SENATE BILL 995

By: Senators Brinkley, Raskin, Colburn, Currie, Forehand, Jacobs, Jennings, Jones–Rodwell, Kelley, King, Kittleman, Madaleno, Mathias, Montgomery, Peters, Pinsky, Pugh, Robey, Rosapepe, and Zirkin

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CHAPTER _____

AN ACT concerning

Medical Marijuana Oversight Commission – Caregivers – Certificate of Qualifying Patient

FOR the purpose of making marijuana a Schedule II controlled dangerous substance; prohibiting certain persons from distributing or dispensing marijuana to certain persons; providing for a certain penalty; establishing an independent Medical Marijuana Oversight Commission; providing for the purpose and membership of the Commission; specifying the terms of the initial members of the Commission; providing for the appointment of a chair and vice chair of the Commission; providing that a member of the Commission may not receive certain compensation but is entitled to certain reimbursement; authorizing the Commission to employ a certain staff; requiring the Commission to consult with certain experts and to meet with a certain frequency; providing for the powers and duties of the Commission; authorizing the Commission to contract with certain entities; requiring the Commission to adopt certain regulations on or before a certain date; authorizing the Commission to suspend or revoke certain registrations; authorizing the Commission to inspect certain entities; requiring the Commission to approve certain certifications of certain physicians; requiring a physician certification to be renewed annually; requiring a certain proposal from a physician to the Commission to include certain information; encouraging the Commission to approve certain applications; exempting certain physicians from certain penalties for certain actions; requiring a certifying physician to

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.
[Brackets] indicate matter deleted from existing law.
Underlining indicates amendments to bill.
Strikeout indicates matter stricken from the bill by amendment or deleted from the law by amendment.
submit a certain annual report to the Commission at a certain time; authorizing the Commission to set certain fees; authorizing an academic medical center to apply to the Commission to conduct certain research; requiring the Commission to approve certain applications for registration from academic medical centers; providing the expiration and renewal of proposal from a registered academic medical center; requiring a proposal from an academic medical center to include certain information; encouraging the Commission to approve certain applications from academic medical centers; requiring a registered academic medical center to submit a certain annual report to the Commission at a certain time; requiring the Commission to issue a request for applications for registration as a grower; requiring the Commission to require an applicant for registration as a registered grower to provide certain information; requiring the Commission to approve the fewest number of registered growers as is reasonable; providing for the expiration and renewal of a registration as a registered grower; providing that a registered grower is exempt from certain State and local penalties for certain actions; requiring a registered grower to meet certain security and safety standards and submit to certain testing of certain marijuana; requiring a registered grower to conduct a certain background check on certain employees; prohibiting a registered grower from holding certain registrations or being a certifying physician; prohibiting certain individuals from being an employee of a registered grower unless the registered grower is also an academic medical center; requiring the Commission to adopt certain regulations after consulting with the Department of Agriculture and State Police; requiring the Commission to establish certain fees; requiring the Commission to establish a registration program to register dispensing pharmacies, dispensing centers, and academic medical centers; requiring the Commission to require an applicant for dispensing center, dispensing pharmacy, or academic medical center registration to provide certain information to the Commission; requiring the Commission to charge certain fees for certain applications and for the issuance of certain registrations; providing that a registered academic center is not required to be registered as a dispensing center; requiring certain entities seeking to operate as a dispensing center to perform a certain criminal history records check on each employee; prohibiting certain individuals from obtaining a registration to operate a dispensing center or to be an employee of a dispensing center; requiring certain entities to require employees of the entity to submit to certain drug testing; requiring the Commission to issue a certain registration if certain conditions are met; authorizing the Commission to set reasonable limits on the number of dispensing centers in the State or in a geographic area; requiring the Commission to assign a certain identification number to certain entities; providing that a denial of a certain application shall be considered a final agency decision for a certain purpose; requiring entities that have been issued a certain registration to display the registration in a certain manner and to report certain changes to the Commission at a certain time; prohibiting entities that have been issued a certain registration from holding certain registrations or being a certifying physician; providing for certain restrictions on the advertisement of the sale of marijuana; requiring the Commission, in
consultation with State and local law enforcement, to develop certain regulations providing for the issuance of registry identification cards; requiring the Commission to issue a registry identification card to certain patients; requiring a qualifying patient to submit certain information to the Commission; providing for the manner in which the Commission shall approve, deny, and issue a registry identification card; requiring the Commission to deny a request for a primary caregiver for certain reasons; requiring each applicant to serve as a primary caregiver to submit to a certain criminal history records check; prohibiting certain individuals from serving as primary caregivers; requiring a registry identification card to include certain information; requiring a primary caregiver or qualifying patient to provide a certain notice to the Commission under certain circumstances within a certain time period; requiring a certifying physician or registered academic medical center to provide a certain notice to certain patients and the Commission under certain circumstances and within a certain time period; requiring the Commission to establish certain procedures and to maintain a certain list of individuals to whom the Commission has issued registry identification cards; prohibiting employees of State and local law enforcement from querying certain records; exempting certain persons from certain penalties when acting in accordance with this Act; providing that the possession of, or application for, a registry identification card does not constitute probable cause to conduct a certain search or inspection; providing that an individual may not be subject to certain arrest or prosecution for being in the presence or vicinity of the medical use of marijuana as authorized by this Act; authorizing certain entities to sell or distribute a certain amount of marijuana in a certain time to certain individuals under certain circumstances; requiring registered dispensing pharmacies and registered dispensing centers to follow certain procedures and maintain certain records; providing that a qualifying patient may be registered at only one registered dispensing pharmacy or registered dispensing center at any time; providing for the construction of this Act; providing that this Act may not be construed to provide certain immunity to certain persons; providing that this Act may not be construed to require certain insurance reimbursement; requiring the Commission to submit certain reports to the Governor and General Assembly on or before certain dates; authorizing the Commission to accept certain funds; requiring the Commission to use certain fees in a certain manner; authorizing the Commission to distribute certain funds to certain entities for a certain purpose; authorizing the Commission to provide certain funds to the General Fund establishing that it is an affirmative defense to a prosecution for the possession of marijuana or the possession of certain drug paraphernalia that the defendant was a certain caregiver and possessed the marijuana or drug paraphernalia for a certain purpose; establishing that a certain qualifying patient who has been issued and possesses a certain written certification is not subject to arrest, citation, prosecution, or civil or administrative penalty by a professional licensing board or denied a right or privilege for the medical use of marijuana, under certain circumstances; establishing that a qualifying patient may not be denied certain rights relating to child custody or visitation or presumed guilty of certain charges based solely on certain conduct; establishing that a qualifying patient is
not disqualified from certain medical care; providing that a certain physician is not subject to arrest, prosecution, or civil or administrative penalty for providing a certain written certification or making certain statements; establishing that this Act does not prevent certain sanctions from being imposed on a physician; providing that marijuana, marijuana paraphernalia, and certain other property may not be seized or forfeited under certain circumstances; establishing that a certain individual is not subject to arrest or prosecution for a certain offense solely for being in a certain location; providing that a certain written certification issued under the laws of another jurisdiction has the same force and effect as a written certification in this State; providing that possession of a certain written certification may not be the basis for a certain finding of probable cause; establishing that a certain written certification issued to a minor is not valid except under certain circumstances; establishing that this Act does not authorize certain conduct or prohibit the imposition of certain penalties; providing that this Act does not require a public or private health care insurer to make a certain reimbursement; providing a statutory form for a written certification of qualifying patient; defining certain terms; making this Act an emergency measure; and generally relating to marijuana for medical use.

BY renumbering

Article – Criminal Law
Section 5–403(d), (e), and (f), respectively, to be Section 5–403(e), (f), and (g), respectively Annotated Code of Maryland (2002 Volume and 2011 Supplement)

BY repealing and reenacting, with amendments,

Article – Criminal Law

BY adding to

Article – Criminal Law
Section 5–403(d) and 5–611 Annotated Code of Maryland (2002 Volume and 2011 Supplement)

BY adding to

Article – Health – General

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That Section(s) 5–403(d), (e), and (f), respectively, of Article – Criminal
Law of the Annotated Code of Maryland be renumbered to be Section(s) 5–403(e), (f), and (g), respectively.

SECTION 2. AND BE IT FURTHER ENACTED, That the laws of Maryland read as follows:

Article – Criminal Law

5–402.

(d) (1) A material, compound, mixture, or preparation that contains any of the following hallucinogenic or hallucinogenic-like substances is a substance listed in Schedule I:

(i) bufotenine;

(ii) diethylnryptamine;

(iii) dimethyltryptamine;

(iv) 4-methyl-2,5-dimethoxyamphetamine;

(v) ibogaine;

(vi) lysergic acid diethylamide;

[(vii) marijuana;]

[(viii)] (VII) mescaline;

[(ix)] (VIII) peyote;

[(x)] (IX) psilocybin;

[(xi)] (X) psilocyn;

[(xii)] (XI) tetrahydrocannabinol;

[(xiii)] (XII) thiophene analog of phencyclidine;

[(xiv)] (XIII) 2,5-dimethoxyamphetamine;

[(xv)] (XIV) 4-bromo-2,5-dimethoxyamphetamine;

[(xvi)] (XV) 4-methoxyamphetamine;
[(xvii)] (XVI) 3, 4-methylenedioxyamphetamine;
[(xviii)] (XVII) 3, 4-methylenedioxyamphetamine (MDMA);
[(xix)] (XVIII) 5-methoxy-3, 4-methylenedioxyamphetamine;
[(xx)] (XIX) 3, 4, 5-trimethoxyamphetamine;
[(xxi)] (XX) N-methyl-3-piperidyl benzilate;
[(xxii)] (XXI) N-ethyl-3-piperidyl benzilate;
[(xxiii)] (XXII) N-ethyl-1-phenylcyclohexylamine;
[(xxiv)] (XXIII) 1-(1-phenylcyclohexyl)-pyrrolidine;
[(xxv)] (XXIV) 1-(1-(2-thienyl)cyclohexyl)-piperidine;
[(xxvi)] (XXV) 1-methyl-4-phenyl-4-propionoxypiperidine (MPPP); and
[(xxvii)] (XXVI) 1-(2-phenylethyl)-4-phenyl-4-acetyloxypiperidine (PEPAP).

