## SENATE, No. 2373

# STATE OF NEW JERSEY

### 218th LEGISLATURE

INTRODUCED APRIL 5, 2018

Sponsored by: Senator NICHOLAS P. SCUTARI District 22 (Middlesex, Somerset and Union)

#### **SYNOPSIS**

Authorizes medical marijuana for treatment of any diagnosed condition; revises requirements for physicians to authorize qualifying patients; and revises requirements for alternative treatment center operations and permitting.

#### **CURRENT VERSION OF TEXT**

As introduced.



**AN ACT** concerning medical marijuana and revising and supplementing P.L.2009, c.307.

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

- 1. Section 2 of P.L.2009, c.307 (C.24:6I-2) is amended to read as follows:
  - 2. The Legislature finds and declares that:
- a. Modern medical research has discovered a beneficial use for marijuana in treating or alleviating the pain or other symptoms associated with certain [debilitating] <u>qualifying</u> medical conditions, as found by the National Academy of Sciences' Institute of Medicine in March 1999;
- b. According to the U.S. Sentencing Commission and the Federal Bureau of Investigation, 99 out of every 100 marijuana arrests in the country are made under state law, rather than under federal law. Consequently, changing state law will have the practical effect of protecting from arrest the vast majority of seriously ill people who have a medical need to use marijuana;
- c. Although federal law currently prohibits the use of marijuana, the laws of Alaska, California, Colorado, Hawaii, Maine, Michigan, Montana, Nevada, New Mexico, Oregon, Rhode Island, Vermont, and Washington permit the use of marijuana for medical purposes, and in Arizona doctors are permitted to prescribe marijuana. New Jersey joins this effort for the health and welfare of its citizens;
  - d. States are not required to enforce federal law or prosecute people for engaging in activities prohibited by federal law; therefore, compliance with this act does not put the State of New Jersey in violation of federal law; and
  - e. Compassion dictates that a distinction be made between medical and non-medical uses of marijuana. Hence, the purpose of this act is to protect from arrest, prosecution, property forfeiture, and criminal and other penalties, those patients who use marijuana to alleviate suffering from [debilitating] certain qualifying medical conditions, as well as their physicians, primary caregivers, and those who are authorized to produce marijuana for medical purposes.
- 40 (cf: P.L.2009, c.307, s.2)

42 2. Section 3 of P.L.2009, c.307 (C.24:6I-3) is amended to read 43 as follows:

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

- 1 3. As used in [this act] P.L.2009, c.307 (C.24:6I-1 et al.), 2 P.L.2015, c.158 (C.18A:40-12.22), and P.L., c. (C. 3 (pending before the Legislature as this bill):
- 4 "ATC identification card" means a document issued by the 5 department that identifies a person as an owner, director, board 6 member, principal officer, or employee of an ATC.

"Bona fide physician-patient relationship" means a relationship in which the physician has ongoing responsibility for the assessment, care, and treatment of a patient's [debilitating] qualifying medical condition.

["Certification" means a statement signed by a physician with whom a qualifying patient has a bona fide physician-patient relationship, which attests to the physician's authorization for the patient to apply for registration for the medical use of marijuana.

15 "Central region" means the counties of Hunterdon, Middlesex, 16 Mercer, Monmouth, Ocean, Somerset, and Union.

"Commissioner" means the Commissioner of Health.

- 18 "Common ownership or control" means:

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- 19 (1) between two for-profit entities, the same individuals or 20 entities own and control more than 50 percent of both entities;
  - (2) between a nonprofit entity and a for-profit entity, a majority of the directors, trustees, or members of the governing body of the nonprofit entity directly or indirectly own and control more than 50 percent of the for-profit entity; and
  - (3) between two nonprofit entities, the same directors, trustees, or governing body members comprise a majority of the voting directors, trustees, or governing body members of both nonprofits.
  - "Cultivate" means possessing, planting, propagating, cultivating, growing, harvesting, processing, labeling, manufacturing, compounding, and storing medical marijuana consistent with P.L.2009, c.307 (C.24:6I-1 et al.).
    - ["Debilitating medical condition" means:
  - (1) one of the following conditions, if resistant to conventional medical therapy: seizure disorder, including epilepsy; intractable skeletal muscular spasticity; post-traumatic stress disorder; or glaucoma;
  - (2) one of the following conditions, if severe or chronic pain, severe nausea or vomiting, cachexia, or wasting syndrome results from the condition or treatment thereof: positive status for human immunodeficiency virus; acquired immune deficiency syndrome; or
- 42 (3) amyotrophic lateral sclerosis, multiple sclerosis, terminal 43 cancer, muscular dystrophy, or inflammatory bowel disease, 44 including Crohn's disease;
- 45 (4) terminal illness, if the physician has determined a prognosis 46 of less than 12 months of life; or

1 (5) any other medical condition or its treatment that is approved 2 by the department by regulation.

"Department" means the Department of Health.

"Immediate family" means the spouse, child, sibling, or parent of an individual, and shall include the siblings and parents of the individual's spouse and the spouse of the individual's child.

"Interest holder" means a direct or indirect owner, part owner, investor, lender, stockholder, officer, director, partner, or member of any corporation, partnership, limited liability company, limited liability partnership, employee cooperative, association, nonprofit corporation, business entity, or any other person with a direct ownership interest or indirect interest through intermediary business entities or other structures in an alternative treatment center.

"Marijuana" has the meaning given in section 2 of the "New Jersey Controlled Dangerous Substances Act," P.L.1970, c.226 (C.24:21-2).

"Medical marijuana alternative treatment center" or "alternative treatment center" or "ATC" means an organization [approved] issued a permit by the department to [perform activities necessary to provide registered qualifying patients with usable marijuana and related paraphernalia in accordance with the provisions of this act] operate as a medical marijuana cultivator-processor or as a medical marijuana dispensary. This term shall include the organization's officers, directors, board members, and employees.

"Medical marijuana cultivator-processor" means an organization holding a permit issued by the department that authorizes the organization to: possess and cultivate marijuana; produce, manufacture, or otherwise create marijuana-infused and marijuana-derived products; and deliver, transfer, transport, distribute, supply, and sell medical marijuana, marijuana-infused products, marijuana-derived products, and related supplies to medical marijuana dispensaries. A medical marijuana cultivator-processor permit shall not authorize the permit holder to deliver, transfer, transport, distribute, supply, sell, or dispense medical marijuana, marijuana-infused products, marijuana-derived products, or related supplies to qualifying patients or their primary caregivers.

"Medical marijuana dispensary" means an organization issued a permit by the department that authorizes the organization to obtain medical marijuana, marijuana-infused products, and marijuana derived products from a medical marijuana cultivator-processor, and to possess, display, deliver, transfer, transport, distribute, supply, sell, and dispense medical marijuana, marijuana-infused products, marijuana-derived products, and related supplies to qualifying patients and their primary caregivers. A medical marijuana dispensary permit shall not authorize the permit holder to cultivate marijuana or to manufacture or process marijuana-infused or marijuana-derived products.

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

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

"Northern region" means the counties of Bergen, Essex, Hudson,
 Morris, Passaic, Sussex, and Warren.

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

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

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

a. is at least 18 years old;

- b. has agreed to assist with a registered qualifying patient's medical use of marijuana, is not currently serving as primary caregiver for **[**another**]** more than one other qualifying patient, and is not the qualifying patient's physician;
- c. subject to the provisions of paragraph (2) of section 4 of P.L.2009, c.307 (C.24:6I-4), has never been convicted of possession or sale of a controlled dangerous substance, unless such conviction occurred after the effective date of [this act] P.L.2009, c.307 (C.24:6I-1 et al.) and was for a violation of federal law related to possession or sale of marijuana that is authorized under [this act] P.L.2009, c.307 (C.24:6I-1 et al.), P.L.2015, c.158 (C.18A:40-12.22), or P.L. , c. (C. ) (pending before the Legislature as this bill);
- d. has registered with the department pursuant to section 4 of **[**this act**]** P.L.2009, c.307 (C.24:6I-4), and, if the individual is not an immediate family member of the patient, has satisfied the criminal history record background check requirement of section 4 of **[**this act**]** P.L.2009, c.307 (C.24:6I-4); and
- e. has been designated as primary caregiver on the qualifying patient's application or renewal for a registry identification card or in other written notification to the department.

"Qualifying medical condition" means any medical condition
 diagnosed by a physician, including the symptoms of the condition
 and any symptoms resulting from any treatment for the condition,

which the physician determines may be treated using medical marijuana.

"Qualifying patient" or "patient" means a resident of the State who has been [provided with a certification] authorized for the medical use of marijuana by a physician pursuant to a bona fide physician-patient relationship.

"Region" means the northern region, the central region, or the southern region, as defined in this section.

"Registry identification card" means a document issued by the department that identifies a person as a registered qualifying patient or primary caregiver.

"Southern region" means the counties of Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, and Salem.

