor license, or a
15 Class 4 Cannabis Retailer license; and

16 (3) a clinical registrant that has been issued a Class 1 Cannabis
17 Grower license, a Class 2 Cannabis Processor license, or a Class 4
18 Cannabis Retailer license shall not be authorized to concurrently hold
19 a Class 3 Cannabis Wholesaler license¹.

20 ¹The ¹A clinical registrant ¹issued an adult use cannabis license
21 pursuant to this subsection¹ shall be authorized to use the same
22 premises for all activities authorized under P.L.2009, c.307 (C.24:6I-1
23 et al.) and P.L. , c. (C.) (pending before the Legislature as
24 Senate Bill No. 2703) without being required to establish or maintain
25 any physical barriers or separations between operations related to the
26 medical use of cannabis and operations related to adult use cannabis,
27 provided that the clinical registrant shall be required to certify to the
28 commission that the clinical registrant has sufficient quantities of
29 medical cannabis and medical cannabis products available to meet the
30 reasonably anticipated treatment needs of registered qualifying
31 patients as a condition of ¹selling ¹engaging in activities related to
32 the growing, producing, wholesaling, or retail sale of¹ adult use
33 cannabis ¹at retail , as applicable¹.

34 f. (1) A clinical registrant issued a permit pursuant to this section
35 may conduct authorized activities related to medical cannabis and, if
36 applicable, adult use cannabis, at more than one physical location,
37 provided that each location is approved by the commission and is in
38 the same region in which the academic medical center with which the
39 clinical registrant has a contract is located.

40 (2) A clinical registrant may apply to the commission for approval
41 to relocate an approved facility to another location in the same region,
42 which application shall be approved unless the commission makes a
43 specific determination that the proposed relocation would be
44 inconsistent with the purposes of P.L.2009, c.307 (C.24:6I-1 et al.) and
45 P.L. , c. (C.) (pending before the Legislature as this bill). The
46 denial of an application for relocation submitted pursuant to this

1 paragraph shall be considered a final agency decision, subject to
2 review by the Appellate Division of the Superior Court.

3 (3) The commission may authorize a clinical registrant to dispense
4 medical cannabis and medical cannabis products from more than one
5 physical location if the commission determines that authorizing
6 additional dispensing locations is necessary for the clinical registrant
7 to best serve and treat qualifying patients and clinical trial participants.

8 g. A clinical registrant permit shall not be sold or transferred to
9 any other entity ⁴unless the commission finds that the sale or transfer
10 of the permit is necessary to continue essential clinical research or the
11 commission finds that the sale or transfer is otherwise consistent with
12 the purposes of P.L.2009, c.307 (C.24:6I-1 et al.) and P.L. , c. (C.
13) (pending before the Legislature as this bill). No sale or transfer of a
14 clinical registrant permit shall be approved until each applicant at the
15 entity applying to purchase or receive the transfer of the permit
16 undergoes a criminal history record background check pursuant to
17 subsection d. of section 7 of P.L.2009, c.307 (C.24:6I-7) ⁴.

18 h. Clinical registrant permits shall be valid for the term of the
19 contractual relationship between the academic medical center and the
20 clinical registrant. The commission may renew a clinical registrant
21 permit to correspond to any renewal of the contractual relationship
22 between the academic medical center and the clinical registrant.

23 i. Each clinical registrant shall submit the results of the clinical
24 research obtained through an approved clinical registrant permit to the
25 commission no later than one year following the conclusion of the
26 research study or publication of the research study in a peer-reviewed
27 medical journal. Nothing in this subsection shall be deemed to require
28 the disclosure of any clinical research that would infringe on the
29 intellectual property of the clinical registrant or on the confidentiality
30 of patient information.

31 j. Application materials submitted to the commission pursuant to
32 this section shall not be considered a public record pursuant to
33 P.L.1963, c.73 ¹, P.L.2001, c.404 ¹ (C.47:1A-1 et ¹al.), or the
34 common law concerning access to public records ¹seq.) or P.L.2001,
35 c.404 (C.47:1A-5 et al.) ¹.

36
37 14. (New section) a. (1) The commission shall, within 18
38 months following the commission's organization, and every three
39 years thereafter, conduct a feasibility study concerning the potential
40 for establishing a cannabis research and development permit type.
41 In order to advance scientific and medical understanding concerning
42 the potential uses of medical cannabis, and to ensure ongoing
43 quality control in the collection of data and the aggregation of
44 clinical, translational, and other research, the feasibility study shall
45 assess the medical cannabis market and industry, current
46 perspectives in the scientific and medical communities on medical
47 cannabis, as well as those of other relevant disciplines, to determine

1 the potential benefits of establishing a research and development
2 permit type. Any cannabis research and development permit
3 established by the commission shall be limited to advancing the use
4 of cannabis as medicine, improving the lives of current registered
5 qualifying patients as well as future patients who could derive
6 therapeutic benefit from the use of cannabis, and furthering the
7 knowledge of cannabis in the scientific and medical communities.

8 (2) The commission shall additionally assess the feasibility of
9 securing State funding to support the award of a monetary grant in
10 conjunction with the issuance of a cannabis research and
11 development permit to a successful applicant, following a
12 competitive application process, as well as assess potential future
13 regulations to apply to any cannabis research and development
14 permits that are supported by private investment.

15 (3) Each feasibility study conducted pursuant to this subsection
16 shall include at least one public hearing, at which the commission
17 shall receive testimony from interested members of the public.

18 (4) The commission shall submit a report of its findings and
19 conclusions to the Governor and, pursuant to section 2 of P.L.1991,
20 c.164 (C.52:14-19.1), to the Legislature, within 90 days following
21 the conclusion of each feasibility study.

22 b. The requirement to complete a feasibility study pursuant to
23 subsection a. of this section shall expire at such time as the
24 commission establishes a cannabis research and development permit
25 type and promulgates rules and regulations with regard to the
26 permit pursuant to the “Administrative Procedure Act,” P.L.1968,
27 c.410 (C.52:14B-1 et seq.).

28 c. The commission may establish, by regulation, such
29 additional permit types in connection with medical cannabis as the
30 commission deems necessary and appropriate to maximize the
31 effectiveness and efficiency of the State medical cannabis program
32 and meet the needs of qualifying patients, health care practitioners,
33 medical cannabis cultivators, medical cannabis manufacturers,
34 medical cannabis dispensaries, and related entities. Such permits
35 may include, but shall not be limited to, permits authorizing
36 pharmacy practice sites licensed pursuant to
37 P.L.2003, c.280 (C.45:14-40 et seq.) to be authorized to dispense
38 medical cannabis to qualifying patients and their designated and
39 institutional caregivers.

40

41 15. (New section) a. A medical cannabis cultivator, medical
42 cannabis manufacturer, medical cannabis dispensary, or clinical
43 registrant may appoint a medical advisory board to provide advice
44 to the medical cannabis cultivator, medical cannabis manufacturer,
45 medical cannabis dispensary, or clinical registrant on all aspects of
46 its business.

47 b. A medical advisory board appointed pursuant to this section
48 shall comprise five members: three health care practitioners

1 licensed or certified to practice in New Jersey; one qualifying
2 patient who resides in the same area in which the medical cannabis
3 cultivator, medical cannabis manufacturer, medical cannabis
4 dispensary, or clinical registrant is located; and one individual who
5 owns a business in the same area in which the medical cannabis
6 cultivator, medical cannabis manufacturer, medical cannabis
7 dispensary, or clinical registrant is located. No owner, director,
8 officer, or employee of a medical cannabis cultivator, medical
9 cannabis manufacturer, medical cannabis dispensary, or clinical
10 registrant may serve on a medical advisory board. The membership
11 of a medical advisory board shall be subject to commission
12 approval.

13 c. A medical advisory board appointed pursuant to this section
14 shall meet at least two times per calendar year.

15

16 16. (New section) a. (1) An organization issued a permit to
17 operate a medical cannabis cultivator, medical cannabis
18 manufacturer, medical cannabis dispensary, or clinical registrant
19 shall not be eligible for a State or local economic incentive.