(D) A material, compound, mixture, or preparation that contains marijuana is a substance listed in Schedule II.

5-403.

(A) An individual who is employed by a dispensing pharmacy or a dispensing center registered with the Medical Marijuana Oversight Commission under Title 13, Subtitle 31 of the Health-General Article may not distribute or dispense marijuana except to a registered qualifying patient or a registered primary caregiver.

(B) An individual who is registered with the Medical Marijuana Oversight Commission under Title 13, Subtitle 31 of the Health-General Article as a qualifying patient or a patient’s primary caregiver may not distribute or dispense marijuana to another individual who is not a registered qualifying patient.

(C) An academic medical center registered with the Medical Marijuana Oversight Commission under Title 13, Subtitle 31 of the
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HEALTH—GENERAL ARTICLE OR A CERTIFYING PHYSICIAN CERTIFIED BY THE MEDICAL MARIJUANA OVERSIGHT COMMISSION UNDER TITLE 13, SUBTITLE 31 OF THE HEALTH—GENERAL ARTICLE MAY NOT DISTRIBUTE OR DISPENSE MARIJUANA TO ANOTHER INDIVIDUAL WHO IS NOT A REGISTERED QUALIFYING PATIENT OR A REGISTERED PRIMARY CAREGIVER.

(D) A PERSON WHO VIOLATES SUBSECTION (A), (B), OR (C) OF THIS SECTION IS GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO IMPRISONMENT NOT EXCEEDING 7 YEARS OR A FINE NOT EXCEEDING $7,000 OR BOTH.

5–601.

(a) Except as otherwise provided in this title, a person may not:

(1) possess or administer to another a controlled dangerous substance, unless obtained directly or by prescription or order from an authorized provider acting in the course of professional practice; or

(2) obtain or attempt to obtain a controlled dangerous substance, or procure or attempt to procure the administration of a controlled dangerous substance by:

(i) fraud, deceit, misrepresentation, or subterfuge;

(ii) the counterfeiting or alteration of a prescription or a written order;

(iii) the concealment of a material fact;

(iv) the use of a false name or address;

(v) falsely assuming the title of or representing to be a manufacturer, distributor, or authorized provider; or

(vi) making, issuing, or presenting a false or counterfeit prescription or written order.

(b) Information that is communicated to a physician in an effort to obtain a controlled dangerous substance in violation of this section is not a privileged communication.

(c) (1) Except as provided in paragraphs (2) and (3) of this subsection, a person who violates this section is guilty of a misdemeanor and on conviction is subject to imprisonment not exceeding 4 years or a fine not exceeding $25,000 or both.
(2) A person whose violation of this section involves the use or possession of marijuana is subject to imprisonment not exceeding 1 year or a fine not exceeding $1,000 or both.

(3) (i) 1. In this paragraph the following words have the meanings indicated.


3. “CAREGIVER” MEANS A RESIDENT OF THE STATE WHO:

A. IS AT LEAST 21 YEARS OLD OR, IF THE INDIVIDUAL IS PROVIDING CARE TO A FAMILY MEMBER, SPOUSE, OR DOMESTIC PARTNER, IS AT LEAST 18 YEARS OLD;

B. HAS NOT BEEN CONVICTED OF A FELONY FOR A CRIME OF VIOLENCE AS DEFINED IN § 14–101 OF THIS ARTICLE;

C. HAS NOT BEEN CONVICTED OF A FELONY FOR A VIOLATION OF A STATE OR FEDERAL CONTROLLED SUBSTANCES LAW; AND

D. IS ONE OF NO MORE THAN TWO CAREGIVERS DESIGNATED BY A PATIENT TO PROVIDE PHYSICAL OR MEDICAL ASSISTANCE TO THE PATIENT, PROVIDED THE PATIENT HAS BEEN DIAGNOSED WITH A DEBILITATING MEDICAL CONDITION BY A PHYSICIAN WITH WHOM THE PATIENT HAS A BONA FIDE PHYSICIAN–PATIENT RELATIONSHIP.

[3.] 4. “Debilitating medical condition” means a chronic or debilitating disease or medical condition or the treatment of a chronic or debilitating disease or medical condition that produces one or more of the following, as documented by a physician with whom the patient has a bona fide physician–patient relationship:

A. cachexia or wasting syndrome;

B. severe or chronic pain;

C. severe nausea;

D. seizures;

E. severe and persistent muscle spasms; or
F. any other condition that is severe and resistant to conventional medicine.

(ii) 1. In a prosecution for the use or possession of marijuana, the defendant may introduce and the court shall consider as a mitigating factor any evidence of medical necessity.

2. Notwithstanding paragraph (2) of this subsection, if the court finds that the person used or possessed marijuana because of medical necessity, on conviction of a violation of this section, the maximum penalty that the court may impose on the person is a fine not exceeding $100.

(iii) 1. In a prosecution for the use or possession of marijuana under this section, it is an affirmative defense that the defendant used or possessed marijuana because:

A. the defendant has a debilitating medical condition that has been diagnosed by a physician with whom the defendant has a bona fide physician–patient relationship;

B. the debilitating medical condition is severe and resistant to conventional medicine; and

C. marijuana is likely to provide the defendant with therapeutic or palliative relief from the debilitating medical condition.

2. **In a prosecution for the possession of marijuana under this section, it is an affirmative defense that the defendant used or possessed marijuana because:**

   [2.] 3. **[The] An affirmative defense UNDER THIS PARAGRAPH may not be used if the defendant was:**

   A. using marijuana in a public place; or

   B. in possession of more than 1 ounce of marijuana.

5–619.

(a) To determine whether an object is drug paraphernalia, a court shall consider, among other logically relevant factors:

(1) any statement by an owner or a person in control of the object concerning its use;
(2) any prior conviction of an owner or a person in control of the object under a State or federal law relating to a controlled dangerous substance;

(3) the proximity of the object, in time and space, to a direct violation of this section or to a controlled dangerous substance;

(4) a residue of a controlled dangerous substance on the object;

(5) direct or circumstantial evidence of the intent of an owner or a person in control of the object to deliver it to another who, the owner or the person knows or should reasonably know, intends to use the object to facilitate a violation of this section;

(6) any instructions, oral or written, provided with the object concerning its use;

(7) any descriptive materials accompanying the object that explain or depict its use;

(8) national and local advertising concerning use of the object;

(9) the manner in which the object is displayed for sale;

(10) whether the owner or a person in control of the object is a licensed distributor or dealer of tobacco products or other legitimate supplier of related items to the community;

(11) direct or circumstantial evidence of the ratio of sales of the object to the total sales of the business enterprise;

(12) the existence and scope of legitimate uses for the object in the community; and

(13) expert testimony concerning use of the object.

(b) The innocence of an owner or a person in control of the object as to a direct violation of this section does not prevent a finding that the object is intended for use or designed for use as drug paraphernalia.

(c) (1) Unless authorized under this title, a person may not use or possess with intent to use drug paraphernalia to:

(i) plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, pack, repack, store, contain, or conceal a controlled dangerous substance; or
(ii) inject, ingest, inhale, or otherwise introduce into the human body a controlled dangerous substance.

(2) A person who violates this subsection is guilty of a misdemeanor and on conviction is subject to:

(i) for a first violation, a fine not exceeding $500; and

(ii) for each subsequent violation, imprisonment not exceeding 2 years or a fine not exceeding $2,000 or both.

(3) A person who is convicted of violating this subsection for the first time and who previously has been convicted of violating subsection (d)(4) of this section is subject to the penalty specified under paragraph (2)(ii) of this subsection.

(4) (i) 1. In this paragraph the following words have the meanings indicated.


3. “CAREGIVER” MEANS A RESIDENT OF THE STATE WHO:

A. IS AT LEAST 21 YEARS OLD OR, IF THE INDIVIDUAL IS PROVIDING CARE TO A FAMILY MEMBER, SPOUSE, OR DOMESTIC PARTNER, IS AT LEAST 18 YEARS OLD;

B. HAS NOT BEEN CONVICTED OF A FELONY FOR A CRIME OF VIOLENCE AS DEFINED IN § 14–101 OF THIS ARTICLE;

C. HAS NOT BEEN CONVICTED OF A FELONY FOR A VIOLATION OF A STATE OR FEDERAL CONTROLLED SUBSTANCES LAW; AND

D. IS ONE OF NO MORE THAN TWO CAREGIVERS DESIGNATED BY A PATIENT TO PROVIDE PHYSICAL OR MEDICAL ASSISTANCE TO THE PATIENT, PROVIDED THE PATIENT HAS BEEN DIAGNOSED WITH A DEBILITATING MEDICAL CONDITION BY A PHYSICIAN WITH WHOM THE PATIENT HAS A BONA FIDE PHYSICIAN–PATIENT RELATIONSHIP.