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

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

- 3. Section 4 of P.L.2009, c.307 (C.24:6I-4) is amended to read as follows:
- 4. a. The department shall establish a registry of qualifying patients and their primary caregivers, and shall issue a registry identification card, which shall be valid for two years, to a qualifying patient and primary caregiver, if applicable, who submits the following, in accordance with regulations adopted by the department:
- (1) a **[**certification that meets the requirements of section 5 of this act **]** documentation of a physician's authorization for the medical use of marijuana;
- (2) an application or renewal fee, which may be based on a sliding scale as determined by the commissioner; except that no application or renewal fee shall apply in the case of an immediate family member of the patient who serves as primary caregiver to the patient. In all other cases, the application and renewal fee shall not exceed \$10 for patients who are indigent and \$50 for all other cardholders;
- (3) the name, address, and date of birth of the patient and caregiver, as applicable; and
- (4) the name, address, and telephone number of the patient's physician.
- b. Before issuing a registry identification card, the department shall verify the information contained in the application or renewal form submitted pursuant to this section. In the case of a primary caregiver who is not an immediate family member of the patient, the department shall provisionally approve an application pending the results of a criminal history record background check, if the caregiver otherwise meets the requirements of [this act] P.L.2009, c.307 (C.24:6I-1 et al.). The department shall approve or deny an

1 application or renewal within 30 days of receipt of the completed 2 application or renewal, and shall issue a registry identification card 3 within five days of approving the application or renewal. The 4 department may deny an application or renewal only if the applicant 5 fails to provide the information required pursuant to this section, or 6 if the department determines that the information was incorrect or 7 falsified or does not meet the requirements of [this act] P.L.2009, 8 c.307 (C.24:6I-1 et al.). Denial of an application shall be a final 9 agency decision, subject to review by the Superior Court, Appellate 10 Division.

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c. (1) The commissioner shall require each applicant seeking to serve as a primary caregiver who is not an immediate family member of the patient to undergo a criminal history record background check. The commissioner is authorized to exchange fingerprint data with and receive criminal history record background information from the Division of State Police and the Federal Bureau of Investigation consistent with the provisions of applicable federal and State laws, rules, and regulations. The Division of State Police shall forward criminal history record background information to the commissioner in a timely manner when requested pursuant to the provisions of this section.

An applicant seeking to serve as a primary caregiver who is not an immediate family member of the patient shall submit to being fingerprinted in accordance with applicable State and federal laws, rules, and regulations. No check of criminal history record background information shall be performed pursuant to this section unless the applicant has furnished [his] the applicant's written consent to that check. An applicant who is not an immediate family member of the patient who refuses to consent to, or cooperate in, the securing of a check of criminal history record background information shall not be considered for inclusion in the registry as a primary caregiver or issuance of an identification card. applicant shall bear the cost for the criminal history record background check, including all costs of administering and processing the check. No criminal history record background check shall be required of an applicant to be a primary caregiver if the applicant is an immediate family member of the patient.

(2) The commissioner shall not approve an applicant seeking to serve as a primary caregiver who is not an immediate family member of the patient if the criminal history record background information of the applicant reveals a disqualifying conviction. For the purposes of this section, a disqualifying conviction shall mean a conviction of a crime involving any controlled dangerous substance or controlled substance analog as set forth in chapter 35 of Title 2C of the New Jersey Statutes except [paragraph]: subparagraph (b) of paragraph (10) of subsection b. of N.J.S.2C:35-5, paragraphs (11) or (12) of subsection b. of N.J.S.2C:35-5, or paragraphs (3) or (4) of

subsection a. of N.J.S.2C:35-10, or any similar law of the United States or of any other state.

- (3) Upon receipt of the criminal history record background information from the Division of State Police and the Federal Bureau of Investigation, the commissioner shall provide written notification to the applicant of [his] the applicant's qualification or disqualification for serving as a primary caregiver.
- If the applicant is disqualified because of a disqualifying conviction pursuant to the provisions of this section, the conviction that constitutes the basis for the disqualification shall be identified in the written notice.
- (4) The Division of State Police shall promptly notify the commissioner in the event that an individual who was the subject of a criminal history record background check conducted pursuant to this section is convicted of a crime or offense in this State after the date the background check was performed. Upon receipt of that notification, the commissioner shall make a determination regarding the continued eligibility of the applicant to serve as a primary caregiver.
- (5) Notwithstanding the provisions of subsection b. of this section to the contrary, no applicant shall be disqualified from serving as a registered primary caregiver on the basis of any conviction disclosed by a criminal history record background check conducted pursuant to this section if the individual has affirmatively demonstrated to the commissioner clear and convincing evidence of rehabilitation. In determining whether clear and convincing evidence of rehabilitation has been demonstrated, the following factors shall be considered:
- (a) the nature and responsibility of the position which the convicted individual would hold, has held, or currently holds;
  - (b) the nature and seriousness of the crime or offense;
- (c) the circumstances under which the crime or offense occurred;
  - (d) the date of the crime or offense;
- (e) the age of the individual when the crime or offense was committed;
- (f) whether the crime or offense was an isolated or repeated incident;
- (g) any social conditions which may have contributed to the commission of the crime or offense; and
- (h) any evidence of rehabilitation, including good conduct in prison or in the community, counseling or psychiatric treatment received, acquisition of additional academic or vocational schooling, successful participation in correctional work-release programs, or the recommendation of those who have had the individual under their supervision.
- d. A registry identification card shall contain the following information:

- 1 (1) the name, address, and date of birth of the patient and 2 primary caregiver, if applicable;
  - (2) the expiration date of the registry identification card;
  - (3) photo identification of the cardholder; and

- (4) such other information that the department may specify by regulation.
- e. (1) A patient who has been issued a registry identification card shall notify the department of any change in the patient's name, address, or physician or change in status of the patient's [debilitating] qualifying medical condition, within 10 days of such change, or the registry identification card shall be deemed null and void.
- (2) A primary caregiver who has been issued a registry identification card shall notify the department of any change in the caregiver's name or address within 10 days of such change, or the registry identification card shall be deemed null and void.
- f. The department shall maintain a confidential list of the persons to whom it has issued registry identification cards. Individual names and other identifying information on the list, and information contained in any application form, or accompanying or supporting document shall be confidential, and shall not be considered a public record under P.L.1963, c.73 (C.47:1A-1 et seq.) or P.L.2001, c.404 (C.47:1A-5 et al.), and shall not be disclosed except to:
- (1) authorized employees of the department and the Division of Consumer Affairs in the Department of Law and Public Safety as necessary to perform official duties of the department and the division, as applicable; and
- (2) authorized employees of State or local law enforcement agencies, only as necessary to verify that a person who is engaged in the suspected or alleged medical use of marijuana is lawfully in possession of a registry identification card.
- g. Applying for or receiving a registry card does not constitute a waiver of the qualifying patient's patient-physician privilege. (cf: P.L.2009, c.307, s.4)

4. (New section) a. A physician shall not be required to enroll in any medical marijuana physician registry or undergo any additional registration process as a condition of authorizing patients

for the medical use of marijuana.

b. When authorizing a qualifying patient who is a minor for the medical use of marijuana, if the treating physician is not trained in the care of pediatric patients, the treating physician shall, prior to authorizing the patient for the medical use of marijuana, obtain written confirmation from a physician trained in the care of pediatric patients establishing, in the physician's professional opinion, and following an examination of the minor patient or review of the minor patient's medical record, that the minor patient

is likely to receive therapeutic or palliative benefits from the medical use of marijuana to treat or alleviate symptoms associated with the patient's qualifying medical condition. If the treating physician is trained in the care of pediatric patients, no additional written confirmation from any other physician shall be required as a condition of authorizing the patient for the medical use of marijuana.

- 5. (New section) a. Except as provided in subsection b. of this section, no physician who has authorized a patient for the medical use of marijuana pursuant to P.L.2009, c.307 (C.24:6I-1 et al.) within the past 90 days, and no member of such physician's immediate family, shall be an interest holder in, or receive any form of direct or indirect compensation from, any alternative treatment center.
- b. Nothing in subsection a. of this section shall be construed to prevent a physician from serving on the medical advisory board of an alternative treatment center established pursuant to section 9 of P.L., c. (C.) (pending before the Legislature as this bill) and receiving a reasonable stipend for such service, provided that:
- (1) the stipend does not exceed the stipend paid to any other member of the medical advisory board for serving on the board; and
- (2) the amount of the stipend is not based on patient volumes at the alternative treatment center or on the number of authorizations for the medical use of marijuana the physician issues pursuant to P.L.2009, c.307 (C.24:6I-1 et al.).
- c. A physician, or an immediate family member of a physician, who applies for an ATC identification card shall certify that the physician has not authorized a patient for the medical use of marijuana pursuant to P.L.2009, c.307 (C.24:6I-1 et al.) within the 90 days immediately preceding the date of the application.
- d. A person who violates subsection a. of this section shall be guilty of a crime of the fourth degree.

