

| CHAPTER He-C 400 THERAPEUTIC ~~USE OF~~ CANNABIS PROGRAM

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CHAPTER He-C 400 THERAPEUTIC ~~USE OF~~ CANNABIS PROGRAM

PART He-C 401 THERAPEUTIC ~~USE OF~~ CANNABIS PROGRAM REGISTRY RULES

Statutory Authority: RSA 126-X:6, I

He-C 401.01 Purpose and Scope.

(a) The purpose of these rules is to establish the requirements for issuing registry identification cards to qualifying patients and their designated caregivers for the therapeutic use of cannabis.

(b) ~~This rule shall apply to New Hampshire residents only.~~ Individuals who are not legal residents of the State of New Hampshire shall not be eligible to receive registry identification cards as qualifying patients.

He-C 401.02 Definitions.

(a) “Alternative treatment center” means “alternative treatment center” as defined in RSA 126-X:1, I, namely, “a not-for-profit entity registered under RSA 126-X:7 that acquires, possesses, cultivates, manufactures, delivers, transfers, transports, sells, supplies, and dispenses cannabis, and related supplies and educational materials, to qualifying patients and alternative treatment centers.”

(b) “Cannabis” means “cannabis” as defined in RSA 126-X:1, III, namely, “all parts of any plant of the Cannabis genus of plants, whether growing or not; the seeds thereof; the resin extracted from any part of such plant; and every compound, salt, derivative, mixture, or preparation of such plant, its seeds, or resin. Such term shall not include the mature stalks of such plants, fiber produced from such stalks, oil, or cake made from the seeds of such plants, any other compound, salt, derivative, mixture, or preparation of such mature stalks (except the resin extracted therefrom), fiber, oil or cake, or the sterilized seeds of such plants which are incapable of germination.”

(c) “Commissioner” means the commissioner of the New Hampshire department of Health and human services, or his or her designee.

(d) “Department” means the New Hampshire department of health and human services.

(e) “Diversion” means the obtaining or transferring of cannabis from a legal possession or use to an illegal use or to a person not authorized to use or obtain cannabis under RSA 126-X or He-C 401.

~~(e)~~(f) “Designated caregiver” means “designated caregiver” as defined in RSA 126-X:1, VI, namely, “an individual who:

(a) Is at least 21 years of age;

(b) Has agreed to assist with one or more (not to exceed 5) qualifying patient’s therapeutic use of cannabis, except if the qualifying patient and designated caregiver each live greater than 50 miles from the nearest alternative treatment center, in which case the designated caregiver may assist with the therapeutic use of cannabis for up to 9 qualifying patients;

(c) Has never been convicted of a felony or any felony drug-related offense; and

(d) Possesses a valid registry identification card issued pursuant to RSA 126-X:4.”

~~(f)~~(g) “Minor” means an applicant who is under 18 years of age.

~~(g)~~(h) “Provider” means:

(1) A physician licensed to prescribe drugs to humans under RSA 329 and who possesses an active registration certification from the United States Drug Enforcement Administration to prescribe controlled substances; or

(2) An advanced practice registered nurse licensed to prescribe drugs to humans under RSA 326-B:18 and who possesses an active registration certification from the United States Drug Enforcement Administration to prescribe controlled substances.

~~—(h) “Provider-patient relationship” means “provider-patient relationship” as defined in RSA 126-X:1, VIII, namely, “at least a 3-month medical relationship between a licensed provider and a patient that includes an in-person exam, a history, a diagnosis, and a treatment plan appropriate for the licensee’s medical specialty.”~~

(i) “Provider-patient relationship” means at least a 3-month medical relationship between a licensed provider and a patient, unless the 3-month requirement does not apply in accordance with He-C 401.06(b)(1)b., during which the provider has conducted a full assessment of the patient’s medical history and current medical condition in accordance with He-C 401.06(b)(2).

~~(j)~~(j) “Qualifying medical condition” means “qualifying medical condition” as defined in RSA 126-X:1, IX(a), namely, “the presence of:

(1) Cancer, glaucoma, positive status for human immunodeficiency virus, acquired immune deficiency syndrome, hepatitis C currently receiving antiviral treatment, amyotrophic lateral sclerosis, muscular dystrophy, Crohn’s disease, agitation of Alzheimer’s disease, multiple sclerosis, chronic pancreatitis, spinal cord injury or disease, traumatic brain injury, or one or more injuries that significantly interferes with daily activities as documented by the patient’s provider; and

(2) A severely debilitating or terminal medical condition or its treatment that has produced at least one of the following: elevated intraocular pressure, cachexia, chemotherapy-induced anorexia, wasting syndrome, severe pain that has not responded to previously prescribed medication or surgical measures or for which other treatment options produced serious side effects, constant or severe nausea, moderate to severe vomiting, seizures, or severe, persistent muscle spasms.”

~~(k)~~(k) “Qualifying patient” means “qualifying patient” as defined in RSA 126-X:1, X, namely “a resident of New Hampshire who has been diagnosed by a provider as having a qualifying medical condition and who possesses a valid registry identification card issued pursuant to RSA 126-X:4.”

~~(l)~~(l) “Registry identification card” means “registry identification card” as defined in RSA 126-X:1, XI, namely, “a document indicating the date issued and expiration date by the department pursuant to RSA 126-X:4 that identifies an individual as a qualifying patient or a designated caregiver.”

~~(m)~~(m) “Therapeutic use” means “therapeutic use” as defined in RSA 126-X:1, XIII, namely, “the acquisition, possession, cultivation, preparation, use, delivery, transfer, or transportation of cannabis or

paraphernalia relating to the administration of cannabis to treat or alleviate a qualifying patient’s qualifying medical condition or symptoms or results of treatment associated with the qualifying patient’s qualifying medical condition. It shall not include:

- (a) The use of cannabis by a designated caregiver who is not a qualifying patient; or
- (b) Cultivation or purchase by a visiting qualifying patient; or
- (c) Cultivation by a designated caregiver or qualifying patient.”

~~(m)(n)~~ “Visiting qualifying patient” means “visiting qualifying patient” as defined in RSA 126-X:1, XVI, namely, “a patient with a qualifying medical condition who is not a resident of New Hampshire or who has been a resident of New Hampshire for fewer than 30 days and is not eligible to purchase therapeutic cannabis in New Hampshire or receive cannabis from a qualifying New Hampshire patient.”