3. “Debilitating medical condition” means a chronic or debilitating disease or medical condition or the treatment of a chronic or debilitating disease or medical condition that produces one or more of the following, as documented by a physician with whom the patient has a bona fide physician–patient relationship:
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A. cachexia or wasting syndrome;
B. severe or chronic pain;
C. severe nausea;
D. seizures;
E. severe and persistent muscle spasms; or
F. any other condition that is severe and resistant to conventional medicine.

(ii) 1. In a prosecution under this subsection involving drug paraphernalia related to marijuana, the defendant may introduce and the court shall consider as a mitigating factor any evidence of medical necessity.

2. Notwithstanding paragraph (2) of this subsection, if the court finds that the person used or possessed drug paraphernalia related to marijuana because of medical necessity, on conviction of a violation of this subsection, the maximum penalty that the court may impose on the person is a fine not exceeding $100.

(iii) 1. In a prosecution under this subsection involving drug paraphernalia related to marijuana, it is an affirmative defense that the defendant used or possessed drug paraphernalia related to marijuana because:

A. the defendant has a debilitating medical condition that has been diagnosed by a physician with whom the defendant has a bona fide physician–patient relationship;
B. the debilitating medical condition is severe and resistant to conventional medicine; and
C. marijuana is likely to provide the defendant with therapeutic or palliative relief from the debilitating medical condition.

2. In a prosecution under this subsection involving drug paraphernalia related to marijuana, it is an affirmative defense that the defendant possessed drug paraphernalia related to marijuana because the defendant was a caregiver and the drug paraphernalia related to marijuana that was intended for medical use by an individual with a debilitating medical condition.
The affirmative defense UNDER THIS SUBPARAGRAPH may not be used if the defendant was:

A. using marijuana in a public place; or

B. in possession of more than 1 ounce of marijuana.

(d) (1) Unless authorized under this title, a person may not deliver or sell, or manufacture or possess with intent to deliver or sell, drug paraphernalia, knowing, or under circumstances where one reasonably should know, that the drug paraphernalia will be used to:

(i) plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, pack, repack, store, contain, or conceal a controlled dangerous substance; or

(ii) inject, ingest, inhale, or otherwise introduce into the human body a controlled dangerous substance.

(2) A person who violates this subsection is guilty of a misdemeanor and on conviction is subject to:

(i) for a first violation, a fine not exceeding $500; and

(ii) for each subsequent violation, imprisonment not exceeding 2 years or a fine not exceeding $2,000 or both.

(3) A person who is convicted of violating this subsection for the first time and who previously has been convicted of violating paragraph (4) of this subsection is subject to imprisonment not exceeding 2 years or a fine not exceeding $2,000 or both.

(4) If a person who is at least 18 years old violates paragraph (1) of this subsection by delivering drug paraphernalia to a minor who is at least 3 years younger than the person, the person is guilty of a separate misdemeanor and on conviction is subject to imprisonment not exceeding 8 years or a fine not exceeding $15,000 or both.

(e) (1) A person may not advertise in a newspaper, magazine, handbill, poster, sign, mailing, or other writing or publication, or by sound truck, knowing, or under circumstances where one reasonably should know, that the purpose of the advertisement, wholly or partly, is to promote the sale or delivery of drug paraphernalia.

(2) A person who violates this subsection is guilty of a misdemeanor and on conviction is subject to:
(i) for a first violation, a fine not exceeding $500; and

(ii) for each subsequent violation, imprisonment not exceeding 2 years or a fine not exceeding $2,000 or both.

Article – Health – General

SUBTITLE 31. 18. MEDICAL MARIJUANA.

13–3101. 24–1801.

(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

(B) “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 MEDICAL CONDITION.

(C) “CENTRAL REPOSITORY” MEANS THE CRIMINAL JUSTICE INFORMATION SYSTEM CENTRAL REPOSITORY OF THE DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL SERVICES.

(D) “CERTIFYING PHYSICIAN” MEANS AN INDIVIDUAL LICENSED BY THE STATE BOARD OF PHYSICIANS UNDER TITLE 14 OF THE HEALTH OCCUPATIONS ARTICLE TO PRACTICE MEDICINE WHO HAS COMPLETED:

(1) A TRAINING PROGRAM DESIGNED AND APPROVED BY THE COMMISSION; OR

(2) TRAINING WITH A REGISTERED ACADEMIC MEDICAL CENTER AND IS CERTIFYING PATIENTS UNDER THE DIRECTION OF A REGISTERED ACADEMIC MEDICAL CENTER.

(E) “COMMISSION” MEANS THE MEDICAL MARIJUANA OVERSIGHT COMMISSION ESTABLISHED UNDER THIS SUBTITLE.

(F) “DISPENSING CENTER” MEANS AN ENTITY REGISTERED UNDER THIS SUBTITLE THAT ACQUIRES, POSSESES, DELIVERS, TRANSFERS, TRANSPORTS, SUPPLIES, SELLS, OR DISPENSES MARIJUANA OR RELATED SUPPLIES AND EDUCATION MATERIALS.

(G) “DISPENSING PHARMACY” MEANS A PHARMACY REGISTERED UNDER THIS SUBTITLE THAT ACQUIRES, POSSESES, DELIVERS, TRANSFERS,
TRANSPORTS, SELLS, SUPPLIES, OR DISPENSES MARIJUANA OR RELATED SUPPLIES AND EDUCATIONAL MATERIALS.

(H) “MARIJUANA” HAS THE MEANING STATED IN § 5–101 OF THE CRIMINAL LAW ARTICLE.

(I) “MEDICAL USE” MEANS THE ACQUISITION, POSSESSION, CULTIVATION, MANUFACTURE, USE, DELIVERY, SALE, TRANSFER, OR TRANSPORTATION OF MARIJUANA OR PARAPHERNALIA RELATING TO THE ADMINISTRATION OF MARIJUANA TO TREAT OR ALLEVIATE A REGISTERED PATIENT’S CONDITION OR SYMPTOMS.

(J) (1) “PRIMARY CAREGIVER” MEANS A RESIDENT OF THE STATE WHO:

(i) IS AT LEAST 18 YEARS OLD;

(ii) HAS AGREED TO ASSIST WITH THE MEDICAL USE OF MARIJUANA FOR NO MORE THAN FIVE QUALIFYING PATIENTS;

(iii) HAS BEEN DESIGNATED AS PRIMARY CAREGIVER ON THE QUALIFYING PATIENT’S APPLICATION OR RENEWAL FOR A REGISTRY IDENTIFICATION CARD FOR THE PRIMARY CAREGIVER; AND

(iv) HAS SATISFIED THE CRIMINAL HISTORY RECORDS CHECK REQUIRED UNDER § 13–3108 OF THIS SUBTITLE.

(2) “PRIMARY CAREGIVER” DOES NOT INCLUDE THE QUALIFYING PATIENT’S CERTIFYING PHYSICIAN.

(K) “QUALIFYING PATIENT” MEANS A RESIDENT OF THE STATE WHO:

(1) IS AT LEAST 18 YEARS OLD, UNLESS THE COMMISSION GRANTS AN EXCEPTION AT THE RECOMMENDATION OF THE PATIENT’S CERTIFYING PHYSICIAN; AND

(2) (i) HAS BEEN PROVIDED WITH WRITTEN CERTIFICATION BY A CERTIFYING PHYSICIAN PURSUANT TO A BONA FIDE PHYSICIAN–PATIENT RELATIONSHIP; OR

(ii) IS ENROLLED IN A RESEARCH PROGRAM WITH A REGISTERED ACADEMIC MEDICAL CENTER.
(L) "Registered academic medical center" means a program approved by the Commission to conduct research regarding the medical use of marijuana by humans that:

(1) Operates a medical residency program for physicians; and

(2) Conducts research that is overseen by the U.S. Department of Health and Human Services and that involves human subjects.

(M) "Registered grower" means an entity that:

(1) Is registered by the Commission under this subtitle to be exempt from state and local penalties for cultivating marijuana in accordance with this subtitle; and

(2) Is exempt from state and local penalties for transferring marijuana cultivated by the entity to a dispensing pharmacy or to a dispensing center for a fee.

(N) "Registry identification card" means a document issued by the Commission that identifies an individual as a qualifying patient or a primary caregiver.

(O) (1) "Usable marijuana" means the dried leaves and flowers of marijuana and any mixture or preparation of the dried leaves and flowers.

(2) "Usable marijuana" does not include the seeds, stalks, or roots of the plant.

(P) "Written certification" means a certification issued by a certifying physician to a qualifying patient with whom the physician has a bona fide physician-patient relationship that includes a written statement certifying that, in the physician’s professional opinion, after having completed a full assessment of the patient's medical history and current medical condition, the patient has a condition that meets the inclusion criteria and does not meet the exclusion criteria of the certifying physician’s application, and for which:
(1) Recognized drugs or treatment would not be effective or other treatment options have more serious side effects or a greater risk of addiction; and

(2) The potential benefits of the medical use of marijuana would likely outweigh the health risks for the patient.

13–3102.

(a) There is an independent Medical Marijuana Oversight Commission.

(b) The purpose of the Commission is to register and regulate academic medical centers, certifying physicians, growers, dispensing centers, and dispensing pharmacies.