- 6. Section 7 of P.L.2009, c.307 (C.24:6I-7) is amended to read as follows:
  - 7. a. The department shall accept applications from entities for permits to operate as alternative treatment centers [, and may charge a reasonable fee for the issuance of a permit under this section]. [The department shall seek to ensure the availability of a sufficient number of] To ensure adequate access to alternative treatment centers throughout the State, [pursuant to need, including at least two] the department shall grant permits to three medical marijuana cultivator-processors and at least nine medical marijuana dispensaries in each [in] of the northern, central, and southern regions of the State, for a total of nine medical marijuana cultivator-processor permits and 27 medical marijuana dispensary permits;

1	this total number of permits shall include the six alternative
2	treatment center permits issued prior to the effective date of P.L.,
3	c. (pending before the Legislature as this bill), which shall
4	constitute six of the medical marijuana cultivator-processor permits
5	and six of the medical marijuana dispensary permits, plus the three
6	medical marijuana cultivator-processor permits and the 21 medical
7	marijuana dispensary permits issued pursuant to section 7 of P.L. ,
8	c. (C. ) (pending before the Legislature as this bill).
9	Thereafter, the department shall periodically evaluate whether the
10	number of medical marijuana cultivator-processors and medical
11	marijuana dispensaries is sufficient to meet the needs of qualifying
12	patients in the State, and, if it determines additional medical
13	marijuana cultivator-processors or medical marijuana dispensaries
14	are needed to meet the needs of qualifying patients, make a request
15	for applications and such additional medical marijuana cultivator-
16	processor permits and medical marijuana dispensary permits as it
17	deems necessary.
18	Commencing 18 months after the effective date of P.L.
19	c. (C. ) (pending before the Legislature as this bill), a medical
<ul><li>20</li><li>21</li></ul>	marijuana dispensary may submit an application to the department for approval to open a satellite dispensary. Any such application
22	shall meet the requirements of subsection k. of section 8 of P.L.
23	c. (C. ) (pending before the Legislature as this bill). The
24	department may reject an application for a satellite dispensary if the
25	department determines the proposed location would be contrary to
26	the interests of ensuring geographic dispersion of medical
27	marijuana dispensaries throughout the State or would not be suited
28	to meeting current patient treatment needs in the proposed region.
29	If a satellite dispensary application is rejected by the department,
30	the medical marijuana dispensary shall be authorized to submit a
31	new application for another location. A medical marijuana
32	dispensary shall have no more than one satellite dispensary.
33	Subject to department approval, a medical marijuana dispensary
34	may close its satellite dispensary or, pursuant to subsection j. of this
35	section, relocate the satellite dispensary to a new location within the
36	same county as the satellite dispensary is located.
37	An initial application for a medical marijuana cultivator-
38	processor permit or a medical marijuana dispensary permit shall
39	meet the application requirements set forth in section 8 of P.L.,
40 41	c. (C. ) (pending before the Legislature as this bill).  An alternative treatment center holding a permit that was issued.
42	An alternative treatment center holding a permit that was issued prior to the effective date of P.L. , c. (pending before the
43	Legislature as this bill) shall be deemed to hold both a medical
<del>4</del> 3	marijuana cultivator-processor permit and a medical marijuana
<del>45</del>	dispensary permit, and shall be authorized to hold both permits
46	concurrently. The first two centers issued a permit in each region
47	shall be nonprofit entities, and centers subsequently issued permits
48	may be nonprofit or for-profit entities <b>]</b>
10	may be nonprofit of for profit entities

S2373 SCUTARI 12 1 No interest holder, or natural person with a direct or indirect 2 interest through intermediary business entities or other structures, in 3 any medical marijuana cultivator-processor, shall own, either in 4 whole or in part, or be directly or indirectly interested in, a medical 5 marijuana dispensary. The foregoing shall not apply to interest 6 holders of a medical marijuana alternative treatment center issued a 7 permit by the department prior to the effective date of 8 P.L., c. (C. ) (pending before the Legislature as this bill). 9 No interest holder, or natural person with a direct or indirect 10 interest through intermediary business entities or other structures, in 11 any medical marijuana dispensary, shall own, either in whole or in 12 part, or be directly or indirectly interested in, a medical marijuana 13 cultivator-processor. The foregoing shall not apply to interest 14 holders of a medical marijuana alternative treatment center issued a 15 permit by the department prior to the effective date of P.L. , 16 c. (C. ) (pending before the Legislature as this bill). 17 No natural person or entity shall hold an interest in more than 18 one medical marijuana cultivator-processor or more than one 19 medical marijuana dispensary at any time, except that an interest 20 holder in a medical marijuana alternative treatment center that was 21 issued a permit by the department prior to the effective date of 22 P.L., c. (C. ) (pending before the Legislature as this bill) 23 may concurrently hold up to a 15 percent ownership interest in up 24 to one additional medical marijuana alternative treatment center that 25 was issued a permit by the department prior to the effective date of 26 P.L., c. (C. ) (pending before the Legislature as this bill), up 27 to one medical marijuana cultivator-processor, or up to one medical 28 marijuana dispensary; a medical marijuana cultivator-processor may 29 concurrently hold up to a 15 percent ownership interest in up to one

29 concurrently hold up to a 15 percent ownership interest in up to one 30 additional medical marijuana cultivator-processor or up to one 31 medical marijuana alternative treatment center that was issued a 32 permit by the department prior to the effective date of 33 P.L., c. (C.) (pending before the Legislature as this bill);

34 and a medical marijuana dispensary may concurrently hold up to a

35 <u>15 percent ownership interest in up to one additional medical</u>
 36 <u>marijuana dispensary or up to one medical marijuana alternative</u>

treatment center that was issued a permit by the department prior to

treatment center that was issued a permit by the department prior to the effective date of P.L., c. (C. ) (pending before the

39 <u>Legislature as this bill</u>).

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None of the ownership restrictions set forth in this subsection shall be construed to be implicated solely by any person's ownership of less than one percent of the total capitalization of a publicly traded company, provided that the stockholder is not also an employee, officer, or director of the publicly traded company.

[An alternative treatment center] A medical marijuana cultivator-processor shall be authorized to acquire a reasonable initial and ongoing inventory, as determined by the department, of marijuana seeds or seedlings and paraphernalia, possess, cultivate,

1 plant, grow, harvest, process, [display,] and manufacture medical 2 marijuana and marijuana-infused and marijuana-derived products, 3 and deliver, transfer, transport, distribute, supply, sell, or dispense 4 medical marijuana, [or] marijuana-infused products, marijuana-5 derived products, and related supplies to any medical marijuana 6 dispensary in the State. If approved by the department, a medical 7 marijuana cultivator-processor may operate, within the scope of its 8 permit, from more than one physical location. Medical marijuana 9 dispensaries may purchase or acquire medical marijuana, 10 marijuana-infused and marijuana-derived products, paraphernalia, 11 and related supplies from any medical marijuana cultivator-12 processor in the State, and distribute, supply, sell, or dispense 13 marijuana, marijuana-infused products, marijuana-derived products, 14 and related supplies to qualifying patients or their primary 15 caregivers who are registered with the department pursuant to 16 section 4 of [this act] P.L.2009, c.307 (C.24:6I-4). [An alternative 17 treatment center A medical marijuana cultivator-producer shall not 18 be limited in the number of strains of medical marijuana cultivated 19 [, and] or the number of products manufactured. A medical 20 marijuana cultivator-producer may package, and a medical 21 marijuana dispensary may directly dispense [marijuana] to 22 qualifying patients and their primary caregivers, medical marijuana 23 in dried form, oral lozenges, topical formulations, transdermal form, 24 sublingual form, tincture form, or edible form, or any other form as 25 authorized by the commissioner. Edible form shall include tablets, 26 capsules, drops or syrups, and any other form as authorized by the 27 commissioner. [Edible forms shall be available only to qualifying 28 patients who are minors. 29

Applicants that choose to apply for authorization as **[**nonprofit**]** alternative treatment centers with nonprofit status shall be subject to all applicable State laws governing nonprofit entities, but need not be recognized as a 501(c)(3) organization by the federal Internal Revenue Service.

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- b. The department shall require that an applicant provide such information as the department determines to be necessary pursuant to regulations adopted pursuant to [this act] P.L.2009, c.307 (C.24:6I-1 et al.) and may, in its discretion, require any applicant to submit a personal history disclosure and conduct financial due diligence on any person or entity providing \$100,000 or more in financial backing to an applicant.
- c. A person who has been convicted of a crime involving any controlled dangerous substance or controlled substance analog as set forth in chapter 35 of Title 2C of the New Jersey Statutes except [paragraph]: subparagraph (b) of paragraph (10) of subsection b. of N.J.S.2C:35-5, paragraphs (11) or (12) of subsection b. of N.J.S.2C:35-5, or paragraphs (3) or (4) of subsection a. of N.J.S.2C:35-10, or any similar law of the United States or any other

- 1 state shall not be issued a permit to operate as an alternative
- 2 treatment center or be **[**a director, officer, or employee of an
- 3 alternative treatment center issued an ATC identification card,
- 4 unless such conviction occurred after the effective date of [this act]
- 5 P.L.2009, c.307 (C.24:6I-1 et al.) and was for a violation of federal
- 6 law relating to possession or sale of marijuana for conduct that is
- 7 authorized under [this act] P.L.2009, c.307 (C.24:6I-1 et al.),
- 8 P.L.2015, c.158 (C.18A:40-12.22), or P.L. , c. (C. ) (pending
- 9 <u>before the Legislature as this bill)</u>.

