

P.L. 2021, CHAPTER 118, *approved June 24, 2021*
Senate, No. 619 (*Third Reprint*)

1 AN ACT concerning medical cannabis and amending P.L.2019,
2 c.153 and P.L.2009, c.307.

3
4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:

6
7 1. Section 5 of P.L.2019, c.153 (C.24:6I-5.1) is amended to
8 read as follows:

9 5. a. A health care practitioner shall not be required to be
10 listed publicly in any medical cannabis practitioner registry as a
11 condition of authorizing patients for the medical use of cannabis.

12 b. No authorization for the medical use of cannabis may be
13 issued by a health care practitioner to the practitioner's own self or
14 to a member of the practitioner's immediate family.

15 c. The commission shall establish a process to allow medical
16 cannabis to be dispensed to a patient who has been authorized for
17 the medical use of cannabis and who has initiated the process of
18 registering with the commission pursuant to section 4 of P.L.2009,
19 c.307 (C.24:6I-4), but whose registration has not been completed or
20 subject to other final action by the commission. A patient may be
21 dispensed medical cannabis in quantities of up to a two-week
22 supply during the pendency of the patient's registration, after which
23 time the patient may be dispensed medical cannabis in an amount
24 consistent with the requirements of section 10 of P.L.2009, c.307
25 (C.24:6I-10). The commission shall impose such restrictions on
26 access to medical cannabis pursuant to this subsection as shall be
27 necessary to protect against fraud, abuse, and diversion.

28 d. ³**[For ¹a period of¹ 270 days following the ¹effective¹ date**
29 **of]** ¹**[enactment of]** ¹P.L. , c. (C.) (pending before the
30 Legislature as this bill), a health care practitioner may authorize a
31 patient who is a ¹**[child,]** ¹resident of a long-term care facility,
32 ¹**[developmentally disabled]** has a developmental disability¹ , ¹is¹
33 terminally ill, ¹is¹ receiving hospice care ¹through a licensed
34 hospice care provider¹ , or ¹is¹ housebound as certified by the
35 patient's physician, for the medical use of cannabis ¹[in the course
36 of the health care practitioner's practice of] using¹ telemedicine or
37 telehealth. ¹[Following the 270 day period after the date of
38 enactment of P.L. , c. (C.) (pending before the Legislature
39 as this bill)] Thereafter,¹ a health care practitioner may ²initially²
40 authorize any patient for the medical use of cannabis ¹[in the
41 course of the health care practitioner's practice of] using¹
42 telemedicine or telehealth, provided that, and except in the case of a

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

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SHH committee amendments adopted January 27, 2020.

²Assembly AHE committee amendments adopted March 5, 2020.

³Senate amendments adopted in accordance with Governor's recommendations June 3, 2021.

1 patient who is a ¹【child, developmentally disabled】 resident of a
2 long-term care facility, has a developmental disability¹ ,
3 ¹is¹terminally ill, ¹is¹ receiving hospice care ¹from a licensed
4 hospice care provider¹ , or ¹is¹ housebound ¹as certified by the
5 patient's physician¹, the patient has had at least one previous in-
6 office ¹【visit】 consultation¹ with the health care practitioner prior
7 to the ¹【patient's authorization】 practitioner authorizing the
8 patient¹ for the medical use of cannabis ¹using telemedicine or
9 telehealth¹ . ²Following the initial authorization, the patient shall
10 have at least one in-office consultation with the practitioner on an
11 annual basis in order for the patient to receive continued
12 authorization for the use of medical cannabis. The practitioner may
13 require more frequent in-office consultations if additional
14 consultations are necessary to continue to authorize the patient's
15 use of medical cannabis.²】 A health care practitioner may initially
16 authorize any qualifying patient for the medical use of cannabis
17 using telemedicine or telehealth, provided that the use of
18 telemedicine or telehealth, rather than an in-person visit, is
19 consistent with the standard of care required for assessment and
20 treatment of the patient's condition. Following the initial
21 authorization, the practitioner may provide continued authorization
22 for the use of medical cannabis via telemedicine or telehealth if the
23 practitioner determines that an in-person visit is not required,
24 consistent with the standard of care. The practitioner may require
25 in-office consultations if additional consultations are necessary to
26 continue to authorize the patient's use of medical cannabis.³

27 As used in this subsection, “telehealth” and “telemedicine” shall
28 have the same meaning as is provided in section 1 of P.L.2017,
29 c.117 (C.45:1-61).