(c) The Commission consists of the following 14 members:

(1) 2 members of the Senate of Maryland, appointed by the President of the Senate;

(2) 2 members of the House of Delegates, appointed by the Speaker of the House;

(3) The Secretary of Health and Mental Hygiene, or the Secretary's designee; and

(4) The following 9 members, appointed by the Governor:

(I) 1 member of the public who supports the use of marijuana for medical purposes and who is or was a patient who found relief from the use of medical marijuana;

(II) 2 physicians licensed in the state;

(III) 1 nurse licensed in the state;

(IV) 1 pharmacist licensed in the state;

(V) 1 scientist who has conducted grant-funded research;
(vi) 2—INDIVIDUALS WITH EXPERIENCE IN LAW ENFORCEMENT; AND

(vii) AN ATTORNEY WHO IS KNOWLEDGEABLE ABOUT MEDICAL MARIJUANA LAWS IN THE UNITED STATES.

(D) (1) The term of a member is 4 years.

(2) The terms of the appointed members are staggered.

(3) A member who serves two consecutive full 4-year terms may not be reappointed for 4 years after completion of those terms.

(4) A member who is appointed after a term has begun serves only for the rest of the term and until a successor is appointed and qualifies.

(E) ANNUALLY, FROM AMONG THE MEMBERS OF THE COMMISSION:

(1) THE GOVERNOR SHALL APPOINT A CHAIR; AND

(2) THE CHAIR SHALL APPOINT A VICE CHAIR.

(F) A MEMBER OF THE COMMISSION:

(1) MAY NOT RECEIVE COMPENSATION AS A MEMBER OF THE COMMISSION, BUT

(2) IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.

(G) THE COMMISSION MAY EMPLOY A STAFF, INCLUDING CONTRACTUAL STAFF, IN ACCORDANCE WITH THE STATE BUDGET OR FUNDED DIRECTLY BY APPLICATION AND REGISTRATION FEES AND GRANTS TO THE COMMISSION.

(H) THE COMMISSION SHALL CONSULT WITH EXPERTS IN PERFORMING THE DUTIES OF THE COMMISSION.

(I) THE COMMISSION SHALL MEET AT LEAST SIX TIMES A YEAR, AT THE TIMES AND PLACES DETERMINED BY THE COMMISSION.
1 13–3103.

(A) In addition to the powers set forth elsewhere in this subtitle, the Commission may:

(1) Adopt regulations to carry out the provisions of this subtitle;

(2) Create subcommittees from among the members of the Commission;

(3) Appoint advisory committees that may include individuals and representatives of interested public or private organizations;

(4) Apply for and accept any funds, property, or services from any person or government agency;

(5) Make agreements with a grantor or payer of funds, property, or services;

(6) Publish and disseminate any information that relates to the medical use of marijuana and related research; and

(7) Subject to the limitations of this subtitle, exercise any other power that is reasonably necessary to carry out the purposes of this subtitle.

(B) In addition to the duties set forth elsewhere in this subtitle, the Commission shall:

(1) Adopt regulations that relate to the meetings, minutes, and transactions of the Commission;

(2) Keep minutes of each meeting;

(3) Prepare annually a budget proposal that includes the estimated income of the Commission and the proposed expenses for the administration and operation of the Commission; and

(4) Prepare from the information filed with the Commission any summary, compilation, or other supplementary report that will advance the purposes of this subtitle.
(c) (1) The Commission may contract with a qualified, independent third party for any service necessary to carry out the powers and duties of the Commission.

(2) Unless permission is granted specifically by the Commission, a third party hired by the Commission may not release, publish, or otherwise use any information to which the third party has access under the contract the third party has entered into with the Commission.

(d) The Commission may inspect any dispensing center, registered grower, or registered pharmacy.

(e) The Commission shall advance the development of scientific information related to the medical use of marijuana.

(f) (1) On or before September 1, 2012, the Commission shall adopt regulations to implement this subtitle.

(2) Regulations adopted by the Commission may not require registered academic medical centers or physicians to:

   (i) Designate dispensing centers or dispensing pharmacies for patients;

   (ii) Possess, cultivate, or distribute marijuana; or

   (iii) Have any control over the possession, cultivation, or distribution of marijuana.

(g) The Commission may suspend or revoke the registrations of academic medical centers, dispensing centers, dispensing pharmacies, physicians, and registered growers that violate this subtitle or regulations issued under this subtitle.

13–3104.

(a) (1) The Commission shall approve as a certifying physician an individual who:

   (i) Meets the requirements of this subtitle;

   (ii) Completes the training program established under this section; and
(iii) Submits application materials that are satisfactory to the Commission.

(2) A physician certification may be renewed annually.

(B) The Commission shall consult with experts, including academics and medical professionals, to establish a training program to enable physicians to become certifying physicians.

(c) To be registered as a certifying physician, a physician shall submit a proposal to the Commission that includes:

(1) The criteria for including a patient under the care of the physician for the purposes of this subtitle, including qualifying medical conditions;

(2) The criteria the physician will use to exclude patients from the care of the physician for the purposes of this subtitle;

(3) The physician’s plan for screening a patient for dependence, both before and after the qualifying patient is issued a written certification; and

(4) The physician’s plan for the ongoing assessment and follow-up care of a patient and for collecting and analyzing data.

(d) If the Commission finds that a physician’s proposed treatment of a medical condition is within the physician’s clinical practice area, the Commission is encouraged to approve applications for the following medical conditions:

(1) A chronic or debilitating disease or medical condition that results in a patient being admitted into hospice or receiving palliative care; and

(2) A chronic or debilitating disease or medical condition or the treatment of a chronic or debilitating disease or medical condition that produces:

(i) Cachexia, anorexia, or wasting syndrome;

(ii) Severe or chronic pain;
(III) Severe nausea;

(IV) Seizures; or

(V) Severe and persistent muscle spasms.

(E) The Commission may approve applications that include any other condition that is severe and resistant to conventional medicine if:

(1) The failure of approved medications to provide relief has been documented; and

(2) The symptoms can reasonably be expected to be relieved by the medical use of marijuana.

(F) (1) Each certifying physician shall submit an annual report to the Commission no later than 60 days before the expiration of the certifying physician's registration.

(2) An annual report submitted under paragraph (1) of this subsection shall include:

(I) The number of patients served;

(II) The county of residence of each patient served;

(III) Any medical condition for which medical marijuana was recommended; and

(IV) A summary of clinical outcomes, including adverse events and any cases of suspected diversion.

(3) An annual report submitted under paragraph (1) of this subsection may not include any personal information that identifies a patient.

(G) (1) A certifying physician may apply annually for a renewal of a registration.

(2) The Commission shall grant or deny a renewal of a registration based on the certifying physician's performance,
INCLUDING WHETHER THE PHYSICIAN IS PROVIDING CERTIFICATIONS FOR MEDICAL CONDITIONS WITHIN THE PHYSICIAN’S PRACTICE AREA.

(H) **The Commission shall set a reasonable fee for processing physician applications and for the training program for physicians established under this subtitle.**

(I) **A certifying physician shall be protected from civil and criminal penalties under State and local law for actions authorized by this subtitle, including the issuance of written certifications and the collection and analysis of data.**

13 3105.

(A) (1) **An academic medical center may apply to the Commission to conduct research involving the medical use of marijuana.**

(2) **The Commission shall approve the application for registration of an academic medical center that meets the requirements of this subtitle and submits a proposal that is satisfactory to the Commission.**

(3) **Each registered academic medical center registration expires after 1 year, unless it is renewed.**

(B) **A proposal from an academic medical center shall include:**

(1) **A list of medical providers who intend to participate in the program and the qualifications of the medical providers, including professional credentials and training specific to the medical use of marijuana;**

(2) **The criteria for including a patient in the program, including qualifying medical conditions;**

(3) **The criteria the academic medical center will use to exclude a patient from the program;**

(4) **The academic medical center’s plan for screening a patient for dependence, both before and after the qualifying patient is issued a written certification;**
(5) The academic medical center’s plan for the ongoing assessment and follow-up care for a patient and for collecting and analyzing data;

(6) A list of any clinical trials or additional research related to medical marijuana that the academic medical center intends to pursue; and

(7) A letter of approval from an institutional review board for any proposed research activity.

(c) The Commission is encouraged to approve otherwise satisfactory applications for registration that include any of the following medical conditions:

(1) A chronic or debilitating disease or medical condition that results in a patient being admitted into hospice or receiving palliative care; and

(2) A chronic or debilitating disease or medical condition or the treatment of a chronic or debilitating disease or medical condition that produces:

   (i) Cachexia, anorexia, or wasting syndrome;

   (ii) Severe or chronic pain;

   (iii) Severe nausea;

   (iv) Seizures; or

   (v) Severe and persistent muscle spasms.

(d) The Commission may approve applications for registration that include any other condition that is severe and resistant to conventional medicine if:

(1) The failure of approved medications to provide relief has been documented; and

(2) The symptoms can reasonably be expected to be relieved by the medical use of marijuana.
(E) A REGISTERED ACADEMIC MEDICAL CENTER, A PHYSICIAN PARTICIPATING IN A REGISTERED ACADEMIC MEDICAL CENTER’S PROGRAM, AND STAFF OF A REGISTERED ACADEMIC MEDICAL CENTER SHALL BE PROTECTED FROM CIVIL AND CRIMINAL PENALTIES UNDER STATE AND LOCAL LAW FOR ACTIONS AUTHORIZED BY THIS SUBTITLE, INCLUDING CONDUCTING RESEARCH INVOLVING MEDICAL MARIJUANA AND CERTIFYING PATIENTS TO PARTICIPATE IN THE PROGRAM.