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10 d. (1) The commissioner shall require each applicant seeking 11 a permit to operate as an alternative treatment center to undergo a 12 criminal history record background check. For purposes of this section, the term "applicant" shall include any applicant for an ATC 13 14 identification card authorizing the individual to be an owner, director, board member, principal officer, or employee of an 15 16 alternative treatment center. The commissioner is authorized to 17 exchange 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. 21 Division of State Police shall forward criminal history record 22 background information to the commissioner in a timely manner

when requested pursuant to the provisions of this section.

- An applicant shall submit to being fingerprinted in accordance with applicable State and federal laws, rules, and regulations. No check of criminal history record background information shall be performed pursuant to this section unless the applicant has furnished [his] written consent to that check. An applicant who refuses to consent to, or cooperate in, the securing of a check of criminal history record background information shall not be considered for [a permit to operate, or authorization to be employed at, an alternative treatment center] issuance of an ATC identification card. An applicant shall bear the cost for the criminal history record background check, including all costs of administering and processing the check.
- (2) The commissioner shall not approve an applicant for **[**a permit to operate, or authorization to be employed at, an alternative treatment center **]** issuance of an ATC identification card if the criminal history record background information of the applicant reveals a disqualifying conviction as set forth in subsection c. of this section.
- 42 (3) Upon receipt of the criminal history record background 43 information from the Division of State Police and the Federal 44 Bureau of Investigation, the commissioner shall provide written 45 notification to the applicant of [his] the applicant's qualification 46 for or disqualification for [a permit to operate or] issuance of an 47 ATC identification card authorizing the individual to be [a] an

owner, director, <u>board member, principal</u> officer, or employee of an
 alternative treatment center, <u>as appropriate</u>.

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

- (4) The Division of State Police shall promptly notify the commissioner in the event that an individual who was the subject of a criminal history record background check conducted pursuant to this section is convicted of a crime or offense in this State after the date the background check was performed. Upon receipt of that notification, the commissioner shall make a determination regarding the continued eligibility to operate or be **[a]** an owner, director, board member, principal officer, or employee of an alternative treatment center.
- (5) Notwithstanding the provisions of subsection b. of this section to the contrary, the commissioner may offer [provisional authority for] an applicant to be an employee of an alternative treatment center a provisional ATC identification card, which shall be valid for a period not to exceed three months, if the applicant submits to the commissioner a sworn statement attesting that the [person] applicant has not been convicted of any disqualifying conviction pursuant to this section.
- (6) Notwithstanding the provisions of subsection b. of this section to the contrary, no employee of an alternative treatment center shall be disqualified <u>from issuance of an ATC identification card</u> on the basis of any conviction disclosed by a criminal history record background check conducted pursuant to this section if the individual has affirmatively demonstrated to the commissioner clear and convincing evidence of rehabilitation. In determining whether clear and convincing evidence of rehabilitation has been demonstrated, the following factors shall be considered:
- (a) the nature and responsibility of the position which the convicted individual would hold, has held, or currently holds;
  - (b) the nature and seriousness of the crime or offense;
- (c) the circumstances under which the crime or offense occurred;
  - (d) the date of the crime or offense;
  - (e) the age of the individual when the crime or offense was committed;
- (f) whether the crime or offense was an isolated or repeated incident;
- (g) any social conditions which may have contributed to the commission of the crime or offense; and
- 45 (h) any evidence of rehabilitation, including good conduct in 46 prison or in the community, counseling or psychiatric treatment 47 received, acquisition of additional academic or vocational 48 schooling, successful participation in correctional work-release

programs, or the recommendation of those who have had the individual under their supervision.

- e. The department shall issue **[**a permit to a person to operate as an alternative treatment center permit to an applicant if the department finds that issuing such a permit would be consistent with the purposes of [this act] P.L.2009, c.307 (C.24:6I-1 et al.) and the requirements of this section are met and the department has verified the information contained in the application. An initial permit to operate an alternative treatment center issued pursuant to this subsection shall be valid for three years, and thereafter shall be renewable biennially. The department shall approve or deny an application within 60 days after receipt of a completed application. The denial of an application shall be considered a final agency decision, subject to review by the Appellate Division of the Superior Court. The department may suspend or revoke a permit to operate as an alternative treatment center for cause, which shall be subject to review by the Appellate Division of the Superior Court.
- f. A person [who has been] or entity issued a medical marijuana cultivator-processor permit pursuant to this section shall display the permit at the premises of the [alternative treatment center] medical marijuana cultivator-processor facility at all times when marijuana is being produced, [or], cultivated, processed, or manufactured, and a person or entity issued a medical marijuana dispensary permit pursuant to this section shall display the permit on the premises of the medical marijuana dispensary at all times when medical marijuana is being dispensed to a registered qualifying patient or the patient's primary caregiver. An individual who has been issued an ATC identification card shall have the card on the cardholder's person at all times that the individual is on the premises of an alternative treatment center.
- g. An alternative treatment center shall report any change in information to the department not later than 10 days after such change, or the permit shall be deemed null and void.
- h. [An alternative treatment center] A medical marijuana cultivator-processor may charge a medical marijuana dispensary for the reasonable costs associated with the production, cultivation, processing, and manufacture of medical marijuana and marijuana-infused and marijuana-derived products, and a medical marijuana dispensary may charge a registered qualifying patient or primary caregiver for the reasonable costs associated with the [production and] distribution of medical marijuana [for] to the cardholder.
- i. The commissioner shall adopt regulations to:
- (1) require such written documentation of each delivery of marijuana to, and pickup of marijuana for, a registered qualifying patient, including the date and amount dispensed, to be maintained in the records of the [alternative treatment center] medical marijuana dispensary, as the commissioner determines necessary to

ensure effective documentation of the operations of each laternative treatment center medical marijuana dispensary;

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- (2) monitor, oversee, and investigate all activities performed by an alternative treatment center; and
- (3) ensure adequate security of all facilities 24 hours per day, including production and retail locations, and security of all delivery methods to registered qualifying patients.
- 8 j. A medical marijuana cultivator-processor may apply to the 9 department for approval to relocate to another location within the 10 same region, and a medical marijuana dispensary may apply to the department for approval to relocate the medical marijuana 11 12 dispensary or a satellite dispensary, if any, to another location within the same county. The department may approve an 13 14 application for relocation if the department finds the relocation 15 would be consistent with the purposes of P.L.2009, c.307 (C.24:6I-16 1 et al.). The denial of an application to relocate a medical 17 marijuana cultivator-processor, medical marijuana dispensary, or 18 satellite dispensary shall be considered a final agency decision, 19 subject to review by the Appellate Division of the Superior Court.
  - k. (1) A medical marijuana cultivator-processor or medical marijuana dispensary may apply to the department for approval to sell or transfer its permit to another entity. The department shall not approve the sale or transfer of a medical marijuana cultivator processor or medical marijuana dispensary permit until each applicant at the entity applying to purchase or receive the transfer of the permit undergoes a criminal history record background check pursuant to subsection d. of this section, the department finds that the sale or transfer of the permit would be consistent with the purposes of P.L.2009, c.307 (C.24:6I-1 et al.), the requirements of this section are met, and the department has verified the information contained in the application. The department shall approve or deny an application within 90 days after receipt of a completed application. The denial of an application to sell or transfer a medical marijuana cultivator processor or medical marijuana dispensary permit shall be considered a final agency decision, subject to review by the Appellate Division of the Superior Court. The sale or transfer of a permit pursuant to this subsection shall not constitute authorization to relocate the permitted facility unless the entity purchasing or receiving transfer of the permit additionally receives approval for the relocation from the department pursuant to subsection j. of this section.
  - (2) If a nonprofit medical marijuana cultivator processor or medical marijuana dispensary proposes to sell or transfer its permit to a for-profit entity, its board of directors may proceed with the sale or transfer upon receiving approval for the sale or transfer from the department pursuant to paragraph (1) of this subsection, and, except as provided in paragraph (3) of this subsection, after obtaining an independent appraisal for the fair market value of the