30 (cf: P.L.2019, c.153, s.5)

31

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

34 10. a. A health care practitioner shall provide written
35 instructions for a registered qualifying patient or the patient's
36 designated caregiver, or an institutional caregiver acting on behalf
37 of the patient, to present to a medical cannabis dispensary or a
38 clinical registrant concerning the total amount of usable cannabis
39 that a patient may be dispensed, in weight, in a 30-day period,
40 which amount shall not exceed the maximum amount that may be
41 authorized for the patient pursuant to subsection f. of this section.

42 b. A health care practitioner may issue multiple written
43 instructions at one time authorizing the patient to receive a total of
44 up to a one-year supply, provided that the following conditions are
45 met:

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

4 (2) Each separate set of instructions shall indicate the earliest
5 date on which a dispensary or clinical registrant may dispense the
6 cannabis, except for the first dispensation if it is to be filled
7 immediately; and

8 (3) The health care practitioner has determined that providing
9 the patient with multiple instructions in this manner does not create
10 an undue risk of diversion or abuse.

11 c. A registered qualifying patient or the patient's designated
12 caregiver, or an institutional caregiver acting on behalf of a
13 qualifying patient, shall present verification of the patient's or
14 caregiver's registration with the commission, as applicable, and
15 these written instructions to any medical cannabis dispensary or
16 clinical registrant at the time the patient or caregiver requests the
17 dispensing or delivery of medical cannabis, which medical cannabis
18 dispensary or clinical registrant shall verify and log the
19 documentation presented. An institutional caregiver shall
20 additionally present an authorization executed by the patient
21 certifying that the institutional caregiver is authorized to obtain
22 medical cannabis on behalf of the patient. A health care
23 practitioner may provide a copy of a written instruction by
24 electronic or other means, including ^{1,1} but not limited to,
25 telemedicine and telehealth, as determined by the commission,
26 directly to a medical cannabis dispensary or a clinical registrant on
27 behalf of a registered qualifying patient. The dispensation of
28 medical cannabis pursuant to any written instructions shall occur
29 within one year of the date that the instructions were written or
30 become eligible for dispensing, whichever is later, or the
31 instructions are void.

32 d. (Deleted by amendment, P.L.2019, c.153)

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

45 f. (1) Except as provided in paragraph (2) of this subsection,
46 for a period of 18 months after the effective date of P.L.2019,
47 c.153 (C.24:6I-5.1 et al.), the maximum amount of usable cannabis
48 that a patient may be dispensed, in weight, in a 30-day period, shall

1 be three ounces. Commencing 18 months after the effective date of
2 P.L.2019, c.153 (C.24:6I-5.1 et al.), the maximum amount of usable
3 cannabis that a patient may be dispensed shall be prescribed by the
4 commission by regulation.

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

17 g. The commission shall establish, by regulation, curricula for
18 health care practitioners and for staff at medical cannabis
19 dispensaries and clinical registrants:

20 (1) The curriculum for health care practitioners shall be
21 designed to assist practitioners in counseling patients with regard to
22 the quantity, dosing, and administration of medical cannabis as
23 shall be appropriate to treat the patient's qualifying medical
24 condition. Health care practitioners shall complete the curriculum
25 as a condition of authorizing patients for the medical use of
26 cannabis; and

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

37 h. Commencing July 1, 2020, the amount of the sales tax that
38 may be imposed under the "Sales and Use Tax Act," P.L.1966, c.30
39 (C.54:32B-1 et seq.) on medical cannabis dispensed by a medical
40 cannabis dispensary or clinical registrant shall not exceed four
41 percent.

42 Commencing July 1, 2021, the amount of the sales tax that may
43 be imposed under the "Sales and Use Tax Act," P.L.1966, c.30
44 (C.54:32B-1 et seq.) on medical cannabis dispensed by a medical
45 cannabis dispensary or clinical registrant shall not exceed two
46 percent.

47 Commencing July 1, 2022, medical cannabis dispensed by a
48 medical cannabis dispensary or clinical registrant shall not be

1 subject to any tax imposed under the "Sales and Use Tax Act,"
2 P.L.1966, c.30 (C.54:32B-1 et seq.).

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

8 i. A municipality in which a medical cannabis dispensary is
9 located may adopt an ordinance imposing a transfer tax on any
10 medical cannabis dispensed by the dispensary, including medical
11 cannabis that is furnished by the dispensary to a medical cannabis
12 handler for delivery to a registered qualifying patient or the patient's
13 caregiver. The rate of a transfer tax established pursuant to this
14 subsection shall be at the discretion of the municipality, except that
15 in no case shall the rate exceed two percent of the purchase price of
16 the medical cannabis.

17 (cf: P.L.2019, c.153, s.18)

18

19 3. This act shall take effect immediately.

20

21

22

23

24 _____
25 Permits use of telemedicine and telehealth to authorize patients
26 for medical cannabis and to issue written instructions for dispensing
medical cannabis.