THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 3

Session of 2015

INTRODUCED BY FOLMER, LEACH, TEPLITZ, WILEY, BLAKE, FONTANA, YUDICHAK, SCARNATI, BOSCOLA, YAW, ARGALL, SMITH, COSTA, FARNESI, WAGNER, BARTOLOTTA, WILLIAMS, TARTAGLIONE, VULAKOVICH, WHITE, SCHWANK, RAFFERTY, STEFANO, WOZNIAK, McGARRIGLE, BROWNE AND DINNERMAN, JANUARY 26, 2015

AMENDMENTS TO HOUSE AMENDMENTS, APRIL 12, 2016

AN ACT

Establishing a medical marijuana program; providing for patient and caregiver certification and for medical marijuana organization registration; imposing duties on the Department of Health; providing for a tax on medical marijuana organization gross receipts; establishing the Medical Marijuana Program Fund; establishing the Medical Marijuana Advisory Board; establishing a medical marijuana research program; imposing duties on the Department of Corrections, the Department of Education and the Department of Human Services; and providing for academic clinical research centers and for penalties and enforcement.

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Establishing a Medical Marijuana Program; Providing for Patient and Caregiver Certification and for Medical Marijuana Organization Registration; Imposing Duties on the Department of Health; Providing for a Tax on Medical Marijuana Organization Gross Receipts; Establishing the Medical Marijuana Program Fund; Establishing the Medical Marijuana Advisory Board; Establishing a Medical Marijuana Research Program; Imposing Duties on the Department of Corrections, the Department of Education and the Department of Human Services; and Providing for Academic Clinical Research Centers and for Penalties and Enforcement.
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SECTION 1904. APPROVAL.
The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

CHAPTER 1

PRELIMINARY PROVISIONS

Section 101. Short title.
This act shall be known and may be cited as the Medical Marijuana Act.

Section 102. Declaration of policy.
The General Assembly finds and declares as follows:

(1) Scientific evidence suggests that medical marijuana—
is one potential therapy that may mitigate suffering in some
patients and also enhance quality of life.

(2) The Commonwealth is committed to patient safety.
Carefully regulating the program which allows access to
medical marijuana will enhance patient safety while research
into its effectiveness continues.

(3) It is the intent of the General Assembly to:

(i) Provide a program of access to medical marijuana
which balances the need of patients to have access to the
latest treatments with the need to promote patient
safety.

(ii) Provide a safe and effective method of delivery
of medical marijuana to patients.

(iii) Promote high quality research into the
effectiveness and utility of medical marijuana.

(4) It is the further intention of the General Assembly
that any Commonwealth-based program to provide access to
medical marijuana serve as a temporary measure, pending
Federal approval of and access to medical marijuana through
traditional medical and pharmaceutical avenues.

Section 103. Definitions.

The following words and phrases when used in this act shall
have the meanings given to them in this section unless the
context clearly indicates otherwise:

"Advisory board." The advisory board established under
section 1106.

"Caregiver." The individual designated by a patient or, if
the patient is under 18 years of age, an individual under
section 508(2), to deliver medical marijuana.

"Certified medical use." The acquisition, possession, use or
transportation of medical marijuana by a patient, or the
acquisition, possession, delivery, transportation or-
administration of medical marijuana by a caregiver, for use as-
part of the treatment of the patient's serious medical
condition, as authorized in a certification under this act,
including enabling the patient to tolerate treatment for the-
serious medical condition.

"Certified registered nurse practitioner." As defined in
section 2 of the act of May 22, 1951 (P.L.317, No.69), known as
The Professional Nursing Law.

"Change in control." The acquisition by a person or group of-
persons acting in concert of a controlling interest in an-
applicant or registrant either all at one time or over the span-
of a 12-consecutive-month period.

"Continuing care." Treating a patient, in the course of-
which the practitioner has completed a full assessment of the-
patient's medical history and current medical condition,
including an in-person consultation with the patient.

"Controlling interest." As follows:

(1) The term shall mean the following:

(i) For a publicly traded entity, voting rights that-
entitle a person to elect or appoint one or more of the-
members of the board of directors or other governing-
board or the ownership or beneficial holding of 5% or-
more of the securities of the publicly traded entity.

(ii) For a privately held entity, the ownership of-
any security in the entity.

(2) For purposes of this definition, the term "security"
is as defined in section 102(t) of the act of December 5,
1972 (P.L.1280, No.284), known as the Pennsylvania Securities-
Act of 1972.

"Department." The Department of Health of the Commonwealth.

"Dispensary." A person, including a natural person,
corporation, partnership, association, trust or other entity, or
any combination thereof, which is registered by the department
to dispense medical marijuana. The term does not include a
health care medical marijuana organization under Chapter 19.

"Family or household member." As defined in 23 Pa.C.S. §
6102 (relating to definitions).

"Financial backer." An investor, mortgagee, bondholder, note-
holder or other source of equity of an applicant other than a
financial institution.

"Financial institution." A bank, a national banking-
association, a bank and trust company, a trust company, a
savings and loan association, a building and loan association, a
mutual savings bank, a credit union or a savings bank.

"Form of medical marijuana." The characteristics of the
medical marijuana recommended or limited for a particular
patient, including the method of consumption and any particular
dosage, strain, variety and quantity or percentage of medical-
marijuana or particular active ingredient.

"Fund." The Medical Marijuana Program Fund established in
section 902.

"Grower/processor." A person, including a natural person,
corporation, partnership, association, trust or other entity, or
any combination thereof, which is registered by the department
under this act to grow and process medical marijuana. The term
does not include a health care medical marijuana organization
under Chapter 19.

"Identification card." A document issued under section 505-
that permits access to medical marijuana under this act.

"Individual dose." A single measure of medical marijuana.


"Medical marijuana." Marijuana for medical use as set forth in this act.

"Medical marijuana organization." A dispensary or a grower/processor. The term does not include a health care medical marijuana organization under Chapter 19.

"Patient." An individual who:

1. has a serious medical condition;
2. has met the requirements for certification under this act; and
3. is a resident of this Commonwealth.


"Practitioner." A physician who is registered with the department under section 302.

"Prescription drug monitoring program." The Achieving Better Care by Monitoring All Prescriptions Program (ABC MAP).

"Principal." An officer, director or person who directly owns a beneficial interest in or ownership of the securities of an applicant or registrant, a person who has a controlling interest in an applicant or registrant or who has the ability to elect the majority of the board of directors of an applicant or registrant.
registrant or otherwise control an applicant or registrant, other than a financial institution.

"Registry." The registry established by the department under section 301(1).

"Secretary." The Secretary of Health of the Commonwealth.

"Serious medical condition." Any of the following:

2. Positive status for human immunodeficiency virus or acquired immune deficiency syndrome.
3. Amyotrophic lateral sclerosis.
5. Multiple sclerosis.
6. Damage to the nervous tissue of the spinal cord with objective neurological indication of intractable spasticity.
7. Epilepsy.
8. Inflammatory bowel disease.
13. Intractable seizures.
15. Sickle cell anemia.
16. Severe chronic or intractable pain of neuropathic origin or severe chronic or intractable pain in which conventional therapeutic intervention and opiate therapy is contraindicated or ineffective.
17. Autism.

"Terminally ill." A medical prognosis of life expectancy of approximately one year or less if the illness runs its normal
CHAPTER 3

PROGRAM

Section 301. Program established.

A medical marijuana program for patients suffering from serious medical conditions is established. The program shall be administered by the department. The department shall have the authority to do all things necessary to fulfill its responsibilities in implementing this act. At minimum, the department shall:

(1) Establish and maintain a computerized registry containing information set forth in this act relating to patients certified to use medical marijuana, caregivers, practitioners and medical marijuana organizations, which shall include identification numbers for patients and caregivers and the certification information required to be submitted to the department under section 501(c)(2).

(1.1) Establish within the computerized registry a separate, electronic database to be used by the department and dispensaries and which contains the information set forth in section 703(a)(1), (2), (3), (4) and (5) and such additional information that the department may require by regulation. The registry and database shall be capable of providing information in real time. The database shall be capable of receiving information from a dispensary regarding the disbursement of medical marijuana to patients and caregivers and verification of the form of medical marijuana. Dispensaries shall have real-time access to information in the database.

(i) To ensure that medical marijuana is not diverted...
or otherwise used for unlawful purposes.

(ii) To establish the authenticity of identification cards.

(iii) To provide the form of medical marijuana provided in the certification by the practitioner.

(2) Develop and implement procedures for:

(i) Issuance of identification cards to patients and caregivers.

(ii) Review and approval of certifications submitted by practitioners.

(iii) Review of the credentials of practitioners who submit certifications.

(iv) Review and approval of applications for identification cards.

(v) Review and approval of applications to become registered with the department as a medical marijuana organization.

(vi) Review and approval of applications of physicians to become registered with the department as practitioners.

(3) Develop a four-hour course for physicians regarding the latest scientific research on medical marijuana, including the risks and benefits of medical marijuana, and any other subjects deemed necessary by the department. The State Board of Medicine and the State Board of Osteopathic Medicine shall approve continuing education credit for any physician who successfully completes the course. The State Board of Pharmacy shall approve continuing education credit for any pharmacist who successfully completes the course pursuant to the requirement in section 707(9). The State Board of Medicine and the State Board of Osteopathic Medicine shall approve continuing education credit for any physician who successfully completes the course. The State Board of Pharmacy shall approve continuing education credit for any pharmacist who successfully completes the course pursuant to the requirement in section 707(9).
Board of Nursing shall approve continuing education credit for a certified registered nurse practitioner who successfully completes the course pursuant to the requirement in section 707(9). The State Board of Medicine and the State Board of Osteopathic Medicine shall approve continuing education credit for a physician assistant who successfully completes the course pursuant to the requirement in section 707(9).

(4) Develop a two-hour course for the principals and employees of a medical marijuana organization who either come into contact with patients or caregivers or who physically handle medical marijuana. Employees must successfully complete the course no later than 90 days after commencing employment. Principals must successfully complete the course prior to commencing initial operation of the medical marijuana organization. The subject matter of the course shall encompass the following:

(i) Recognizing unauthorized suspected activity under this act and the regulations promulgated by the department, including criminal diversion of medical marijuana and falsification of identification cards.

(ii) Proper handling of medical marijuana and recordkeeping.

(iii) Proper reporting of suspected unauthorized activity, including activities under subparagraph (i), to law enforcement.

(iv) Any other subject necessary to ensure compliance with this act and regulations promulgated under this act, as determined by the department.

(5) Develop a procedure for announced and unannounced...
inspections by the department of the facilities for growing, processing or dispensing or selling medical marijuana, and of the books, papers and tracking and other systems utilized by medical marijuana organizations required by this act.

(6) Establish a manner and method to administer research studies to be operated by vertically integrated health systems in order to collect research data on the use of medical marijuana to treat serious medical conditions in accordance with Chapter 19.

(7) Establish and maintain public outreach efforts about this act. The efforts shall include:

(i) A dedicated telephone number regarding medical marijuana so that patients, caregivers and members of the public may call to obtain basic information about the dispensing of medical marijuana under this act.

(ii) A publicly accessible Internet website which provides information about the medical marijuana program. At a minimum, the website shall contain:

   (A) Basic information designed to educate the public regarding the medical marijuana program.

   (B) The information set forth in section 301.1(b).

   (C) The dedicated telephone number.

   (D) The information provided to the department under section 1102(a)(2) by medical marijuana organizations. This information shall be posted on the department's publicly accessible Internet website as soon as is practicable after receipt of the information from the medical marijuana organizations.

(8) Collaborate as necessary, as determined by the
secretary, with other Commonwealth agencies or to contract with third parties to assist the department in fulfilling its responsibilities under this act.

(9) Determine the minimum number and type of medical marijuana to be produced by a grower/processor and dispensed by a dispensary.

Section 301.1. Confidentiality and public disclosure.

(a) Patient information.—The department shall maintain a confidential list of patients and caregivers to whom it has issued identification cards. Individual identifying information about patients and caregivers obtained by the department, including certifications issued by practitioners, the information on identification cards and information provided by the Pennsylvania State Police pursuant to section 506(b) shall be confidential and exempt from public disclosure, including disclosure under the act of February 14, 2008 (P.L.6, No.3), known as the Right-to-Know Law.

(b) Medical marijuana organizations and practitioners.—The following are public records under the Right-to-Know Law:

(1) An application for registration as a medical marijuana organization. The department shall maintain a separate list of names, addresses and telephone numbers of medical marijuana organizations.

(2) The names, business addresses and medical credentials of practitioners. All other practitioner registration information shall be confidential and exempt from public disclosure under the Right-to-Know Law.

(3) Information relating to penalties assessed against medical marijuana organizations and practitioners by the department for violation of this act.
Section 302. Practitioner registration.

(a) Eligibility.--A physician who satisfies the following is eligible for inclusion in the registry:

(1) The physician applies for registration in the form and manner required by the department.

(2) The department determines that the physician is, by training or experience, qualified to treat a serious medical condition. The physician shall provide documentation of required credentials, training or experience as required by the department.

(3) The physician has successfully completed the course under section 301(3).

(b) Department action.--The department shall review an application submitted by a physician to determine whether to include the physician in the registry. The review shall include information maintained by the Department of State regarding whether the physician has a valid, unexpired, unrevoked, unsuspended Pennsylvania license to practice medicine and whether the physician has been subject to discipline. The review shall be conducted each time the department reviews certifications under section 501. If the physician is not the holder of a valid, unexpired, unrevoked, unsuspended Pennsylvania license to practice medicine, then the department shall deny the certification and shall remove the physician from the registry until such time as the physician holds a valid, unexpired, unrevoked, unsuspended Pennsylvania license to practice medicine. A physician who is listed in the registry is authorized to issue a certification to use medical marijuana.