- 1 permit. The sale or transfer of the permit shall be consistent with
- 2 the requirements of the "New Jersey Nonprofit Corporation Act,"
- 3 N.J.S.15A:1-1 et seq. The proceeds of the sale or transfer,
- 4 <u>following satisfaction of the obligations of the medical marijuana</u>
- 5 <u>cultivator-processor or medical marijuana dispensary, shall be</u>
- 6 retained or expended in a manner consistent with the requirements
- of the "New Jersey Nonprofit Corporation Act," N.J.S.15A:1-1 et
- 8 seq., or until the organization is lawfully wound down or dissolved.
- 9 <u>If a nonprofit medical marijuana cultivator processor or medical</u>
- 10 marijuana dispensary seeks to sell or transfer its permit to a for-
- profit entity with which it shares common ownership or control, the sale or transfer shall not proceed unless at least one disinterested
- sale or transfer shall not proceed unless at least one disinterested
- director or trustee approves the sale or transfer in accordance with the requirements of the "New Jersey Nonprofit Corporation Act,"
- 15 N.J.S.15A:1-1 et seq.
- 16 (3) In the case of a nonprofit alternative treatment center that
- 17 was issued a permit prior to the effective date of P.L., c. (C.)
- 18 (pending before the Legislature as this bill), in lieu of obtaining an
- independent appraisal of the fair market value of the alternative
   treatment center's medical marijuana cultivator-processor or
- 21 medical marijuana dispensary permit as required under paragraph
- 22 (2) of this subsection, upon receiving approval for the sale from the
- 23 <u>department pursuant to paragraph (1) of this subsection, a nonprofit</u>
- 24 <u>alternative treatment center that was issued a permit prior to the</u>
- 25 <u>effective date of P.L.</u> , c. (C. ) (pending before the
- 26 <u>Legislature as this bill) may, on a single occasion and no later than</u>
- one year after the effective date of P.L., c. (C.) (pending before the Legislature as this bill), elect to pay the department a fee
- before the Legislature as this bill), elect to pay the department a fee of \$300,000 and sell or transfer its medical marijuana cultivator
- 30 processor permit or medical marijuana dispensary permit for a sum
- 31 that satisfies its outstanding obligations.
- 32 <u>I. The maximum fees that may be charged in connection with</u>
- an alternative treatment center permit shall be as follows:
- 34 (1) for issuance of an initial three-year permit or biennial 35 renewal of an existing permit, \$40,000;
- 36 (2) for authorization to relocate a medical marijuana cultivator-
- 37 processor to a new location within the same region, or for
- 38 <u>authorization to relocate a medical marijuana dispensary or satellite</u>
- 39 <u>dispensary to another location within the same county, \$20,000;</u>
  - (3) for a permit to open a satellite dispensary, \$20,000; and
- 41 (4) except as otherwise provided in paragraph (3) of subsection
- 42 <u>k. of this section, to sell or transfer an alternative treatment center</u>
- 43 permit, \$150,000.
- 44 (cf: P.L.2013, c.160, s.2)

- 7. (New section) The department shall begin accepting and processing applications for three additional cultivator-processors
- 48 and 21 additional medical marijuana dispensaries no later than 90

days after the effective date of P.L., c. (C.) (pending before the Legislature as this bill).

The department shall make a determination as to a permit application within 90 days after receiving the application, and shall issue an initial permit to an approved applicant immediately upon collection of the permit fee, unless the department finds the applicant is not implementing the plans, procedures, protocols, actions, or other measures set forth in the applicant's permit application submitted pursuant to section 8 of P.L. , c. (C. ) (pending before the Legislature as this bill), or is otherwise not in compliance with the requirements of P.L.2009, c.307 (C.24:6I-1 et al.), in which case the department shall issue the permit to the next highest scoring applicant in the same region that is in compliance with the applicant's permit application and the requirements of P.L.2009, c.307 (C.24:6I-1 et al.).

- 8. (New section) a. Each application for an initial three year permit to operate a medical marijuana cultivator processor or medical marijuana dispensary, and for biennial renewal of such permit, shall be submitted to the department. A separate application shall be required for each location at which an applicant seeks to operate. Renewal applications shall be submitted to the department no later than 90 days before the date the current permit will expire.
- b. An initial medical marijuana cultivator-processor or medical marijuana dispensary permit application shall be evaluated and scored on a 100 point scale, consistent with the requirements of subsections c. and d. of this section, plus any bonus points awarded pursuant to subsection e. of this section.
- c. In addition to any points awarded for an initial application for a medical marijuana cultivator-processor permit or a medical marijuana dispensary permit pursuant to subsection d. of this section and any bonus points awarded pursuant to subsection e. of this section, up to 21 points may be awarded for the summary of the applicant's operating plan, excluding safety and security criteria:
- (1) In the case of an applicant for a medical marijuana cultivator-processor permit, the operating plan summary shall include a written description, of up to 1,000 words per topic, concerning the applicant's qualifications for, experience in, and knowledge of each of the following topics:
- (a) State-licensed cultivation of medical marijuana and manufacture of marijuana products using appropriate extraction methods;
- (b) conventional horticulture or agriculture, familiarity with good agricultural practices, and any relevant certifications or degrees;
- (c) pharmaceutical manufacturing, good manufacturing practices, quality control, and quality assurance;
  - (d) recall plans;

- 1 (e) packaging and labeling;
- 2 (f) inventory control and tracking software or systems for the production of medical marijuana;
- 4 (g) analytical chemistry and testing of marijuana and marijuana-5 infused or marijuana-derived products and formulations;
  - (h) water management practices;
- 7 (i) odor mitigation practices;

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- (j) onsite and offsite recordkeeping;
- (k) strain variety and plant genetics;
- 10 (l) pest control and disease management practices, including plans for the use of pesticides, nutrients, and additives;
  - (m) waste disposal plans; and
- (n) compliance with applicable laws and regulations.
  - (2) In the case of an applicant for a medical marijuana dispensary permit, the operating plan summary shall include a written description, of up 1,000 words per topic, concerning the applicant's qualifications for, experience in, and knowledge of each of the following topics:
- 19 (a) State-licensed dispensation of medical marijuana to 20 qualifying patients;
- 21 (b) healthcare, medicine, and treatment of patients with 22 debilitating medical conditions;
  - (c) marijuana product evaluation procedures;
- 24 (d) recall plans;
- (e) packaging and labeling;
- 26 (f) inventory control and point-of-sale software or systems for 27 the sale of medical marijuana;
  - (g) patient counseling procedures;
- 29 (h) the routes of administration, strains, varieties, and 30 cannabinoid profiles of medical marijuana products;
  - (i) odor mitigation practices;
  - (i) onsite and offsite recordkeeping;
- 33 (k) the composition of the applicant's medical advisory board, if 34 any;
- 35 (1) compliance with State and federal patient privacy rules;
- 36 (m) waste disposal plans; and
- 37 (n) compliance with applicable laws and regulations.
- d. In addition to any points awarded for an operating plan summary submitted pursuant to subsection c. of this section and any bonus points awarded pursuant to subsection e. of this section, up 79 points may be awarded for an initial application for a medical marijuana cultivator-processor permit or a medical marijuana dispensary permit, as follows:
- 44 (1) Up to four points may be awarded for the applicant's environmental impact plan, which shall not exceed five pages.
- 46 (2) Up to 7.5 points may be awarded for the summary of the 47 applicant's safety and security plans and procedures, which shall 48 include descriptions of the following:

(a) plans for the use of security personnel;

- (b) the experience or qualifications of existing security personnel;
- (c) security and surveillance features, including descriptions of any alarm systems, video surveillance systems, and access and visitor management systems, along with drawings identifying the proposed locations for surveillance cameras and other security features;
- (d) plans for the storage of medical marijuana and medical marijuana products, including any safes, vaults, and climate control systems that will be utilized for this purpose;
  - (e) a diversion prevention plan;
  - (f) an emergency management plan;
- (g) procedures for screening, monitoring, and performing criminal history record background checks of employees;
- (h) cybersecurity procedures, including, in the case of an applicant for a medical marijuana dispensary permit, procedures for collecting, processing, and storing patient data, and the applicant's familiarity with State and federal privacy laws;
- (i) workplace safety plans and the applicant's familiarity with federal Occupational Safety and Health Administration regulations;
- (j) the applicant's history of workers' compensation claims and safety assessments;
  - (k) procedures for reporting adverse events; and
  - (l) a sanitation practices plan.
- (3) Up to 15 total points may be awarded for the summary of the applicant's business experience, subject to the following requirements:
- (a) up to six points may be awarded for the description of the applicant's experience operating businesses in highly-regulated industries;
- (b) up to six points may be awarded for a description of the applicant's experience in operating alternative treatment centers and related medical marijuana production and dispensation entities under the laws of New Jersey or any other state; and
- (c) up to three points may be awarded for the applicant's plan, which shall not exceed three pages, to comply with and mitigate the effects of 26 U.S.C. s.280E on marijuana businesses, and for evidence that the applicant is not in arrears with respect to any tax obligation to the State.

In evaluating the experience described under subparagraphs (a) and (b) of this paragraph, the department shall afford the greatest weight to the experience of the applicant itself, controlling owners, and entities with common ownership or control with the applicant; followed by the experience of those with a 15 percent or greater ownership interest in the applicant's organization; followed by interest holders in the applicant's organization; followed by other

officers, directors, and bona fide full-time employees of the applicant as of the submission date of the application.

- (4) Up to 15 points may be awarded based on a description of the proposed location for the applicant's alternative treatment center site, which shall be awarded as follows:
- (a) up to seven points may be awarded for a description of the proposed location, the surrounding area, and the suitability or advantages of the proposed location, along with a floor plan and optional renderings or architectural or engineering plans;
- (b) four points may be awarded for submitting zoning approvals for the proposed location, which shall consist of a letter or affidavit from appropriate municipal officials that the location will conform to municipal zoning requirements allowing for the cultivation, processing, or dispensing of medical marijuana, marijuana-infused and marijuana-derived products, and related supplies, as appropriate; and
- (c) four points may be awarded for submitting proof of local support for the suitability of the location, which may be demonstrated by a letter from the municipality's highest-ranking official or by a resolution adopted by the municipality's governing body indicating that the intended location is appropriately located or otherwise suitable for the cultivation, processing, or dispensing of medical marijuana, marijuana-infused and marijuana-derived products, and related supplies, as appropriate.