~~(n) “Written certification” means “written certification” as defined in RSA 126 X:1, XVII, namely, “documentation of a qualifying medical condition by a provider pursuant to rules adopted by the department pursuant to RSA 541-A for the purpose of issuing registry identification cards, after having completed a full assessment of the patient’s medical history and current medical condition made in the course of a provider-patient relationship of at least 3 months in duration. The 3 month requirement for the provider-patient relationship required in this paragraph shall not apply if the provider issuing the written certification certifies that the onset of the patient’s qualifying medical condition occurred within the past 3 months, and the certifying provider is primarily responsible for the patient’s care related to his or her qualifying medical condition. The date of issuance and the patient’s qualifying medical condition, symptoms or side effects, the certifying provider’s name, medical specialty, and signature shall be specified on the written certification.”~~

~~(o) “Written certification” means documentation of a qualifying medical condition by a provider for the purpose of issuing registry identification cards, after having completed a full assessment of the patient’s medical history and current medical condition in accordance with He-C 401.06(b)(2) and made in the course of a provider-patient relationship, and which includes the date of issuance, the patient’s qualifying medical condition, symptoms or side effects, the certifying provider’s name, medical specialty, and signature.~~

#### He-C 401.03 Registry Identification Card Required.

(a) In order to receive legal protection for the therapeutic use of cannabis as authorized by RSA 126-X, an individual shall apply for and receive a registry identification card for the therapeutic use of cannabis.

(b) A qualifying patient or designated caregiver shall be in possession of his or her registry identification card at all times while in possession of cannabis outside his or her home.

(c) Pursuant to RSA 126-X:3, V, a qualifying patient or designated caregiver who is found to be in possession of cannabis outside of his or her home and is not in possession of his or her registry identification card shall be subject to a fine of up to \$100.

#### He-C 401.04 Initial Application Requirements for Qualifying Patients.

(a) Applicants for a qualifying patient registry identification card shall submit a completed application, “Application for the Therapeutic Use of Cannabis – Qualifying Patient” (edition date), to the department, which includes the following:

- (1) Indication whether it is an initial or renewal application, and if a renewal application, the applicant's current registry identification number;
- (2) The following applicant information:
  - a. Full name;
  - b. Mailing address;
  - c. Physical address if different than mailing address, except that if the applicant is homeless this shall not be required;
  - d. Telephone number ~~for both home and work, as applicable~~;
  - e. Date of birth; and
  - f. NH driver's license number or state or federal government-issued identification card number, if a copy of this documentation is provided as proof of NH residency in accordance with (b)(4) below, except that if the applicant is a minor this information shall be provided for the applicant's custodial parent or legal guardian;
- (3) The following information about the applicant's certifying provider(s):
  - a. Full name;
  - b. Business address; and
  - c. Telephone number;
- (4) A signed release authorizing the release of relevant medical information by the certifying provider to the department if further information about the applicant's qualifying medical condition is ~~needed~~ required by the department;
- (5) The following information about the applicant's designated caregiver, if the applicant has designated a caregiver:
  - a. Full name;
  - b. Mailing address;
  - c. Physical address if different than mailing address;
  - d. Telephone number ~~for both home and work, as applicable~~; and
  - e. Date of birth;
- (6) The name and city or town of the applicant's designated alternative treatment center;
- (7) If the applicant is a minor, the attestations and consents required by He-C 401.08 ~~(f)~~ (g) and ~~(g)~~ (h);

(8) The initialing of all acknowledgements required on the application, including the acknowledgement of the limitations on the applicant’s authorization for the therapeutic use of cannabis and that such authorization is applicable only in New Hampshire;

(9) A signed certification that the applicant is a resident of New Hampshire and that the facts as stated in the application are accurate to the best of ~~his or her~~ the applicant’s knowledge and belief;

(10) A signed pledge not to divert cannabis to anyone who is not allowed to possess cannabis pursuant to RSA 126-X and acknowledgement that diversion of cannabis is punishable as a class B felony and will result in revocation of his or her registry identification card, in addition to other penalties for the illegal sale of cannabis; ~~and~~

(11) All other information required by the “Application for the Therapeutic Use of Cannabis – Qualifying Patient” (edition date); ~~and~~

(12) A statement that false statements made on the application are punishable as unsworn falsification pursuant to RSA 641:3.

(b) In addition to (a) above, applicants shall provide to the department the following supporting documentation:

(1) A “Written Certification for the Therapeutic Use of Cannabis” (edition date) completed by the patient’s provider in accordance with He-C 401.07, except that a written certification completed more than 60 days prior to the date of the applicant’s application submission shall not be accepted;

(2) A non-refundable fee in accordance with He-C 401.14(b)(1) or (2);

(3) A recent passport style photograph of the applicant’s face in natural color, which meets the following requirements:

a. A digital photograph, in .jpg format, supplied on a compact disc (CD) which is labeled with the applicant’s name and date of birth;

b. Taken against a white backdrop;

c. The photograph shall contain a front image of the applicant’s full face;

d. The applicant’s face shall take up at least 70% of the photograph;

e. The applicant shall not wear a hat, sunglasses, or any other item that might alter or disguise the overall features of the face; and

f. The photograph shall have been taken not more than 30 days prior to the date of the application; and

(4) Proof of New Hampshire residency, as follows, except that if the applicant is a minor this information shall be provided for the applicant’s custodial parent or legal guardian:

- a. A copy of the applicant’s New Hampshire driver’s license;
  - b. A copy of the applicant’s state or federal government-issued identification card that shows the applicant’s name and address; or
  - c. If documentation in a. and b. above is unavailable, other documentation that contains the applicant’s name and current address and which indicates New Hampshire residency, such as:
    1. A current lease agreement;
    2. Tax documents from the previous calendar year; or
    3. A utility bill issued within the previous 2 months of the date of the application.
- (c) The applicant shall mail or hand-deliver the documents in (a) and (b) above to:

New Hampshire Department of Health and Human Services  
Therapeutic Cannabis Program – Registry  
129 Pleasant Street  
Concord, NH 03301

He-C 401.05 Initial Application Requirements for Designated Caregivers.