20 (2) The issuance of a permit to operate a medical cannabis
21 cultivator, medical cannabis manufacturer, cannabis dispensary, or
22 clinical registrant to an organization that has been awarded a State
23 or local economic incentive shall invalidate the right of the
24 organization to benefit from the economic incentive as of the date
25 of issuance of the permit, except that an academic medical center
26 that has entered into a contractual relationship with a clinical
27 registrant shall not have any right to benefit from an economic
28 incentive invalidated pursuant to this paragraph on the basis of that
29 contractual relationship.

30 b. (1) A property owner, developer, or operator of a project to
31 be used, in whole or in part, as a medical cannabis cultivator,
32 medical cannabis manufacturer, medical cannabis dispensary, or
33 clinical registrant shall not be eligible for a State or local economic
34 incentive during the period of time that the economic incentive is in
35 effect.

36 (2) The issuance of a permit to operate a medical cannabis
37 cultivator, medical cannabis manufacturer, medical cannabis
38 dispensary, or clinical registrant at a location that is the subject of a
39 State or local economic incentive shall invalidate the right of a
40 property owner, developer, or operator to benefit from the economic
41 incentive as of the date of issuance of the permit, except that an
42 academic medical center that has entered into a contractual
43 relationship with a clinical registrant shall not have any right to
44 benefit from an economic incentive invalidated pursuant to this
45 paragraph on the basis of that contractual relationship.

46 c. As used in this section:

47 "Business" means any non-governmental person, association,
48 for-profit or non-profit corporation, joint venture, limited liability

1 company, partnership, sole proprietorship, or other form of business
2 organization or entity.

3 "Governmental entity" means the State, a local unit of
4 government, or a State or local government agency or authority.

5 "State or local economic incentive" means a financial incentive,
6 awarded by a governmental entity to a business, or agreed to
7 between a governmental entity and a business, for the purpose of
8 stimulating economic development or redevelopment in New
9 Jersey, including, but not limited to, a bond, grant, loan, loan
10 guarantee, matching fund, tax credit, or other tax expenditure.

11 "Tax expenditure" means the amount of foregone tax collections
12 due to any abatement, reduction, exemption, credit, or transfer
13 certificate against any State or local tax.

14

15 17. Section 8 of P.L.2009, c.307 (C.24:6I-8) is amended to read
16 as follows:

17 8. The provisions of **[this act]** P.L.2009, c.307 (C.24:6I-
18 1 et al.), P.L.2015, c.158 (C.18A:40-12.22 et al.), and
19 P.L. , c. (C.) (pending before the Legislature as this bill)
20 shall not be construed to permit a person to:

21 a. operate, navigate, or be in actual physical control of any
22 vehicle, aircraft, railroad train, stationary heavy equipment or vessel
23 while under the influence of **[marijuana]** cannabis; or

24 b. smoke **[marijuana]** cannabis in a school bus or other form of
25 public transportation, in a private vehicle unless the vehicle is not in
26 operation, on any school grounds, in any correctional facility, at any
27 public park or beach, at any recreation center, or in any place where
28 smoking is prohibited pursuant to N.J.S.2C:33-13.

29 A person who commits an act as provided in this section shall be
30 subject to such penalties as are provided by law.

31 (cf: P.L.2009, c.307, c.8)

32

33 18. Section 10 of P.L.2009, c.307 (C.24:6I-10) is amended to
34 read as follows:

35 10. a. A **[physician]** health care practitioner shall provide
36 written instructions for a registered qualifying patient or **[his]** the
37 patient's designated caregiver, or an institutional caregiver acting
38 on behalf of the patient, to present to **[an alternative treatment**
39 **center]** a medical cannabis dispensary or a clinical registrant
40 concerning the total amount of usable **[marijuana]** cannabis that a
41 patient may be dispensed, in weight, in a 30-day period, which
42 amount shall not exceed **[two ounces. If no amount is noted, the**
43 **maximum amount that may be dispensed at one time is two ounces]**
44 the maximum amount that may be authorized for the patient
45 pursuant to subsection f. of this section.

46 b. A **[physician]** health care practitioner may issue multiple
47 written instructions at one time authorizing the patient to receive a

1 total of up to a **[90-day]** one year supply, provided that the
2 following conditions are met:

3 (1) Each separate set of instructions shall be issued for a
4 legitimate medical purpose by the **[physician]** health care
5 practitioner, as provided in **[this act]** P.L.2009, c.307 (C.24:6I-
6 1 et al.);

7 (2) Each separate set of instructions shall indicate the earliest
8 date on which a **[center]** dispensary or clinical registrant may
9 dispense the **[marijuana]** cannabis, except for the first dispensation
10 if it is to be filled immediately; and

11 (3) The **[physician]** health care practitioner has determined that
12 providing the patient with multiple instructions in this manner does
13 not create an undue risk of diversion or abuse.

14 c. A registered qualifying patient or **[his primary]** the patient's
15 designated caregiver, or an institutional caregiver acting on behalf
16 of a qualifying patient, shall present ¹verification of¹ the patient's or
17 caregiver's ¹**[registry identification card]** registration with the
18 commission¹, as applicable, and these written instructions to **[the**
19 alternative treatment center] any medical cannabis dispensary or
20 clinical registrant, which shall verify and log the documentation
21 presented. An institutional caregiver shall additionally present an
22 authorization executed by the patient certifying that the institutional
23 caregiver is authorized to obtain medical cannabis on behalf of the
24 patient. A **[physician]** health care practitioner may provide a copy
25 of a written instruction by electronic or other means, as determined
26 by the **[commissioner]** executive director, directly to **[an**
27 alternative treatment center] a medical cannabis dispensary or a
28 clinical registrant on behalf of a registered qualifying patient. The
29 dispensation of **[marijuana]** medical cannabis pursuant to any
30 written instructions shall occur within one month of the date that
31 the instructions were written or become eligible for dispensing,
32 whichever is later, or the instructions are void.

33 d. **[A patient may be registered at only one alternative**
34 **treatment center at any time.]** (deleted by amendment, P.L. , c.)
35 (pending before the Legislature as this bill)

36 e. Prior to dispensing medical cannabis to a qualifying patient,
37 the patient's designated caregiver, or an institutional caregiver, the
38 medical cannabis dispensary or clinical registrant shall access the
39 system established pursuant to section 11 of P.L.2009, c.307
40 (C.45:1-45.1) to ascertain whether medical cannabis was dispensed
41 for the patient by any medical cannabis dispensary or clinical
42 registrant within the preceding 30 days. Upon dispensing medical
43 cannabis to a qualifying patient, the patient's designated caregiver,
44 or an institutional caregiver, the medical cannabis dispensary or
45 clinical registrant shall transmit to the patient's health care

1 practitioner information concerning the amount, strain, and form of
2 medical cannabis that was dispensed.

3 f. (1) Except as provided in paragraph (2) of this subsection,
4 the maximum amount of usable cannabis that a patient may be
5 dispensed, in weight, in a 30-day period, shall be:

6 (a) until January 1, 2019, two ounces in dried form or the
7 equivalent amount in any other form;

8 (b) on or after January 1, 2019 and continuing until July 1,
9 2019, two and one-half ounces in dried form or the equivalent
10 amount in any other form; and

11 (c) on or after July 1, 2019, three ounces in dried form or the
12 equivalent amount in any other form.

13 (2) The monthly limits set forth in paragraph (1) of this
14 subsection shall not apply to patients who are terminally ill or who
15 are currently receiving hospice care through a licensed hospice,
16 which patients may be dispensed an unlimited amount of medical
17 cannabis. Qualifying patients who are not receiving hospice care or
18 who are not terminally ill may petition the commission, on a form
19 and in a manner as the commission shall require by regulation, for
20 an exemption from the monthly limits set forth in paragraph (1) of
21 this paragraph, which petition the commission shall approve if the
22 commission finds that granting the exemption is necessary to meet
23 the patient's treatment needs and is consistent with the provisions of
24 P.L.2009, c.307 (C.24:6I-1 et al.).