Notwithstanding any other provision of this subsection, an application shall be disqualified from consideration unless it includes documentation demonstrating that the applicant will have final control of the premises upon approval of the application, including, but not limited to, a lease agreement, contract for sale, title, deed, or similar documentation. In addition, if the applicant will lease the premises, the application will be disqualified from consideration unless it includes certification from the landlord that the landlord is aware that the tenant's use of the premises will involve cultivation, processing, or dispensing of medical marijuana and medical marijuana products, as appropriate. An application shall not be disqualified from consideration if the application does not include the materials described in subparagraphs (b) or (c) of this paragraph.

- (5) Up to 15 total points may be awarded in the community impact and social responsibility section of the application, subject to the following requirements:
- (a) up to four points may be awarded for a community impact plan, not to exceed five pages, summarizing how the applicant intends to have a positive impact on the community in which the proposed medical marijuana cultivator-processor or medical marijuana dispensary is to be located, which shall include an economic impact plan, a description of outreach activities, and any

financial assistance or discount plans the applicant will provide to qualifying patients and primary caregivers;

- (b) up to three points may be awarded for a written description of the applicant's record of social responsibility, philanthropy, and ties to the proposed host community, which shall not exceed five pages;
- (c) up to four points may be awarded for a written description of any research the applicant has conducted on the medical efficacy or adverse effects of marijuana use and the applicant's participation in or support of marijuana-related research and educational activities, which shall not exceed three pages; and
- (d) up to four points may be awarded for a written plan, which shall not exceed three pages, describing any research and development regarding the medical efficacy or adverse effects of marijuana, and any marijuana-related educational and outreach activities, the applicant intends to conduct if issued a permit by the department.

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

- (6) Up to 7.5 total points may be awarded for the applicant's workforce development and job creation plan, which may be awarded based on the following criteria:
- (a) up to four points may be awarded for a description of the applicant's workforce development and job creation plan, which may include information on the applicant or its owners' history of job creation and planned job creation at its proposed medical marijuana cultivator-processor or medical marijuana dispensary; education, training, and resources to be made available for employees; any relevant certifications; and an optional diversity plan; and
- (b) 3.5 points shall be awarded to any applicant that has executed a labor peace agreement or card check and neutrality agreement with a collective bargaining unit for the proposed medical marijuana cultivator-processor or medical marijuana dispensary. An applicant that does not submit the information described in this subparagraph shall not be disqualified from consideration.
- (7) Up to 15 total points may be awarded for the description of applicant's business and financial plan:

(a) up to five points may be awarded for an executive summary of the applicant's business plan, which shall not exceed 1,500 words;

- (b) up to five points may be awarded for a demonstration of the applicant's financial ability to implement its business plan, which shall not exceed 10 pages including attachments, and which may include, but shall not be limited to, bank statements, business and individual financial statements, net worth statements, and debt and equity financing statements. An applicant who demonstrates the availability of at least \$500,000 in a bank account in the applicant's name at the time the application is submitted shall be awarded full points under this subparagraph;
- (c) up to five points may be awarded for a description of the applicant's experience complying with guidance pertaining to marijuana issued by the Financial Crimes Enforcement Network under 31 U.S.C. s.5311 et seq., the federal Bank Secrecy Act, which may be demonstrated by submitting letters regarding its banking history from banks or credit unions that certify they are aware of the business activities of the applicant, or entities with common ownership or control of the applicant's organization, in any state where the applicant has operated a business related to medical marijuana. For the purposes of this subparagraph, the department shall consider only bank references involving accounts in the name of the applicant or of an entity with common ownership or control of the applicant's organization. An applicant who does not submit the information described in this subparagraph shall not be disqualified from consideration.
- e. Up to a total of 40 bonus points may be added to the applicant's total score based on the following:
- (1) If any of the applicant's majority or controlling owners were previously approved by the department to serve as an officer, director, principal, or key employee of an alternative treatment center, and the individual served in such capacity at the alternative treatment center for two or more years, the department shall award 10 bonus points, which shall be added to the applicant's total score. No points shall be deducted from the applicant's total score if none of the majority or controlling owners meet the requirements of this paragraph.
- (2) If an applicant can demonstrate that its governance structure includes the involvement of a licensed and accredited school of medicine or osteopathic medicine, a general acute care hospital or ambulatory care facility licensed in New Jersey, or a pharmacy, the department shall award 15 bonus points, which shall be added to the applicant's total score, provided the following conditions are met:
- (a) the school, hospital, facility, or pharmacy has conducted or participated in institutional review board-approved research related to marijuana involving the use of human subjects;

(b) the school, hospital, facility, or pharmacy holds a profit share or ownership interest in the applicant's organization of 10 percent or more; and

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

No points shall be deducted from the applicant's total score if the applicant's governance structure does not include a school, hospital, facility, or pharmacy that meets the requirements of this paragraph.

- (3) If the applicant submits evidence that the applicant, or an entity with common ownership or control with the applicant, has executed a collective bargaining agreement in the cannabis industry that has been in effect for at least six months as of the submission date of the application, the department shall award 15 bonus points, which shall be added to the applicant's total score. No points shall be deducted from the applicant's total score if the applicant has not executed a collective bargaining agreement in the cannabis industry that meets the requirements of this paragraph.
- f. In reviewing a medical marijuana cultivator-processor or medical marijuana dispensary initial permit application, unless the information is otherwise solicited by the department in a specific application question, the department's evaluation of the application shall be limited to the experience and qualifications of the applicant's organization, including any entities with common ownership or control of the applicant's organization, controlling owners or interest holders in the applicant's organization, and the officers, directors, and actual full-time existing employees of the applicant's organization. Responses pertaining to consultants, independent contractors, and prospective or part-time employees of the entity shall not be considered or scored. Each applicant shall certify as to the status of the individuals and entities included in the application.
- g. To the extent possible, the department shall seek to ensure that at least 15 percent of the total number of new medical marijuana dispensary permits issued on or after the effective date of P.L., c. (C.) (pending before the Legislature as this bill) are issued to a qualified applicant that:
- (1) has been certified as a minority business or as a women's business by the Division of Development for Small Businesses and Women's and Minority Businesses in the New Jersey Commerce and Economic Growth Commission pursuant to P.L.1986, c.195 (C.52:27H-21.18 et seq.);
- 44 (2) has been certified as a veteran-owned business by the 45 Department of the Treasury pursuant to P.L.2011, c.147 (C.52:32-46 49 et seq.); or
- 47 (3) is a disabled-veteran business, as defined in section 2 of 48 P.L.2015, c.116 (C.52:32-31.2).

In selecting among applicants who meet these criteria, the Department of Health shall grant a higher preference to applicants with up to two groups in its ownership composition that meet the criteria described in this subsection.

- h. No employee of the department shall have any direct or indirect financial interest in the cultivation, processing, or dispensing of medical marijuana or related paraphernalia, or otherwise receive anything of value from a medical marijuana cultivator-processor or medical marijuana dispensary permit applicant in exchange for reviewing, processing, or making any recommendations with respect to a permit application.
- i. Application materials submitted to the department pursuant to this section not be considered a public record pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.), P.L.2001, c.404 (C.47:1A-5 et al.), or the common law concerning access to public records.
- j. If the department notifies an applicant that it has scored sufficiently high on multiple applications to be awarded more than one medical marijuana cultivator-processor or medical marijuana dispensary permit by the department, the applicant shall notify the department, within seven business days after receiving such notice, as to which permit it will accept. For any permit award declined by an applicant pursuant to this subsection, the department shall, upon receiving notice from the applicant of the declination, award the permit to the applicant with the next highest score on an application for that permit in the same region. If an applicant fails to notify the department as to which permit it will accept, the department shall have the discretion to determine which permit it will award to the applicant, based on the department's determination of Statewide need and the scores awarded to other applications in the affected regions.
- k. Any application submitted by a medical marijuana dispensary to open a satellite dispensary shall include a description of the proposed location for the applicant's satellite dispensary site, including:
- (1) a description of the proposed location, the surrounding area, and the suitability or advantages of the proposed location, along with a floor plan and optional renderings or architectural or engineering plans;
- (2) zoning approvals for the proposed location, which shall consist of a letter or affidavit from appropriate municipal officials that the location will conform to municipal zoning requirements allowing for the dispensing of medical marijuana, marijuana-infused and marijuana-derived products, and related supplies; and
- (3) proof of local support for the suitability of the location, which may be demonstrated by a letter from the municipality's highest-ranking official or by a resolution adopted by the municipality's governing body indicating that the intended location is appropriately located or otherwise suitable for the dispensing of

1 medical marijuana, marijuana-infused and marijuana-derived 2 products, and related supplies.

Notwithstanding any other provision of this subsection, an application shall be disqualified from consideration unless it includes documentation demonstrating that the applicant will have final control of the premises upon approval of the application, including, but not limited to, a lease agreement, contract for sale, title, deed, or similar documentation. In addition, if the applicant will lease the premises, the application will be disqualified from consideration unless it includes certification from the landlord that the landlord is aware that the tenant's use of the premises will involve dispensing of medical marijuana and medical marijuana products. An application shall not be disqualified from consideration if the application does not include the materials described in paragraphs (2) or (3) of this subsection.