(a) Applicants for a designated caregiver registry identification card shall submit a completed application, “Application for the Therapeutic Use of Cannabis – Designated Caregiver” (edition date), to the department, which includes the following:

- (1) Indication whether it is an initial or renewal application, and if a renewal application, the applicant’s current registry identification number;
- (2) The following applicant information:
  - a. Full name;
  - b. Mailing address;
  - c. Physical address if different than mailing address;
  - d. Telephone number ~~for both home and work, as applicable~~; and
  - e. Date of birth;
- (3) The following qualifying patient information for each qualifying patient the applicant will be assisting with the therapeutic use of cannabis, which shall not exceed 5 qualifying patients, except that additional qualifying patients shall be allowed, up to a maximum of 9, if both the designated caregiver and the additional qualifying patients each live greater than 50 miles from the nearest alternative treatment center:
  - a. Full name;

- b. Mailing address;
- c. Physical address if different than mailing address;
- d. Telephone number ~~for both home and work, as applicable~~;
- e. Date of birth; and
- f. The name and city or town of the alternative treatment center the qualifying patient has designated;

(4) The initialing of all acknowledgements required on the application, including the acknowledgement of the limitations on the applicant’s authorization for the therapeutic use of cannabis and that such authorization is applicable only in New Hampshire;

(5) A signed certification that the facts as stated in the application are accurate to the best of ~~his or her~~ the applicant’s knowledge and belief;

(6) A signed pledge not to divert cannabis to anyone who is not allowed to possess cannabis pursuant to RSA 126-X and acknowledgement that diversion of cannabis is punishable as a class B felony and will result in revocation of his or her registry identification card, in addition to other penalties for the illegal sale of cannabis; ~~and~~

(7) All other information required by the “Application for the Therapeutic Use of Cannabis – Designated Caregiver” (edition date); and

(8) A statement that false statements made on the application are punishable as unsworn falsification pursuant to RSA 641:3.

(b) In addition to (a) above, applicants shall provide to the department the following supporting documentation:

(1) A non-refundable fee in accordance with He-C 401.14(b)(1) or (2); and

(2) A recent passport style photograph of the applicant’s face in natural color, which meets the following requirements:

- a. A digital photograph, in .jpg format, supplied on a compact disc (CD) which is labeled with the applicant’s name and date of birth;
- b. Taken against a white backdrop;
- c. The photograph shall contain a front image of the applicant’s full face;
- d. The applicant’s face shall take up at least 70% of the photograph;
- e. The applicant shall not wear a hat, sunglasses, or any other item that might alter or disguise the overall features of the face; and

f. The photograph shall have been taken not more than 30 days prior to the date of the application.

(c) In addition to the materials in (a) and (b) above, for each applicant the department shall also receive the results of a state and federal criminal history records check from the division of state police, department of safety. An application shall not be considered complete without the results of a state and federal criminal history records check.

(d) In order for the department to receive the results of a state and federal criminal history records check, an applicant shall submit to the division of state police the following:

- (1) A notarized criminal history record release form, as provided by the division of state police, which authorizes the release of the applicant's criminal history record, if any, to the department;
- (2) A complete set of electronic fingerprints taken by a qualified law enforcement agency or an authorized employee of the department of safety; and
- (3) The required fee.

(e) In the event that, after 2 attempts, the applicant's electronic fingerprints are invalid due to insufficient pattern, ~~the applicant shall:~~

(1) The applicant shall obtain a police clearance from the local police department of each town, city, or county where the applicant has lived during the past 5 years;

(2) The applicant shall submit the police clearances obtained in (1) above to the division of state police; and

(3) The department shall receive from the division of state police the results of the police clearance check process.

~~(1) Provide on the application in (a) above the locations of all the places he or she has lived during the past 5 years; and~~

~~(2) Submit with the application the 2 notices received from the division of state police indicating that his or her fingerprints are invalid due to insufficient pattern.~~

(f) The applicant shall mail or hand-deliver the documents in (a) and (b) above, ~~and in (e)(2) above if applicable,~~ to:

New Hampshire Department of Health and Human Services  
Therapeutic Cannabis Program – Registry  
129 Pleasant Street  
Concord, NH 03301

He-C 401.06 Provider Requirements.

(a) The department shall accept written certifications for the therapeutic use of cannabis only from providers who hold:

(1) An active license, in good standing, pursuant to RSA 329 for physicians or pursuant to RSA 326-B:18 for advanced practice registered nurses; ~~or~~ and

(2) An active federal Drug Enforcement Administration controlled substance registration in good standing.

(b) A provider issuing a written certification shall:

(1) Have a provider-patient relationship with the patient, as defined in He-C 401.02 ~~(h)(i)~~ (i) ~~and RSA 126-X:1, VIII~~, as indicated by the existence of either:

a. At least a 3-month medical relationship between the provider and the patient; or

b. ~~Pursuant to RSA 126-X:1, XVII, a~~ A medical relationship between the provider and the patient that is less than 3 months duration provided that the provider certifies on the “Written Certification for the Therapeutic Use of Cannabis” that the onset or diagnosis of the patient’s qualifying medical condition occurred within the past 3 months, and the certifying provider is primarily responsible for the patient’s care related to his or her qualifying medical condition;

(2) Conduct a full assessment of the patient’s medical history and current medical condition which includes:

a. An in-person physical examination of the patient;

b. A medical history of the patient, including a prescription history;

c. A review of laboratory testing, imaging, and other relevant tests;

d. Appropriate consultations;

~~e.e.~~ A diagnosis of the patient’s current medical condition; and

~~d.f.~~ The development of a treatment plan for the patient appropriate for the provider’s specialty;

(3) Diagnose the patient as having a qualifying medical condition, as defined in He-C 401.02 ~~(h)(j)~~ (j) and RSA 126-X:1, IX(a), or as approved in accordance with He-C 401.09;

(4) Explain the potential ~~risks and benefits~~ health effects of the therapeutic use of cannabis;

a. To the patient; or

b. In the case of a patient who is a minor, to the minor’s custodial parent or legal guardian with responsibility for health care decisions for the patient, which shall be inclusive of potential risks and benefits of the therapeutic use of cannabis;

(5) Be of the opinion that ~~the potential benefits of the patient’s~~ the patient’s therapeutic use of cannabis is appropriate for the patient’s qualifying medical condition ~~would likely outweigh the health risks of such use to the patient;~~

(6) ~~Be reasonably able~~ Make reasonable efforts to follow the patient clinically at appropriate intervals to provide follow-up care and treatment to the patient including, but not limited to, physical examinations, to determine the ~~efficacy~~ health effects of cannabis for treating the patient's qualifying medical condition or the symptom of the qualifying medical condition for which the written certification was issued;

(7) Comply with the generally accepted standards of medical practice ~~except to the extent such standards would counsel against certifying a qualifying patient for the therapeutic use of cannabis;~~

(8) Maintain medical records for all patients for whom the provider has issued a written certification which support the certification of a qualifying medical condition;

(9) Make a copy of such records which support the certification of a qualifying medical condition available to the department, and otherwise provide information to the department upon request about the patient's qualifying medical condition, to ensure compliance with RSA 126-X and He-C 401; and

(10) If the provider provides ~~instructions recommendations~~ for the therapeutic use of cannabis to the patient, ~~also securely transmit and chooses to send~~ such instructions to the patient's designated alternative treatment center, securely transmit such instructions; ~~and~~

~~(11) Notify the department in writing if the patient no longer suffers from a qualifying medical condition or should discontinue using cannabis.~~

(c) A provider shall not consider a patient to have a qualifying medical condition if a patient who has had a diagnosis of a qualifying medical condition in the past ~~does not have an active~~ no longer actively has a qualifying medical condition, unless the symptoms related to such qualifying medical condition are mitigated by the therapeutic use of cannabis, ~~and is not undergoing treatment for such condition.~~

(d) If the patient's qualifying medical condition pursuant to RSA 126-X:1, IX(a)(2), is severe pain, the provider shall:

(1) Either:

- a. Document ~~that~~ previously prescribed medication or surgical measures to which the severe pain has not responded; or
- b. Document ~~that~~ previously prescribed other treatment options which have produced serious side effects; and

(2) Maintain medical records of all previously prescribed medication, surgical measures, and other treatments.