25 g. The executive director shall establish, by regulation,
26 curricula for health care practitioners and for staff at medical
27 cannabis dispensaries and clinical registrants:

28 (1) The curriculum for health care practitioners shall be
29 designed to assist practitioners in counseling patients with regard to
30 the quantity, dosing, and administration of medical cannabis as
31 shall be appropriate to treat the patient's qualifying medical
32 condition. Health care practitioners shall complete the curriculum
33 as a condition of authorizing patients for the medical use of
34 cannabis; and

35 (2) The curriculum for employees of medical cannabis
36 dispensaries and clinical registrants shall be designed to assist the
37 employees in counseling patients with regard to determining the
38 strain and form of medical cannabis that is appropriate to treat the
39 patient's qualifying medical condition. Employees of medical
40 cannabis dispensaries and clinical registrants shall be required to
41 complete the curriculum as a condition of registration with the
42 commission. Completion of the curriculum may constitute part of
43 the annual training required pursuant to paragraph (1) of subsection
44 j. of section 7 of P.L.2009, c.307 (C.24:6I-7).

45 h. Commencing July 1, 2020, the amount of the sales tax that
46 may be imposed under the "Sales and Use Tax Act," P.L.1966, c.30
47 (C.54:32B-1 et seq.) on medical cannabis dispensed by a medical

1 cannabis dispensary or clinical registrant shall not exceed five
2 percent.

3 Commencing July 1, 2022, the amount of the sales tax that may
4 be imposed under the "Sales and Use Tax Act," P.L.1966, c.30
5 (C.54:32B-1 et seq.) on medical cannabis dispensed by a medical
6 cannabis dispensary or clinical registrant shall not exceed three
7 percent.

8 Commencing July 1, 2023, the amount of the sales tax that may
9 be imposed under the "Sales and Use Tax Act," P.L.1966, c.30
10 (C.54:32B-1 et seq.) on medical cannabis dispensed by a medical
11 cannabis dispensary or clinical registrant shall not exceed one
12 percent.

13 Commencing July 1, 2024, medical cannabis dispensed by a
14 medical cannabis dispensary or clinical registrant shall not be
15 subject to any tax imposed under the "Sales and Use Tax Act,"
16 P.L.1966, c.30 (C.54:32B-1 et seq.).

17 ¹Any revenue collected pursuant to a tax imposed on the sale of
18 medical cannabis under the "Sales and Use Tax Act," P.L.1966,
19 c.30 (C.54:32B-1 et seq.), shall be exclusively appropriated to
20 programs for the treatment of mental health and substance use
21 disorders.¹

22 (cf: P.L.2009, c.307, s.10)

23
24 19. Section 13 of P.L.2009, c.307 (C.24:6I-11) is amended to
25 read as follows:

26 13. a. The **【commissioner】** executive director may accept
27 from any governmental department or agency, public or private
28 body or any other source grants or contributions to be used in
29 carrying out the purposes of **【this act】** P.L.2009, c.307 (C.24:6I-1
30 et al.) and P.L. , c. (C.) (pending before the Legislature as
31 this bill).

32 b. All fees collected pursuant to **【this act】** P.L.2009, c.307
33 (C.24:6I-1 et al.) and P.L. , c. (C.) (pending before the
34 Legislature as this bill), including those from qualifying patients,
35 designated and institutional caregivers, and 【alternative treatment
36 centers'】 initial, modification and renewal applications for
37 alternative treatment centers, including medical cannabis
38 cultivators, medical cannabis manufacturers, medical cannabis
39 dispensaries, and clinical registrants, shall be used to offset the cost
40 of the 【department's】 commission's administration of the
41 provisions of 【this act】 P.L.2009, c.307 (C.24:6I-1 et al.) and
42 P.L. , c. (C.) (pending before the Legislature as this bill).

43 (cf: P.L.2009, c.307, s.13)

44
45 20. Section 14 of P.L.2009, c.307 (C.24:6I-12) is amended to
46 read as follows:

1 14. a. The commissioner, or after the effective date of
2 P.L. , c. (C.) (pending before the Legislature as this bill), the
3 executive director, shall report to the Governor, and to the
4 Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1):

5 (1) no later than one year after the effective date of **[this act]**
6 P.L.2009, c.307 (C.24:6I-1 et al.), on the actions taken to
7 implement the provisions of **[this act]** P.L.2009, c.307 (C.24:6I-
8 1 et al.); and

9 (2) annually thereafter on the number of applications for
10 **[registry identification cards]** registration with the commission¹,
11 the number of qualifying patients registered, the number of
12 **[primary]** designated and institutional caregivers registered, the
13 nature of the [debilitating] qualifying medical conditions of the
14 patients, the number of ¹[registry identification cards]
15 registrations¹ revoked, the number of [alternative treatment center]
16 medical cannabis cultivator, medical cannabis manufacturer, and
17 medical cannabis dispensary permits issued and revoked, the
18 number and type of integrated curricula approved, established, and
19 maintained in connection with an IC permit, the number of testing
20 laboratories licensed, the number of clinical registrant permits
21 issued and the nature of the clinical research conducted by each
22 clinical registrant, any incidents of diversion of medical cannabis,
23 information concerning racial, ethnic, and gender diversity in the
24 individuals issued and currently holding permits issued by the
25 commission, statistics concerning arrests for drug offenses
26 throughout the State and in areas where medical cannabis
27 dispensaries are located, including information concerning racial
28 disparities in arrest rates for drug offenses generally and cannabis
29 offenses in particular, and the number of [physicians providing
30 certifications for] health care practitioners authorizing patients for
31 the medical use of cannabis, including the types of license or
32 certification held by those practitioners.

33 b. The reports shall not contain any identifying information of
34 patients, caregivers, or **[physicians]** health care practitioners.

35 c. Within two years after the effective date of **[this act]**
36 P.L.2009, c.307 (C.24:6I-1 et al.) and every two years thereafter,
37 the commissioner or, after the effective date of
38 P.L. , c. (C.) (pending before the Legislature as this bill),
39 the executive director, shall: evaluate whether there are sufficient
40 numbers of [alternative treatment centers] medical cannabis
41 cultivators, medical cannabis manufacturers, medical cannabis
42 dispensaries, and clinical registrants to meet the needs of registered
43 qualifying patients throughout the State; evaluate whether the
44 maximum amount of medical [marijuana] cannabis allowed
45 pursuant to [this act] P.L.2009, c.307 (C.24:6I-1 et al.) is sufficient
46 to meet the medical needs of qualifying patients; and determine

1 whether any **【alternative treatment center】** medical cannabis
2 cultivator, medical cannabis manufacturer, medical cannabis
3 dispensary, or clinical registrant has charged excessive prices **【for**
4 marijuana】 in connection with medical cannabis **【that the center**
5 dispensed】.

6 The commissioner or, after the effective date of
7 P.L. , c. (C.) (pending before the Legislature as this bill),
8 the executive director, shall report his findings no later than two
9 years after the effective date of **【this act】** P.L.2009, c.307 (C.24:6I-
10 1 et al.), and every two years thereafter, to the Governor, and to the
11 Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1).
12 (cf: P.L.2009, c.307, s.14)

13

14 21. Section 15 of P.L.2009, c.307 (C.24:6I-13) is amended to
15 read as follows:

16 15. a. The **【Department of Health】** Cannabis Regulatory
17 Commission is authorized to exchange fingerprint data with, and
18 receive information from, the Division of State Police in the
19 Department of Law and Public Safety and the Federal Bureau of
20 Investigation for use in reviewing applications for individuals
21 **【seeking】** who are required to complete a criminal history record
22 background check in connection with applications to serve as
23 **【primary】** designated caregivers or institutional caregivers pursuant
24 to section 4 of P.L.2009, c.307 (C.24:6I-4), for licenses to operate
25 as, or to be a director, officer, or employee of, medical cannabis
26 testing laboratories pursuant to section 25 of P.L. , c. (C.)
27 (pending before the Legislature as this bill), for permits to operate
28 as, or to be a director, officer, or employee of¹, or an investor in,¹
29 clinical registrants pursuant to section 13 of P.L. , c. (C.)
30 (pending before the Legislature as this bill), and for permits to
31 operate as, or to be a director, officer, or employee of, 【alternative
32 treatment centers】¹, or an investor in,¹ medical cannabis
33 cultivators, medical cannabis manufacturers, and medical cannabis
34 dispensaries pursuant to section 7 of P.L.2009, c.307 (C.24:6I-7).