- 9. (New section) a. An alternative treatment center may appoint a medical advisory board to provide advice to the alternative treatment center on all aspects of its business.
- b. A medical advisory board appointed pursuant to this section shall comprise five members: three health care professionals licensed to practice in New Jersey, at least one of whom shall be a physician; one qualifying patient; and one individual who owns a business in the same region in which the alternative treatment center is located. The qualifying patient member shall reside in the county in which the alternative treatment center is located. No ATC identification card holder may serve on a medical advisory board.
- c. A medical advisory board appointed pursuant to this section shall meet at least two times per calendar year.

- 10. Section 10 of P.L.2009, c.307 (C.24:6I-10) is amended to read as follows:
- 10. a. A physician shall provide written instructions for a registered qualifying patient or [his] the patient's primary caregiver to present to [an alternative treatment center] a medical marijuana dispensary concerning the total amount of usable marijuana that a patient may be dispensed, in weight, in a 30-day period, which amount shall not exceed [two] four ounces. If no amount is noted, the maximum amount that may be dispensed at one time is [two] four ounces.
- b. A physician may issue multiple written instructions at one time authorizing the patient to receive a total of up to a 90-day supply, provided that the following conditions are met:
- (1) Each separate set of instructions shall be issued for a legitimate medical purpose by the physician, as provided in [this act] P.L.2009, c.307 (C.24:6I-1 et al.);

- (2) Each separate set of instructions shall indicate the earliest date on which a **[**center**]** dispensary may dispense the marijuana, except for the first dispensation if it is to be filled immediately; and
- (3) The physician has determined that providing the patient with multiple instructions in this manner does not create an undue risk of diversion or abuse.
- c. A registered qualifying patient or [his] the patient's primary caregiver shall present the patient's or caregiver's registry identification card, as applicable, and these written instructions to the [alternative treatment center] medical marijuana dispensary, which shall verify and log the documentation presented. physician may provide a copy of a written instruction by electronic or other means, as determined by the commissioner, directly to [an alternative treatment center] a medical marijuana dispensary on behalf of a registered qualifying patient. The dispensation of marijuana pursuant to any written instructions shall occur within one month of the date that the instructions were written or the instructions are void.
  - d. [A] Medical marijuana may be dispensed to a patient or the patient's primary caregiver [may be registered at only one alternative treatment center at any time] by any medical marijuana dispensary in the State. Prior to dispensing medical marijuana to a qualifying patient or the patient's primary caregiver, the medical marijuana dispensary shall access the system established pursuant to section 11 of P.L.2009, c.307 (C.45:1-45.1) to ascertain whether medical marijuana was dispensed to the patient or the patient's primary caregiver by any medical marijuana dispensary within the preceding 30 days. Upon dispensing medical marijuana to a qualifying patient or the patient's primary caregiver, the medical marijuana dispensary shall transmit to the patient's physician information concerning the amount, strain, and form of medical marijuana that was dispensed.

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

- 35 11. Section 14 of P.L.2009, c.307 (C.24:6I-12) is amended to read as follows:
  - 14. a. The commissioner shall report to the Governor, and to the Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1):
  - (1) no later than one year after the effective date of **[**this act**]** P.L.2009, c.307 (C.24:6I-1 et al.), on the actions taken to implement the provisions of **[**this act**]** P.L.2009, c.307 (C.24:6I-1 et al.) and P.L.2015, c.158 (C.18A:40-12.22 et al.); and
  - (2) annually thereafter on the number of applications for registry identification cards, the number of qualifying patients registered, the number of primary caregivers registered, the nature of the **[**debilitating**]** qualifying medical conditions of the patients, the number of registry identification cards revoked, the number of

alternative treatment center permits issued and revoked, and the number of physicians [providing certifications for] <u>authorizing</u> patients <u>for the medical use of marijuana</u>.

- b. The reports shall not contain any identifying information of patients, caregivers, or physicians.
- 6 c. Within two years after the effective date of [this act] 7 P.L.2009, c.307 (C.24:6I-1 et al.) and every two years thereafter, the commissioner shall: evaluate whether there are sufficient 8 9 numbers of alternative treatment centers to meet the needs of 10 registered qualifying patients throughout the State; evaluate 11 whether the maximum amount of medical marijuana allowed 12 pursuant to [this act] P.L.2009, c.307 (C.24:6I-1 et al.) is sufficient to meet the medical needs of qualifying patients; and determine 13 14 whether any alternative treatment center has charged excessive 15 prices for marijuana that the center dispensed.

The commissioner shall report his findings no later than two years after the effective date of [this act] P.L.2009, c.307 (C.24:6I-1 et al.), and every two years thereafter, to the Governor, and to the Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1). (cf: P.L.2009, c.307, s.14)

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- 12. Section 15 of P.L.2009, c.307 (C.24:6I-13) is amended to read as follows:
- 24 15. a. The Department of Health is authorized to exchange 25 fingerprint data with, and receive information from, the Division of 26 State Police in the Department of Law and Public Safety and the 27 Federal Bureau of Investigation for use in reviewing applications 28 for individuals seeking to serve as primary caregivers who are not 29 an immediate family member of the patient pursuant to section 4 of 30 P.L.2009, c.307 (C.24:6I-4), applications for an ATC identification 31 card pursuant to section 7 of P.L.2009, c.307 (C.24:6I-7), and 32 applications for permits to operate as **[**, or to be a director, officer, 33 or employee of, lalternative treatment centers pursuant to section 7 34 of P.L.2009, c.307 (C.24:6I-7).
  - b. The Division of State Police shall promptly notify the Department of Health in the event an applicant seeking to serve as a primary caregiver who is not an immediate family member of the patient, an applicant for an ATC identification card, or an applicant for a permit to operate as **[**, or to be a director, officer, or employee of, **]** an alternative treatment center, who was the subject of a criminal history record background check conducted pursuant to subsection a. of this section, is convicted of a crime involving possession or sale of a controlled dangerous substance.

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(cf: P.L.2012, c.17, s.91)

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

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- 1 11. a. A physician who [provides a certification] authorizes a 2 patient for the medical use of marijuana or who provides a written 3 instruction for the medical use of marijuana to a qualifying patient pursuant to P.L.2009, c.307 (C.24:6I-1 et al.) and any [alternative 4 5 treatment center I medical marijuana dispensary shall furnish to the Director of the Division of Consumer Affairs in the Department of 6 7 Law and Public Safety such information, on a daily basis and in 8 such a format [and at such intervals,] as the director shall prescribe 9 by regulation, for inclusion in a system established to monitor the 10 dispensation of marijuana in this State for medical use as authorized 11 by the provisions of P.L.2009, c.307 (C.24:6I-1 et al.), which 12 system shall serve the same purpose as, and be cross-referenced 13 with, the electronic system for monitoring controlled dangerous 14 substances established pursuant to section 25 of P.L.2007, c.244 (C.45:1-45). 15
  - b. The Director of the Division of Consumer Affairs, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), and in consultation with the Commissioner of Health [and Senior Services], shall adopt rules and regulations to effectuate the purposes of subsection a. of this section.
- of P.L.1968, c.410 provision 21 c. Notwithstanding any 22 (C.52:14B-1 et seq.) to the contrary, the Director of the Division of 23 Consumer Affairs shall adopt, immediately upon filing with the 24 Office of Administrative Law and no later than the 90th day after the effective date of P.L.2009, c.307 (C.24:6I-1 et al.), such 25 26 regulations as the director deems necessary to implement the 27 provisions of subsection a. of this section. Regulations adopted 28 pursuant to this subsection shall be effective until the adoption of 29 rules and regulations pursuant to subsection b. of this section and 30 may be amended, adopted, or readopted by the director in 31 accordance with the requirements of P.L.1968, c.410 (C.52:14B-1 32 et seq.).

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

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

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15. The Commissioner of Health shall adopt, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq., such rules and regulations as may be necessary to effectuate the purposes of this act.

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16. This act shall take effect 90 days after the date of enactment, except that the Commissioner of Health may take any advance administrative action as may be necessary to implement the requirements of this act.

#### **STATEMENT**

This bill makes various revisions to the requirements of the "Compassionate Use Medical Marijuana Act," P.L.2009, c.307 (C.24:6I-1 et al.), including allowing medical marijuana to be authorized for any condition, revising the application, ownership, and operational requirements for alternative treatment centers (ATCs), revising the requirements for physicians to authorize patients for the medical use of marijuana, and revising certain requirements concerning patients and primary caregivers.

#### Patient Registration and Certification and Dispensing Requirements

The bill provides that medical marijuana may be authorized for the treatment of any medical condition diagnosed by a physician, including the symptoms of the medical condition and the symptoms resulting from any treatment for the medical condition, rather than the list of enumerated conditions as provided under current law.

The bill provides that no application or renewal fee will apply in the case of an immediate family member of a qualifying patient who serves as primary caregiver to the patient; in all other cases, the maximum fee will be \$10 for an individual who is indigent and \$50 for all other cardholders. The current application fee is \$200, with a reduced fee of \$20 for low-income applicants. In addition, an immediate family member of a patient will not be required to undergo a criminal history record background check. The bill provides that a person may serve as primary caregiver for up to two patients at one time; under current law, primary caregivers are restricted to serving as primary caregiver for no more than one patient at a time.