(c) Practitioner requirements.--A practitioner shall have an ongoing responsibility, so long as the practitioner remains in
the registry, to immediately notify the department in writing if the practitioner knows or has reason to know that any of the following is true with respect to a patient for whom the practitioner has issued a certification under this act:

(1) The patient no longer has the serious medical condition for which the certification was issued.

(2) Medical marijuana would no longer be therapeutic or palliative.

(3) The patient has died.

Section 303. Practitioner restrictions.

(a) Practices prohibited.—The following apply with respect to practitioners:

(1) A practitioner may not accept, solicit or offer any form of remuneration from or to a prospective patient, patient, prospective caregiver, caregiver or medical marijuana organization, including an employee, financial backer or principal, to certify a patient, other than accepting a fee for service with respect to the examination of the prospective patient to determine if the prospective patient should be issued a certification to use medical marijuana.

(2) A practitioner may not hold a direct or economic interest in a medical marijuana organization.

(3) A practitioner may not advertise the practitioner's services as a practitioner who can certify a patient to receive medical marijuana.

(b) Unprofessional conduct.—A practitioner who violates subsection (a)(1), (2) or (3) or section 501(f) shall not be permitted to issue certifications to patients. The practitioner shall be removed from the registry.
(e) Discipline.—In addition to any other penalty that may be imposed under this act, a violation of subsection (a)(1), (2) or (3) or section 501(f) shall be deemed unprofessional conduct under section 41(8) of the act of December 20, 1985 (P.L.457, No.112), known as the Medical Practice Act of 1985, or section 15(a)(8) of the act of October 5, 1978 (P.L.1109, No.261), known as the Osteopathic Medical Practice Act, and shall subject the practitioner to discipline by the State Board of Medicine or the State Board of Osteopathic Medicine, as appropriate.

CHAPTER 5

PATIENT AND CAREGIVER CERTIFICATION

Section 501. Issuance of certification.

(a) Conditions for issuance.—A certification to use medical marijuana may be issued by a practitioner to a patient if all of the following requirements are met:

(1) The practitioner is authorized, as evidenced by the practitioner's inclusion in the registry, to issue a certification.

(2) The patient has a serious medical condition, which is specified in the patient's health care record.

(3) The practitioner by training or experience is qualified to treat the patient's serious medical condition.

(4) The patient is under the practitioner's continuing care for the serious medical condition.

(5) In the practitioner's professional opinion and review of past treatments, the practitioner determines the patient is likely to receive therapeutic or palliative benefit from the use of medical marijuana.

(b) Contents.—In addition to the information set forth in subsection (a), the certification shall include:

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(1) The name, date of birth and address of the patient.
(2) The specific serious medical condition of the patient.
(3) A statement by the practitioner that the patient has a serious medical condition and the patient is under the practitioner's continuing care for the serious medical condition.
(4) The date of issuance.
(5) The name, address, telephone number and signature of the practitioner.
(6) Any requirement or limitation concerning the appropriate form of medical marijuana.
(7) Information needed for the research program database under section 1902(b)(2) as determined by the department.
(c) Optional information.—The practitioner may state in the certification that, in the practitioner's professional opinion:
   (1) The patient would benefit from medical marijuana only until a specified date.
   (2) The patient is terminally ill.
(d) Consultation.—A practitioner shall consult the prescription drug monitoring program prior to issuing or modifying a certification for the purpose of reviewing the controlled substance history of a patient.
(e) Duties of practitioner. The practitioner shall:
   (1) Provide the certification to the patient.
   (2) Provide a copy of the certification to the department, which shall place the information in the registry. The department shall permit electronic submission of the certification.
   (3) File a copy of the certification in the patient's
health care record.

(f) Prohibition.—A practitioner may not issue a certification for the practitioner's own use or for the use of a family or household member.

Section 502. Certification form.

The department shall develop a standard certification form, which shall be available upon request. In addition, the form shall be available to practitioners electronically. The form shall include a statement that a false statement made by a practitioner is punishable under the applicable provisions of 18 Pa.C.S. Ch. 49 (relating to falsification and intimidation).

Section 503. Lawful use of medical marijuana.

(a) General rule.—Notwithstanding any provision of law to the contrary, certified medical use of medical marijuana as set forth in this act and regulations promulgated under this act is lawful within this Commonwealth.

(b) Limitations.—The lawful use of medical marijuana is subject to the following limitations:

(1) Medical marijuana may only be administered to a patient who is certified by a practitioner.

(2) Subject to regulations promulgated under section 1108(3), medical marijuana may only be dispensed to a patient or caregiver in the following forms:

   (i) pill;

   (ii) oil;

   (iii) topical forms, including gel, creams or ointments;

   (iv) a form medically appropriate for administration by vaporization or nebulization.

   (v) tincture; or
(vi) liquid.

(3) In accordance with section 1108, medical marijuana may be dispensed to a patient or a caregiver in dry leaf or plant form.

(4) (Reserved).

(5) For each patient, possession of medical marijuana by a patient and a caregiver may not exceed a 30-day supply of individual doses, consistent with any regulations of the department, except that, during the last seven days of any 30-day period, a patient may also possess a 30-day supply for the subsequent 30-day period.

(6) An individual may not act as a caregiver for more than five patients.

(7) A patient may designate up to two caregivers at any one time.

(8) The form of medical marijuana that may be possessed by a patient or caregiver under a certification shall be in compliance with any requirement or limitation of the practitioner.

(9) The medical marijuana shall be kept in the original package in which it was dispensed, except for the portion removed for immediate use by the patient.

(10) A patient or caregiver shall possess an identification card whenever the patient or caregiver is in immediate possession of medical marijuana.

(11) With respect to the packaging of medical marijuana by growers/processors and dispensing of medical marijuana by dispensaries, the medical marijuana shall only be identified by the name of the grower/processor, the name of the dispensary, the species and the percentage of
tetrahydrocannabinol and cannabidiol.

(12) An individual may not claim intoxication due to medical marijuana as a defense in an impairment of contracts cause of action.

Section 504. Unlawful use of medical marijuana.

(a) General rule. Notwithstanding section 503, the use of medical marijuana as set forth in this section is unlawful and shall, in addition to any other penalty provided by law, be deemed a violation of the act of April 14, 1972 (P.L.233, No.64), known as The Controlled Substance, Drug, Device and Cosmetic Act.

(b) Unlawful use described. Regardless of the form of medical marijuana stated in the patient's certification, it is unlawful to:

(1) Smoke medical marijuana.

(2) Incorporate medical marijuana into edible form.

Nothing in this act shall be construed to preclude the incorporation of medical marijuana into edible form by a patient or a caregiver in order to aid ingestion of the medical marijuana by the patient.

(3) Grow medical marijuana unless registered as a grower/processor or health care medical marijuana organization under Chapter 19 and acting in compliance with this act.

Section 505. Identification cards.

(a) Issuance. Upon review and approval of the certification issued to a patient by a practitioner, satisfactory review of a practitioner's medical credentials, satisfactory review of the prescription drug monitoring program in the case of a caregiver and satisfactory review of the Federal and Commonwealth criminal
history record information in the case of a caregiver, the-
department shall issue an identification card to a patient or-
caregiver. The identification card shall permit a patient or-
caregiver to access medical marijuana in accordance with this-
act.

(b) Expiration. An identification card shall expire within-
one year from the date of issuance, upon the death of the-
patient, or as otherwise provided in this section. The-
department shall specify the form of application for an-
identification card. The department shall provide the form upon-
request, and the form shall be available electronically via the-
department's publicly accessible Internet website.

c) Separate cards to be issued. The department shall issue-
separate identification cards for patients and caregivers as-
soon as reasonably practicable after receiving a completed-
application, unless it determines that the application is-
incomplete or factually inaccurate, in which case it shall-
promptly notify the applicant.

d) Change in name or address. A patient or caregiver who-
has been issued an identification card shall notify the-
department within 10 days of any change of name or address. In-
addition, with respect to the patient, the patient shall notify-
the department within 10 days if the patient no longer has the-
serious medical condition noted on the certification.

e) Lost or defaced card. In the event of a lost, stolen,
destroyed or illegible identification card, the patient or-
caregiver shall apply to the department within 10 business days-
of discovery of the loss or defacement of the card for a-
replacement card. The application for a replacement card shall-
be on a form furnished by the department and accompanied by a-
$25 fee. The department may establish higher fees for issuance of second and subsequent replacement identification cards. The department may waive or reduce the fee in cases of demonstrated financial hardship. The department shall issue a replacement identification card as soon as practicable. The card may contain a different identification number. A patient or caregiver may not obtain medical marijuana until the patient receives the replacement card.

Section 506. Process for obtaining or renewing an identification card.

(a) Requirements. The following apply:

(1) To obtain, amend or renew an identification card, a patient or caregiver shall file an application with the department.

(2) In the case of a patient, the application shall include the following:

(i) The patient's certification. A new certification must be provided with a renewal application.

(ii) The name, address and date of birth of the patient.

(iii) The date of the certification.

(iv) If the patient has an identification card based on a current valid certification, the identification number and expiration date of that identification card.

(v) The specified date until which the patient would benefit from medical marijuana, if the certification states such a date.

(vi) The name, address and telephone number of the certifying practitioner.

(vii) Other information required by the department.
(3) If the patient designates a caregiver, the application shall include the name, address and date of birth of the caregiver, and other individual identifying information required by the department.

(4) In the case of a caregiver, the application shall include the following:

(i) Federal and Commonwealth criminal history record information as set forth in subsection (b).

(ii) The name, address and date of birth of the caregiver.

(iii) If the caregiver has an identification card, the identification number and expiration date of the identification card.

(iv) Other information required by the department.

(5) The application shall be signed and dated by the patient or caregiver, as appropriate.

(6) The application shall be accompanied by a fee of $50. The department may waive or reduce the fee in cases of demonstrated financial hardship.

(7) The department may prescribe any other requirements for the application.

(b) Requirement. The following apply:

(1) In each case before approving the application to be a caregiver, the department shall review the applicant's Federal and Commonwealth criminal history record information and the prescription drug monitoring program with respect to the caregiver to determine if the caregiver has a history of drug abuse or a history of diversion of controlled substances or illegal drugs. The department may, within its discretion, deny an application to become a caregiver if the applicant—
has a history of drug abuse or a history of diverting
controlled substances or illegal drugs. The department shall
deny the application to be a caregiver if the applicant has
been convicted of any criminal offense related to sale or
possession of drugs, narcotics or other controlled substances
within the last five years.

(2) Notwithstanding any provision of law to the contrary
and in order to fulfill the requirements of this subsection,
the Pennsylvania State Police shall, at the request of the
department, provide criminal history background
investigations, which shall include records of criminal
arrests and convictions, no matter where occurring, including
Federal criminal history record information, on applicants
for the position of caregiver. For purposes of approving
applicants to become caregivers, the department shall request
the information set forth in this paragraph for each
applicant who seeks to become a caregiver. The department may
receive and retain information otherwise protected by 18
Pa.C.S. Ch. 91 (relating to criminal history record
information).

(c) Notice. An application for an identification card shall
include notice that a false statement made in the application is
punishable under the applicable provisions of 18 Pa.C.S. Ch. 49
(relating to falsification and intimidation).

Section 507. Special conditions.

The following apply:

(1) If the practitioner states in the certification
that, in the practitioner's professional opinion, the patient
would benefit from medical marijuana only until a specified
earlier date, then the identification card shall expire on
that date.

(2) If the practitioner reissues a certification which terminates a certification on an earlier date, then a replacement identification card shall be issued with the earlier expiration date. The original identification card shall be promptly returned by the patient to the department.

(3) If the certification so provides, the identification card shall state any requirement or limitation by the practitioner as to the form of medical marijuana for the patient.

Section 508. Minors.

If a patient is under 18 years of age, the following apply.

(1) The patient shall have a caregiver.

(2) A caregiver must be one of the following:

(i) A parent or legal guardian of the patient.

(ii) An individual designated by a parent or legal guardian.

(iii) An appropriate individual approved by the department upon a sufficient showing that no parent or legal guardian is appropriate or available.

Section 509. Caregiver authorization and limitations.

(a) Age. An individual who is under 21 years of age may not be a caregiver unless a sufficient showing, as determined by the department, is made to the department that the individual should be permitted to serve as a caregiver.

(b) Changing caregiver. If a patient wishes to change or terminate the designation of the patient's caregiver, for whatever reason, the patient shall notify the department as soon as practicable. The department shall issue a notification to the caregiver that the caregiver's identification card is invalid.
and must be promptly returned to the department.

(c) Denial in part.—If an application of a patient designates an individual as a caregiver who is not authorized to be a caregiver, that portion of the application shall be denied by the department. The department shall review the balance of the application and may approve that portion of it.

Section 510. Contents of identification card.

An identification card shall contain the following:

(1) The name of the patient and the caregiver, as appropriate. The identification card shall also state whether the individual is designated as a patient or as a caregiver.

(2) The date of issuance and expiration date.

(3) An identification number for the patient and caregiver, as appropriate.

(4) A photograph of the individual to whom the identification card is being issued, whether the individual is a patient or a caregiver. The method of obtaining the photograph shall be specified by the department by regulation. The department shall provide reasonable accommodation for a patient who is confined to the patient's home or is in inpatient care due to a serious medical condition.

(5) Any requirement or limitation set by the practitioner as to the form of medical marijuana.

(6) Any other requirements determined by the department, except the department may not require that an identification card disclose the patient's serious medical condition.

Section 511. Suspension.

If a patient or caregiver intentionally, knowingly or recklessly violates any provision of this act as determined by

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the department, the identification card of the patient or
caregiver may be suspended or revoked. The suspension or
revocation shall be in addition to any criminal or other penalty
that may apply.

Section 512. Use of prescription drug monitoring program.

(a) Requirement. A practitioner shall consult the
prescription drug monitoring program each time prior to
authorizing the use of medical marijuana for a patient and each
time prior to changing the form of medical marijuana for a
patient.