35 b. The Division of State Police shall promptly notify the
36 **【Department of Health】** Cannabis Regulatory Commission in the
37 event an applicant seeking to serve as a **【primary】** designated or
38 institutional caregiver, an applicant for a license to operate as, or to
39 be a director, officer, or employee of, a medical cannabis testing
40 laboratory, an applicant for a license to operate as, or to be a
41 director, officer, or employee of,¹ or an investor in,¹ a clinical
42 registrant, or an applicant for a permit to operate as, or to be a
43 director, officer, or employee of, **【an alternative treatment center】**
44 ¹ or an investor in,¹ a medical cannabis cultivator, medical cannabis
45 manufacturer, or medical cannabis dispensary, who was the subject
46 of a criminal history record background check conducted pursuant

1 to subsection a. of this section, is convicted of a crime involving
2 possession or sale of a controlled dangerous substance.
3 (cf: P.L.2012, c.17, s.91)
4

5 22. Section 16 of P.L.2009, c.307 (C.24:6I-14) is amended to
6 read as follows:

7 16. Nothing in **[this act]** P.L.2009, c.307 (C.24:6I-1 et al.),
8 P.L.2015, c.158 (C.18A:40-12.22 et al.), or P.L. , c. (C.)
9 (pending before the Legislature as this bill) shall be construed to
10 require a government medical assistance program or private health
11 insurer to reimburse a person for costs associated with the medical
12 use of **[marijuana, or an employer to accommodate the medical use**
13 **of marijuana in any workplace]** cannabis, or to restrict or otherwise
14 affect the distribution, sale, prescribing, and dispensing of any
15 product that has been approved for marketing as a prescription drug
16 or device by the federal Food and Drug Administration.
17 (cf: P.L.2009, c.307, s.16)
18

19 23. Section 18 of P.L.2009, c.307 (C.24:6I-16) is amended to
20 read as follows:

21 18. a. Pursuant to the "Administrative Procedure Act,"
22 P.L.1968, c.410 (C.52:14B-1 et seq.), the commissioner or, after the
23 effective date of P.L. , c. (C.) (pending before the
24 Legislature as this bill), the executive director, shall promulgate
25 rules and regulations to effectuate the purposes of **[this act]**
26 P.L.2009, c.307 (C.24:6I-1 et al.), in consultation with the
27 Department of Law and Public Safety.

28 b. Notwithstanding any provision of P.L.1968, c.410
29 (C.52:14B-1 et seq.) to the contrary, the commissioner shall adopt,
30 immediately upon filing with the Office of Administrative Law and
31 no later than the 90th day after the effective date of **[this act]**
32 P.L.2009, c.307 (C.24:6I-1 et al.), such regulations as the
33 commissioner deems necessary to implement the provisions of **[this**
34 **act]** P.L.2009, c.307 (C.24:6I-1 et al.). Regulations adopted
35 pursuant to this subsection shall be effective until the adoption of
36 rules and regulations pursuant to subsection a. of this section and
37 may be amended, adopted, or readopted by the commissioner in
38 accordance with the requirements of P.L.1968, c.410 (C.52:14B-1
39 et seq.).

40 c. No later than 90 days after the effective date of
41 P.L. , c. (C.) (pending before the Legislature as this bill),
42 the executive director shall promulgate rules and regulations to
43 effectuate the purposes of P.L. , c. (C.) (pending before the
44 Legislature as this bill). Rules and regulations adopted pursuant to
45 this subsection shall, at a minimum:

46 (1) Specify the number of new medical cannabis cultivator,
47 medical cannabis manufacturer, and medical cannabis dispensary

1 permits the commission will issue in the first year next following
2 the effective date of P.L. , c. (C.) (pending before the
3 Legislature as this bill); and

4 (2) Establish recommended dosage guidelines for medical
5 cannabis in each form available to qualifying patients that are
6 equivalent to one ounce of medical cannabis in dried form. The
7 executive director shall periodically review and update the dosage
8 guidelines as appropriate, including to establish dosage guidelines
9 for new forms of medical cannabis that become available.

10 (cf: P.L.2009, c.307, s.18)

11

12 24. (New section) a. Each batch of medical cannabis cultivated
13 by a medical cannabis cultivator or a clinical registrant and each
14 batch of a medical cannabis product produced by a medical
15 cannabis manufacturer or a clinical registrant shall be tested in
16 accordance with the requirements of section 26 of
17 P.L. , c. (C.) (pending before the Legislature as this bill) by
18 a laboratory licensed pursuant to section 25 of P.L. , c. (C.)
19 (pending before the Legislature as this bill). The laboratory
20 performing the testing shall produce a written report detailing the
21 results of the testing, a summary of which shall be included in any
22 packaging materials for medical cannabis and medical cannabis
23 products dispensed to qualifying patients and their designated and
24 institutional caregivers. The laboratory may charge a reasonable
25 fee for any test performed pursuant to this section.

26 b. The requirements of subsection a. of this section shall take
27 effect at such time as the executive director certifies that a
28 sufficient number of laboratories have been licensed pursuant to
29 section 25 of P.L. , c. (C.) (pending before the Legislature
30 as this bill) to ensure that all medical cannabis and medical
31 cannabis products can be promptly tested and labeled without
32 disrupting patient access to medical cannabis.

33

34 25. (New section) a. A laboratory that performs testing services
35 pursuant to section 24 of P.L. , c. (C.) (pending before the
36 Legislature as this bill) shall be licensed by the commission and
37 may be subject to inspection by the commission to determine the
38 condition and calibration of any equipment used for testing
39 purposes and to ensure that testing is being performed in
40 accordance with the requirements of section 26 of
41 P.L. , c. (C.) (pending before the Legislature as this bill).

42 b. There shall be no upper limit on the number of laboratories
43 that may be licensed to perform testing services.

44 c. A person who has been convicted of a crime involving any
45 controlled dangerous substance or controlled substance analog as
46 set forth in chapter 35 of Title 2C of the New Jersey Statutes except
47 paragraph (4) of subsection a. of N.J.S.2C:35-10, or any similar law
48 of the United States or any other state shall not be issued a license

1 to operate as or be a director, officer, or employee of a medical
2 cannabis testing laboratory, unless such conviction occurred after
3 the effective date of P.L.2009, c.307 (C.24:6I-1 et al.) and was for a
4 violation of federal law relating to possession or sale of cannabis
5 for conduct that is authorized under P.L.2009, c.307 (C.24:6I-
6 1 et al.), P.L.2015, c.158 (C.18A:40-12.22 et al.), or
7 P.L. , c. (C.) (pending before the Legislature as this bill).

8 d. (1) The executive director shall require each applicant for
9 licensure as a medical cannabis testing laboratory to undergo a
10 criminal history record background check, except that no criminal
11 history record background check shall be required for an applicant
12 who completed a criminal history record background check as a
13 condition of professional licensure or certification.

14 For purposes of this section, the term "applicant" shall include
15 any owner, director, officer, or employee of a medical cannabis
16 testing laboratory. The executive director is authorized to exchange
17 fingerprint data with and receive criminal history record
18 background information from the Division of State Police and the
19 Federal Bureau of Investigation consistent with the provisions of
20 applicable federal and State laws, rules, and regulations. The
21 Division of State Police shall forward criminal history record
22 background information to the executive director in a timely
23 manner when requested pursuant to the provisions of this section.