~~(e) A provider shall, prior to issuing a written certification for a minor, secure written consent from the minor's custodial parent or legal guardian to allow the minor's therapeutic use of cannabis.~~

~~(f)~~(e) A provider issuing a written certification shall not delegate to any other health care professional or any other person, authority to diagnose a patient as having a debilitating medical condition.

~~(g)(f)~~ A provider issuing a written certification shall not issue a written certification for him or herself or for the provider's immediate family members.

~~(h)(g)~~ Pursuant to ~~RSA 126-X:8, XVIII, aA~~ provider shall not:

~~(1) Accept, solicit, or offer any form of pecuniary remuneration from or to an alternative treatment center, except if the provider is employed by an alternative treatment center;~~

~~(2)(1)~~ Offer a discount or other thing of value to a patient who uses or agrees to use a particular alternative treatment center;

~~(3)(2)~~ Examine a patient in relation to issuing a written certification at a location where cannabis is sold or distributed; or

~~(4)(3)~~ Hold any economic interest in an alternative treatment center, including but not limited to employment at an alternative treatment center, if the provider issues written certifications to patients.

~~(h)(h)~~ Nothing in He-C 401 shall prohibit a provider from notifying the department if the provider acquires information indicating that a qualifying patient:

~~(1) s~~Should no longer be certified for the therapeutic use of cannabis; ~~or that a qualifying patient~~

~~(2) f~~Falsified information that was the basis of the provider's written certification;

~~(3) No longer suffers from a qualifying medical condition; or~~

~~(4) Should discontinue using cannabis.~~

#### He-C 401.07 Written Certification Requirements.

(a) The patient's provider shall complete a "Written Certification for the Therapeutic Use of Cannabis" (edition date).

(b) The "Written Certification for the Therapeutic Use of Cannabis" (edition date) shall be:

~~(1) Completed within 60 days of the qualifying patient's application; and~~

~~(2) P~~provided to the qualifying patient for submission with the application materials, as required by He-C 401.04(b)(1).

(c) On the "Written Certification for the Therapeutic Use of Cannabis" (edition date), the provider shall:

(1) Certify that he or she is a provider, as defined in He-C 401.02~~(g)(h) and RSA 126-X:1, VII(a)~~, who holds:

a. An active license, in good standing, pursuant to RSA 329 for physicians or pursuant to RSA 326-B:18 for advanced practice registered nurses; and

b. An active federal Drug Enforcement Administration controlled substance registration in good standing;

(2) Certify that he or she has a provider-patient relationship with the patient, as follows:

~~a. In accordance with RSA 126 X:1, VIII, namely, “at least a 3-month medical relationship between a licensed provider and a patient that includes an in-person exam, a history, a diagnosis, and a treatment plan appropriate for the licensee’s medical specialty”; or~~

~~b. In accordance with RSA 126 X:1, VIII, namely, “at least a 3-month medical relationship between a licensed provider and a patient that includes an in-person exam, a history, a diagnosis, and a treatment plan appropriate for the licensee’s medical specialty”, except that pursuant to RSA 126 X:1, XVII, the 3-month requirement for the provider-patient relationship required in this paragraph shall not apply if the provider issuing the written certification certifies that the onset of the patient’s qualifying medical condition occurred within the past 3 months, and the certifying provider is primarily responsible for the patient’s care related to his or her qualifying medical condition;~~

a. “I have completed a full assessment of the patient’s medical history and current medical condition in accordance with He-C 401.06(b)(2) and made in the course of a provider-patient relationship of at least 3 months in duration”; or

b. “I have completed a full assessment of the patient’s medical history and current medical condition in accordance with He-C 401.06(b)(2), but I do not have a provider-patient relationship of at least 3 months in duration. The onset or diagnosis of my patient’s qualifying condition occurred within the past 3 months, and I am primarily responsible for the patient’s care related to his or her qualifying medical condition”;

(3) Certify the dates of the provider-patient relationship in (2) above;

(4) Certify that his or her patient has a qualifying medical condition, as defined in He-C 401.02~~(i)~~(j) and RSA 126-X:1, IX(a), or as approved in accordance with He-C 401.09, which includes both a condition and symptoms or side effects;

(5) Certify that the he or she has explained the potential ~~risks and benefits~~health effects of the therapeutic use of cannabis:

~~a. †To the patient;~~ or

b. In the case of a patient who is a minor, to the patient’s custodial parent or legal guardian with responsibility for health care decisions for the patient, which shall be inclusive of the potential risks and benefits of the therapeutic use of cannabis; and

(6) Indicate the duration for which the registry identification card shall be valid, if less than one year from its issuance.

(d) False statements made on the written certification are punishable as unsworn falsification pursuant to RSA 641:3.

(a) The minor applicant’s custodial parent or legal guardian who is responsible for the health care decisions of the applicant shall submit the “Application for the Therapeutic Use of Cannabis – Qualifying Patient” required by He-C 401.04(a) on behalf of the applicant.

(b) In cases where parents share legal custody of a minor applicant, the parent submitting an application shall notify the other parent with legal custody of the minor applicant in advance of submitting the application to the department by providing to the other parent the completed application and the completed written certification.

(c) In cases where a minor applicant’s legal guardian is not a custodial parent, the legal guardian shall submit with the application proof of legal guardianship.

~~(b)~~(d) The applicant’s custodial parent or legal guardian who is responsible for the health care decisions of the applicant shall submit 2 written provider certifications, one of which shall be from a pediatrician.

~~(e)~~(e) The applicant’s custodial parent or legal guardian who is responsible for the health care decisions of the applicant shall serve as the applicant’s designated caregiver by:

- (1) Submitting the “Application for the Therapeutic Use of Cannabis – Designated Caregiver” required by He-C 401.05(a) to be a designated caregiver; and
- (2) Being approved to be the applicant’s designated caregiver.

~~(f)~~(f) The patient application in (a) above shall not be considered complete, and shall not be processed, if it is not accompanied by the designated caregiver application in ~~(e)~~(e)(1) above.