(b) Other access by practitioner. A practitioner may access
the prescription drug monitoring program to:

(1) Determine whether a patient may be under treatment
with a controlled substance by another physician or other
person.

(2) Allow the practitioner to review the patient's
controlled substance history as deemed necessary by the
practitioner.

(3) Provide to the patient, or caregiver on behalf of
the patient if authorized by the patient, a copy of the
patient's controlled substance history.

Section 513. Prohibitions.

The following prohibitions shall apply:

(1) A patient may not operate or be in physical control
of any of the following while under the influence with a
blood content of more than 10 nanograms of active-
tetrahydrocannabinol per milliliter of blood in serum:

(i) Chemicals which require a permit issued by the
Federal Government or a state government or an agency of
the Federal Government or a state government.
(ii) High-voltage electricity or any other public utility.

(2) A patient may not perform any employment duties at heights or in confined spaces, including, but not limited to, mining while under the influence of medical marijuana.

(3) A patient may be prohibited by an employer from performing any task which the employer deems life-threatening, to either the employee or any of the employees of the employer, while under the influence of medical marijuana. The prohibition shall not be deemed an adverse employment decision even if the prohibition results in financial harm for the patient.

(4) A patient may be prohibited by an employer from performing any duty which could result in a public health or safety risk while under the influence of medical marijuana. The prohibition shall not be deemed an adverse employment decision even if the prohibition results in financial harm for the patient.

CHAPTER 7

MEDICAL MARIJUANA ORGANIZATIONS

Section 701. Medical marijuana organizations.

The growing, acquiring, possessing, manufacturing, selling, delivering, transporting, distributing or dispensing of medical marijuana by a medical marijuana organization, including a clinical registrant under Chapter 20, under this act and in accordance with regulations promulgated by the department under this act shall be lawful.

Section 702. Laboratory.

A grower/processor shall contract with an independent laboratory to test the medical marijuana produced by the
grower/processor. The department shall approve the laboratory and require that the laboratory report testing results in a manner as the department shall determine, including requiring a test at harvest and a test at final processing.

Section 703. Dispensing to patients and caregivers.

(a) General rule. A dispensary may dispense medical marijuana to a patient or caregiver upon presentation to the dispensary of a valid identification card for that patient or caregiver. The dispensary shall provide to the patient or caregiver a receipt, as appropriate. The receipt shall include all of the following:

   (1) The name, address and identification number of the dispensary.
   (2) The name and identification number of the patient and caregiver.
   (3) The date the medical marijuana was dispensed.
   (4) Any requirement or limitation by the practitioner as to the form of medical marijuana for the patient.
   (5) The form and the quantity of medical marijuana dispensed.

(b) Record retention. The dispensary shall retain the following for six years:

   (1) A copy of the patient's or caregiver's identification card, as appropriate.
   (2) The receipt, which may be retained in electronic form.

(c) Filing with department. Prior to dispensing medical marijuana to a patient or caregiver, the dispensary shall file the receipt information with the department by electronic means on a real-time basis as the department shall require.
department shall immediately enter the information into the separate, electronic database established under section 301(1.1) for use by the department and dispensaries to inhibit diversion and other unlawful use of medical marijuana. When filing receipt and certification information electronically under this subsection, the dispensary shall dispose of any electronically recorded prescription certification information as provided by regulation.

(d) Limitations. No dispensary may dispense to a patient or caregiver:

(1) a quantity of medical marijuana greater than that which the patient or caregiver is permitted to possess under the certification; or

(2) a form of medical marijuana prohibited by this act.

(e) Supply. When dispensing medical marijuana to a patient or caregiver, the dispensary may not dispense an amount greater than a 30-day supply until the patient has exhausted all but a seven-day supply provided pursuant to a previously issued certification.

(f) Verification. Prior to dispensing medical marijuana to a patient or caregiver, the dispensary shall verify the information in subsections (e) and (g) by consulting the database established under section 301(1.1).

(g) Form of medical marijuana. Medical marijuana dispensed to a patient or caregiver by a dispensary shall conform to any requirement or limitation set by the practitioner as to the form of medical marijuana for the patient.

(h) Safety insert. When a dispensary dispenses medical marijuana to a patient or caregiver, the organization shall provide to that patient or caregiver, as appropriate, a safety
insert. The insert shall be developed and approved by the department. The insert shall provide the following information:

1. Lawful methods for administering medical marijuana in individual doses.
2. Any potential dangers stemming from the use of medical marijuana.
3. How to recognize what may be problematic usage of medical marijuana and how to obtain appropriate services or treatment for problematic usage.
4. How to prevent or deter the misuse of medical marijuana by minors or others.
5. Any other information as determined by the department.

1. Sealed and labeled package. Medical marijuana shall be dispensed by a dispensary to a patient or caregiver in a sealed and properly labeled package. The labeling shall contain the following:

1. The information required to be included in the receipt provided to the patient or caregiver, as appropriate, by the dispensary.
2. The packaging date.
3. Any applicable date by which the medical marijuana should be used.
4. A warning stating:

"This product is for medicinal use only. Women should not consume during pregnancy or while breastfeeding except on the advice of the practitioner who issued the certification and in the case of breastfeeding, the infant's pediatrician. This product might impair the ability to drive or operate heavy machinery. Keep out of reach of children."
The amount of individual doses contained within the package and the species and percentage of tetrahydrocannabinol and cannabidiol.

A warning that the medical marijuana must be kept in the original container in which it was dispensed.

A warning that unauthorized use is unlawful and will subject the person to criminal penalties.

Any other information required by the department.

Convictions prohibited. The following individuals may not hold volunteer positions or positions with remuneration in or be affiliated with a medical marijuana organization, including a clinical registrant under Chapter 20, in any way if the individual has been convicted of any criminal offense related to the sale or possession of illegal drugs, narcotics or controlled substances:

(1) Financial backers.
(2) Principals.
(3) Employees.

Section 704. Pricing.

The following apply:

(1) Each sale of medical marijuana by a dispensary shall not exceed the maximum price determined by the department through regulation. A charge made or demanded for medical marijuana by a dispensary which exceeds the maximum price determined by the department is deemed to be a violation of the act of December 17, 1968 (P.L.1224, No.387), known as the Unfair Trade Practices and Consumer Protection Law.

(2) The department shall set the maximum per-dose price of each form of medical marijuana dispensed by a dispensary. In setting the maximum per-dose price, the department shall
consider the fixed and variable costs of producing the form
of medical marijuana and any other factor the department
dems relevant to determine the maximum per-dose price.

(3) The department may set the maximum per-dose price of
each form of medical marijuana sold by a grower/processor to
a dispensary.

(4) A grower/processor shall make medical marijuana
available for sale to all dispensaries at the same per-dose
price.

(5) If a grower/processor changes the per-dose price on
any sale of any form of medical marijuana to a dispensary,
the grower/processor shall change the per-dose price for that
form of medical marijuana for all other dispensaries by the
same amount.

Section 705. Facility requirements.

(a) General rule.--The following apply:

(1) A grower/processor may only grow or process medical
marijuana in an indoor, enclosed, secure facility located
within this Commonwealth, as determined by the department.
The facility may include a greenhouse.

(2) A dispensary may only dispense medical marijuana in
an indoor, enclosed, secure facility located within this
Commonwealth, as determined by the department.

(3) A dispensary may not operate on the same site as a
facility used for growing and processing medical marijuana.

(4) A grower/processor may not be located within 1,000
feet of the property line of a public, private or parochial
school or a day-care center, unless the grower/processor is
located within a keystone opportunity zone.

(5) A dispensary may not be located within 1,000 feet of
the property line of a public, private or parochial school or a day-care center, unless the dispensary is located within a keystone opportunity zone.

(b) Determination.—A grower/processor shall provide documentation of the quality and safety of the medical marijuana produced by the grower/processor to the department and to any patient or caregiver to which the medical marijuana is dispensed. The documentation shall include the test results under section 702.

Section 706. Registration.

(a) Registration required.—Upon application, the department may register the person as:

(1) Both a grower/processor and a dispensary or solely as a grower/processor.

(2) Both a dispensary and a grower/processor or solely as a dispensary.

(b) Separate registration.—Separate registration is required for a grower/processor and for a dispensary, including when:

(1) A dispensary is registered as a grower/processor.

(2) A grower/processor is registered as a dispensary.

(c) Records.—A grower/processor which is also registered as a dispensary shall keep separate books and records.

(d) Department to establish regions.—The department shall establish no fewer than three regions within this Commonwealth for the purpose of registering growers/processors and dispensaries and providing for their locations. The department shall implement this subsection in a manner which will supply an adequate amount of medical marijuana to patients and caregivers in each region. In determining the geographic boundaries of the...
regions, the department shall consider the following:

(1) Population.

(2) The number of patients suffering from serious medical conditions.

(3) The types of serious medical conditions.

(4) Access to public transportation.

(5) Any other factor the department deems relevant.

(e) Notice. When the boundaries are established, the department shall publish notice of the determination in the Pennsylvania Bulletin. The department may adjust the boundaries as necessary every two years. Notice of any adjustment to the boundaries shall be published in the Pennsylvania Bulletin.

Section 707. Limitations on registrations.

The following limitations apply to registration of grower/processors and dispensaries:

(1) The department may not initially register more than 25 grower/processors.

(2) The department may not initially register more than 50 dispensaries. Each dispensary may provide medical marijuana at no more than three separate locations.

(3) The department may not permit a single person to hold more than five individual dispensary registrations.

(4) The department may not permit a single person to hold more than one grower/processor registration.

(5) No more than five grower/processors may be registered as dispensaries. If the number of grower/processors is increased pursuant to section 1108(4), no more than 20% of the total number of grower/processors may also be registered as dispensaries.

(6) A dispensary may only obtain medical marijuana from
a grower/processor holding a valid registration under this act.

(7) A grower/processor may only provide medical marijuana to a dispensary holding a valid registration under this act.

(8) No medical marijuana may be dispensed from, obtained from or transferred to a location outside of this Commonwealth.

(8.1) In accordance with regulations promulgated by the department:

(i) To initially grow medical marijuana, a grower/processor may obtain seed from outside this Commonwealth.

(ii) To grow medical marijuana, a grower/processor may obtain seed and plant material from another grower/processor within this Commonwealth.

(9) A dispensary shall have a physician or a pharmacist onsite at all times during the hours the dispensary is open to receive patients and caregivers, except that if a dispensary has more than one separate location, a physician assistant or a certified registered nurse practitioner may be onsite at the other location. A physician, a pharmacist, a physician assistant or a certified registered nurse practitioner shall, prior to assuming duties under this paragraph, successfully complete the course established in section 301(3). A physician may not certify patients to receive medical marijuana or otherwise treat patients at the dispensary.

(10) A dispensary may sell medical devices and instruments which are needed to administer medical marijuana.
under this act.

(11) A dispensary may sell services approved by the-

department related to the use of medical marijuana.

Section 708. Application and issuance of registration.

(a) Application for initial registration. The department is-

authorized to register eligible applicants to grow and process-
or dispense medical marijuana. The department shall develop a-
standard application form, which shall be available upon-
request. The department shall provide the application in-
electronic form, which shall be available on the department's-
publicly accessible Internet website.

(b) Contents of application. An applicant shall provide the-
following information:

(1) A description of the business activities in which-
the applicant intends to engage as a medical marijuana-
organization.

(2) A statement that the applicant:

(i) Is of good moral character. The applicant shall-
submit Federal and Commonwealth criminal history record-
information in order to support the assertion of good-
moral character. For purposes of this subparagraph an-
applicant shall include each financial backer and-
principal of the medical marijuana organization.

(ii) Possesses or has the right to use sufficient-
land, buildings and other premises and equipment to-
properly carry on the activity described in the-
application. The information shall be specified in the-
application in sufficient detail to allow the department-
to verify the information.

(iii) Is able to maintain effective security and-
control to prevent diversion, abuse and other illegal-
conduct relating to medical marijuana. The statement-
shall include a provision which states that in the event-
of any loss or theft of medical marijuana the medical-
marijuana organization shall notify the Pennsylvania-
State Police within 24 hours.

(iv) Is able to comply with all applicable-
Commonwealth laws and regulations relating to the-
activities in which it intends to engage under the-
registration.

(3) The name, address and title of each financial backer-
and principal of the applicant. Residential addresses shall-
be included for individuals. Each individual or-
representative of an entity shall submit an affidavit with-
the application setting forth:

(i) Any position of management or ownership during-
the preceding 10 years of a controlling interest in any-
other business, located inside or outside this-
Commonwealth, manufacturing or distributing controlled-
substances.

(ii) Whether the individual or entity has been-
convicted of a criminal offense graded higher than a-
summary offense.

(iii) Whether the individual or entity has had a-
registration or license suspended or revoked in any-
administrative or judicial proceeding.

(iv) Any other information the department may-
require.

(e) Notice. The application shall include notice that a-
false statement made in the application is punishable under the-
applicable provisions of 18 Pa.C.S. Ch. 49 (relating to falsification and intimidation).

(d) Duty to report.--The applicant is under a continuing duty to:

(1) Report to the department any change in facts or circumstances reflected in the application or any newly discovered or occurring fact or circumstance which is required to be included in the application, including a change in control of the medical marijuana organization.

(2) Report to the Pennsylvania State Police, within 24 hours, any loss or theft of medical marijuana from the facility the applicant is operating.

(3) Submit to inspections, whether announced or unannounced, by the department of the facilities for growing, processing, dispensing or selling medical marijuana, or of the books, papers and tracking or other systems required by this act.

(e) Granting of registration.--The department shall grant a registration or amendment to a registration under this section if the department is satisfied that:

(1) The applicant will be able to maintain effective control against diversion of medical marijuana.

(2) The applicant will be able to comply with all applicable laws and regulations of this Commonwealth relating to the activities in which it intends to engage under the registration.