24 An applicant who is required to undergo a criminal history
25 record background check pursuant to this section shall submit to
26 being fingerprinted in accordance with applicable State and federal
27 laws, rules, and regulations. No check of criminal history record
28 background information shall be performed pursuant to this section
29 unless the applicant has furnished the applicant's written consent to
30 that check. An applicant who is required to undergo a criminal
31 history record background check pursuant to this section who
32 refuses to consent to, or cooperate in, the securing of a check of
33 criminal history record background information shall not be
34 considered for a license to operate, or authorization to be employed
35 at, a medical cannabis testing laboratory. An applicant shall bear
36 the cost for the criminal history record background check, including
37 all costs of administering and processing the check.

38 (2) The executive director shall not approve an applicant for a
39 license to operate, or authorization to be employed at, a medical
40 cannabis testing laboratory if the criminal history record
41 background information of the applicant reveals a disqualifying
42 conviction as set forth in subsection c. of this section.

43 (3) Upon receipt of the criminal history record background
44 information from the Division of State Police and the Federal
45 Bureau of Investigation, the executive director shall provide written
46 notification to the applicant of the applicant's qualification for or
47 disqualification for a permit to operate or be a director, officer, or
48 employee of a medical cannabis testing laboratory.

1 If the applicant is disqualified because of a disqualifying
2 conviction pursuant to the provisions of this section, the conviction
3 that constitutes the basis for the disqualification shall be identified
4 in the written notice.

5 (4) The Division of State Police shall promptly notify the
6 executive director in the event that an individual who was the
7 subject of a criminal history record background check conducted
8 pursuant to this section is convicted of a crime or offense in this
9 State after the date the background check was performed. Upon
10 receipt of that notification, the executive director shall make a
11 determination regarding the continued eligibility to operate or be a
12 director, officer, or employee of a medical cannabis testing
13 laboratory.

14 (5) Notwithstanding the provisions of subsection c. of this
15 section to the contrary, the executive director may offer provisional
16 authority for an applicant to be an owner, director, officer, or
17 employee of a medical cannabis testing laboratory for a period not
18 to exceed three months if the applicant submits to the executive
19 director a sworn statement attesting that the person has not been
20 convicted of any disqualifying conviction pursuant to this section.

21 (6) Notwithstanding the provisions of subsection c. of this
22 section to the contrary, no applicant to be an owner, director,
23 officer, or employee of a medical cannabis testing laboratory shall
24 be disqualified on the basis of any conviction disclosed by a
25 criminal history record background check conducted pursuant to
26 this section if the individual has affirmatively demonstrated to the
27 executive director clear and convincing evidence of rehabilitation.
28 In determining whether clear and convincing evidence of
29 rehabilitation has been demonstrated, the following factors shall be
30 considered:

31 (a) the nature and responsibility of the position which the
32 convicted individual would hold, has held, or currently holds;

33 (b) the nature and seriousness of the crime or offense;

34 (c) the circumstances under which the crime or offense
35 occurred;

36 (d) the date of the crime or offense;

37 (e) the age of the individual when the crime or offense was
38 committed;

39 (f) whether the crime or offense was an isolated or repeated
40 incident;

41 (g) any social conditions which may have contributed to the
42 commission of the crime or offense; and

43 (h) any evidence of rehabilitation, including good conduct in
44 prison or in the community, counseling or psychiatric treatment
45 received, acquisition of additional academic or vocational
46 schooling, successful participation in correctional work-release
47 programs, or the recommendation of those who have had the
48 individual under their supervision.

1 26. (New section) a. The commission shall establish, by
2 regulation, standardized requirements and procedures for testing
3 medical cannabis and medical cannabis products.

4 b. Any test performed on medical cannabis or on a medical
5 cannabis product shall include ³[, at a minimum,]³ liquid
6 chromatography analysis to determine chemical composition and
7 potency, and ³, at a minimum,³ screening for ³each of the
8 following:

9 (1) microbial³ contamination ³[by biologic contaminants,] ;

10 (2)³ foreign material ³[,] ;

11 (3)³ residual pesticides ³[, and] ;

12 (4)³ other agricultural residue and residual solvents ³; and

13 (5) heavy metals³.

14 c. Laboratories shall use the dosage equivalence guidelines
15 developed by the commission pursuant to paragraph (2) of
16 subsection c. of section 18 of P.L.2009, c.307 (C.24:6I-16) when
17 testing and determining the potency of medical cannabis products.

18 d. ³[Equipment used by a licensed laboratory for testing
19 purposes shall be] As a condition of licensure, each laboratory shall
20 certify its intention to seek third party accreditation in accordance
21 with ISO 17025 standards in order to ensure equipment is³ routinely
22 inspected, calibrated, and maintained ³[in accordance with national
23 standards or, if national standards are not available, with the
24 manufacturer's specifications. Calibration procedures shall include
25 specific directions and limits for accuracy and precision, and
26 provisions for remedial action when these limits are not met. Each
27 licensed laboratory shall maintain records of all inspection,
28 calibration, and maintenance activities, which shall be made
29 available to the commission upon request] until such time as the
30 commission issues its own standards or confirms the use of ISO
31 17025³.

32 e. Until such time as the commission establishes the standards
33 required by this section, a licensed laboratory ³[may utilize testing
34 standards established by any other] shall utilize the testing
35 standards established by another³ state with a medical cannabis
36 program ³, which state shall be designated by the executive
37 director³.

38
39 27. (New section) The executive director may waive any
40 requirement of P.L.2009, c.307 (C.24:6I-1 et al.) or
41 P.L. , c. (C.) (pending before the Legislature as this bill) if
42 the executive director determines that granting the waiver is
43 necessary to achieve the purposes of P.L.2009, c.307 (C.24:6I-
44 1 et al.) and P.L. , c. (C.) (pending before the Legislature
45 as this bill) and provide access to patients who would not otherwise
46 qualify for the medical use of cannabis to alleviate suffering from a

1 diagnosed medical condition, and does not create a danger to the
2 public health, safety, or welfare.

3
4 28. (New section) All powers, duties, and responsibilities with
5 regard to the regulation and oversight of activities authorized
6 pursuant to P.L.2009, c.307 (C.24:6I-1 et al.) and
7 P.L. , c. (C.) (pending before the Legislature as this bill)
8 shall be transferred from the Department of Health to the Cannabis
9 Regulatory Commission established pursuant to section 7 of
10 P.L. , c. (C.) (pending before the Legislature as Senate Bill
11 No. 2703) at such time as the members of the Cannabis Regulatory
12 Commission are appointed and the commission first organizes. Any
13 reference to the Department of Health or the Commissioner of
14 Health in any statute or regulation pertaining to the provisions of
15 P.L.2009, c.307 (C.24:6I-1 et al.) or P.L. , c. (C.) (pending
16 before the Legislature as this bill) shall be deemed to refer to the
17 Cannabis Regulatory Commission and the Executive Director of the
18 Cannabis Regulatory Commission, respectively. The provisions of
19 this section shall be carried out in accordance with the “State
20 Agency Transfer Act,” P.L.1971, c.375 (C.52:14D-1 et seq.).

21
22 29. (New section) If any provision of P.L.2009, c.307 (C.24:6I-
23 1 et al.), P.L.2015, c.158 (C.18A:40-12.22 et al.), or
24 P.L. , c. (C.) (pending before the Legislature as this bill) or
25 its application to any person or circumstance is held invalid, the
26 invalidity does not affect other provisions or applications of
27 P.L.2009, c.307 (C.24:6I-1 et al.), P.L.2015, c.158 (C.18A:40-
28 12.22 et al.), and P.L. , c. (C.) (pending before the
29 Legislature as this bill) which can be given effect without the
30 invalid provision or application, and to this end the provisions of
31 P.L.2009, c.307 (C.24:6I-1 et al.), P.L.2015, c.158 (C.18A:40-
32 12.22 et al.), and P.L. , c. (C.) (pending before the
33 Legislature as this bill) are severable.