(F) (1) EACH REGISTERED ACADEMIC MEDICAL CENTER SHALL SUBMIT AN ANNUAL REPORT TO THE COMMISSION NO LATER THAN 60 DAYS BEFORE THE EXPIRATION OF THE ACADEMIC MEDICAL CENTER’S REGISTRATION.

(2) AN ANNUAL REPORT SUBMITTED UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL INCLUDE:

(I) THE NUMBER OF PATIENTS SERVED;

(II) THE COUNTY OF RESIDENCE OF EACH PATIENT SERVED;

(III) ANY MEDICAL CONDITION FOR WHICH MEDICAL MARIJUANA WAS RECOMMENDED;

(IV) A SUMMARY OF CLINICAL OUTCOMES FOR EACH PATIENT THAT INCLUDES ANY ADVERSE EVENT AND CASE OF SUSPECTED DIVERSION; AND

(V) A PROGRESS REPORT ON RESEARCH STUDIES CONDUCTED UNDER THE MEDICAL MARIJUANA PROGRAM.

(3) AN ANNUAL REPORT SUBMITTED UNDER PARAGRAPH (1) OF THIS SUBSECTION MAY NOT INCLUDE ANY PERSONAL INFORMATION THAT IDENTIFIES A PATIENT.

(4) THE REGISTERED ACADEMIC MEDICAL CENTER SHALL PREPARE A LAY SUMMARY OF THE REPORT THAT IS AVAILABLE TO THE PUBLIC.

(G) (1) A REGISTERED ACADEMIC MEDICAL CENTER MAY APPLY ANNUALLY TO RENEW A REGISTRATION.

(2) THE COMMISSION SHALL GRANT OR DENY AN APPLICATION FOR THE RENEWAL OF A REGISTRATION BASED ON THE REGISTERED ACADEMIC MEDICAL CENTER’S PERFORMANCE, INCLUDING WHETHER THE ACADEMIC
MEDICAL CENTER IS PROVIDING APPROPRIATE TRAINING AND OVERSIGHT FOR CERTIFYING PHYSICIANS AND COLLECTING AND ANALYZING DATA.

(ii) The Commission shall set a reasonable fee for processing academic medical center applications for registration.

13–3106.

(A) The Commission shall issue a request for applications for registration as a registered grower.

(B) (1) The Commission shall require an applicant for registration as a registered grower under subsection (A) of this section to provide the following information:

(i) The name of the individual who is responsible for operating the cultivation facility;

(ii) The location of any proposed cultivation facility;

(iii) The security measures that will be followed by the registered grower in cultivating, storing, and transporting marijuana;

(iv) The method by which the registered grower will account for the amount of marijuana cultivated and transferred to a dispensing center or dispensing pharmacy;

(v) The training that will be provided to employees to prevent diversion;

(vi) How the registered grower will address violations of the diversion policy; and

(vii) Any other information that the Commission considers necessary.

(2) The Commission shall approve the fewest number of registered growers under this section as is reasonable.

(3) A registration issued under this section:
(I) Shall expire 1 year after the date of issuance;

and

(II) May be renewed annually.

(c) (1) A registered grower is exempt from State and local penalties for cultivating marijuana for medical use in accordance with this subtitle.

(2) A registered grower shall:

(i) Be protected from civil and criminal penalties under State and local law for possessing and cultivating marijuana in accordance with this subtitle;

(ii) Be protected from civil and criminal penalties under State and local law for selling, transporting, or transferring marijuana to dispensing centers, dispensing pharmacies, and registered academic medical centers in accordance with this subtitle;

(iii) Meet certain security and safety standards that may be verified by the Commission;

(iv) Submit to pharmacological testing of the marijuana conducted by the registered grower or a private entity to ensure:

1. That the marijuana can be accurately labeled based on the potency and strain of the marijuana; and

2. That there is no adulteration or contamination of the marijuana; and

(v) Conduct a criminal history records check on any employee of the registered grower as provided for in this subtitle, unless the registered grower is also a registered academic medical center.

(d) A registered grower may not:

(1) Hold any other registration issued under this subtitle unless the registered grower is also a registered academic medical center; or
(2) Be a certifying physician.

(F) (1) Unless a registered grower is also a registered academic medical center, an individual who has been convicted of selling a controlled dangerous substance may not be an employee of a registered grower, unless the conviction was for a violation of federal law relating to the sale of marijuana for conduct that is legal under this subtitle.

(2) Unless a registered grower is also a registered academic medical center, an individual who has been convicted of a felony may not be an employee of a registered grower.

(F) The Commission, after consulting with the Department of Agriculture and State Police, shall adopt regulations to be followed by a registered grower, including:

(1) The security features to be required on the registered grower's premises, which shall include a requirement for security 24 hours per day, 7 days per week and a prohibition on cultivating marijuana outdoors;

(2) The security features to be required in transport to an entity that obtains a registration to dispense marijuana;

(3) Labeling requirements, that shall include:

(1) The weight of marijuana in each package; and

(II) The following text or substantially similar text: “WARNING: For qualifying patients' medical use only. Keep away from children. Do not operate machinery or drive while under the influence of marijuana.”;

(4) The location of the registered grower; and

(5) Requirements to ensure that registered growers accurately track the amount of marijuana produced and dispensed and the individuals to whom the marijuana is dispensed.

(G) The Commission may establish a fee for registration and renewal applications for registered growers.
(ii) The Commission shall grant or deny the renewal of registration based on the registered grower’s performance, including whether the registered grower has followed regulations, including the implementation of appropriate procedures for security and nondiversion.

13-3107.

(A) The Commission shall establish a registration program to register entities that are exempt from state and local penalties for distributing marijuana for medical use.

(B) The following entities may apply to register with the Commission to be exempt from state and local penalties for distributing marijuana for medical purposes:

(1) A pharmacy that holds a pharmacy registration issued by the State Board of Pharmacy;

(2) A dispensing center as provided for in this section; and

(3) An academic medical center as provided for in this section.

(C) The Commission shall require an applicant for registration as a dispensing center or dispensing pharmacy to provide the following:

(1) An application fee;

(2) The name of the individual who is responsible for operating the dispensing pharmacy or dispensing center;

(3) The location of the dispensing pharmacy or dispensing center;

(4) The security measures that will be followed by the dispensing pharmacy or dispensing center in receiving, storing, and dispensing marijuana;

(5) The method by which the dispensing pharmacy or dispensing center will account for the amount of marijuana received and dispensed;
(6) The training that will be provided to employees to prevent diversion;

(7) How the dispensing pharmacy or dispensing center will address violations of the diversion policy; and

(8) Any other information that the Commission considers necessary.

(D) (1) A registered academic medical center is not required to register as a registered dispensing center.

(2) An academic medical center may apply to the Commission to dispense marijuana to patients and to operate as a registered academic medical center.

(3) An application submitted under paragraph (2) of this subsection shall include:

   (I) A summary of the training that will be provided to employees and to patients to prevent diversion;

   (II) A description of the materials that will be provided to patients to ensure informed consent; and

   (III) A description of how the academic medical center will address violations of the diversion policy.

(E) (1) Except as provided in paragraph (2) of this subsection, an entity seeking to operate as a registered dispensing center shall perform a criminal history records check on each employee.

(2) The criminal history records check requirement under paragraph (1) of this subsection does not apply to dispensing pharmacies or registered academic medical centers.

(3) As part of the criminal history records check for an employee, an entity shall submit an application to the Central Repository with:

   (I) Two complete sets of the employee’s legible fingerprints; and
(II) Any fee required under State law for access to State criminal history records.

(4) The Central Repository shall forward to the employee, the dispensing center, and the Commission the employee's criminal history record information.

(5) Information obtained from the Central Repository under this subsection is confidential and may not be disseminated.

(6) (I) An individual who has been convicted of the sale of a controlled dangerous substance may not be issued a registration to operate a dispensing center unless the conviction was for a violation of Federal law relating to sale of marijuana for conduct that is legal under this subtitle.

(II) An individual who has been convicted of the sale of a controlled dangerous substance may not be an employee of a dispensing center unless the conviction was for a violation of Federal law relating to sale of marijuana for conduct that is legal under this subtitle.

(III) An individual who has been convicted of a felony may not be issued a registration to operate a dispensing center unless the conviction was for a violation of Federal law relating to the sale of marijuana for conduct that is legal under this subtitle.

(IV) An individual who has been convicted of a felony may not be an employee of a dispensing center unless the conviction was for a violation of Federal law relating to the sale of marijuana for conduct that is legal under this subtitle.

(F) Unless the entity is a registered academic medical center, an entity seeking to be exempt from State and local criminal penalties for operating a registered dispensing center or being a registered grower under this subtitle shall require each employee of the entity to submit to periodic drug testing as determined by the Commission in regulations.

(G) (I) Except as otherwise provided in this subsection, the Commission shall issue a registration to operate a registered
DISPENSING CENTER OR REGISTERED DISPENSING PHARMACY TO AN APPLICANT IF:

(i) The requirements of this section are met;

(ii) The Commission has verified the information contained in the application; and

(iii) The application is in compliance with any requirements issued by the Commission.