(3) The applicant is ready, willing and able to properly carry on the activity for which a registration is sought.

(4) The applicant possesses or has the right to use sufficient land, buildings and equipment to properly carry on
the activity described in the application.

(5) It is in the public interest that the registration be granted. In determining whether the granting of registration is in the public interest, the department shall consider whether the number of medical marijuana organizations in an area will be adequate or excessive.

(6) The applicant and its principals and financial backers are of good moral character.

(7) The applicant satisfies any other conditions as determined by the department.

(f) Additional information.—If the department is not satisfied that the applicant should be issued a registration, the department shall notify the applicant in writing of the factors for which further documentation is required. Within 30 days of the receipt of the notification, the applicant may submit additional material to the department for consideration.

(g) Fees.—The following apply:

(1) For a grower/processor:

(i) An initial application fee in the amount of $10,000 shall be paid. The fee is nonrefundable.

(ii) A fee for registration as a grower/processor in the amount of $200,000 shall be paid. The period of registration is one year. Applicants shall submit the registration fee at the time of submission of the application. The fee shall be returned if the registration is not granted.

(iii) A renewal fee for registration as a grower/processor in the amount of $10,000 shall be paid. The renewal fee shall be returned if the renewal is not granted.
Before the granting of the initial registration, the department shall verify that the applicant has $2,000,000 in capital, $500,000 of which must be on deposit with a financial institution.

An application to renew registration shall be filed with the department not more than six months nor less than four months prior to expiration.

All fees shall be paid by certified check or money order.

For a dispensary:

An initial application fee in the amount of $5,000 shall be paid. The fee is nonrefundable.

A fee for registration as a dispensary in the amount of $30,000 shall be paid. The period of registration is one year. An applicant shall submit the registration fee at the time of submission of the application. The fee shall be returned if the application is not granted.

A renewal fee for registration as a dispensary in the amount of $5,000 shall be paid. The fee shall be returned if the renewal is not granted.

There shall be no additional fee for operating more than one location.

Before the granting of the initial registration, the department shall verify that the applicant has $150,000 in capital, which must be on deposit with a financial institution.

An application to renew registration shall be filed with the department not more than six months nor less than four months prior to expiration.
(vii) All fees shall be paid by certified check or money order.

(3) A fee of $250 shall be required when amending the application to indicate relocation within this Commonwealth or the addition or deletion of approved activities by the medical marijuana organization.

(4) Fees payable under this section shall be deposited into the fund.

(h) Issuance. A registration issued by the department to a medical marijuana organization shall be effective only for that organization and shall specify the following:

(1) The name and address of the medical marijuana organization.

(2) The land, buildings and facilities that may be used by the medical marijuana organization.

(3) Any other information the department requires to assure compliance with this act.

(i) Relocation. The department may approve an application from a medical marijuana organization to relocate within this Commonwealth or to add or delete activities or facilities. The medical marijuana organization may not relocate or add or delete activities or facilities unless approved by the department.

(j) Length of registration. A registration issued by the department shall be valid for one year from the date of issuance, except that in order to facilitate registration renewals, the department may, upon an initial application for registration, issue registrations that are valid for not more than one year and eleven months.

(k) Posting. A dispensary shall post a copy of its registration in a location within its facility such that it is
easily observable by patients, caregivers, law enforcement
officers and agents of the department.

Section 709. Registration renewals.

(a) The following apply to a renewal of registration:

(1) An applicant is under a continuing duty to report to
the department any change in facts or circumstances reflected
in the application or any newly discovered or occurring fact
or circumstance which is required to be included in the
application.

(2) The application shall include the following
information, prepared in the manner and detail as the
department may require:

(i) Any material change in the information provided
by the medical marijuana organization in an application
or renewal of registration.

(ii) Every known charge or initiated investigation,
pending or concluded during the period of the
registration, by any governmental or administrative
agency with respect to:

(A) each incident or alleged incident involving
the theft, loss or possible diversion of medical
marijuana grown, processed or dispensed by the
applicant; and

(B) compliance by the applicant with the laws of
this Commonwealth with respect to any substance
listed in section 4 of the act of April 14, 1972
(P.L.233, No.64), known as The Controlled Substance,
Drug, Device and Cosmetic Act.

(b) Granting of renewal. The department shall renew a
registration unless the department determines that:
(1) The applicant is unlikely to maintain or be able to maintain effective control against diversion of medical marijuana.

(2) The applicant is unlikely to comply with all laws of this Commonwealth applicable to the activities in which it may engage under the registration.

(c) Nonrenewal decision. If the department is not satisfied that the applicant is entitled to a renewal of the registration, the department shall within a reasonable time serve upon the applicant or the applicant's attorney of record by registered or certified mail an order directing the applicant to show cause why the application for renewal should not be denied. The order shall specify in detail the way in which the applicant has not satisfied the department's requirement for renewal. Within 30 days of the order, the applicant may submit additional material to the department or demand a hearing, or both. If a hearing is demanded, the department shall fix a date as soon as practicable.

Section 710. Suspension or revocation of registration.

The department may suspend or revoke registration as a medical marijuana organization, including registration under Chapter 20, if:

(1) The department has evidence that a medical marijuana organization has failed to maintain effective control against diversion of medical marijuana.

(2) The medical marijuana organization violates any provision of this act or a regulation of the department.

(3) The medical marijuana organization has intentionally, knowingly, recklessly or negligently failed to comply with applicable laws of this Commonwealth relating to
the activities in which it engages under the registration.

Section 711. Privilege not property right.

Registration of a medical marijuana organization, including registration under Chapter 20, gives a medical marijuana organization a privilege to engage in the specified activity, but registration does not give a property right.

Section 712. Diversity goals.

(a) Goals. It is the intent and goal of the General Assembly that the department promote and ensure diversity and the participation by diverse groups in the activities authorized under this act. In order to further this goal, the department shall adopt and implement policies or guidelines ensuring the following:

(1) That diverse groups are accorded equal opportunity in the registration process, either directly as applicants or registrants or through ownership interests in applicants or registrants.

(2) That registrants promote the participation of diverse groups in the registrants' operations by affording equal access to employment opportunities.

(b) Duties of department. To facilitate participation by diverse groups in the activities authorized under this act, the department shall:

(1) Conduct the necessary and appropriate outreach, including, if determined appropriate, consulting with other State agencies, boards and commissions, including the Department of General Services and the Department of State, for the purpose of identifying diverse groups capable of participating in the activities under this act.

(2) Provide sufficient and continuous notice of the
participation opportunities afforded under this act by
publishing notice in the Pennsylvania Bulletin and on the
department's publicly accessible Internet website.

(3) Include in the applications for registration under
this act language to encourage applicants to utilize and give
consideration to diverse groups for contracting or
professional services opportunities.

(4) Designate an employee to oversee the efforts adopted
by registrants to promote the participation of diverse groups
in the activities authorized under this act and comply with
the diversity goals of this section.

(e) Reports.—No later than March 1, 2018, and each March 1
thereafter, the department shall submit a report to the
chairperson and minority chairperson of the Public Health and
Welfare Committee of the Senate and the chairperson and minority-
chairperson of the Health Committee of the House of
Representatives summarizing the participation and utilization of
diverse groups in the activities authorized under this act. The
report shall include:

(1) The participation level, by percentage, of diverse
groups in the activities authorized under this act.

(2) A summary of how diverse groups are utilized by
registrants, including in the provision of goods or services.

(3) Any other information the department deems
appropriate.

(d) Definitions.—The following words and phrases when used
in this section shall have the meanings given to them in this
subsection unless the context clearly indicates otherwise:

"Disadvantaged business." As defined in 74 Pa.C.S. § 303(b)
(relating to diverse business participation).
"Diverse group." A disadvantaged business, minority-owned business, women-owned business, service-disabled veteran-owned small business or veteran-owned small business that has been certified by a third-party certifying organization.

"Minority owned business." As defined in 74 Pa.C.S. § 303(b).

"Service disabled veteran owned small business." As defined in 51 Pa.C.S. § 9601 (relating to definitions).

"Third party certifying organization." As defined in 74 Pa.C.S. § 303(b).

"Veteran-owned small business." As defined in 51 Pa.C.S. § 9601.

"Women-owned business." As defined in 74 Pa.C.S. § 303(b).

CHAPTER 9
TAX ON MEDICAL MARIJUANA

Section 901. Tax on medical marijuana.

(a) Tax imposed.--A tax is imposed on the gross receipts of a grower/processor received from the sale of medical marijuana by a grower/processor to a dispensary, to be paid by the grower/processor, at the rate of 5%. The tax shall be charged against and be paid by the grower/processor and shall not be added as a separate charge or line item on any sales slip, invoice, receipt or other statement or memorandum of the price paid by a dispensary, patient or caregiver.

(b) Payment of tax and reports. The tax imposed under subsection (a) shall be administered in the same manner as the tax imposed under Article XI of the act of March 4, 1971 (P.L.6, No.2), known as the Tax Reform Code of 1971, except that estimated tax payments under section 3003.2 of the Tax Reform Code of 1971 shall not be required. A grower/processor shall...
make quarterly payments under this section for each calendar
quarter at the rate prescribed in subsection (a) on the gross
receipts for the calendar quarter. The tax shall be due and
payable on the 20th day of January, April, July and October for
the preceding calendar quarter on a form prescribed by the
Department of Revenue.

(c) (Reserved).

(d) Deposit of proceeds.--All money received from the tax
imposed under subsection (a) shall be deposited in the fund.

(e) Exemption.--Medical marijuana shall not be subject to
the tax imposed under section 202 of the Tax Reform Code of
1971.

(f) Information.--A grower/processor that sells medical
marijuana shall provide to the Department of Revenue information
required by the department.

Section 902. Medical Marijuana Program Fund.

(a) Fund established.--The Medical Marijuana Program Fund is
established as a special fund in the State Treasury. Money in
the fund is appropriated as set forth in subsection (c). Any
amount unspent at the end of a fiscal year shall be appropriated
to the department for its operations.

(b) Source of funds.--Fees and taxes payable under this act
shall be deposited into the fund. The money deposited into the
fund may only be used for the purposes set forth in this
section. Any interest accrued shall be deposited into the fund.

(c) Use of proceeds. After any repayment made under
subsection (d), money in the fund is appropriated in accordance
with the following percentages:

(1) To the department, for operations of the department,
including outreach efforts under section 301(7), as required
by this act, 45% of the revenue in the fund. Fifteen percent of the amount under this paragraph shall be expended for:

(i) the cost of providing medical marijuana to patients participating in the research program under Chapter 19;

(ii) the cost of providing medical marijuana to patients who demonstrate financial hardship under this act; and

(iii) the cost associated with the waiver of fees for identification cards under sections 505(e) and 506(a).

(2) To the Department of Drug and Alcohol Programs, for drug abuse prevention and counseling and treatment services, 10% of the revenue in the fund.

(3) To the department, for further research related to the safety and use of medical marijuana, including the research program established under Chapter 19, 30% of the revenue in the fund. Funding shall be provided for research into the treatment of those serious medical conditions for which medical marijuana is available for treatment within this Commonwealth and for research into the use of medical marijuana to treat other medical conditions for which medical marijuana may have legitimate medicinal value. However, money in the fund may not be expended on activity under Chapter 20.

(4) To the Pennsylvania Commission on Crime and Delinquency, for distribution to local police departments which demonstrate a need relating to the enforcement of this act, as determined by the Pennsylvania Commission on Crime and Delinquency, 10% of the revenue in the fund.

(5) To the Pennsylvania State Police to fulfill its
duties under this act, 5% of the revenue in the fund.

(d) Repayment of initial appropriation.--The department shall repay from the fees, taxes and investment earnings of the fund to the General Fund any money appropriated for the initial planning, organization and administration by the department with respect to the establishment of the program at the time of the original enactment of this act. Repayment shall take place within a 10 year period commencing one year after the date of publication in the Pennsylvania Bulletin of the final regulations described under section 1107.

CHAPTER 11
ADMINISTRATION

Section 1101. Governing practice and procedure.

The department’s consideration and resolution of all applications for registration under Chapters 7 and 20, the resolution of applications for identification cards, the finding of violations by the department and the imposition of civil penalties and sanctions shall be conducted in accordance with 2 Pa.C.S. (relating to administrative law and procedure).

Section 1102. Reports by medical marijuana organizations.

(a) Reports required.--A medical marijuana organization shall report to the department as follows:

(1) A medical marijuana organization shall periodically file reports related to its activities. The department shall determine the information required in and the frequency of filing the reports.

(2) A medical marijuana organization shall report the following to the department every 60 days:

(i) The amount of medical marijuana sold.

(ii) The total dollar value of medical marijuana
dispensed to patients and caregivers.

(iii) The amount of medical marijuana purchased.

(iv) The cost of medical marijuana to each dispensary.

(b) Tracking systems.—Each medical marijuana organization shall adopt and maintain a 24-hour security, tracking, recordkeeping, record retention and surveillance system relating to every stage of acquiring, possessing, growing, manufacturing, selling, delivering, transporting, distributing or dispensing medical marijuana. The department shall specify the type and manner of 24-hour security, tracking, recordkeeping, record retention and surveillance system required through regulation.

(c) Additional tracking and recall systems.—In addition to other systems required by subsection (b), the department shall require that a grower/processor or dispenser implement the following:

(1) For a grower/processor and a dispensary, real time inventory tracking.

(2) For a grower/processor, a seed-to-sale tracking system that tracks medical marijuana from seed or immature plant stage until the medical marijuana is sold to a dispensary.

(3) For a dispensary, a system that tracks medical marijuana from purchase from the grower/processor until the medical marijuana is dispensed to a patient or caregiver.

(4) For a grower/processor and a dispensary, a daily log of each day's beginning inventory, acquisitions, sales, disbursements, disposals and ending inventory.

(5) For a grower/processor and a dispensary, a system for recall of defective medical marijuana.
(6) For a grower/processor, a system to track the plant
waste resulting from the growth or processing of medical-
marijuana.