~~(e)~~(g) If the applicant’s custodial parent or legal guardian who is responsible for the health care decisions of the applicant is not approved to be the applicant’s designated caregiver, the applicant’s application to be a qualifying patient shall be denied.

~~(f)~~(h) The applicant’s custodial parent or legal guardian who is responsible for the health care decisions of the applicant shall attest, on the “Application for the Therapeutic Use of Cannabis – Qualifying Patient,” that:

- (1) He or she is the custodial parent or legal guardian of the applicant;
- (2) He or she is responsible for the applicant’s health care decisions;
- (3) The applicant’s health care provider has explained to the parent or legal guardian who is responsible for the health care decisions of the applicant the potential risks and benefits of the therapeutic use of cannabis; and
- (4) He or she understands that if his or her application to be a designated caregiver is not approved, then the applicant’s application to be a qualifying patient shall not be approved.

~~(e)~~(i) The applicant’s custodial parent or legal guardian who is responsible for the health care decisions of the applicant shall consent, on the “Application for the Therapeutic Use of Cannabis – Qualifying Patient”:

- (1) To allow the applicant’s therapeutic use of cannabis;
- (2) To serve as the applicant’s designated caregiver; and
- (3) To control the acquisition of the cannabis and the frequency of the therapeutic use of cannabis by the applicant.

He-C 401.09 Approval of a Severely Debilitating or Terminal Medical Condition not Listed as a Qualifying Medical Condition.

(a) ~~Providers~~ Any person seeking to have the department include a severely debilitating or terminal medical condition that is not listed as a qualifying medical condition as defined in He-C 401.02~~(i)~~(j) and in RSA 126-X:1, IX(a), shall submit a written petition to the ~~commissioner~~ department for consideration.

(b) The ~~commissioner~~ department shall consider a petition only if it includes the following information:

~~(1) A completed “Written Certification for the Therapeutic Use of Cannabis” (edition date) for his or her patient;~~

(1) A detailed justification for including a new medical condition as a qualifying medical condition;

(2) A description of the extent to which the medical condition is generally accepted by the medical community as a valid, existing medical condition, and is considered severely debilitating or terminal;

(3) If one or more treatments for the condition, rather than the condition itself, are alleged to be the cause of ~~the patient’s~~ suffering, a description of the extent to which the treatments causing suffering are generally accepted by the medical community as valid treatments for the condition;

(4) A description of the symptoms caused by the condition or treatments thereof and the extent to which the condition or the treatments thereof cause elevated intraocular pressure, cachexia, chemotherapy-induced anorexia, wasting syndrome, severe pain that has not responded to previously prescribed medication or surgical measures or for which other treatment options produced serious side effects, constant or severe nausea, moderate to severe vomiting, seizures, or severe, persistent muscle spasms;

(5) A description of the availability, or lack thereof, of conventional medical treatments, other than those that cause suffering, to alleviate suffering caused by the condition or the treatment thereof;

(6) A description of the extent to which evidence that is generally accepted among the medical community and other experts supports a finding that the use of cannabis alleviates suffering caused by the condition or the treatment thereof; and

(7) A description of any information or studies known to the petitioner regarding health effects, including any beneficial or adverse effects, from the use of cannabis in patients with the medical condition that is the subject of the petition.

(c) If a medical condition in a petition has been previously considered and rejected by the ~~commissioner~~department, or is determined by the ~~commissioner~~department to be substantially similar to such a rejected condition, the ~~commissioner~~department shall not accept the petition for further consideration unless the petition contains new scientific evidence or research, or describes substantially different symptoms, not previously considered in an earlier petition.

(d) The ~~commissioner~~department shall provide written notice to the petitioner whether the petition is accepted or rejected for consideration.

(e) At least twice per year, the ~~commissioner~~department shall conduct a public hearing to evaluate any petitions it has accepted.

(f) No less than 20 days before each public hearing, the ~~commissioner~~department shall provide notice of such hearing by publishing on its Internet website the date, time and location of the hearing, and the medical condition(s) that will be considered.

(g) In addition to information provided in a petition and at the public hearing, the ~~commissioner~~department may consider scientific, medical or other evidence and research pertaining to the petition, and may consider information provided, in person or in writing, from other persons knowledgeable about the medical condition from within and without the department, including members of the therapeutic cannabis advisory council, as established pursuant to RSA 126-X:9.

(h) Following the public hearing, the ~~commissioner~~department shall consider the petition, the public comments, and any additional information or expertise described in (g) above for each proposed medical condition considered at the hearing.

(i) Within 180 days of the receipt of a petition accepted by the ~~commissioner~~department for consideration, the ~~commissioner~~department shall issue a written decision about each medical condition for which a petition was accepted for consideration.

(j) The ~~commissioner~~department shall include in the written decision the following:

~~(1) Whether the medical condition, medical treatment or disease is severely debilitating or terminal;~~

~~(2) Whether cannabis is more likely than not to have the potential to be beneficial to treat or alleviate the debilitation associated with the medical condition or treatment thereof;~~

~~(3) Whether the medical condition will now be included as a qualifying medical condition for the therapeutic use of cannabis; and~~

~~(4)(1) Other matters that the ~~commissioner~~department considers relevant to the decision made about the petition; and~~

(2) Whether the medical condition will now be included as a qualifying medical condition for the therapeutic use of cannabis; and

(k) A medical condition that has been approved by the ~~commissioner~~ department as a qualifying medical condition for the therapeutic use of cannabis in accordance with (a) through (j) above shall be available to all individuals who apply for a registry identification card as a qualifying patient.

(l) Any person seeking to have the department remove a qualifying condition that has been approved in accordance with (a) through (k) above shall submit a written petition to the department for consideration.

(m) The department shall consider a petition submitted in (l) above, with the input and advice of the therapeutic use of cannabis advisory council, only if it includes:

(1) A detailed justification for removing the medical condition as a qualifying medical condition; and

(2) Information that rebuts the information provided in the original petition in (b) above and as considered by the department in (g) above.

(n) The process described in (c) through (i) above shall be followed for petitions submitted in accordance with (l) above.

(o) The department shall include in the written decision the following:

(1) Matters that the department considers relevant to the decision made about the petition; and

(2) Whether the medical condition will be removed as a qualifying medical condition for the therapeutic use of cannabis.

(p) A medical condition that has been removed by the department as a qualifying medical condition for the therapeutic use of cannabis in accordance with (l) through (o) above shall not be available to any individual who applies for a registry identification card as a qualifying patient.

(q) Pursuant to RSA 126-A:5, VIII(c)-(e), the commissioner shall not delegate, but shall retain, his or her decision making authority on all appeals made under this section.