(2) The Commission may set reasonable limits on the number of registered dispensing centers in the State or in a geographic area.

(3) If the Commission limits the number of registered dispensing centers, the Commission may consider a proposed dispensing center's plans for security, preventing diversion, and providing lower-cost or free marijuana to qualifying patients with little or no income in determining whether to issue a registration.

(4) The Commission shall approve or deny an application to operate a dispensing center or dispensing pharmacy within 60 days after receipt of a completed application.

(5) The Commission shall assign a unique identification number to each dispensing center or dispensing pharmacy that has been issued a registration under this section.

(6) A denial of an application shall be considered a final agency decision for purposes of judicial review under the Administrative Procedure Act.

(H) An entity that has been issued a registration under this section shall display the registration at the registered dispensing pharmacy or registered dispensing center at all times when the registered dispensing pharmacy or registered dispensing center is in possession of marijuana.

(I) An entity that has been issued a registration under this section shall report any change in information on the registration to the Commission no later than 10 days after the change.
(J) An entity that has been issued a registration under this section may not:

(1) Hold any other registration issued under this subtitle unless the entity is a registered academic medical center; or

(2) Be a certifying physician.

(k) On or before September 1, 2012, the Commission, in consultation with the State Board of Pharmacy, the State police, and stakeholders, shall develop regulations regarding the procedures to be followed by registered academic medical centers, registered dispensing pharmacies, and registered dispensing centers in dispensing, storing, and transporting marijuana under this subtitle.

(l) (1) The Commission shall establish a reasonable fee for applications and the renewal of registrations for dispensing centers and dispensing pharmacies.

(2) The Commission shall grant or deny a renewal based on the registered dispensing center or registered dispensing pharmacy’s performance, including whether the registered dispensing center or registered dispensing pharmacy has followed regulations, including the implementation of appropriate procedures for security and nondiversion.

13-3108.

(a) (1) The Commission, in consultation with State and local law enforcement, shall develop regulations providing for the issuance of registry identification cards to qualifying patients who:

(i) Have received a written certification from a certifying physician; or

(ii) Are enrolled to participate in a registered academic program’s research program.

(2) The Commission may establish an application fee and a renewal fee for the issuance of a registry identification card that may be based on a sliding scale.
(3) The Commission shall issue a registry identification card to a qualifying patient who:

(i) has been issued a valid written certification by a certified physician; or

(ii) has been certified to participate in a medical marijuana program by a registered academic medical center.

(4) To apply for a registry identification card, a qualifying patient shall submit to the Commission:

(i) the name, address, and date of birth of the qualifying patient;

(ii) the written certification issued by the patient’s certifying physician or documentation from a registered academic medical center;

(iii) the name, address, and date of birth of the qualifying patient’s primary caregiver if the patient is seeking the assistance of a primary caregiver;

(iv) the application or renewal fee as determined by the Commission; and

(v) if the qualifying patient is seeking the assistance of a primary caregiver, the reason that the patient requires the assistance of a caregiver to obtain marijuana.

(B) (1) The Commission shall:

(i) approve or deny an application for a registry identification card or renewal within 30 days after receipt of the application or renewal;

(ii) issue a registry identification card within 5 days after approving the application or renewal; and

(iii) ensure that an individual is not designated as a primary caregiver for more than five qualifying patients.
(2) The Commission may deny an application for a registry identification card or renewal only if:

   (i) The applicant fails to provide the information required under this section; or

   (ii) If the Commission determines that the information in the application or renewal was falsified.

(3) The Commission shall deny a request by a qualifying patient for a primary caregiver if:

   (i) The applicant fails to provide the information required under this section;

   (ii) The Commission determines that the information provided in the application or renewal was falsified;

   (iii) The qualifying patient did not provide a convincing reason why the individual needed a primary caregiver;

   (iv) The primary caregiver is already registered to assist at least five or more patients; or

   (v) The primary caregiver has a conviction that precludes participation in the program.

(4) A denial by the Commission of an application for a registry identification card under this section shall be considered a final agency decision for purposes of judicial review under the Administrative Procedure Act.

(c) (1) The Commission shall require each applicant seeking to serve as a primary caregiver to apply to the Central Repository for a criminal history records check.

(2) The Commission shall approve provisionally an application to serve as a primary caregiver pending the results of a criminal history records check.

(3) As part of the application for the criminal history records check under this subsection, an applicant shall submit to the Central Repository:
(I) Two complete sets of the applicant's legible fingerprints taken on forms approved by the director of the Central Repository; and

(II) Any fee required under State law for access to State criminal history records.

(4) The Central Repository shall forward to the applicant and to the Commission the applicant's criminal history record information.

(5) Information obtained from the Central Repository under this subsection is confidential and may not be disseminated.

(6) (I) An applicant who has been convicted of possession or the sale of a controlled dangerous substance may not serve as a primary caregiver unless the conviction occurred on or after September 1, 2012, and was for a violation of federal law relating to possession or sale of marijuana for conduct that is legal under this subtitle.

(II) An individual who has been convicted of a felony may not be issued a registry identification card to serve as a primary caregiver.

(7) On receipt of the criminal history records check from the Central Repository, the Commission shall notify the applicant in writing of the applicant's qualification for or disqualification from serving as a primary caregiver.

(D) (1) A registry identification card issued under this section shall contain the following information:

(I) The name, address, and date of birth of the qualifying patient;

(II) The name, address, and date of birth of the qualifying patient's primary caregiver, if any;

(III) The date of issuance;

(IV) The expiration date of the registry identification, which shall be 1 year after the date of issuance, unless a different date is included on the written certification;
(v) Photo identification of the cardholder;

(vi) A random identification card number; and

(vii) Any other information required by the Commission in regulations.

(2) A primary caregiver or qualifying patient who has been issued a registry identification card shall notify the Commission of any change in the name of a primary caregiver or qualifying patient or address within 10 days after the change or the registry identification card shall be considered void.

(3) (I) If there is a change in the status of a patient’s qualifying medical condition that requires a certifying physician to withdraw the patient’s written certification or requires the qualifying patient’s registered academic medical center to terminate the qualifying patient’s participation in its program, the certifying physician or registered academic medical center shall provide written notice to the patient and the Commission within 10 days after becoming aware of the change.

(ii) On receipt of the notice required under subparagraph (i) of this paragraph, the Commission shall:

1. Revoke the patient’s registry identification card and, if applicable, the patient’s primary caregiver’s registry identification card; and

2. Send the patient and, if applicable, the patient’s primary caregiver a revocation notice requiring the immediate return of all registry identification cards.

(III) On receipt of a revocation notice under subparagraph (ii) of this paragraph, a patient and, if applicable, a patient’s primary caregiver shall:

1. Immediately send to the Commission, or any other entity issuing registry identification cards, the registry identification card of the patient and, if applicable, the patient’s primary caregiver; and
2. Within 15 days, dispose of any marijuana in the patient’s possession by transferring the marijuana to a registered dispensing center or registered dispensing pharmacy.

(e) The Commission shall establish procedures for each registered qualifying patient to designate a single registered dispensing center or registered dispensing pharmacy with the Commission.

(f) (1) The Commission shall maintain a list of the individuals to whom the Commission has issued registry identification cards.

(2) The list maintained by the Commission under paragraph (1) of this subsection:

   (i) is confidential;

   (ii) may not be considered a public record; and

   (iii) may not be disclosed except to:

   1. Authorized employees of the Commission as necessary to perform official duties of the Commission; or

   2. Authorized employees of State or local law enforcement to verify that an individual who is engaged in the suspected or alleged medical use of marijuana is lawfully in possession of a registry identification card.

(3) Employees of State and local law enforcement may not query records for individuals not immediately being considered in cases of suspected marijuana misuse or who present law enforcement with a registry identification card.

(4) Authorized employees of State or local law enforcement may provide the Commission with a registry identification number associated with a registry identification card and receive verification of the name, address, and current program status for the patient associated with the registry identification number.
(A) The following persons acting in accordance with the provisions of this subtitle may not be subject to arrest, prosecution, or any civil or administrative penalty, including civil penalty or disciplinary action, by a professional licensing board, or be denied any right or privilege, for the medical use of marijuana:

(1) A qualifying patient or a patient’s primary caregiver who holds a valid registry identification card and is in possession of an allowable amount of usable marijuana purchased or acquired in accordance with the provisions of this subtitle;

(2) A registered grower or a registered grower’s employee;

(3) If a qualifying patient is unable to dispose of marijuana and the patient does not have a primary caregiver, an individual transporting the qualifying patient’s marijuana to a registered dispensing center or registered dispensing pharmacy;

(4) A dispensing pharmacy that holds a registration under this subtitle or a registered dispensing center or an employee of a registered dispensing pharmacy or registered dispensing center;

(5) A certifying physician;

(6) A registered academic medical center and the staff of the center; and

(7) A laboratory conducting testing of medical marijuana, including testing for potency and contaminants, or an employee of a laboratory conducting testing of medical marijuana.

(B) The possession of, or the application for, a registry identification card does not constitute probable cause to search an individual or the property of an individual possessing or applying for the registry identification card, or otherwise subject the individual or the property of the individual to inspection by a governmental unit.

(C) An individual may not be subject to arrest or prosecution for constructive possession, conspiracy, or any other offense for being in the presence or vicinity of the medical use of marijuana as authorized by this subtitle.
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13-3110.