Section 1103. Law enforcement notification.

Notwithstanding any law to the contrary, the department may-
notify any appropriate law enforcement agency of informa-
tion relating to any violation or suspected violation of this act.
In addition, the department shall verify to law enforcement-
personnel in an appropriate case whether a certification,
registration or an identification card is valid.

Section 1104. Evaluation.

The department may provide for an analysis and evaluation of
the implementation and effectiveness of this act, including
whether the intent and stated policy of the General Assembly
have been achieved. The department may enter into agreements
with one or more persons for the performance of an evaluation of
the implementation and effectiveness of this act.

Section 1105. Report.

(a) Report required.—The department shall submit a written-
report under subsection (b) every two years, beginning two years
after the effective date of this section, to the following:

(1) The Governor.

(2) The President pro tempore of the Senate.

(3) The Majority Leader and the Minority Leader of the
Senate.

(4) The Speaker of the House of Representatives.

(5) The Majority Leader and the Minority Leader of the
House of Representatives.

(6) The chairman and minority chairman of the Judiciary-
Committee of the Senate.
(7) The chairman and minority chairman of the Public Health and Welfare Committee of the Senate.

(8) The chairman and minority chairman of the Judiciary Committee of the House of Representatives.

(9) The chairman and minority chairman of the Health Committee of the House of Representatives.


(b) Contents of report. The following information shall be included in the report:

(1) An assessment of the use of medical marijuana as a result of the enactment of this act.

(2) An assessment of the benefits and risks to patients using medical marijuana under this act, including adverse events.

(3) Recommendations for amendments to this act for reasons of patient safety or to aid the general welfare of the citizens of this Commonwealth.

Section 1106. Advisory board.

(a) Establishment. The Medical Marijuana Advisory Board is established within the department. The advisory board shall consist of the following members:

(1) The secretary or a designee.

(2) The Commissioner of the Pennsylvania State Police or a designee.

(3) The chairman of the State Board of Pharmacy or a designee.

(4) The Commissioner of Professional and Occupational Affairs or a designee.

(5) The Physician General or a designee.

(6) The president of the Pennsylvania Chiefs of Police.
(7) The president of the Pennsylvania District Attorneys Association or a designee.

(8) One member to be appointed by each of the following, which members shall be knowledgeable and experienced in issues relating to care and treatment of individuals with a serious medical condition, geriatric or pediatric medicine or clinical research:

(i) The Governor.

(ii) The President pro tempore of the Senate.

(iii) The Majority Leader of the Senate.

(iv) The Minority Leader of the Senate.

(v) The Speaker of the House of Representatives.

(vi) The Majority Leader of the House of Representatives.

(vii) The Minority Leader of the House of Representatives.

(9) One member appointed by the Governor, who shall be a patient, a family or household member of a patient or a patient advocate.

(b) Terms.—Except as provided under subsection (g), the members appointed under subsection (a)(8) and (9) shall serve a term of four years or until a successor has been appointed and qualified, but no longer than six months beyond the four-year period.

(c) Chair.—The secretary, or a designee, shall serve as chair of the advisory board.

(d) Voting; quorum.—The members under subsections (1), (2), (3), (4), (5), (6) and (7) shall serve ex officio and shall have voting rights. A majority of the members shall constitute a
quorum for the purpose of organizing the advisory board,
conducting its business and fulfilling its duties. A vote of the
majority of the members present shall be sufficient for all
actions of the advisory board unless the bylaws require a
greater number.

(e) Attendance. A member of the advisory board appointed
under subsection (a)(8) or (9) who fails to attend three
consecutive meetings shall forfeit his seat unless the
secretary, upon written request from the member, finds that the
member should be excused from a meeting for good cause. A member
who cannot be physically present may attend meetings via
electronic means, including video conference.

(f) Governance. The advisory board shall have the power to
prescribe, amend and repeal bylaws, rules and regulations
governing the manner in which the business of the advisory board
is conducted and the manner in which the duties granted to it
are fulfilled. The advisory board may delegate supervision of
the administration of advisory board activities to an
administrative secretary and other employees of the department
as the secretary shall appoint.

(g) Initial terms. The initial terms of members appointed
under subsection (a)(8) and (9) shall be for terms of one, two,
three or four years, the particular term of each member to be
designated by the secretary at the time of appointment. All
other members shall serve for a term of four years.

(h) Vacancy. In the event that any member appointed under
subsection (a)(8) or (9) shall die or resign or otherwise become
disqualified during the member’s term of office, a successor
shall be appointed in the same way and with the same
qualifications as set forth in this section and shall hold
office for the unexpired term. An appointed member of the
advisory board shall be eligible for reappointment.

(i) Expenses.—A member appointed under subsection (a)(8) or
(9) shall receive the amount of reasonable travel, hotel and
other necessary expenses incurred in the performance of the
duties of the member in accordance with Commonwealth
regulations, but shall receive no other compensation for the
member’s service on the board.

(j) Duties.—The advisory board shall have the following
duties:

(1) To examine and analyze the statutory and regulatory
law relating to medical marijuana within this Commonwealth.
(2) To examine and analyze the law and events in other
states and the nation with respect to medical marijuana.
(3) To accept and review written comments from
individuals and organizations about medical marijuana.
(4) To issue two years after the effective date of this
section a written report to the Governor, the Senate and the
House of Representatives.
(5) The written report under paragraph (4) shall include
recommendations and findings as to the following:

(i) Whether to change the types of medical
professionals who can issue certifications to patients.
(ii) Whether to change, add or reduce the types of
medical conditions which qualify as serious medical
conditions under this act.
(iii) Whether to change, add or reduce the form and
manner of consumption of medical marijuana permitted
under this act.
(iv) Whether to change, add or reduce the number of
growers/processors or dispensaries.

(v) How to ensure affordable patient access to medical marijuana, including whether the department should set a maximum per-dose price for medical marijuana.

(vi) Whether to permit medical marijuana to be dispensed in dry leaf or plant form, for administration by vaporization.

(6) The final written report under this section shall be adopted at a public meeting. The report shall be a public record under the act of February 14, 2008 (P.L.6, No.3), known as the Right-to-Know Law.

Section 1107. Regulations.

In order to implement the provisions of this act, the department shall promulgate regulations within 18 months of the effective date of this section. The regulations shall provide for the following:

(1) Restricting the advertising and marketing of medical marijuana, which shall be consistent with the Federal regulations governing prescription drug advertising and marketing.

(2) Growing of medical marijuana by grower/processors in an indoor, enclosed facility. The regulations shall also specify the manner and method of growing medical marijuana.

(3) The procedure for certification of patients.

(4) A procedure for review and approval of certifications submitted by practitioners.

(5) A procedure to review the credentials of practitioners who submit certifications.

(6) A procedure to review and approve applications for...
identification cards.

(7) A procedure to review and approve applications to
become registered with the department as a medical marijuana
organization.

(8) A procedure to renew the registration of a medical
marijuana organization.

(9) The setting of a maximum per dose price for medical
marijuana by a dispensary.

(10) Additional information required by the department
for certification of patients and applications to become
registered as a medical marijuana organization.

(11) The procedure for waiving or reducing application
fees to be paid by patients and caregivers in the case of
financial hardship.

(12) Additional requirements of identification cards for
patients or caregivers.

(13) The method of transporting, delivering, growing,
processing and selling medical marijuana by a
grower/processor and the method of dispensing of medical
marijuana by a dispensary, including the types of medical
devices, instruments and services, which may be sold by a
dispensary.

(14) The method for maintaining effective security and
control to prevent diversion and abuse of medical marijuana
by a medical marijuana organization, including specifying the
requirements of the tracking system required by section
1102(b) and (c).

(15) The contents and timing of reports which must be
filed with the department by medical marijuana organizations.

(16) The proper disposal of electronic information by
medical marijuana organizations.

(17) Information required for labeling of medical
marijuana by medical marijuana organizations.

(18) The procedure for practitioners registering with
the department.

(19) The frequency of filing reports by medical
marijuana organizations.

(20) The criteria for designating an appropriate
individual to be a caregiver for a patient under 18 years of
age.

(21) The procedure for obtaining photographs for
identification cards.

(22) The procedure for reporting results of laboratory
testing of medical marijuana.

(23) The procedure for approving laboratories that seek
to test medical marijuana.

(24) The contents of the safety insert.

(25) The procedure for filing receipts generated by
dispensaries with the department.

(26) A schedule for inspections by the department of the
facilities for growing, processing, dispensing or selling
medical marijuana, or of the books, papers and tracking
systems of medical marijuana organizations required by this
act.

(27) Regulations that the department must promulgate
under section 1903(a), a procedure to select patients for the
research study and any other regulation the department deems
necessary to implement the research program under Chapter 19.

(28) Regulations which ensure a grower/processor only
provides medical marijuana to a dispensary holding a valid
registration and which ensure that a dispensary only procures medical marijuana from a grower/processor holding a valid registration, as set forth in section 707(6) and (7).

(29) The determination of the minimum number and the types of medical marijuana to be produced by a grower/processor and dispensed by a dispensary.

(30) Regulations which set forth the procedure for a grower/processor to obtain seed from outside this Commonwealth to initially grow medical marijuana.

(31) Regulations which set forth the procedure for a grower/processor to obtain seed and plant material from another grower/processor within this Commonwealth to grow medical marijuana.

(32) Regulations necessary to implement Chapter 20.

(33) Any other regulation necessary to implement this act, as determined by the department.

Section 1108. Regulations based on recommendations of advisory board.

(a) Recommendations. After receiving the report of the advisory board under section 1106(j)(4), at the discretion of the secretary, the department may promulgate regulations to effectuate recommendations made by the advisory board. The secretary shall issue notice in the Pennsylvania Bulletin within 12 months of the receipt of the report of the advisory board. The notice shall include the recommendations of the advisory board and shall state the specific reasons for the decision of the secretary on whether or not to effectuate each recommendation. The secretary shall consider whether to promulgate regulations with respect to:

(1) Whether to change the types of medical professionals—
who can issue certifications to patients with respect to the
use of medical marijuana under this act.

(2) Whether to change, add or reduce the types of
medical conditions which qualify as serious medical
conditions under this act.

(3) Whether to change, add or reduce the form and manner
of consumption of medical marijuana permitted under this act.

(4) Whether to change, add or reduce the number of
growersprocessors or dispensaries.

(5) Whether to permit medical marijuana to be dispensed
in dry leaf or plant form for administration by vaporization.

(b) Timing. Any regulations promulgated under this section
shall be promulgated within 12 months of the receipt of the
report of the advisory board.

Section 1109. Temporary regulations.

(a) Promulgation. In order to facilitate the prompt
implementation of this act, regulations promulgated by the
department shall be deemed temporary regulations which shall
expire not later than 18 months following the publication of the
temporary regulation. The department may promulgate temporary
regulations not subject to:

(1) Sections 201, 202, 203, 204 and 205 of the act of
July 31, 1968 (P.L.769, No.240), referred to as the
Commonwealth Documents Law.

(2) The act of June 25, 1982 (P.L.633, No.181), known as
the Regulatory Review Act.

(3) Sections 204(b) and 301(10) of the act of October
15, 1980 (P.L.950, No.164), known as the Commonwealth
Attorneys Act.

(b) Expiration. The department's authority to adopt
temporary regulations under subsection (a) shall expire 18-
months after the effective date of this section. Regulations-
adopted after this period shall be promulgated as provided by-
law.

(c) Temporary regulations. The department shall begin-
publishing temporary regulations in the Pennsylvania Bulletin no-
later than six months from the effective date of this section.

CHAPTER 13

OFFENSES RELATED TO MEDICAL MARIJUANA

Section 1301. Criminal diversion of medical marijuana by-
practitioners.

In addition to any other penalty provided by law, a-
practitioner commits a misdemeanor of the first degree if the-
practitioner intentionally, knowingly or recklessly certifies a-
person as being able to lawfully receive medical marijuana or-
otherwise provides medical marijuana to a person who is not-
lawfully permitted to receive medical marijuana.

Section 1302. Criminal diversion of medical marijuana by-
medical marijuana organizations.

In addition to any other penalty provided by law, an employee-
or principal of a medical marijuana organization, including an-
employee or principal of a clinical registrant under Chapter 20,-
commits a misdemeanor of the first degree if the person-
intentionally, knowingly or recklessly sells, dispenses, trades,
delivers or otherwise provides medical marijuana to a person who-
is not lawfully permitted to receive medical marijuana.

Section 1303. Criminal retention of medical marijuana.

In addition to any other penalty provided by law, a patient-
or caregiver commits a misdemeanor of the third degree if the-
patient or caregiver intentionally, knowingly or recklessly-

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possesses, stores or maintains an amount of medical marijuana in excess of the amount legally permitted.

Section 1304. Criminal diversion of medical marijuana by patient or caregiver.

(a) Offense defined. In addition to any other penalty provided by law, a patient or caregiver commits an offense if the patient or caregiver intentionally, knowingly or recklessly provides medical marijuana to a person who is not lawfully permitted to receive medical marijuana.

(b) Grading. A first offense under this section constitutes a misdemeanor of the second degree. A second or subsequent offense constitutes a misdemeanor of the first degree.

Section 1305. Falsification of identification cards.

(a) Offense defined. In addition to any other penalty provided by law, a person commits an offense if, knowing he is not privileged to hold an identification card, the person:

(1) possesses an identification card and either attempts to use the card to obtain medical marijuana or obtains medical marijuana;

(2) possesses an identification card which falsely identifies the person as being lawfully entitled to receive medical marijuana and either attempts to use the card to obtain medical marijuana or obtains medical marijuana; or

(3) possesses an identification card which contains any false information on the card and the person either attempts to use the card to obtain medical marijuana or obtains medical marijuana.

