

[First Reprint]

**SENATE, No. 619**

---

**STATE OF NEW JERSEY**  
**219th LEGISLATURE**

---

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

**Sponsored by:**

**Senator DECLAN J. O'SCANLON, JR.**

**District 13 (Monmouth)**

**SYNOPSIS**

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

**CURRENT VERSION OF TEXT**

As reported by the Senate Health, Human Services and Senior Citizens Committee on January 27, 2020, with amendments.



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. For <sup>1</sup>a period of<sup>1</sup> 270 days following the <sup>1</sup>effective<sup>1</sup> date of  
29 <sup>1</sup>[enactment of]<sup>1</sup> P.L. \_\_\_\_\_, c. (C. \_\_\_\_\_) (pending before the  
30 Legislature as this bill), a health care practitioner may authorize a  
31 patient who is a <sup>1</sup>[child,]<sup>1</sup> resident of a long-term care facility,  
32 <sup>1</sup>[developmentally disabled] has a developmental disability<sup>1</sup> , <sup>1</sup>is<sup>1</sup>  
33 terminally ill, <sup>1</sup>is<sup>1</sup> receiving hospice care <sup>1</sup>through a licensed  
34 hospice care provider<sup>1</sup> , or <sup>1</sup>is<sup>1</sup> housebound as certified by the  
35 patient's physician, for the medical use of cannabis <sup>1</sup>[in the course  
36 of the health care practitioner's practice of] using<sup>1</sup> telemedicine or  
37 telehealth. <sup>1</sup>[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,<sup>1</sup> a health care practitioner may authorize  
40 any patient for the medical use of cannabis <sup>1</sup>[in the course of the  
41 health care practitioner's practice of] using<sup>1</sup> telemedicine or  
42 telehealth, provided that, and except in the case of a patient who is a  
43 <sup>1</sup>[child, developmentally disabled] resident of a long-term care  
44 facility, has a developmental disability<sup>1</sup> , <sup>1</sup>is<sup>1</sup> terminally ill, <sup>1</sup>is<sup>1</sup>

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:

<sup>1</sup>Senate SHH committee amendments adopted January 27, 2020.

1 receiving hospice care <sup>1</sup>from a licensed hospice care provider <sup>1</sup>, or  
2 <sup>1</sup>is <sup>1</sup>housebound <sup>1</sup>as certified by the patient's physician <sup>1</sup>, the  
3 patient has had at least one previous in-office <sup>1</sup>【visit】 consultation <sup>1</sup>  
4 with the health care practitioner prior to the <sup>1</sup>【patient's  
5 authorization】 practitioner authorizing the patient <sup>1</sup> for the medical  
6 use of cannabis <sup>1</sup>using telemedicine or telehealth <sup>1</sup>.

7 As used in this subsection, "telehealth" and "telemedicine" shall  
8 have the same meaning as is provided in section 1 of P.L.2017,  
9 c.117 (C.45:1-61).

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

11

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

14 10. a. A health care practitioner shall provide written  
15 instructions for a registered qualifying patient or the patient's  
16 designated caregiver, or an institutional caregiver acting on behalf  
17 of the patient, to present to a medical cannabis dispensary or a  
18 clinical registrant concerning the total amount of usable cannabis  
19 that a patient may be dispensed, in weight, in a 30-day period,  
20 which amount shall not exceed the maximum amount that may be  
21 authorized for the patient pursuant to subsection f. of this section.

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

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

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

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

36 c. A registered qualifying patient or the patient's designated  
37 caregiver, or an institutional caregiver acting on behalf of a  
38 qualifying patient, shall present verification of the patient's or  
39 caregiver's registration with the commission, as applicable, and  
40 these written instructions to any medical cannabis dispensary or  
41 clinical registrant at the time the patient or caregiver requests the  
42 dispensing or delivery of medical cannabis, which medical cannabis  
43 dispensary or clinical registrant shall verify and log the  
44 documentation presented. An institutional caregiver shall  
45 additionally present an authorization executed by the patient  
46 certifying that the institutional caregiver is authorized to obtain  
47 medical cannabis on behalf of the patient. A health care

1 practitioner may provide a copy of a written instruction by  
2 electronic or other means, including <sup>1,1</sup> but not limited to,  
3 telemedicine and telehealth, as determined by the commission,  
4 directly to a medical cannabis dispensary or a clinical registrant on  
5 behalf of a registered qualifying patient. The dispensation of  
6 medical cannabis pursuant to any written instructions shall occur  
7 within one year of the date that the instructions were written or  
8 become eligible for dispensing, whichever is later, or the  
9 instructions are void.