#### He-C 401.10 Processing of Applications and Issuance of Registry Identification Cards.

(a) An application for initial approval as a qualifying patient or a designated caregiver shall be complete when the department determines that all information and supporting documentation required by He-C 401.04 or He-C 401.05, or both in the case of a minor patient applicant, have been received.

(b) If an application does not contain all of the items required by He-C 401.04 or He-C 401.05, or both in the case of a minor patient applicant, the department shall notify the applicant in writing within 10 business days specifying any information or supporting documentation required to be submitted before the application can be processed.

(c) If after written notice in (b) above the applicant fails to provide the missing information or supporting documentation, including payment of the required fee, within 30 days of such notice:

(1) The application shall be considered incomplete and shall not be processed; and

- (2) The applicant may reapply by submitting a new initial application in accordance with He-C 401.04 or He-C 401.05.
- (d) The department shall approve an applicant as a qualifying patient if the department determines that:
- (1) The applicant has submitted to the department a complete application and required supporting documentation in accordance with He-C 401.04;
  - (2) The applicant is a resident of New Hampshire;
  - (3) The applicant’s medical provider has completed a written certification that meets the requirements of He-C 401.07 and has certified that the applicant has a qualifying medical condition which meets the definition in He-C 401.02~~(h)(j)~~;
  - (4) All information submitted is accurate;
  - (5) No basis for denial, as established in He-C 401.12(a), exists; and
  - (6) In the case of a minor patient, all requirements in He-C 401.08 have been met.
- (e) The department shall approve an applicant as a designated caregiver if the department determines that:
- (1) The applicant has submitted to the department a complete application and required supporting documentation in accordance with He-C 401.05;
  - (2) The applicant is at least 21 years old;
  - (3) Based upon the results of the criminal history records or the police clearances released to the department by the division of state police, ~~or the police clearances received from each location where the applicant lived during the past 5 years,~~ the applicant has never been convicted of a felony;
  - (4) The qualifying patient(s) listed on the caregiver application has designated the caregiver applicant as the qualifying patient’s caregiver;
  - (5) The number of qualifying patients listed on the caregiver application does not exceed 5, except that additional qualifying patients shall be allowed, up to a maximum of 9, if both the designated caregiver and the additional qualifying patients each live greater than 50 miles from the nearest alternative treatment center;
  - (6) All information submitted is accurate; and
  - (7) No basis for denial, as established in He-C 401.12(a), exists.
- (f) Pursuant to RSA 126-X:4, III, the department shall act on a complete application, including all supporting documentation and required fee, for either a qualifying patient or a designated caregiver within 15 calendar days of its receipt.

(g) Within 5 calendar days of the determination to approve an application for either a qualifying patient or a designated caregiver, the department shall issue to the applicant a registry identification card.

#### He-C 401.11 Registry Identification Card Expirations and Procedures for Renewals.

(a) A registry identification card shall be valid on the date of issuance and expire one year later on the last day of the month it was issued unless a completed application for renewal has been received or a shorter time period is established in accordance with ~~(f)~~(e) or ~~(g)~~(f) below.

(b) Each qualifying patient and designated caregiver shall complete and submit to the department application materials pursuant to He-C 401.04 or He-C 401.05 at least 30 days prior to the expiration of his or her current registry identification card.

~~(c) Exceptions to (b) shall be as follows:~~

~~(1) For both patients and designated caregivers:~~

~~a. A new photograph of the applicant may be submitted, but shall not be required except in accordance with b. below, with each application for renewal; and~~

~~b. A new photograph of the applicant shall be required:~~

~~1. Every 4 years; and~~

~~2. If the applicant's appearance has changed such that the photograph previously submitted no longer accurately resembles the applicant's current appearance;~~

~~(2) For designated caregivers:~~

~~a. Results of a criminal history records check shall not be required with each application for renewal;~~

~~b. In lieu of submitting the results of a criminal history record check, an applicant for renewal as a designated caregiver shall:~~

~~1. Immediately notify the department upon being convicted of a felony conviction in this or any other state; and~~

~~2. Attest, on the application for renewal, that he or she has had no felony convictions in this or any other state.~~

~~(d)~~(c) If the qualifying patient or designated caregiver fails to submit a complete application for renewal prior to the expiration of his or her current registry identification card:

(1) The qualifying patient or designated caregiver's registry identification card shall expire in accordance with (a) above; and

(2) Any subsequent application for a registry identification card shall be as an initial applicant.

~~(e)~~(d) Applications for renewal shall be processed and registry identification cards shall be reissued in accordance with He-C 401.10.

~~(f)~~(e) Exceptions to (a) above shall be as follows:

(1) If the qualifying patient's certifying medical provider indicates in the written certification that the certification should expire at an earlier specified date, then the registry identification card shall expire on that date; and

(2) If the qualifying patient's certifying medical provider notifies the department in writing that the qualifying patient no longer suffers from a qualifying medical condition or should discontinue using cannabis, the registry identification card shall become void upon notification by the department to the qualifying patient.

~~(g)~~(f) A designated caregiver's registry identification card shall become void upon notification by the department to the designated caregiver that all the qualifying patients for whom he or she is acting as designated caregiver either have lost their status as qualifying patients or have rescinded or otherwise ended the designation.

~~(h)~~(g) A registry identification card that has been voided by the department, or has otherwise expired, shall be surrendered by returning the card to the department in accordance with He-C 401.13.

#### He-C 401.12 Denial of an Application, Enforcement Actions, and Administrative Appeals.

(a) The department shall deny an initial or renewal application for a registry identification card if:

(1) The applicant previously had a registry identification card revoked for violating the provisions of RSA 126-X or He-C 401;

(2) The department determines that the information provided in the application or supporting material was misleading, false, or fraudulent; or

(3) The department determines that the information provided in the application or supporting documentation did not meet the requirements of RSA 126-X or He-C 401.

(b) Grounds for revocation of a qualifying patient or designated caregiver's registry identification card shall include each of the following:

(1) Violation of any provision of RSA 126-X or He-C 401;

(2) Submission of misleading, false, or fraudulent information in the application or supporting documentation;

(3) Fraudulent use of a registry identification card;

(4) Selling, distributing, or giving cannabis to any unauthorized person;

(5) Tampering, falsifying, altering, modifying, duplicating, or allowing another person to use, tamper, falsify, alter, or modify, or duplicate a registry identification card;

- (6) Failure to notify the department within 10 days after becoming aware that the registry identification card has been lost, stolen, or destroyed;
- (7) Failure to notify the department within the required timeframes of other situations described in He-C 401.13(a) and (b);
- (8) A designated caregiver has been convicted of a felony in this or any other state;
- (9) A qualifying patient or designated caregiver has become an inmate at a correctional facility;
- (10) A qualifying patient ~~or designated caregiver~~ is no longer a resident of New Hampshire; and
- (11) A qualifying patient has used cannabis in a manner that puts others at risk of their health, safety, or welfare, or has failed to take reasonable precautions to avoid putting others at such risk.