(b) Grading. A first offense under this section constitutes a misdemeanor of the second degree. A second or subsequent offense under this section constitutes a misdemeanor of the
Section 1306. Adulteration of medical marijuana.

(a) General rule. In addition to any other penalty provided by law, a person commits an offense if the person adulterates, fortifies, contaminates or changes the character or purity of medical marijuana from that set forth on the patient's or caregiver's identification card.

(b) Grading. A first offense under this section constitutes a misdemeanor of the second degree. A second or subsequent offense under this section constitutes a misdemeanor of the first degree.

Section 1307. Disclosure of information prohibited.

(a) Offense defined. In addition to any other penalty provided by law, an employee or principal of a medical marijuana organization, including an employee or principal of a clinical registrant under Chapter 20, or an employee of the department commits a misdemeanor of the third degree if the person discloses, except to authorized persons for official governmental or health care purposes, any information related to the use of medical marijuana.

(b) Exception. Subsection (a) shall not apply where disclosure is permitted or required by law or by court order.

Section 1308. Additional penalties.

(a) Criminal penalties. In addition to any other penalty provided by law, a practitioner, caregiver, patient or employee or principal of any medical marijuana organization, including an employee or principal of a clinical registrant under Chapter 20, who violates any of the provisions of this act, other than those specified in section 1301, 1302, 1303, 1304, 1305, 1306 or 1307, or any regulation promulgated under this act.
(1) For a first offense, commits a misdemeanor of the third degree and shall, upon conviction, be sentenced to pay a fine of not more than $5,000, or to imprisonment for not more than six months.

(2) For a second or subsequent offense, commits a misdemeanor of the third degree and shall, upon conviction, be sentenced to pay a fine of not more than $10,000, or to imprisonment for not less than six months or more than one year, or both.

(b) Civil penalties. In addition to any other remedy available to the department, the department may assess a civil penalty for a violation of this act, a regulation promulgated under this act or an order issued under this act or regulation as provided in this subsection. The following shall apply:

(1) The department may assess a penalty of not more than $10,000 for each violation and an additional penalty of not more than $1,000 for each day of a continuing violation. In determining the amount of each penalty, the department shall take the following factors into consideration:

(i) The gravity of the violation.

(ii) The potential harm resulting from the violation to patients, caregivers or the general public.

(iii) The willfulness of the violation.

(iv) Previous violations, if any, by the person being assessed.

(v) The economic benefit to the person being assessed for failing to comply with the requirements of this act, a regulation promulgated under this act or an order issued under this act or regulation.

(2) If the department finds that the violation did not
threaten the safety or health of a patient, caregiver or the
general public and the violator took immediate action to
remedy the violation upon learning of it, the department may
issue a written warning in lieu of assessing a civil penalty.

(3) A person who aids, abets, counsels, induces,
procures or causes another person to violate this act, a
regulation promulgated under this act or an order issued
under this act or regulation shall be subject to the civil
penalties provided under this subsection.

(c) Sanctions.——
(1) In addition to the penalties provided in subsection
(b) and any other penalty authorized by law, the department
may impose the following sanctions:

   (i) Revoke or suspend the registration of a person
   found to be in violation of this act, a regulation
   promulgated under this act or an order issued under this
   act or regulation.

   (ii) Revoke or suspend the registration of a person
   for conduct, activity or the occurrence of an event that
   would have disqualified the person from receiving the
   registration.

   (iii) Revoke or suspend the registration of a person
   for willfully and knowingly violating or attempting to
   violate an order of the department directed to the
   person.

   (iv) Suspend a registration of a person pending the
   outcome of a hearing in a case in which the registration
   could be revoked.

   (v) Order restitution of funds or property
   unlawfully obtained or retained by a registrant.
(vi) Issue a cease and desist order.

(2) A person who aids, abets, counsels, induces, procures or causes another person to violate this act shall be subject to the sanctions provided under this subsection.

(d) Costs of action. The department may assess against a person determined to be in violation of this act the costs of investigation of the violation.

(e) Minor violations. Nothing in this section shall be construed to require the assessment of a civil penalty or the imposition of a sanction for a minor violation of this act if the department determines that the public interest will be adequately served under the circumstances by the issuance of a written warning.

Section 1309. Other restrictions.

This act does not permit any person to engage in and does not prevent the imposition of any civil, criminal or other penalty for the following:

(1) Undertaking any task under the influence of medical marijuana when doing so would constitute negligence, professional malpractice or professional misconduct.

(2) Possessing or using medical marijuana in a State or county correctional facility, including a facility owned or operated or under contract with the Department of Corrections or the county which houses inmates serving a portion of their sentences on parole or other community correction program.

Nothing in this paragraph shall be construed to apply to employees of the facilities set forth in this paragraph. The Department of Corrections shall adopt a written policy no later than 18 months from the effective date of this section regarding the possession and use of medical marijuana by
employees in State correctional facilities. The governing
authority of a county may adopt a resolution no later than 18-
months from the effective date of this section regarding the
possession and use of medical marijuana by employees in a-
county correctional facility.

(3) Possessing or using medical marijuana in a youth-
detention center or other facility which houses children-
adjudicated delinquent, including the separate, secure State-
owned facility or unit utilized for sexually violent-
delinquent children under 42 Pa.C.S. § 6404 (relating to-
duration of inpatient commitment and review). As used in this-
paragraph, the term "sexually violent delinquent children"
shall have the meaning given to it in 42 Pa.C.S. § 6402-
(relating to definitions). Nothing in this paragraph shall be-
construed to apply to employees of the facilities set forth-
in this paragraph.

CHAPTER 19
RESEARCH PROGRAM

Section 1901. Definitions.
The following words and phrases when used in this chapter-
shall have the meanings given to them in this section unless the-
context clearly indicates otherwise:

"Health care medical marijuana organization." A vertically-
integrated health system approved by the department to dispense-
medical marijuana or grow and process medical marijuana, or-
both, in accordance with a research study under this chapter.

"Vertically integrated health system." A health delivery-
system licensed under the act of July 19, 1979 (P.L.130, No.48),
known as the Health Care Facilities Act, in which the complete-
spectrum of care, including primary and specialty care,
hospitalization and pharmaceutical care, is provided within a-
single organization.

Section 1902. Establishment of medical marijuana research-
program.

(a) Program to be established. The department shall-
establish and develop a research program to study the impact of-
medical marijuana on the treatment and symptom management of-
serious medical conditions. The program shall not include a-
clinical registrant or academic clinical research center under-
Chapter 20.

(b) Department duties. The department shall:

(1) Review all serious medical conditions which are-
cited by a practitioner upon the practitioner's certification-
that a patient be granted an identification card.

(2) Create a database of all serious medical conditions,
including comorbidities, which are cited by practitioners in-
the certifications of patients. The database shall also-
include the form of medical marijuana certified to treat each-
serious medical condition.

(3) When the database contains 25 or more patients with-
the same serious medical condition, petition the United-
States Food and Drug Administration and the United States-
Drug Enforcement Administration for approval to study the-
condition and the impact of medical marijuana on the-
condition.

(4) Concurrent with the request to the United States-
Food and Drug Administration and United States Drug-
Enforcement Administration, publicly announce the formation-
of a research study to which a vertically integrated health-
system and a university within this Commonwealth may submit a-
request to participate.

(5) Upon approval of a research study by the United States Food and Drug Administration and the United States Drug Enforcement Administration, select a vertically integrated health system or systems to conduct the research study and designate the form or forms of medical marijuana which will be used to treat the serious medical condition.

(6) Notify a patient who has been issued an identification card:

(i) that the patient has been selected to participate, at the patient's option, in a research study to study medical marijuana as a treatment; and

(ii) where the patient may secure medical marijuana through a health care medical marijuana organization at no cost to the patient in accordance with subsection (c).

(7) If the United States Food and Drug Administration and the United States Drug Enforcement Administration reject the proposal for the research study, take all reasonable steps to collect and collate data on the serious medical condition and the use of medical marijuana as a treatment for the serious medical condition and consider submitting an additional request to the United States Food and Drug Administration and United States Drug Enforcement Administration for a research study on the same condition.

(c) Costs. The cost of the medical marijuana which is dispensed to patients in accordance with an approved research study shall be paid for by the fund.

(d) Geographic accessibility. The department shall take into consideration the geographic location of the health care medical marijuana organization when assigning a patient to a
health care medical marijuana organization. The department shall make an effort to assign a patient to a health care medical marijuana organization that is located within 50 miles of the patient's residence.

(e) Data. Data collected by the health care medical marijuana organization shall be provided to the university participating in the research study for analysis.

Section 1903. Medical marijuana research program administration.

(a) General rule. The department shall establish a research study for each serious medical condition. The department shall engage universities within this Commonwealth to participate in the collection, collation, analysis and conclusive findings of the research studies. The department shall, by regulation, establish the procedure to be used by health care medical marijuana organizations with respect to:

(1) Real time inventory tracking.

(2) Real time tracking of the medical marijuana dispensed.

(3) Recall of defective medical marijuana.

(b) Request for distributions. The department shall establish a form and procedure for universities selected to participate in a research study to request distributions from the fund to conduct research on medical marijuana, including administrative costs. These distributions shall also be used to pay for the cost of the medical marijuana so that it is not borne by the patient participating in the research study. The forms shall include, at a minimum, the following:

(1) The form or forms of medical marijuana to be studied.
(2) The serious medical condition to be studied.

(c) Research reports.

(1) A vertically integrated health system shall report on the effectiveness of the use of medical marijuana for the treatment of the serious medical condition studied and all counterindications and noted side effects.

(2) The department shall notify the vertically integrated health system and the university participating in the research study of the data which is required to meet the United States Food and Drug Administration's and the United States Drug Enforcement Administration's approval for the research study.

(3) The first report, including the data required under paragraph (2), shall be submitted to the department and made publicly available within 180 days of the initiation of a research study for a specific serious medical condition.

(4) An annual report of the data required under paragraph (2) shall be submitted to the department beginning one year after the initiation of a research study for a specific serious medical condition and each year thereafter.

Section 1904. Approval.

A vertically integrated health system located in this Commonwealth may petition the department to participate in a research study to study a serious medical condition under section 1902. Approval of the vertically integrated health system as a health care medical marijuana organization by the department shall authorize access within a region under section 706(d) to medical marijuana for all patients included in an approved research study.

Section 1905. Requirements.
(a) Dispensing.—A health care medical marijuana organization that dispenses medical marijuana shall:

1. Maintain licensure with the department as required under the act of July 19, 1979 (P.L.130, No.48), known as the Health Care Facilities Act.

2. Secure the medical marijuana within the associated pharmacies of the health care medical marijuana organization in a manner and method prescribed by the department.

3. Keep a daily log of the medical marijuana dispensed and the research study with which the patient and the medical marijuana are associated. Reports shall be delivered to the department and the university participating in the research study on a weekly basis.

4. Report to the Pennsylvania Health Care Cost Containment Council the utilization rates of those patients participating in the research of medical marijuana and treatment options.

5. Only dispense medical marijuana received from a grower/processor or a health care medical marijuana organization that is approved to grow and process medical marijuana.

6. Provide all patients or caregivers with the safety insert, prepared by the department, which includes potential dangers, recognition and correction of problematic dosage and any other information required by the department or which the department deems relevant for patient safety.

(b) Growing and processing.—A health care medical marijuana organization that grows and processes medical marijuana shall:

1. Maintain licensure with the department as required under the Health Care Facilities Act.
(2) Only make available medical marijuana to health care medical marijuana organizations that dispense medical marijuana.

(3) Keep a daily log of medical marijuana intended for ultimate use by patients participating in a research study.

Section 1906. Restrictions.

A health care medical marijuana organization may not participate in a research study of any kind, including the program established under this chapter, or dispense or grow and process medical marijuana if it has violated its licensure requirements under the Health Care Facilities Act.

Section 1907. Regulations.

The department shall, by regulation, establish the procedure to be used by a health care medical marijuana organization that grows and processes medical marijuana with respect to:

(1) Real time inventory tracking, including a seed-to-dispensing tracking system that tracks medical marijuana from seed or immature plant stage until the medical marijuana is provided to a patient in a research study.

(2) Security, recordkeeping, record retention and surveillance systems relating to every stage of growing and processing medical marijuana.

(3) A daily log of each day's beginning inventory, acquisitions, disbursements, disposals and ending inventory.

(4) A system to recall defective medical marijuana.

(5) A system to track the plant waste resulting from the growth of medical marijuana.

(6) Testing of medical marijuana by an independent laboratory to test the medical marijuana produced by the health care medical marijuana organization, including
requiring a test at harvest and a test at final processing.

(7) Any other procedure deemed necessary by the department.

Section 1908. Nonentitlement.

Nothing in this chapter shall be construed to create an entitlement or right of a patient to receive medical marijuana or to participate in a research study.

CHAPTER 20

ACADEMIC CLINICAL RESEARCH CENTERS


The following words and phrases when used in this chapter shall have the meanings given to them in this section unless the context clearly indicates otherwise:

"Academic clinical research center." An accredited medical school within this Commonwealth that operates or partners with an acute care hospital licensed within this Commonwealth.

"Clinical registrant." An entity registered as both a grower/processor and a dispensary which has a contractual relationship with an academic clinical research center as set forth under section 2002.

Section 2002. Registration as both grower/processor and dispensary collaborating with an academic clinical research center.

Notwithstanding the limitations in sections 706 and 707, the department may register up to eight entities which are registered as both a grower/processor and a dispensary that have a contractual relationship with an academic clinical research center under which the academic clinical research center or its affiliate provides advice to the entities registered as both a grower/processor and a dispensary regarding, among other areas,
patient health and safety, medical applications and dispensing
and management of controlled substances. Each entity may provide
medical marijuana at not more than six separate locations. The
total number of locations authorized to dispense medical
marijuana under this section shall not exceed 48. The following
apply with respect to this category of clinical registrant:

(1) A clinical registrant must be registered as both a
grower/processor and a dispensary.