34
35 30. N.J.S.2C:35-18 is amended to read as follows:

36 2C:35-18. Exemption; Burden of Proof. a. If conduct is
37 authorized by the provisions of P.L.1970, c.226 (C.24:21-1 et seq.),
38 P.L.2009, c.307 (C.24:6I-1 et al.), **[or]** P.L.2015, c.158 (C.18A:40-
39 12.22 et al.), or P.L. , c. (C.) (pending before the
40 Legislature as this bill), that authorization shall, subject to the
41 provisions of this section, constitute an exemption from criminal
42 liability under this chapter or chapter 36, and the absence of such
43 authorization shall not be construed to be an element of any offense
44 in this chapter or chapter 36. It is an affirmative defense to any
45 criminal action arising under this chapter or chapter 36 that the
46 defendant is the authorized holder of an appropriate registration,
47 permit, or order form or is otherwise exempted or excepted from
48 criminal liability by virtue of any provision of P.L.1970, c.226

1 (C.24:21-1 et seq.), P.L.2009, c.307 (C.24:6I-1 et al.), **[or]**
2 P.L.2015, c.158 (C.18A:40-12.22 et al.), or P.L. , c. (C.)
3 (pending before the Legislature as this bill). The affirmative defense
4 established herein shall be proved by the defendant by a
5 preponderance of the evidence. It shall not be necessary for the
6 State to negate any exemption set forth in this act or in any
7 provision of Title 24 of the Revised Statutes in any complaint,
8 information, indictment, or other pleading or in any trial, hearing,
9 or other proceeding under this act.

10 b. No liability shall be imposed by virtue of this chapter or
11 chapter 36 upon any duly authorized State officer, engaged in the
12 enforcement of any law or municipal ordinance relating to
13 controlled dangerous substances or controlled substance analogs.
14 (cf: P.L.2015, c.158, s.3)
15

16 31. Section 1 of P.L.2015, c.158 (C.18A:40-12.22) is amended
17 to read as follows:

18 1. a. A board of education or chief school administrator of a
19 nonpublic school shall develop a policy authorizing parents,
20 guardians, and **[primary]** designated caregivers to administer
21 medical **[marijuana]** cannabis to a student while the student is on
22 school grounds, aboard a school bus, or attending a school-
23 sponsored event.

24 b. A policy adopted pursuant to subsection a. of this section
25 shall, at a minimum:

26 (1) require that the student be authorized to engage in the
27 medical use of **[marijuana]** cannabis pursuant to P.L.2009, c.307
28 (C.24:6I-1 et al.) and that the parent, guardian, or **[primary]**
29 designated caregiver be authorized to assist the student with the
30 medical use of **[marijuana]** cannabis pursuant to P.L.2009, c.307
31 (C.24:6I-1 et al.);

32 (2) establish protocols for verifying the registration status and
33 ongoing authorization pursuant to P.L.2009, c.307 (C.24:6I-1 et al.)
34 concerning the medical use of **[marijuana]** cannabis for the student
35 and the parent, guardian, or **[primary]** designated caregiver;

36 (3) expressly authorize parents, guardians, and **[primary]**
37 designated caregivers of students who have been authorized for the
38 medical use of **[marijuana]** cannabis to administer medical
39 **[marijuana]** cannabis to the student while the student is on school
40 grounds, aboard a school bus, or attending a school-sponsored
41 event;

42 (4) identify locations on school grounds where medical
43 **[marijuana]** cannabis may be administered; and

44 (5) prohibit the administration of medical **[marijuana]** cannabis
45 to a student by smoking or other form of inhalation while the
46 student is on school grounds, aboard a school bus, or attending a
47 school-sponsored event.

1 c. Medical **【marijuana】** cannabis may be administered to a
2 student while the student is on school grounds, aboard a school bus,
3 or attending school-sponsored events, provided that such
4 administration is consistent with the requirements of the policy
5 adopted pursuant to this section.

6 (cf: P.L.2015, c.158, s.1)

7

8 32. Section 2 of P.L.2015, c.158 (C.30:6D-5b) is amended to
9 read as follows:

10 2. a. The chief administrator of a facility that offers services
11 for persons with developmental disabilities shall develop a policy
12 authorizing a parent, guardian, or **【primary】** designated caregiver
13 authorized to assist a qualifying patient with the use of medical
14 **【marijuana】** cannabis pursuant to P.L.2009, c.307 (C.24:6I-1 et al.)
15 to administer medical **【marijuana】** cannabis to a person who is
16 receiving services for persons with developmental disabilities at the
17 facility.

18 b. A policy adopted pursuant to subsection a. of this section
19 shall, at a minimum:

20 (1) require the person receiving services for persons with
21 developmental disabilities be a qualifying patient authorized for the
22 use of medical **【marijuana】** cannabis pursuant to P.L.2009, c.307
23 (C.24:6I-1 et al.), and that the parent, guardian, or **【primary】**
24 designated caregiver be authorized to assist the person with the
25 medical use of **【marijuana】** cannabis pursuant to P.L.2009, c.307
26 (C.24:6I-1 et al.);

27 (2) establish protocols for verifying the registration status and
28 ongoing authorization pursuant to P.L.2009, c.307 (C.24:6I-1 et al.)
29 concerning the medical use of **【marijuana】** cannabis for the person
30 and the parent, guardian, or **【primary】** designated caregiver;

31 (3) expressly authorize parents, guardians, and **【primary】**
32 designated caregivers to administer medical **【marijuana】** cannabis
33 to the person receiving services for persons with developmental
34 disabilities while the person is at the facility; and

35 (4) identify locations at the facility where medical **【marijuana】**
36 cannabis may be administered.

37 c. Medical **【marijuana】** cannabis may be administered to a
38 person receiving services for persons with developmental
39 disabilities at a facility that offers such services while the person is
40 at the facility, provided that such administration is consistent with
41 the requirements of the policy adopted pursuant to this section and
42 the provisions of P.L.2009, c.307 (C.24:6I-1 et al.).

43 d. Nothing in this section shall be construed to authorize
44 medical **【marijuana】** cannabis to be smoked in any place where
45 smoking is prohibited pursuant to N.J.S.2C:33-13.

46 (cf: P.L.2015, c.158, s.2)

1 33. (New section) a. The chief administrator of a facility that
2 offers behavioral health care services shall develop a policy
3 authorizing a parent, guardian, or designated caregiver authorized to
4 assist a qualifying patient with the use of medical cannabis pursuant
5 to P.L.2009, c.307 (C.24:6I-1 et al.) to administer medical cannabis
6 to a person who is receiving behavioral health care services at the
7 facility.

8 b. A policy adopted pursuant to subsection a. of this section
9 shall, at a minimum:

10 (1) require the person receiving behavioral health care services
11 be a qualifying patient authorized for the use of medical cannabis
12 pursuant to P.L.2009, c.307 (C.24:6I-1 et al.), and that the parent,
13 guardian, or designated caregiver be authorized to assist the person
14 with the medical use of cannabis pursuant to P.L.2009, c.307
15 (C.24:6I-1 et al.);

16 (2) establish protocols for verifying the registration status and
17 ongoing authorization pursuant to P.L.2009, c.307 (C.24:6I-1 et al.)
18 concerning the medical use of cannabis for the person and the
19 parent, guardian, or designated caregiver;

20 (3) expressly authorize parents, guardians, and designated
21 caregivers to administer medical cannabis to the person receiving
22 behavioral health care services while the person is at the facility;
23 and

24 (4) identify locations at the facility where medical cannabis may
25 be administered.

26 c. Medical cannabis may be administered to a person receiving
27 behavioral health care services at a facility that offers such services
28 while the person is at the facility, provided that such administration
29 is consistent with the requirements of the policy adopted pursuant to
30 this section and the provisions of P.L.2009, c.307 (C.24:6I-1 et al.).

31 d. Nothing in this section shall be construed to authorize
32 medical cannabis to be smoked in any place where smoking is
33 prohibited pursuant to N.J.S.2C:33-13.

34 e. As used in this section, "behavioral health care services"
35 means procedures or services provided by a health care practitioner
36 to a patient for the treatment of a mental illness or emotional
37 disorder that is of mild to moderate severity. "Behavioral health
38 care" and "behavioral health care services" shall not include
39 procedures or services that are provided for the treatment of severe
40 mental illness, severe emotional disorder, or any drug or alcohol use
41 disorder.