(c) At the time of denying an application for a registry identification card, revoking a registry identification card, or issuing a fine in accordance with He-C 401.14(d), the department shall send to the applicant or cardholder written notice that sets forth:

- (1) The action to be taken by the department;
- (2) The reason(s) for the action; and
- (3) The right of an applicant or cardholder to a hearing in accordance with He-C 200 before the enforcement action becomes final.

(d) An applicant or cardholder shall have 30 days after receipt of the notice of enforcement action to request a hearing to contest the action.

(e) If a request for a hearing is not made pursuant to (d) above, the applicant or cardholder shall be deemed to have waived his or her right to a hearing.

(f) Hearings under this section shall be conducted in accordance with He-C 200.

(g) A qualifying patient or designated caregiver who has had his or her registry identification card revoked shall surrender his or her card by returning it to the department within 10 days of the department's decision to revoke the card becoming final.

#### He-C 401.13 Requirements for Notifications.

- (a) A qualifying patient shall notify the department in writing of any of the following:
  - (1) A change to the qualifying patient's name or address, within 10 days of such change;
  - (2) The designation of a caregiver if he or she has not already done so in an initial or renewal application;
  - (3) A change to the qualifying patient's designated caregiver, prior to the change;

(4) A change to the qualifying patient’s designated alternative treatment center, prior to the change; or

(5) A registry identification card has been lost, stolen, or destroyed, within 10 days of the discovery of the loss, theft, or destruction.

(b) A designated caregiver shall notify the department in writing of any of the following:

(1) A change to the designated caregiver’s name or address, within 10 days of such change;

(2) A change to the designated caregiver’s qualifying patient(s), prior to the change; ~~or~~

(3) A registry identification card has been lost, stolen, or destroyed, within 10 days of the discovery of the loss, theft, or destruction; or

(4) Immediately upon being convicted of a felony conviction in this or any other state.

(c) A qualifying patient’s certifying medical provider, or the qualifying patient’s new medical provider if there has been a change in the qualifying patient’s medical provider, ~~shall~~ may notify the department in writing that the qualifying patient no longer suffers from a qualifying medical condition or should discontinue using cannabis.

(d) After notice in (c) above:

(1) The qualifying patient’s registry identification card shall become void upon receiving notice from the department; and

(2) The voided registry identification card shall be returned to the department within 10 days of the notice in (1) above.

(e) Upon learning of the death of a qualifying patient, a surviving family member, caretaker, executor, and the qualifying patient’s designated caregiver shall:

(1) Notify the department that the qualifying patient has died, within 5 days of the death; ~~and~~

(2) Return the qualifying patient’s registry identification card to the department, within 10 days of the death; and

(3) Within 5 days, dispose of any remaining cannabis by either:

a. Requesting a local law enforcement agency to remove the remaining cannabis; or

b. Mixing the remaining cannabis with other ingredients such as soil to render it unusable. in accordance with RSA 126-X:4, XII.

(f) As applicable, the department shall notify a qualifying patient or designated caregiver of any changes described in (a) through (e) above regarding his or her designated caregiver or qualifying patient, respectively.

(g) A new registry identification card, including a new identification number, shall be issued within 20 days for any change to a qualifying patient's or designated caregiver's name, address, or alternative treatment center.

(h) A new registry identification card, but not a new identification number, shall be issued to a designated caregiver for any change to the identification number of a designated caregiver's qualifying patient.

(i) If a newly designated caregiver applies for a registry identification card in accordance with He-C 401.05 and is approved in accordance with He-C 401.10, a new registry identification card, including a new identification number, shall be issued to both the qualifying patient and the designated caregiver.

(j) If a qualifying patient or designated caregiver loses his or her registry identification card, whether due to loss, theft, or destruction, he or she shall notify the department in writing within 10 days of losing the card and be subject to a fee pursuant to RSA 126-X:4, IX(f), and in accordance with He-C 401.14(b)(3). Within 5 days of such notification, the department shall issue a new registry identification card, including a new identification number.

(k) A registry identification card with outdated information, whether due to a change of information or a renewal, shall be surrendered by returning it to the department within 10 business days of the person's receipt of the new registry identification card.

(l) Failure to timely surrender the outdated card to the department shall be grounds for the department to void a newly issued card until such time that the outdated card is returned to the department.

(m) A designated caregiver's registry identification card shall become void upon notification by the department to the designated caregiver that all the qualifying patients for whom he or she is acting as designated caregiver either have lost their status as qualifying patients or have rescinded or otherwise ended the designation.

(n) An voided registry identification card in (m) above:

(1) Shall be surrendered to the department within 10 business days of the department's notification; and

(2) Shall:

a. Be reactivated and reissued if a new qualifying patient designates the caregiver within the caregiver's current approval period; and

b. Not be reactivated and reissued if a new qualifying patient designates the caregiver within the caregiver's current approval period until such time that the caregiver returns the voided card.

(o) In all cases, a registry identification card that is outdated, has expired, has been voided, or has been revoked shall be surrendered by returning the card to the department.

(p) In all cases a registry identification card shall remain the property of the department.

He-C 401.14 Schedule and Payment of Fees and Fines.

(a) All fees and fines required by this part shall be paid as follows:

- (1) By check or money order for the exact amount of the fee made payable to “Treasurer – State of New Hampshire”;
- (2) A money order or certified check shall be required when payment has been made to the department by check, and such check was returned for insufficient funds; and
- (3) Any payment submitted to the department in the form of a check or money order and returned to the state for any reason shall be processed in accordance with RSA 6:11-a.

(b) The department shall charge the following fee amounts:

- (1) For an initial application, as required by He-C 401.04(b)(2) and He-C 401.05(b)(1), \$50;
- (2) For a renewal application, as required by He-C 401.04(b)(2) and He-C 401.05(b)(1), \$50; and
- (3) For issuance of a replacement registry identification card, \$25.

(c) All fees shall be non-refundable.

(d) The department shall issue a fine in the amount of \$150 to a qualifying patient or designated caregiver for failing to notify the department of any changes to his or her name or address within 10 days of such change in accordance with He-C 401.13(a)(1) or (b)(1), or for failing to notify the department of any change to a qualifying patient’s designated caregiver prior to such change in accordance with He-C 401.13(a)(3).

#### He-C 401.15 Confidentiality.

(a) ~~In accordance with RSA 126-X:4, XI, t~~The department shall maintain the confidentiality of all information about qualifying patients, designated caregivers, certifying medical providers, and alternative treatment centers that is contained in the department’s registry, as provided by RSA 126-X and He-C 401.