(2) A clinical registrant must pay the fees and meet all
other requirements under this act for registration, except as
provided in section 708(g)(1)(iv) and (2)(v), as a
grower/processor and a dispensary.

(3) The clinical registrant must have a minimum of
$15,000,000 in capital. The department shall verify the
capital requirement.

(4) The clinical registrant must comply with all other
requirements of this act regarding growing, processing and
dispensing medical marijuana.


Notwithstanding any provision of this act to the contrary,
the department may, upon application, approve the dispensing of
medical marijuana by a clinical registrant to the academic
clinical research center for the purpose of conducting a
research study. The department shall develop the application and
standards for approval of such dispensing by the clinical
registrant. The following apply to the research study:

(1) The clinical registrant shall disclose the following
information to the department in its application:

   (i) The reason for the research project, including

   the reason for the trial.
(ii) The strain of medical marijuana to be used and the strength of the medical marijuana to be used in the research study.

(iii) The anticipated duration of the study.

(iv) Evidence of approval of the trial by accredited institutional review board, including any other required regulatory approvals.

(v) Other information required by the department, except that the department may not require disclosure of any information that would infringe upon the academic clinical research center’s exclusive right to intellectual property or legal obligations for patient confidentiality.

(2) The academic clinical research center shall provide its findings to the department within 365 days of the conclusion of the research study or within 365 days of publication of the results of the research study in a peer-reviewed medical journal, whichever is later.

(3) The department shall allow the exchange of medical marijuana seed between clinical registrants for the conduct of research.

CHAPTER 21
MISCELLANEOUS PROVISIONS
Section 2101. Conflict.

The growth, processing, manufacture, acquisition, transportation, sale, dispensing, distribution, possession and consumption of medical marijuana permitted under this act shall not be deemed to be a violation of the act of April 14, 1972 (P.L.233, No.64), known as The Controlled Substance, Drug, Device and Cosmetic Act. If a provision of the Controlled
Section 2101.1. Financial and employment interests.

(a) Financial interests. Except as may be provided for the judiciary by rule or order of the Pennsylvania Supreme Court, an executive level public employee, public official or party officer, or an immediate family member thereof, shall not intentionally or knowingly hold a financial interest in a medical marijuana organization or in a holding company, affiliate, intermediary or subsidiary thereof, while the individual is an executive level public employee, public official or party officer and for one year following termination of the individual's status as an executive level public employee, public official or party officer.

(b) Employment. Except as may be provided by rule or order of the Pennsylvania Supreme Court, no executive level public employee, public official or party officer, or an immediate family member thereof, shall be employed by a medical marijuana organization or by any holding company, affiliate, intermediary or subsidiary thereof, while the individual is an executive level public employee, public official or party officer and for one year following termination of the individual's status as an executive level public employee, public official or party officer.

(c) Grading. An individual who violates this section commits a misdemeanor and shall, upon conviction, be sentenced to pay a fine of not more than $1,000 or to imprisonment for not more than one year, or both.

(d) State Ethics Commission. The State Ethics Commission
shall do all of the following:

(1) Issue a written determination of whether a person is subject to subsections (a) or (b) upon the written request of the person or any other person that may have liability for an action taken with respect to such person. A person that relies in good faith on a determination made under this paragraph shall not be subject to any penalty for an action taken, provided that all material facts set forth in the request for the determination are correct.

(2) Publish a list of all State, county, municipal and other government positions that meet the definitions of "public official" as defined under subsection (b) or "executive-level public employee." The Office of Administration shall assist the State Ethics Commission in the development of the list, which shall be published by the State Ethics Commission in the Pennsylvania Bulletin biennially and posted by the board on the board's Internet website. Upon request, each public official shall have a duty to provide the State Ethics Commission with adequate information to accurately develop and maintain the list. The State Ethics Commission may impose a civil penalty under 65 Pa.C.S. § 1109(f) (relating to penalties) upon any individual, including any public official or executive level public employee, who fails to cooperate with the State Ethics Commission under this subsection. A person that relies in good faith on the list published by the State Ethics Commission shall not be subject to any penalty for a violation of this section.

(e) Definitions.--As used in this section, the following words and phrases shall have the meanings given to them in this...
subsection:

"Financial interest." As defined in 4 Pa.C.S. § 1512(b) relating to financial and employment interests.

"Immediate family." As defined in 4 Pa.C.S. § 1512(b).

"Party officer." As defined in 4 Pa.C.S. § 1512(b).

"Public official." The term shall include the following:

1. The Governor, Lieutenant Governor, a member of the Governor's cabinet, Treasurer, Auditor General and Attorney General of the Commonwealth.

2. A member of the Senate or House of Representatives of the Commonwealth.

3. An individual elected or appointed to any office of a county or municipality that directly receives a distribution of revenue under this part.

4. An individual elected or appointed to a department, agency, board, commission, authority or other governmental body not included in paragraph (1), (2) or (3) that directly receives a distribution of revenue under this part.

5. An individual elected or appointed to a department, agency, board, commission, authority, county, municipality or other governmental body not included in paragraph (1), (2) or (3) with discretionary power which may influence or affect the outcome of an action or decision and who is involved in the development of regulation or policy relating to a licensed entity or who is involved in other matters under this part.

The term does not include a member of a school board or an individual who held an uncompensated office with a governmental body prior to January 1, 2017, and who no longer holds the office as of January 1, 2017. The term includes a member of an...
Section 2102. Insurers.

Nothing in this act shall be construed to require an insurer or a health plan, whether paid for by Commonwealth funds or private funds, to provide coverage for medical marijuana.

Section 2103. Protections for patients and caregivers.

(a) Licensure. None of the following shall be subject to arrest, prosecution or penalty in any manner, or denied any right or privilege, including civil penalty or disciplinary action by a Commonwealth licensing board or commission, solely for lawful use of medical marijuana or manufacture or sale or dispensing of medical marijuana, or for any other action taken in accordance with this act:

(1) A patient.
(2) A caregiver.
(3) A practitioner.
(4) A medical marijuana organization.
(5) A health care medical marijuana organization or university participating in a research study under Chapter 19.
(6) A clinical registrant or academic clinical research center under Chapter 20.
(7) An employee, principal or financial backer of a medical marijuana organization.
(8) An employee of a health care medical marijuana organization or an employee of a university participating in a research study under Chapter 19.
(9) An employee of a clinical registrant or an employee of an academic clinical research center under Chapter 20.
(10) A pharmacist or certified registered nurse.
practitioner under section 707(9).

(b) Employment.—

(1) No employer may discharge, threaten, refuse to hire or otherwise discriminate or retaliate against an employee regarding an employee's compensation, terms, conditions, location or privileges solely on the basis of such employee's status as an individual who is certified to use medical marijuana.

(2) Nothing in this act shall require an employer to make any accommodation of the use of medical marijuana on the property or premises of any place of employment. This act shall in no way limit an employer's ability to discipline an employee for being under the influence of medical marijuana in the workplace or for working while under the influence of medical marijuana when the employee's conduct falls below the standard of care normally accepted for that position.

(3) Nothing in this act shall require an employer to commit any act that would put the employer or any person acting on its behalf in violation of Federal law.

(e) Custody determination.—The fact that an individual is certified to use medical marijuana and acting in accordance with this act shall not by itself be considered by a court in a custody proceeding. In determining the best interest of a child with respect to custody, the provisions of 23 Pa.C.S. Ch. 53 (relating to child custody) shall apply.

Section 2104. Schools.

The Department of Education shall promulgate regulations within 18 months of the effective date of this section regarding the following:

(1) Possession and use of medical marijuana by a student—
on the grounds of a preschool, primary school and a secondary school.

(2) Possession and use of medical marijuana by an employee of a preschool, primary school and a secondary school on the grounds of such school.

Section 2105. Day-care centers.

The Department of Human Services shall promulgate regulations within 18 months of the effective date of this section regarding the following:

(1) Possession and use of medical marijuana by a child under the care of a child-care or social service center licensed or operated by the Department of Human Services.

(2) Possession and use of medical marijuana by an employee of a child-care or social service center licensed or operated by the Department of Human Services.

(3) Possession and use of medical marijuana by employees of a youth development center or other facility which houses children adjudicated delinquent, including the separate, secure State-owned facility or unit for sexually violent children, as set forth in section 1309(3).

Section 2106. Medical marijuana from other states.

(a) General rule.--It is not a violation of this act or the act of April 14, 1972 (P.L.233, No.64), known as The Controlled Substance, Drug, Device and Cosmetic Act, if a parent or guardian of a minor under 18 years of age lawfully obtains medical marijuana from another state, territory of the United States or any other country to be administered to the minor.

(b) Expiration.--This section shall expire 730 days after the effective date of this section.

Section 2107. Zoning.
The following apply:

(1) A grower/processor shall meet the same municipal zoning and land use requirements as other manufacturing, processing and production facilities that are located in the same zoning district.

(2) A dispensary shall meet the same municipal zoning and land use requirements as other commercial facilities that are located in the same zoning district.

Section 2108. Notice.
Upon amendment of the Controlled Substances Act (Public Law 91-513, 84 Stat. 1236) removing marijuana from Schedule I of the Controlled Substances Act, the department shall publish notice of the effective date of the amendment in the Pennsylvania Bulletin.

Section 2109. Applicability.
The provisions of this act with respect to dispensaries shall not apply beginning 1,095 days from the effective date of an amendment to the Controlled Substances Act (Public Law 91-513, 84 Stat. 1236) removing marijuana from Schedule I of the Controlled Substances Act.

Section 2110. Effective date.
This act shall take effect as follows:

(1) The following provisions shall take effect immediately:

(i) This section.
(ii) Chapter 1.
(iii) Chapter 3.
(iv) Section 704.
(v) Section 711.
(vi) Chapter 9.
(2) The remainder of this act shall take effect upon the issuance of temporary regulations by the department under section 1109(a) or 18 months from the effective date of this section, whichever is sooner.
IS ONE POTENTIAL THERAPY THAT MAY MITIGATE SUFFERING IN SOME PATIENTS AND ALSO ENHANCE QUALITY OF LIFE.

(2) THE COMMONWEALTH IS COMMITTED TO PATIENT SAFETY. CAREFULLY REGULATING THE PROGRAM WHICH ALLOWS ACCESS TO MEDICAL MARIJUANA WILL ENHANCE PATIENT SAFETY WHILE RESEARCH INTO ITS EFFECTIVENESS CONTINUES.

(3) IT IS THE INTENT OF THE GENERAL ASSEMBLY TO:

(I) PROVIDE A PROGRAM OF ACCESS TO MEDICAL MARIJUANA WHICH BALANCES THE NEED OF PATIENTS TO HAVE ACCESS TO THE LATEST TREATMENTS WITH THE NEED TO PROMOTE PATIENT SAFETY.

(II) PROVIDE A SAFE AND EFFECTIVE METHOD OF DELIVERY OF MEDICAL MARIJUANA TO PATIENTS.

(III) PROMOTE HIGH QUALITY RESEARCH INTO THE EFFECTIVENESS AND UTILITY OF MEDICAL MARIJUANA.

(4) IT IS THE FURTHER INTENTION OF THE GENERAL ASSEMBLY THAT ANY COMMONWEALTH-BASED PROGRAM TO PROVIDE ACCESS TO MEDICAL MARIJUANA SERVE AS A TEMPORARY MEASURE, PENDING FEDERAL APPROVAL OF AND ACCESS TO MEDICAL MARIJUANA THROUGH TRADITIONAL MEDICAL AND PHARMACEUTICAL AVENUES.

SECTION 103. DEFINITIONS.

THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS ACT SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE CONTEXT CLEARLY INDICATES OTHERWISE:

"ADVISORY BOARD." THE ADVISORY BOARD ESTABLISHED UNDER SECTION 1201.

"CAREGIVER." THE INDIVIDUAL DESIGNATED BY A PATIENT OR, IF THE PATIENT IS UNDER 18 YEARS OF AGE, AN INDIVIDUAL UNDER SECTION 506(2), TO DELIVER MEDICAL MARIJUANA.

"CERTIFIED MEDICAL USE." THE ACQUISITION, POSSESSION, USE OR
TRANSPORTATION OF MEDICAL MARIJUANA BY A PATIENT, OR THE
ACQUISITION, POSSESSION, DELIVERY, TRANSPORTATION OR
ADMINISTRATION OF MEDICAL MARIJUANA BY A CAREGIVER, FOR USE AS
PART OF THE TREATMENT OF THE PATIENT'S SERIOUS MEDICAL
CONDITION, AS AUTHORIZED IN A CERTIFICATION UNDER THIS ACT,
INCLUDING ENABLING THE PATIENT TO TOLERATE TREATMENT FOR THE
SERIOUS MEDICAL CONDITION.

"CERTIFIED REGISTERED NURSE PRACTITIONER." AS DEFINED IN
SECTION 2 OF THE ACT OF MAY 22, 1951 (P.L.317, NO.69), KNOWN AS
THE PROFESSIONAL NURSING LAW.

"CHANGE IN CONTROL." THE ACQUISITION BY A PERSON OR GROUP OF
PERSONS ACTING IN CONCERT OF A CONTROLLING INTEREST IN AN
APPLICANT OR PERMITTEE EITHER ALL AT ONE TIME OR OVER THE SPAN
OF A 12-CONSECUTIVE-MONTH PERIOD.

"CONTINUING CARE." TREATING A PATIENT, IN THE COURSE OF
WHICH THE PRACTITIONER HAS COMPLETED A FULL ASSESSMENT OF THE
PATIENT'S MEDICAL HISTORY AND CURRENT MEDICAL CONDITION,
INCLUDING AN IN-PERSON CONSULTATION WITH THE PATIENT.