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

11 e. Prior to dispensing medical cannabis to a qualifying patient,  
12 the patient's designated caregiver, or an institutional caregiver, the  
13 medical cannabis dispensary or clinical registrant shall access the  
14 system established pursuant to section 11 of P.L.2009, c.307  
15 (C.45:1-45.1) to ascertain whether medical cannabis was dispensed  
16 to or on behalf of the patient by any medical cannabis dispensary or  
17 clinical registrant within the preceding 30 days. Upon dispensing  
18 medical cannabis to a qualifying patient, the patient's designated  
19 caregiver, or an institutional caregiver, the medical cannabis  
20 dispensary or clinical registrant shall transmit to the patient's health  
21 care practitioner information concerning the amount, strain, and  
22 form of medical cannabis that was dispensed.

23 f. (1) Except as provided in paragraph (2) of this subsection,  
24 for a period of 18 months after the effective date of P.L.2019,  
25 c.153 (C.24:6I-5.1 et al.), the maximum amount of usable cannabis  
26 that a patient may be dispensed, in weight, in a 30-day period, shall  
27 be three ounces. Commencing 18 months after the effective date of  
28 P.L.2019, c.153 (C.24:6I-5.1 et al.), the maximum amount of usable  
29 cannabis that a patient may be dispensed shall be prescribed by the  
30 commission by regulation.

31 (2) The monthly limits set forth in paragraph (1) of this  
32 subsection shall not apply to patients who are terminally ill or who  
33 are currently receiving hospice care through a licensed hospice,  
34 which patients may be dispensed an unlimited amount of medical  
35 cannabis. Qualifying patients who are not receiving hospice care or  
36 who are not terminally ill may petition the commission, on a form  
37 and in a manner as the commission shall require by regulation, for  
38 an exemption from the monthly limits set forth in paragraph (1) of  
39 this paragraph, which petition the commission shall approve if the  
40 commission finds that granting the exemption is necessary to meet  
41 the patient's treatment needs and is consistent with the provisions of  
42 P.L.2009, c.307 (C.24:6I-1 et al.).

43 g. The commission shall establish, by regulation, curricula for  
44 health care practitioners and for staff at medical cannabis  
45 dispensaries and clinical registrants:

46 (1) The curriculum for health care practitioners shall be  
47 designed to assist practitioners in counseling patients with regard to  
48 the quantity, dosing, and administration of medical cannabis as

1 shall be appropriate to treat the patient's qualifying medical  
2 condition. Health care practitioners shall complete the curriculum  
3 as a condition of authorizing patients for the medical use of  
4 cannabis; and

5 (2) The curriculum for employees of medical cannabis  
6 dispensaries and clinical registrants shall be designed to assist the  
7 employees in counseling patients with regard to determining the  
8 strain and form of medical cannabis that is appropriate to treat the  
9 patient's qualifying medical condition. Employees of medical  
10 cannabis dispensaries and clinical registrants shall be required to  
11 complete the curriculum as a condition of registration with the  
12 commission. Completion of the curriculum may constitute part of  
13 the annual training required pursuant to paragraph (1) of subsection  
14 j. of section 7 of P.L.2009, c.307 (C.24:6I-7).

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

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

25 Commencing July 1, 2022, medical cannabis dispensed by a  
26 medical cannabis dispensary or clinical registrant shall not be  
27 subject to any tax imposed under the "Sales and Use Tax Act,"  
28 P.L.1966, c.30 (C.54:32B-1 et seq.).

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

34 i. A municipality in which a medical cannabis dispensary is  
35 located may adopt an ordinance imposing a transfer tax on any  
36 medical cannabis dispensed by the dispensary, including medical  
37 cannabis that is furnished by the dispensary to a medical cannabis  
38 handler for delivery to a registered qualifying patient or the patient's  
39 caregiver. The rate of a transfer tax established pursuant to this  
40 subsection shall be at the discretion of the municipality, except that  
41 in no case shall the rate exceed two percent of the purchase price of  
42 the medical cannabis.

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

44

45 3. This act shall take effect immediately.