(b) Notwithstanding (a) above, information in (a) above shall be released by the department to:

- (1) Authorized employees of the department in the course of their official duties;
- (2) An individual or entity pursuant to an order from a court of competent jurisdiction;
- (3) Law enforcement personnel in accordance with RSA 126-X:4, XI(b)(1)-(3), but such information shall be limited to:

a. The location associated with a qualifying patient, designated caregiver, or ~~cultivation location of an~~ alternative treatment center; and

b. Whether a person is a qualifying patient or a designated caregiver; ~~and~~

(4) Law enforcement personnel in accordance with RSA 126-X:4, XI(b)(4), ~~but such regarding~~ information ~~shall be~~ related to falsified or fraudulent information submitted to the department

where ~~department~~ counsel has made a legal determination that there is probable cause to believe the information is false or falsified;

(5) The NH board of medicine or the NH board of nursing pursuant to RSA 126-X:4, VII~~(a)(2)(b)~~, and RSA 126-X:2:VIII, but such information shall be related to the conveyance of concerns regarding provider conduct;

(6) The health and human services oversight committee established under RSA 126-~~AX~~:13, to the NH board of medicine, and the NH board of nursing in the department's annual data report required by RSA 126-X:10, except that only deidentified, aggregate data required by RSA 126-X:10, IV, shall be released; and

(7) To a qualifying patient, a qualifying patient's certifying provider, or a patient's designated caregiver for the purposes of carrying out these rules.

(c) In order for information to be released to law enforcement personnel in accordance with (b)(3) above, the following shall have occurred:

(1) Local or state law enforcement personnel shall have detained or arrested an individual who claims to be engaged in the therapeutic use of cannabis; ~~and~~

~~(2) Either:~~

~~a.(2)~~ A local or state law enforcement officer shall have submitted a sworn affidavit to the department affirming that he or she has probable cause to believe cannabis is possessed at a specific address; or

~~b.(3)~~ A local or state law enforcement officer shall have submitted a sworn affidavit to the department affirming that he or she has probable cause to believe a specific individual possesses cannabis, and has also provided the person's name and address or name and date of birth.

(d) In accordance with RSA 126-X:4, II(g), the department shall maintain the confidentiality of all criminal history records information received.

#### He-C 401.16 Visiting Qualifying Patients.

(a) For a visiting qualifying patient, "provider" means, pursuant to RSA 126-X:1, VII(b), "an individual licensed to prescribe drugs to humans in the state of the patient's residence and who possesses certification from the United States Drug Enforcement Administration to prescribe controlled substances."

(b) Pursuant to RSA 126-X:2, V, a valid registry identification card, or its equivalent, that is issued under the laws of another state, district, territory, commonwealth, or insular possession of the United States that allows, in the jurisdiction of issuance, a visiting qualifying patient to possess cannabis for therapeutic purposes, shall have the same force and effect as a valid registry identification card issued by the department in this state, provided that:

(1) The visiting qualifying patient shall also produce a statement from his or her provider stating that the visiting qualifying patient has a qualifying medical condition as defined in RSA 126-X:1; and

(2) A visiting qualifying patient shall not cultivate or purchase cannabis in New Hampshire or obtain cannabis from alternative treatment centers or from a qualifying New Hampshire patient.

He-C 401.17 Waivers.

(a) An individual seeking waivers of specific rules in He-C 401 shall submit a written request for a waiver to the department that includes:

- (1) The specific reference to the rule for which a waiver is being sought;
- (2) A full explanation of why a waiver is necessary;
- (3) A full explanation of alternatives proposed, which shall be equally as protective of public and patient health and safety as the rule from which a waiver is sought; and
- (4) The period of time for which the waiver is sought.

(b) Waivers shall not exceed 12 months, or the current registration identification card expiration date.

(c) A request for waiver shall be granted if the department determines that the alternative proposed by the applicant or licensee:

- (1) Meets the objective or intent of the rule for which the waiver is sought; and
- (2) Does not negatively impact the health or safety of any qualifying patient or the public.

(d) The individual's subsequent compliance with the alternatives approved in the waiver shall be considered equivalent to complying with the rule from which waiver was sought.

(e) No provision or procedure prescribed by statute shall be waived.

## APPENDIX

<b><u>Rule Section</u></b>	<b><u>RSA Implemented</u></b>
He-C 401.01	RSA 126-X
He-C 401.02	RSA 126-X:1
He-C 401.03	RSA 126-X:2, IV(a)-(b); RSA 126-X:3, V
He-C 401.04	RSA 126-X:4, I
He-C 401.04(b)(4)	RSA 126-X:1, X
He-C 401.05	RSA 126-X:4, II
He-C 401.05(a)(3)	RSA 126-X:1, VI(b)
He-C 401.05(b)(1)	RSA 126-X:6, I(d)
He-C 401.06	RSA 126-X:1, VII(a), VIII, XVII
<u>He-C 401.06(b)(1)b.</u>	<u>RSA 126-X:1, XVII</u>
He-C 401.06(b)(4) & (6)	RSA 126-X:4, V
He-C 401.06 <del>(h)</del> (g)	RSA 126-X:8, XVIII
He-C 401.07	RSA 126-X:1, XVII
He-C 401.07(c)(4)	RSA 126-X:4, V(b)
He-C 401.08	RSA 126-X:4, V
He-C 401.09	RSA 126-X:1, IX(b)
He-C 401.10	RSA 126-X:4, I-IV
He-C 401.11	RSA 126-X:4, I-IV
He-C 401.11 <del>(f)</del> (e)(2)	RSA 126-X:4, IX(b)
He-C 401.12	RSA 126-X:4, III; RSA 126-X:3, VI-VII
He-C 401.13	RSA 126-X:4, IX
He-C 401.13(d)	RSA 126-X:4, XII
<u>He-C 401.13(e)(3)</u>	<u>RSA 126-X:4, XII; RSA 126-X:2, XIV(b)-(c)</u>
He-C 401.14	RSA 126-X:4, I(b); RSA 126-X:6: I(d); RSA 126-X:4, IX(f)
He-C 401.14(d)	RSA 126-X:4, IX(e)
He-C 401.15	RSA 126-X:4, XI
He-C 401.15(b)(5)	RSA 126-X:4, VII(a)(2)
He-C 401.15(b)(6)	RSA 126-X:10
He-C 401.15(d)	RSA 126-X:4, II(g)
He-C 401.16	RSA 126-X:1, XVI; RSA 126-X:1, VII(b); RSA 126-X:2, V
He-C 401.17	RSA 541-A:22, IV