42
43 34. Section 11 of P.L.2009, c.307 (C.45:1-45.1) is amended to
44 read as follows:

45 11. a. A **【physician】** health care practitioner who 【provides a
46 certification】 authorizes a patient for the medical use of cannabis or
47 who provides a written instruction for the medical use of
48 **【marijuana】** cannabis to a qualifying patient pursuant to P.L.2009,

1 c.307 (C.24:6I-1 et al.) and **【any alternative treatment center】** each
2 medical cannabis dispensary and clinical registrant shall furnish to
3 the Director of the Division of Consumer Affairs in the Department
4 of Law and Public Safety such information, on a daily basis and in
5 such a format **【and at such intervals,】** as the director shall prescribe
6 by regulation, for inclusion in a system established to monitor the
7 dispensation of **【marijuana】** cannabis in this State for medical use
8 as authorized by the provisions of P.L.2009, c.307 (C.24:6I-
9 1 et al.), which system shall serve the same purpose as, and be
10 cross-referenced with, the electronic system for monitoring
11 controlled dangerous substances established pursuant to section 25
12 of P.L.2007, c.244 (C.45:1-45).

13 b. The Director of the Division of Consumer Affairs, pursuant
14 to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-
15 1 et seq.), and in consultation with the **【Commissioner of Health**
16 **and Senior Services】** Executive Director of the Cannabis
17 Regulatory Commission, shall adopt rules and regulations to
18 effectuate the purposes of subsection a. of this section.

19 c. Notwithstanding any provision of P.L.1968, c.410
20 (C.52:14B-1 et seq.) to the contrary, the Director of the Division of
21 Consumer Affairs shall adopt, immediately upon filing with the
22 Office of Administrative Law and no later than the 90th day after
23 the effective date of P.L.2009, c.307 (C.24:6I-1 et al.), such
24 regulations as the director deems necessary to implement the
25 provisions of subsection a. of this section. Regulations adopted
26 pursuant to this subsection shall be effective until the adoption of
27 rules and regulations pursuant to subsection b. of this section and
28 may be amended, adopted, or readopted by the director in
29 accordance with the requirements of P.L.1968, c.410 (C.52:14B-
30 1 et seq.).

31 (cf: P.L.2009, c.307, s.11)

32

33 35. Section 7 of P.L.1991, c.378 (C.45:9-27.16) is amended to
34 read as follows:

35 7. a. A physician assistant may perform the following
36 procedures:

37 (1) Approaching a patient to elicit a detailed and accurate
38 history, perform an appropriate physical examination, identify
39 problems, record information, and interpret and present information
40 to the supervising physician;

41 (2) Suturing and caring for wounds including removing sutures
42 and clips and changing dressings, except for facial wounds,
43 traumatic wounds requiring suturing in layers, and infected wounds;

44 (3) Providing patient counseling services and patient education
45 consistent with directions of the supervising physician;

46 (4) Assisting a physician in an inpatient setting by conducting
47 patient rounds, recording patient progress notes, determining and

- 1 implementing therapeutic plans jointly with the supervising
2 physician, and compiling and recording pertinent narrative case
3 summaries;
- 4 (5) Assisting a physician in the delivery of services to patients
5 requiring continuing care in a private home, nursing home,
6 extended care facility, or other setting, including the review and
7 monitoring of treatment and therapy plans; and
- 8 (6) Referring patients to, and promoting their awareness of,
9 health care facilities and other appropriate agencies and resources in
10 the community.
- 11 (7) (Deleted by amendment, P.L.2015, c.224)
- 12 b. A physician assistant may perform the following procedures
13 only when directed, ordered, or prescribed by the supervising
14 physician, or when performance of the procedure is delegated to the
15 physician assistant by the supervising physician as authorized under
16 subsection d. of this section:
- 17 (1) Performing non-invasive laboratory procedures and related
18 studies or assisting duly licensed personnel in the performance of
19 invasive laboratory procedures and related studies;
- 20 (2) Giving injections, administering medications, and requesting
21 diagnostic studies;
- 22 (3) Suturing and caring for facial wounds, traumatic wounds
23 requiring suturing in layers, and infected wounds;
- 24 (4) Writing prescriptions or ordering medications in an inpatient
25 or outpatient setting in accordance with section 10 of
26 P.L.1991, c.378 (C.45:9-27.19); **[and]**
- 27 (5) Prescribing the use of patient restraints; and
- 28 (6) Authorizing qualifying patients for the medical use of
29 cannabis and issuing written instructions for medical cannabis to
30 registered qualifying patients pursuant to P.L.2009, c.307 (C.24:6I-
31 1 et al.).
- 32 c. A physician assistant may assist a supervising surgeon in the
33 operating room when a qualified assistant physician is not required
34 by the board and a second assistant is deemed necessary by the
35 supervising surgeon.
- 36 d. A physician assistant may perform medical services beyond
37 those explicitly authorized in this section, when such services are
38 delegated by a supervising physician with whom the physician
39 assistant has signed a delegation agreement pursuant to section 8 of
40 P.L.1991, c.378 (C.45:9-27.17). The procedures delegated to a
41 physician assistant shall be limited to those customary to the
42 supervising physician's specialty and within the supervising
43 physician's and the physician assistant's competence and training.
- 44 e. Notwithstanding subsection d. of this section, a physician
45 assistant shall not be authorized to measure the powers or range of
46 human vision, determine the accommodation and refractive states of
47 the human eye, or fit, prescribe, or adapt lenses, prisms, or frames
48 for the aid thereof. Nothing in this subsection shall be construed to

1 prohibit a physician assistant from performing a routine visual
2 screening.

3 (cf: P.L.2015, c.224, s.7)

4

5 36. Section 10 of P.L.1991, c.378 (C.45:9-27.19) is amended to
6 read as follows:

7 10. A physician assistant may order, prescribe, dispense, and
8 administer medications and medical devices and issue written
9 instructions to registered qualifying patients for medical cannabis to
10 the extent delegated by a supervising physician.

11 a. Controlled dangerous substances may only be ordered or
12 prescribed if:

13 (1) a supervising physician has authorized a physician assistant
14 to order or prescribe Schedule II, III, IV, or V controlled dangerous
15 substances in order to:

16 (a) continue or reissue an order or prescription for a controlled
17 dangerous substance issued by the supervising physician;

18 (b) otherwise adjust the dosage of an order or prescription for a
19 controlled dangerous substance originally ordered or prescribed by
20 the supervising physician, provided there is prior consultation with
21 the supervising physician;

22 (c) initiate an order or prescription for a controlled dangerous
23 substance for a patient, provided there is prior consultation with the
24 supervising physician if the order or prescription is not pursuant to
25 subparagraph (d) of this paragraph; or

26 (d) initiate an order or prescription for a controlled dangerous
27 substance as part of a treatment plan for a patient with a terminal
28 illness, which for the purposes of this subparagraph means a
29 medical condition that results in a patient's life expectancy being 12
30 months or less as determined by the supervising physician;

31 (2) the physician assistant has registered with, and obtained
32 authorization to order or prescribe controlled dangerous substances
33 from, the federal Drug Enforcement Administration and any other
34 appropriate State and federal agencies; and

35 (3) the physician assistant complies with all requirements which
36 the board shall establish by regulation for the ordering, prescription,
37 or administration of controlled dangerous substances, all applicable
38 educational program requirements, and continuing professional
39 education programs approved pursuant to section 16 of P.L.1991,
40 c.378 (C.45:9-27.25).

41 b. (Deleted by amendment, P.L.2015, c.224)

42 c. (Deleted by amendment, P.L.2015, c.224)

43 d. In the case of an order or prescription for a controlled
44 dangerous substance or written instructions for medical cannabis,
45 the physician assistant shall print on the order or prescription or the
46 written instructions the physician assistant's Drug Enforcement
47 Administration registration number.