The bill revises the list of disqualifying offenses for applicants seeking to serve as a primary caregiver who are not an immediate family member of the patient to provide that a conviction for possession of any amount of marijuana or hashish, and a conviction for manufacture, dispensing, or distributing less than 50 pounds of marijuana, fewer than 50 marijuana plants, or less than five pounds of hashish, will not constitute a disqualifying condition.

The bill provides that physicians will not be required to enroll in a physician registry as a condition of authorizing qualifying patients for the medical use of marijuana and removes the requirement that physicians certify a patient for medical marijuana.

The bill provides that, in order to authorize a qualifying patient who is a minor for medical marijuana, the certifying physician will be required to either: (1) be trained in the care of pediatric patients; or (2) obtain written confirmation from a physician trained in the care of pediatric patients establishing that, following examination of the patient or a review of the patient's record, the minor patient is likely to receive therapeutic or palliative benefits from the medical

use of marijuana to treat or alleviate symptoms associated with the patient's debilitating medical condition.

The bill increases the maximum amount of medical marijuana that may be dispensed to a patient for a 30-day period from two ounces to four ounces.

The bill removes a provision that limited distribution of edible forms of medical marijuana to qualifying patients who are minors, and specifies that medical marijuana may be distributed in transdermal, sublingual, and tincture forms, as well as in the forms authorized under current law.

The bill provides that medical marijuana may be dispensed to a patient by any medical marijuana dispensary in the State; under current law, patients are to be registered with, and may only be dispensed medical marijuana from, a single alternative treatment center where the patient is registered. The bill requires that, prior to dispensing medical marijuana to a patient, a medical marijuana dispensary will be required to access a system currently maintained by the Division of Consumer Affairs in the Department of Law and Public Safety that tracks medical marijuana dispensations in the State, in order to ascertain whether any medical marijuana was dispensed to the patient or the patient's primary caregiver within the preceding 30 days. Upon dispensing medical marijuana to a patient, the medical marijuana dispensary will be required to transmit to the authorizing physician information concerning the amount, form, and strain of medical marijuana that was dispensed.

The bill provides that a physician or an immediate family member of a physician who authorizes patients for medical marijuana may not hold any profit or ownership interest in an ATC. A physician or the immediate family member of a physician who applies for an ATC identification card is to certify that the physician has not authorized any patients for medical marijuana in the preceding 90 days. A violation of this prohibition will constitute a crime of the fourth degree, which is punishable by imprisonment for up to 18 months, up to a \$10,000 fine, or both. The bill specifies that nothing in the prohibition will prohibit any physician from serving on the medical advisory board of an ATC, provided the physician receives no special compensation or remuneration from the ATC, including payments based on patient volumes or the number of certifications issued by the physician.

#### **ATC Application and Operational Requirements**

With regard to ATCs, the bill differentiates between two different types of ATC: medical marijuana cultivator-processors and medical marijuana dispensaries. Medical marijuana cultivator-processors are facilities that will be authorized to cultivate and process marijuana and marijuana-infused and marijuana-derived products, which it may supply to medical marijuana dispensaries.

- 1 Medical marijuana dispensaries will be authorized to dispense
- 2 marijuana and marijuana products to qualifying patients. An ATC
- 3 holding a permit as of the effective date of the bill will be deemed
- 4 to hold both a cultivator-processor permit and a dispensary permit.
- 5 The bill limits the ability of a person or entity holding a direct or
- 6 indirect interest in an ATC that is issued a new permit under the bill. Specifically:

- A person or entity holding an interest in an ATC issued a
  permit prior to the effective date of the bill may
  simultaneously hold up to a 15 percent interest in up to one
  other ATC issued a permit prior to the effective date of the
  bill, one medical marijuana cultivator-processor, or one
  medical marijuana dispensary;
- A person or entity holding an interest in a medical marijuana cultivator-processor may simultaneously hold up to a 15 percent interest in up to one other medical marijuana cultivator-processor or in one ATC that was issued a permit prior to the effective date of the bill; and
- A person or entity holding an interest in a medical marijuana dispensary may simultaneously hold up to a 15 percent interest in up to one other medical marijuana dispensary or in one ATC that was issued a permit prior to the effective date of the bill.

No person or entity will be permitted to simultaneously hold any other interest in any other ATC. These ownership restrictions do not apply in the case of a person or entity holding an ownership interest of less than one percent of the total capitalization of a publicly traded company, provided the stockholder is not an employee, officer, or director of the publicly traded company. ATCs may, but are not required to be, nonprofit entities.

To ensure adequate access to ATCs throughout the State, the bill requires the Department of Health (DOH) to issue a request for applications for three additional medical marijuana cultivator-processors and 21 additional medical marijuana dispensary permits within 90 days after the effective date of the bill; these new facilities, along with the six ATCs currently operating in the State, will result in a total of nine medical marijuana cultivator-processors and 27 total medical marijuana dispensaries. Thereafter, DOH will be required to periodically evaluate whether the number of existing ATCs is sufficient to meet the needs of qualifying patients in the State, and, if it determines additional ATCs are needed, make a request for applications and issue such additional permits as it deems necessary.

The bill adds specific requirements for DOH to review and score initial permit applications for new medical marijuana cultivator-processors and medical marijuana dispensaries based on a 100-point scale, which includes evaluations of the applicant's operational plan, environmental impact plan, safety and security plan, business

experience, proposed location, record of social responsibility, philanthropy, involvement in research concerning the medical efficacy and adverse effects of medical marijuana, workforce development and job creation plan, and business and financial plan. In evaluating an application, DOH is to limit its review to the controlling owners, officers, directors, and employees, and is not to to consultants, consider responses pertaining independent contractors, or prospective or part-time employees. To the extent possible, DOH is to seek to ensure that at least 15 percent of the new medical marijuana dispensary permits issued under the bill are awarded to entities certified as a minority business, a women's business, a veteran-owned business, or a disabled-veteran business, with higher preference going to entities that are certified in up to two such categories. Application materials submitted to DOH will not constitute a public record subject to the statutory or common laws concerning access to public records.

Applicants are to submit a separate application for each proposed medical marijuana cultivator-processor or medical marijuana dispensary location. If an applicant scores sufficiently high on multiple applications to be awarded more than one permit, the applicant is to notify DOH within seven business days as to which permit it will accept; for any permit declined by an applicant, DOH will award the permit to the next highest-scoring applicant. If an applicant fails to provide notice as to which permit it will accept within seven business days, DOH will have the discretion to determine which permit to award the applicant, based on its determination of Statewide need and the scores awarded to other applicants in the relevant locations.

Commencing 18 months after the effective date of the bill, medical marijuana dispensaries will be allowed to apply to DOH for approval to open up to one satellite dispensary. The application is to include information concerning the proposed location for the satellite dispensary. Medical marijuana dispensaries will be limited to a single satellite dispensary; with DOH approval, a satellite dispensary may be closed or relocated. If a medical marijuana dispensary permit is sold or transferred, such sale or transfer will include the dispensary's satellite dispensary, if any. The fee for a satellite dispensary permit will be \$20,000.

The bill prohibits DOH employees from holding any financial interest in an ATC or receiving anything of value from an ATC in connection with reviewing, processing, or making recommendations with respect to an ATC permit application.

The bill provides that an initial ATC permit will be valid for three years and will thereafter be renewable on a biennial basis.

The bill provides that DOH may require ATC permit applicants to submit a personal history disclosure and may conduct financial due diligence on any person or entity providing \$100,000 or more in financial backing to an applicant. The bill revises the list of

disqualifying offenses for ATC permit applicants to provide that a

- conviction for possession of any amount of marijuana or hashish,
- and a conviction for manufacture, dispensing, or distributing less
- 4 than 50 pounds of marijuana, fewer than 50 marijuana plants, or
- 5 less than five pounds of hashish, will not constitute a disqualifying
- 6 condition.

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The bill clarifies that the officers, directors, board members, owners, and employees of an ATC will be issued "ATC identification cards" upon approval of the ATC's permit application.

11 The bill sets forth certain requirements for the sale or transfer of 12 an ATC permit, which include completing a criminal history record 13 background check of the entity purchasing or receiving the permit, 14 as well as certain requirements specific to nonprofit ATCs, which 15 will be required to comply with the requirements of the "New 16 Jersey Nonprofit Corporation Act," N.J.S.15A:1-1 et seq. If the 17 debts and liabilities of a nonprofit ATC exceed the value of all 18 assets of the ATC other than the permit, the ATC may pay \$300,000 19 to DOH and sell its permit for a sum that satisfies all outstanding 20 obligations. The bill provides that, with DOH approval, medical 21 marijuana cultivator-processors may relocate within the same 22 region and medical marijuana dispensaries may relocate within the 23 same county.

The bill provides that the maximum fee for initial issuance or renewal of an ATC permit will be \$40,000; the maximum fee for relocation of an ATC will be \$20,000; and the maximum fee to sell or transfer an ATC permit will be \$150,000.

The bill provides that ATCs will be permitted to establish a medical advisory board to advise the ATC on all aspects of its business. A medical advisory board is to comprise five members: three healthcare professionals, including at least one physician; one qualifying patient; and one business owner from the same region as the ATC. The qualifying patient member is to reside in the same county in which the ATC is located. No ATC identification card holder may serve on an ATC medical advisory board. Medical

advisory boards are to meet at least two times per year.