(A) An agent of a registered dispensing pharmacy or a registered dispensing center may sell or dispense an amount of usable marijuana that does not exceed the amount set by the Commission in a 30-day period to a qualifying patient or the qualifying patient’s primary caregiver if the individual:

(1) presents a valid registry identification card; and

(2) has identified the registered dispensing pharmacy or registered dispensing center as the sole registered dispensing pharmacy or registered dispensing center from which the patient can receive marijuana, in accordance with Commission regulations.

(B) On receipt of the information required under subsection (A) of this section, the approved registered dispensing pharmacy or registered dispensing center shall verify the information presented.

(C) (1) Each approved registered dispensing pharmacy and registered dispensing center shall maintain internal records of each marijuana-dispensing transaction.

(2) The records required under paragraph (1) of this subsection shall include:

(i) the amount of marijuana dispensed;

(ii) the registry identification number of the individual to whom the marijuana was dispensed and whether that individual was a qualifying patient or the qualifying patient’s primary caregiver;

(iii) the strain of marijuana dispensed; and

(iv) the date and time of the transaction.

(3) A record maintained under this subsection:

(i) is confidential; and
(II) May not include names or other personal identifying information.

(D) (1) A qualifying patient may be registered at only one registered dispensing pharmacy or registered dispensing center at any time.

(2) The Commission shall establish procedures to allow a qualifying patient to change the registered dispensing pharmacy or registered dispensing center designated by the patient for a $15 fee.

(3) The Commission may limit the number of times a qualifying patient may change a designation of a registered dispensing pharmacy or registered dispensing center to once every 30 days.

13-3111.

A person who knowingly gives false information or makes a material misstatement in an application for registration or in an application for a renewal of a registration under this subtitle is guilty of a misdemeanor and on conviction is subject to imprisonment not exceeding 1 year, a fine not exceeding $1,000, or both.

13-3112.

(A) This subtitle may not be construed to authorize any individual to engage in the following, and it does not prevent the imposition of any civil, criminal, or other penalties for:

(1) Performing a task under the influence of marijuana, when doing so would constitute negligence or professional malpractice;

(2) Operating, navigating, or being in actual physical control of any motor vehicle, aircraft, or boat while under the influence of marijuana;

(3) Smoking marijuana in any public place;

(4) Smoking marijuana in a motor vehicle; or
(5) Smoking marijuana on private property that:

(I) 1. Is rented from a landlord; and

2. Is subject to a policy that prohibits the smoking of marijuana on the property; or

(II) Is subject to a policy that prohibits the smoking of marijuana on the property of an attached dwelling adopted by one of the following entities:

1. The board of directors of the council of unit owners of a condominium regime; or

2. The governing body of a homeowner's association.

(b) This subtitle may not be construed to provide immunity to a person who violates the provisions of this subtitle from criminal prosecution for a violation of any law prohibiting or regulating the use, possession, dispensing, distribution, or promotion of controlled dangerous substances, dangerous drugs, detrimental drugs, or harmful drugs, or any conspiracy or attempt to commit any of those offenses.

13-3113.

Nothing in this subtitle shall be construed to require a public or private health insurer to reimburse an individual for the costs associated with the medical use of marijuana.

13-3114.

(a) The sale of marijuana may not be advertised on billboards, television, or radio.

(b) (1) The commission may develop additional rules restricting the time, place, and manner that marijuana sales may be advertised.

(2) Restrictions on advertising may not prevent appropriate signs on the property of the registered dispensing pharmacy or registered dispensing center or listings in business directories including phone books.
(A) Beginning October 1, 2013, and each October 1 thereafter, the Commission shall report to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly on:

1. The number of applications for registry identification cards;
2. The number of qualifying patients and primary caregivers registered by the Commission;
3. The nature of the debilitating medical conditions of the qualifying patients;
4. The number of academic medical centers registered and the scope of the programs in the academic medical centers;
5. The entities receiving registrations to grow marijuana;
6. The entities receiving registrations to dispense marijuana;
7. The number of registry identification cards revoked;
8. The number of registrations issued to entities to grow or dispense marijuana that were revoked; and
9. The number of certifying physicians providing written certifications for patients.

(B) The report required under subsection (A) of this section may not contain any identifying information of qualifying patients, primary caregivers, entities selected to grow or dispense marijuana, or certifying physicians.

(C) On or before October 1, 2013, and once every 2 years thereafter, the Commission shall report to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly on:
(1) Whether there are sufficient numbers of registered dispensing pharmacies and registered dispensing centers to meet the needs of registered qualifying patients throughout the State;

(2) Whether the number and scope of academic programs and the number of certifying physicians is sufficient to meet the needs of patients in the State;

(3) Whether any registered dispensing pharmacy or registered dispensing center has charged excessive prices for marijuana that the pharmacy or center dispensed; and

(4) Any new and emerging documented scientific evidence of the efficacious medical use of marijuana, including symptoms or conditions for which marijuana may be an effective treatment.

13–3116.

(A) The Commission may accept from any source grants or contributions to be used in carrying out this subtitle.

(B) Any fees collected under this subtitle:

(1) Shall be used to offset the costs of the Commission’s administration of this subtitle; and

(2) Shall be set at an amount high enough to ensure that the total amount of fees assessed, plus contributions, and grants collected are sufficient to cover the costs of administering this subtitle.

(C) (1) The Commission may distribute any funds received that exceed the amount of funding needed to fulfill its duties under this subtitle to academic institutions or registered academic medical centers in the State to study the impact of the medical marijuana program or to conduct clinical or observational research on the medical efficacy of marijuana, including:

(i) Clinical trials;

(ii) Self–reported initial and long–term effectiveness and safety of patients;
(III) **Physician reports of initial and long-term safety and effectiveness**;

(IV) **Assessments of safety and acceptability of medical marijuana use among the general public and family members of qualifying patients**;

(V) **Impact on patient illicit and prescription drug use before, during, and after use of medical marijuana**;

(VI) **Impact on the quality of life of the patient or the patient’s family**; and

(VII) **Impact on illicit drug use in the State and associated crime statistics**.

(2) The Commission may provide to the General Fund any funds received that exceed the amount of funding needed to fulfill its duties under this subtitle that remain after disbursements are made under paragraph (1) of this subsection.

(B) **“Bona fide physician–patient relationship”** has the meaning stated in §5–601 of the Criminal Law Article.

(C) **“Debilitating medical condition”** has the meaning stated in §5–601 of the Criminal Law Article.

(D) **“Marijuana”** has the meaning stated in §5–101 of the Criminal Law Article.

(E) (1) **“Medical use”** means the acquisition, possession, preparation, use, delivery, transfer, or transportation of marijuana or paraphernalia relating to the administration of marijuana to treat or alleviate a qualifying patient’s debilitating medical condition.

(2) **“Medical use”** does not include the use of marijuana by a designated caregiver who is not a qualifying patient.

(F) **“Physician”** means:
(1) An individual licensed by the State Board of Physicians under Title 14 of the Health Occupations Article to practice medicine; or

(2) In relation to a visiting qualifying patient, an individual licensed to prescribe drugs to individuals in the State of the patient’s residence and who possesses certification from the United States Drug Enforcement Administration to prescribe controlled substances.

(G) “Qualifying patient” means:

(1) A resident of the State who suffers from a debilitating medical condition and possesses a written certification issued to the patient by a physician with whom the patient has a bona fide physician–patient relationship; or

(2) An individual who:

(i) Is not a resident of Maryland or who has been a resident of Maryland for fewer than 30 days;

(ii) Suffers from a debilitating medical condition;

and

(iii) Possesses a valid written certification or an equivalent document issued under the laws of another state that allows the individual to engage in the medical use of marijuana.

(H) (1) “Written certification” means a document that:

(i) Is in the form or substantially in the form provided in § 24–1806 of this subtitle;

(ii) Is signed and dated by a physician;

(iii) Is valid for 1 year; and

(iv) States that in the physician’s professional opinion a patient is likely to receive therapeutic or palliative benefit from the use of marijuana to treat or alleviate the patient’s debilitating medical condition.
(2) “WRITTEN CERTIFICATION” DOES NOT INCLUDE A DOCUMENT THAT IS NOT PROVIDED IN THE COURSE OF A BONA FIDE PHYSICIAN–PATIENT RELATIONSHIP AFTER THE PHYSICIAN HAS COMPLETED A FULL ASSESSMENT OF THE QUALIFYING PATIENT’S MEDICAL HISTORY.

24–1802.

(A) A QUALIFYING PATIENT IS NOT SUBJECT TO ARREST, CITATION, PROSECUTION, OR CIVIL OR ADMINISTRATIVE PENALTY, INCLUDING DISCIPLINARY ACTION, BY A PROFESSIONAL LICENSING BOARD, AND MAY NOT BE DENIED A RIGHT OR PRIVILEGE, FOR THE MEDICAL USE OF MARIJUANA.

(B) A PERSON OTHERWISE ENTITLED TO CUSTODY OF, OR VISITATION OR PARENTING TIME WITH, A MINOR MAY NOT:

(1) BE DENIED THE RIGHT SOLELY FOR CONDUCT ALLOWED UNDER THIS SUBTITLE; OR

(2) BE PRESUMED GUILTY OF NEGLIGENCE OR CHILD ENDANGERMENT.