1 e. The dispensing of medication or a medical device by a
2 physician assistant shall comply with relevant federal and State
3 regulations, and shall occur only if: (1) pharmacy services are not
4 reasonably available; (2) it is in the best interest of the patient; or
5 (3) the physician assistant is rendering emergency medical
6 assistance.

7 f. A physician assistant may request, receive, and sign for
8 prescription drug samples and may distribute those samples to
9 patients.

10 g. A physician assistant may issue written instructions to a
11 registered qualifying patient for medical cannabis pursuant to
12 section 10 of P.L.2009, c.307 (C.24:6I-10) only if:

13 (1) a supervising physician has authorized the physician
14 assistant to issue written instructions to registered qualifying
15 patients;

16 (2) the physician assistant verifies the patient's status as a
17 registered qualifying patient; and

18 (3) the physician assistant complies with the requirements for
19 issuing written instructions for medical cannabis established
20 pursuant to P.L.2009, c.307 (C.24:6I-1 et al.) and
21 P.L. , c. (C.) (pending before the Legislature as this bill).

22 (cf: P.L.2015, c.224, s.7)

23
24 37. Section 10 of P.L.1991, c.377 (C.45:11-49) is amended to
25 read as follows:

26 10. a. In addition to all other tasks which a registered
27 professional nurse may, by law, perform, an advanced practice
28 nurse may manage preventive care services and diagnose and
29 manage deviations from wellness and long-term illnesses, consistent
30 with the needs of the patient and within the scope of practice of the
31 advanced practice nurse, by:

32 (1) initiating laboratory and other diagnostic tests;

33 (2) prescribing or ordering medications and devices, as
34 authorized by subsections b. and c. of this section; and

35 (3) prescribing or ordering treatments, including referrals to
36 other licensed health care professionals, and performing specific
37 procedures in accordance with the provisions of this subsection.

38 b. An advanced practice nurse may order medications and
39 devices in the inpatient setting, subject to the following conditions:

40 (1) the collaborating physician and advanced practice nurse
41 shall address in the joint protocols whether prior consultation with
42 the collaborating physician is required to initiate an order for a
43 controlled dangerous substance;

44 (2) the order is written in accordance with standing orders or
45 joint protocols developed in agreement between a collaborating
46 physician and the advanced practice nurse, or pursuant to the
47 specific direction of a physician;

- 1 (3) the advanced practice nurse authorizes the order by signing
2 the nurse's own name, printing the name and certification number,
3 and printing the collaborating physician's name;
 - 4 (4) the physician is present or readily available through
5 electronic communications;
 - 6 (5) the charts and records of the patients treated by the advanced
7 practice nurse are reviewed by the collaborating physician and the
8 advanced practice nurse within the period of time specified by rule
9 adopted by the Commissioner of Health pursuant to section 13 of
10 P.L.1991, c.377 (C.45:11-52);
 - 11 (6) the joint protocols developed by the collaborating physician
12 and the advanced practice nurse are reviewed, updated, and signed
13 at least annually by both parties; and
 - 14 (7) the advanced practice nurse has completed six contact hours
15 of continuing professional education in pharmacology related to
16 controlled substances, including pharmacologic therapy, addiction
17 prevention and management, and issues concerning prescription
18 opioid drugs, including responsible prescribing practices,
19 alternatives to opioids for managing and treating pain, and the risks
20 and signs of opioid abuse, addiction, and diversion, in accordance
21 with regulations adopted by the New Jersey Board of Nursing. The
22 six contact hours shall be in addition to New Jersey Board of
23 Nursing pharmacology education requirements for advanced
24 practice nurses related to initial certification and recertification of
25 an advanced practice nurse as set forth in N.J.A.C.13:37-7.2.
- 26 c. An advanced practice nurse may prescribe medications and
27 devices in all other medically appropriate settings, subject to the
28 following conditions:
- 29 (1) the collaborating physician and advanced practice nurse
30 shall address in the joint protocols whether prior consultation with
31 the collaborating physician is required to initiate a prescription for a
32 controlled dangerous substance;
 - 33 (2) the prescription is written in accordance with standing orders
34 or joint protocols developed in agreement between a collaborating
35 physician and the advanced practice nurse, or pursuant to the
36 specific direction of a physician;
 - 37 (3) the advanced practice nurse writes the prescription on a New
38 Jersey Prescription Blank pursuant to P.L.2003, c.280 (C.45:14-
39 40 et seq.), signs the nurse's own name to the prescription and prints
40 the nurse's name and certification number;
 - 41 (4) the prescription is dated and includes the name of the patient
42 and the name, address, and telephone number of the collaborating
43 physician;
 - 44 (5) the physician is present or readily available through
45 electronic communications;
 - 46 (6) the charts and records of the patients treated by the advanced
47 practice nurse are periodically reviewed by the collaborating
48 physician and the advanced practice nurse;

1 (7) the joint protocols developed by the collaborating physician
2 and the advanced practice nurse are reviewed, updated, and signed
3 at least annually by both parties; and

4 (8) the advanced practice nurse has completed six contact hours
5 of continuing professional education in pharmacology related to
6 controlled substances, including pharmacologic therapy, addiction
7 prevention and management, and issues concerning prescription
8 opioid drugs, including responsible prescribing practices,
9 alternatives to opioids for managing and treating pain, and the risks
10 and signs of opioid abuse, addiction, and diversion, in accordance
11 with regulations adopted by the New Jersey Board of Nursing. The
12 six contact hours shall be in addition to New Jersey Board of
13 Nursing pharmacology education requirements for advanced
14 practice nurses related to initial certification and recertification of
15 an advanced practice nurse as set forth in N.J.A.C.13:37-7.2.

16 d. The joint protocols employed pursuant to subsections b. and
17 c. of this section shall conform with standards adopted by the
18 Director of the Division of Consumer Affairs pursuant to section 12
19 of P.L.1991, c.377 (C.45:11-51) or section 10 of P.L.1999, c.85
20 (C.45:11-49.2), as applicable.

21 e. (Deleted by amendment, P.L.2004, c.122.)

22 f. An attending advanced practice nurse may determine and
23 certify the cause of death of the nurse's patient and execute the
24 death certification pursuant to R.S.26:6-8 if no collaborating
25 physician is available to do so and the nurse is the patient's primary
26 caregiver.

27 g. An advanced practice nurse may authorize qualifying
28 patients for the medical use of cannabis and issue written
29 instructions for medical cannabis to registered qualifying patients,
30 subject to the following conditions:

31 (1) the collaborating physician and advanced practice nurse
32 shall address in the joint protocols whether prior consultation with
33 the collaborating physician is required to authorize a qualifying
34 patient for the medical use of cannabis or issue written instructions
35 for medical cannabis;

36 (2) the authorization for the medical use of cannabis or issuance
37 of written instructions for cannabis is in accordance with standing
38 orders or joint protocols developed in agreement between a
39 collaborating physician and the advanced practice nurse, or
40 pursuant to the specific direction of a physician;

41 (3) the advanced practice nurse signs the nurse's own name to
42 the authorization or written instruction and prints the nurse's name
43 and certification number;

44 (4) the authorization or written instruction is dated and includes
45 the name of the qualifying patient and the name, address, and
46 telephone number of the collaborating physician;

47 (5) the physician is present or readily available through
48 electronic communications;

1 (6) the charts and records of qualifying patients treated by the
2 advanced practice nurse are periodically reviewed by the
3 collaborating physician and the advanced practice nurse;

4 (7) the joint protocols developed by the collaborating physician
5 and the advanced practice nurse are reviewed, updated, and signed
6 at least annually by both parties; and

7 (8) the advanced practice nurse complies with the requirements
8 for authorizing qualifying patients for the medical use of cannabis
9 and for issuing written instructions for medical cannabis established
10 pursuant to P.L.2009, c.307 (C.24:6I-1 et al.) and
11 P.L. , c. (C.) (pending before the Legislature as this bill).
12 (cf: P.L.2017, c.28, s.15)

13

14 38. Section 5 of P.L.2009, c.307 (C.24:6I-5) is repealed.

15

16 39. This act shall take effect immediately.