(C) FOR THE PURPOSES OF MEDICAL CARE, INCLUDING ORGAN TRANSPLANTS, A QUALIFYING PATIENT’S AUTHORIZED USE OF MARIJUANA IN ACCORDANCE WITH THIS SUBTITLE IS THE EQUIVALENT OF THE AUTHORIZED USE OF ANY OTHER MEDICATION USED AT THE DIRECTION OF A PHYSICIAN, AND DOES NOT CONSTITUTE THE USE OF AN ILLICIT SUBSTANCE OR OTHERWISE DISQUALIFY A QUALIFYING PATIENT FROM NEEDED MEDICAL CARE.

(D) (1) A PHYSICIAN IS NOT SUBJECT TO ARREST, PROSECUTION, OR CIVIL OR ADMINISTRATIVE PENALTY, INCLUDING DISCIPLINARY ACTION, BY THE MARYLAND BOARD OF PHYSICIANS OR OTHER OCCUPATIONAL OR PROFESSIONAL LICENSING BOARD OR BUREAU AND MAY NOT BE DENIED A RIGHT OR PRIVILEGE SOLELY FOR PROVIDING WRITTEN CERTIFICATIONS OR FOR OTHERWISE STATING THAT, IN THE PHYSICIAN’S PROFESSIONAL OPINION, A PATIENT IS LIKELY TO RECEIVE THERAPEUTIC OR PALLIATIVE BENEFIT FROM THE MEDICAL USE OF MARIJUANA TO TREAT OR ALLEVIATE THE PATIENT’S DEBILITATING MEDICAL CONDITION.

(2) NOTHING IN THIS SUBTITLE MAY BE CONSTRUED TO PREVENT A PROFESSIONAL LICENSING BOARD FROM SANCTIONING A PHYSICIAN FOR FAILING TO PROPERLY EVALUATE A PATIENT’S MEDICAL CONDITION.

(E) MARIJUANA, MARIJUANA PARAPHERNALIA, PROPERTY, OR INTEREST IN PROPERTY THAT IS POSSESSED, OWNED, OR USED IN CONNECTION
WITH THE MEDICAL USE OF MARIJUANA BY A QUALIFYING PATIENT AS ALLOWED UNDER THIS SUBTITLE, OR ACTS INCIDENTAL TO THE POSSESSION, OWNERSHIP, OR USE, MAY NOT BE SEIZED OR FORFEITED ON THE BASIS OF THE USE OR POSSESSION OF MARIJUANA OR MARIJUANA PARAPHERNALIA.

(F) AN INDIVIDUAL IS NOT SUBJECT TO ARREST, OR PROSECUTION FOR CONSTRUCTIVE POSSESSION, CONSPIRACY, OR OTHER OFFENSE SOLELY FOR BEING IN THE PRESENCE OR VICINITY OF THE MEDICAL USE OF MARIJUANA BY A QUALIFYING PATIENT AS ALLOWED UNDER THIS SUBTITLE.

(G) A VALID WRITTEN CERTIFICATION, OR ITS EQUIVALENT, THAT IS ISSUED UNDER THE LAWS OF ANOTHER STATE, DISTRICT, OR TERRITORY OF THE UNITED STATES THAT ALLOWS, IN THE JURISDICTION OF ISSUANCE, A PATIENT TO POSSESS MARIJUANA FOR MEDICAL PURPOSES, HAS THE SAME FORCE AND EFFECT AS A WRITTEN CERTIFICATION ISSUED IN THIS STATE.

(H) THE POSSESSION OF A WRITTEN CERTIFICATION MAY NOT BE THE BASIS FOR A FINDING OF PROBABLE CAUSE TO SEARCH AN INDIVIDUAL OR THE PROPERTY OF AN INDIVIDUAL, OR OTHERWISE SUBJECT THE INDIVIDUAL OR THE PROPERTY OF THE INDIVIDUAL TO INSPECTION BY A GOVERNMENTAL UNIT.

24–1803.

A WRITTEN CERTIFICATION IS NOT VALID FOR A PATIENT WHO IS A MINOR UNLESS THE WRITTEN CERTIFICATION IS ACCOMPANIED BY A STATEMENT FROM A CUSTODIAL PARENT OR LEGAL GUARDIAN WITH RESPONSIBILITY FOR HEALTH CARE DECISIONS FOR THE MINOR AFFIRMING THAT:

(1) THE PHYSICIAN HAS EXPLAINED THE POTENTIAL RISKS AND BENEFITS OF THE MEDICAL USE OF MARIJUANA TO THE CUSTODIAL PARENT OR LEGAL GUARDIAN; AND

(2) THE CUSTODIAL PARENT OR LEGAL GUARDIAN AGREED TO:

(I) ALLOW THE MINOR’S MEDICAL USE OF MARIJUANA; AND

(II) CONTROL THE ACQUISITION OF THE MARIJUANA AND THE FREQUENCY OF THE MEDICAL USE OF MARIJUANA BY THE MINOR.

24–1804.

THIS SUBTITLE DOES NOT AUTHORIZE AN INDIVIDUAL TO ENGAGE IN OR PREVENT THE IMPOSITION OF CIVIL, CRIMINAL, OR OTHER PENALTIES FOR:
(1) Performing a task under the influence of marijuana when doing so would constitute negligence or professional malpractice;

(2) Operating, navigating, or being in actual physical control of a motor vehicle, aircraft, or boat while under the influence of marijuana;

(3) Smoking marijuana in a public place;

(4) Smoking marijuana in a motor vehicle; or

(5) Smoking marijuana on private property that:

   (I) 1. Is rented from a landlord; and

   2. Is subject to a policy that prohibits the smoking of marijuana on the property; or

   (II) Is subject to a policy that prohibits the smoking of marijuana on the property of an attached dwelling adopted by:

       1. The board of directors of the council of unit owners of a condominium regime; or

       2. The governing body of a homeowner’s association.

24–1805.

This subtitle does not require a public or private health insurer to reimburse an individual for the costs associated with the medical use of marijuana.

24–1806.

“Written certification of qualifying patient

Physician’s name: ________________________________

Maryland Board of Physicians number: ________________________________

Physician’s address: ________________________________
(STREET): ____________________________________________

(CITY, STATE, ZIP CODE): ___________________________ TELEPHONE: ___________________________

PATIENT INFORMATION:

PATIENT’S NAME: ___________________________________ PATIENT’S DATE OF BIRTH: ____________

PATIENT’S ADDRESS IN PHYSICIAN’S RECORDS: ____________________________

EXPIRATION DATE OF CERTIFICATION (12 MONTHS FROM DATE OF PHYSICIAN’S SIGNATURE):

__________________________________________

BY SIGNING THIS FORM, I HEREBY CERTIFY THAT THE ABOVE–NAMED PATIENT IN POSSESSION OF THIS WRITTEN CERTIFICATION HAS BEEN DIAGNOSED WITH A DEBILITATING MEDICAL CONDITION, AS DEFINED IN § 24–1801 OF THE HEALTH–GENERAL ARTICLE OF THE ANNOTATED CODE OF MARYLAND THAT IS SEVERE AND RESISTANT TO CONVENTIONAL MEDICINE.


BASED ON MY ASSESSMENT, DIAGNOSIS, AND TREATMENT OF THIS PATIENT, IT IS MY CONCLUSION THAT THE ABOVE–NAMED PATIENT MAY BENEFIT FROM THE MEDICAL USE OF MARIJUANA AND HAS A QUALIFYING DEBILITATING MEDICAL CONDITION.

PRINTED NAME: ______________________________________

SIGNATURE: _______________________________________ DATE: ________

KEY DEFINITIONS
A bona fide physician–patient relationship is defined in § 24–1801 of the Health – General Article of the Annotated Code of Maryland as follows:

“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 medical condition.

A debilitating medical condition is defined in § 24–1801 of the Health – General Article of the Annotated Code of Maryland, as follows:

“Debilitating medical condition” means a chronic or debilitating disease or medical condition or the treatment of a chronic or debilitating disease or medical condition that produces one or more of the following, as documented by a physician with whom the patient has a bona fide physician–patient relationship:

1. Cachexia or wasting syndrome;
2. Severe or chronic pain;
3. Severe nausea;
4. Seizures;
5. Severe and persistent muscle spasms; or
6. Any other condition that is severe and resistant to conventional medicine.

A written certification is defined in § 24–1801 of the Health – General Article of the Annotated Code of Maryland, as follows:

“Written certification” means a document in the form or substantially in the form provided in § 24–1806 of the Health – General Article, signed and dated by a physician, that is valid for 1 year, and that states that in the physician’s professional opinion a patient is likely to receive therapeutic or palliative benefit from the medical use of marijuana to treat or alleviate the patient’s debilitating medical condition or symptoms associated with the debilitating medical condition. A written certification may be made only in the course of a bona fide physician–patient relationship.
AFTER THE PHYSICIAN HAS COMPLETED A FULL ASSESSMENT OF THE QUALIFYING PATIENT’S MEDICAL HISTORY.”

SECTION 3. AND BE IT FURTHER ENACTED, That the terms of the initial appointed members of the Medical Marijuana Oversight Commission, established under Section 2 of this Act, shall expire as follows:

1. three members in 2014;
2. three members in 2015; and
3. three members in 2016.

SECTION 4. AND BE IT FURTHER ENACTED, That this Act is an emergency measure, is necessary for the immediate preservation of the public health or safety, has been passed by a yea and nay vote supported by three-fifths of all the members elected to each of the two Houses of the General Assembly, and shall take effect from the date it is enacted.

Approved:

________________________________________
Governor.

________________________________________
President of the Senate.

________________________________________
Speaker of the House of Delegates.