"CONTROLLING INTEREST." AS FOLLOWS:

1. FOR A PUBLICLY TRADED ENTITY, VOTING RIGHTS THAT
ENTITLE A PERSON TO ELECT OR APPOINT ONE OR MORE OF THE
MEMBERS OF THE BOARD OF DIRECTORS OR OTHER GOVERNING BOARD OR
THE OWNERSHIP OR BENEFICIAL HOLDING OF 5% OR MORE OF THE
SECURITIES OF THE PUBLICLY TRADED ENTITY.

2. FOR A PRIVATELY HELD ENTITY, THE OWNERSHIP OF ANY
SECURITY IN THE ENTITY.

"DEPARTMENT." THE DEPARTMENT OF HEALTH OF THE COMMONWEALTH.

"DISPENSARY." A PERSON, INCLUDING A NATURAL PERSON,
CORPORATION, PARTNERSHIP, ASSOCIATION, TRUST OR OTHER ENTITY, OR
ANY COMBINATION THEREOF, WHICH HOLDS A PERMIT ISSUED BY THE
DEPARTMENT TO DISPENSE MEDICAL MARIJUANA. THE TERM DOES NOT INCLUDE A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION UNDER CHAPTER 19.

"FAMILY OR HOUSEHOLD MEMBER." AS DEFINED IN 23 PA.C.S. § 6102 (RELATING TO DEFINITIONS).

"FINANCIAL BACKER." AN INVESTOR, MORTGAGEE, BONDHOLDER, NOTE HOLDER OR OTHER SOURCE OF EQUITY, CAPITAL OR OTHER ASSETS, OTHER THAN A FINANCIAL INSTITUTION.

"FINANCIAL INSTITUTION." A BANK, A NATIONAL BANKING ASSOCIATION, A BANK AND TRUST COMPANY, A TRUST COMPANY, A SAVINGS AND LOAN ASSOCIATION, A BUILDING AND LOAN ASSOCIATION, A MUTUAL SAVINGS BANK, A CREDIT UNION OR A SAVINGS BANK.

"FORM OF MEDICAL MARIJUANA." THE CHARACTERISTICS OF THE MEDICAL MARIJUANA RECOMMENDED OR LIMITED FOR A PARTICULAR PATIENT, INCLUDING THE METHOD OF CONSUMPTION AND ANY PARTICULAR DOSAGE, STRAIN, VARIETY AND QUANTITY OR PERCENTAGE OF MEDICAL MARIJUANA OR PARTICULAR ACTIVE INGREDIENT.

"FUND." THE MEDICAL MARIJUANA PROGRAM FUND ESTABLISHED IN SECTION 902.

"GROWER/PROCESSOR." A PERSON, INCLUDING A NATURAL PERSON, CORPORATION, PARTNERSHIP, ASSOCIATION, TRUST OR OTHER ENTITY, OR ANY COMBINATION THEREOF, WHICH HOLDS A PERMIT FROM THE DEPARTMENT UNDER THIS ACT TO GROW AND PROCESS MEDICAL MARIJUANA. THE TERM DOES NOT INCLUDE A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION UNDER CHAPTER 19.

"IDENTIFICATION CARD." A DOCUMENT ISSUED UNDER SECTION 501 THAT AUTHORIZES ACCESS TO MEDICAL MARIJUANA UNDER THIS ACT.

"INDIVIDUAL DOSE." A SINGLE MEASURE OF MEDICAL MARIJUANA.

"MEDICAL MARIJUANA." MARIJUANA FOR CERTIFIED MEDICAL USE AS SET FORTH IN THIS ACT.
"MEDICAL MARIJUANA ORGANIZATION." A DISPENSARY OR A GROWER/PROCESSOR. THE TERM DOES NOT INCLUDE A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION UNDER CHAPTER 19.

"PATIENT." AN INDIVIDUAL WHO:

1. HAS A SERIOUS MEDICAL CONDITION;
2. HAS MET THE REQUIREMENTS FOR CERTIFICATION UNDER THIS ACT; AND
3. IS A RESIDENT OF THIS COMMONWEALTH.

"PERMIT." AN AUTHORIZATION ISSUED BY THE DEPARTMENT TO A MEDICAL MARIJUANA ORGANIZATION TO CONDUCT ACTIVITIES UNDER THIS ACT.


"PRACTITIONER." A PHYSICIAN WHO IS REGISTERED WITH THE DEPARTMENT UNDER SECTION 401.

"PRESCRIPTION DRUG MONITORING PROGRAM." THE ACHIEVING BETTER CARE BY MONITORING ALL PRESCRIPTIONS PROGRAM (ABC-MAP).

"PRINCIPAL." AN OFFICER, DIRECTOR OR PERSON WHO DIRECTLY OWNS A BENEFICIAL INTEREST IN OR OWNERSHIP OF THE SECURITIES OF AN APPLICANT OR PERMITTEE, A PERSON WHO HAS A CONTROLLING INTEREST IN AN APPLICANT OR PERMITTEE OR WHO HAS THE ABILITY TO ELECT THE MAJORITY OF THE BOARD OF DIRECTORS OF AN APPLICANT OR PERMITTEE OR OTHERWISE CONTROL AN APPLICANT OR PERMITTEE, OTHER THAN A FINANCIAL INSTITUTION.

"REGISTRY." THE REGISTRY ESTABLISHED BY THE DEPARTMENT FOR PRACTITIONERS.

"SECRETARY." THE SECRETARY OF HEALTH OF THE COMMONWEALTH.

"SERIOUS MEDICAL CONDITION." ANY OF THE FOLLOWING:

(1) CANCER.
(2) POSITIVE STATUS FOR HUMAN IMMUNODEFICIENCY VIRUS OR ACQUIRED IMMUNE DEFICIENCY SYNDROME.
(3) AMYOTROPHIC LATERAL SCLEROSIS.
(4) PARKINSON'S DISEASE.
(5) MULTIPLE SCLEROSIS.
(6) DAMAGE TO THE NERVOUS TISSUE OF THE SPINAL CORD WITH OBJECTIVE NEUROLOGICAL INDICATION OF INTRACTABLE SPASTICITY.
(7) EPILEPSY.
(8) INFLAMMATORY BOWEL DISEASE.
(9) NEUROPATHIES.
(10) HUNTINGTON'S DISEASE.
(11) CROHN'S DISEASE.
(12) POST-TRAUMATIC STRESS DISORDER.
(13) INTRACTABLE SEIZURES.
(14) GLAUCOMA.
(15) SICKLE CELL ANEMIA.
(16) SEVERE CHRONIC OR INTRACTABLE PAIN OF NEUROPATHIC ORIGIN OR SEVERE CHRONIC OR INTRACTABLE PAIN IN WHICH CONVENTIONAL THERAPEUTIC INTERVENTION AND OPIATE THERAPY IS CONTRAINDICATED OR INEFFECTIVE.
(17) AUTISM.

"TERMINALLY ILL." A MEDICAL PROGNOSIS OF LIFE EXPECTANCY OF APPROXIMATELY ONE YEAR OR LESS IF THE ILLNESS RUNS ITS NORMAL COURSE.
SECTION 301. PROGRAM ESTABLISHED.

(A) ESTABLISHMENT.--A MEDICAL MARIJUANA PROGRAM FOR PATIENTS SUFFERING FROM SERIOUS MEDICAL CONDITIONS IS ESTABLISHED. THE PROGRAM SHALL BE IMPLEMENTED AND ADMINISTERED BY THE DEPARTMENT. THE DEPARTMENT SHALL:

(1) ISSUE PERMITS TO MEDICAL MARIJUANA ORGANIZATIONS TO AUTHORIZE THEM TO GROW, PROCESS OR DISPENSE MEDICAL MARIJUANA AND ENSURE THEIR COMPLIANCE WITH THIS ACT.

(2) REGISTER PRACTITIONERS AND ENSURE THEIR COMPLIANCE WITH THIS ACT.

(3) HAVE REGULATORY AND ENFORCEMENT AUTHORITY OVER THE GROWING, PROCESSING, SALE AND USE OF MEDICAL MARIJUANA IN THIS COMMONWEALTH.

(4) ESTABLISH AND MAINTAIN AN ELECTRONIC DATABASE TO INCLUDE ACTIVITIES AND INFORMATION RELATING TO MEDICAL MARIJUANA ORGANIZATIONS, CERTIFICATIONS AND IDENTIFICATION CARDS ISSUED, PRACTITIONER REGISTRATION AND ELECTRONIC TRACKING OF ALL MEDICAL MARIJUANA AS REQUIRED UNDER THIS ACT TO INCLUDE:

   (I) ENSURANCE THAT MEDICAL MARIJUANA IS NOT DIVERTED OR OTHERWISE USED FOR UNLAWFUL PURPOSES BY A PRACTITIONER OR MEDICAL MARIJUANA ORGANIZATION.

   (II) ABILITY TO ESTABLISH THE AUTHENTICITY OF IDENTIFICATION CARDS.

   (III) RECORDING RECOMMENDED FORMS OF MEDICAL MARIJUANA PROVIDED IN A CERTIFICATION FILED BY THE PRACTITIONER.

   (IV) MONITORING ALL GROWTH, TRANSFER, POSSESSION, PROCESSING, TESTING AND DISPENSING OF MEDICAL MARIJUANA
IN THIS COMMONWEALTH.

(V) THE TRACKING SYSTEM UNDER SECTION 701 that must include information under section 801(A) and any other information required by the department to be used by the department and dispensaries to enable a dispensary to lawfully provide medical marijuana. The tracking system and database shall be capable of providing information in real time. The database shall be capable of receiving information from a dispensary regarding the disbursement of medical marijuana to patients and caregivers. This information shall be immediately accessible to the department and other dispensaries to inhibit diversion and ensure compliance with this act.

(5) Maintain a directory of patients and caregivers approved to use or assist in the administration of medical marijuana within the department's database.

(6) Develop a four-hour training course for physicians, pharmacists, certified registered nurse practitioners and physician assistants regarding the latest scientific research on medical marijuana, including the risks and benefits of medical marijuana, and other information deemed necessary by the department. Successful completion of the course shall be approved as continuing education credits as determined by:

(I) the state board of medicine and the state board of osteopathic medicine.

(II) the state board of pharmacy.

(III) the state board of nursing.

(7) Develop a two-hour course for the principals and employees of a medical marijuana organization who either have direct contact with patients or caregivers or who physically
HANDLE MEDICAL MARIJUANA. EMPLOYEES MUST SUCCESSFULLY COMPLETE THE COURSE NO LATER THAN 90 DAYS AFTER COMMENCING EMPLOYMENT. PRINCIPALS MUST SUCCESSFULLY COMPLETE THE COURSE PRIOR TO COMMENCING INITIAL OPERATION OF THE MEDICAL MARIJUANA ORGANIZATION. THE SUBJECT MATTER OF THE COURSE SHALL INCLUDE THE FOLLOWING:

(I) METHODS TO RECOGNIZE AND REPORT UNAUTHORIZED ACTIVITY, INCLUDING DIVERSION OF MEDICAL MARIJUANA FOR UNLAWFUL PURPOSES AND FALSIFICATION OF IDENTIFICATION CARDS.

(II) PROPER HANDLING OF MEDICAL MARIJUANA AND RECORDKEEPING.

(III) ANY OTHER SUBJECT REQUIRED BY THE DEPARTMENT.

(8) DEVELOP ENFORCEMENT PROCEDURES, INCLUDING ANNOUNCED AND UNANNOUNCED INSPECTIONS OF FACILITIES OF GROWER/PROCESSORS AND DISPENSARIES AND ALL RECORDS OF THE MEDICAL MARIJUANA ORGANIZATIONS.

(9) ESTABLISH A PROGRAM TO AUTHORIZE THE USE OF MEDICAL MARIJUANA TO CONDUCT MEDICAL RESEARCH RELATING TO THE USE OF MEDICAL MARIJUANA TO TREAT SERIOUS MEDICAL CONDITIONS, INCLUDING THE COLLECTION OF DATA AND THE PROVISION OF RESEARCH GRANTS.

(10) ESTABLISH AND MAINTAIN PUBLIC OUTREACH PROGRAMS ABOUT THE MEDICAL MARIJUANA PROGRAM, INCLUDING:

(I) A DEDICATED TELEPHONE NUMBER FOR PATIENTS, CAREGIVERS AND MEMBERS OF THE PUBLIC TO OBTAIN BASIC INFORMATION ABOUT THE DISPENSING OF MEDICAL MARIJUANA UNDER THIS ACT.

(II) A PUBLICLY ACCESSIBLE INTERNET WEBSITE WITH SIMILAR INFORMATION.
(11) Collaborate as necessary with other commonwealth agencies or contract with third parties as necessary to carry out the provisions of this act.

(12) Determine the minimum number and type of medical marijuana products to be produced by a grower/processor and dispensed by a dispensary.

(13) Develop recordkeeping requirements for all books, papers, any electronic database or tracking system data and other information of a medical marijuana organization. Information shall be retained for a minimum period of two four years unless otherwise provided by the department.

(14) Restrict the advertising and marketing of medical marijuana, which shall be consistent with the federal regulations governing prescription drug advertising and marketing.

(B) Regulations.--The department shall promulgate all regulations necessary to carry out the provisions of this act.

SECTION 302. CONFIDENTIALITY AND PUBLIC DISCLOSURE.

(A) Patient information.--The department shall maintain a confidential list of patients and caregivers to whom it has issued identification cards. All information obtained by the department relating to patients, caregivers and other applicants shall be confidential and not subject to public disclosure, including disclosure under the act of February 14, 2008 (P.L. 6, No. 3), known as the Right-to-Know Law, including:

(1) Individual identifying information about patients and caregivers.

(2) Certifications issued by practitioners.

(3) Information on identification cards.

(4) Information provided by the Pennsylvania State.
(5) INFORMATION RELATING TO THE PATIENT'S SERIOUS MEDICAL CONDITION.

(B) PUBLIC INFORMATION.--THE FOLLOWING RECORDS ARE PUBLIC RECORDS AND SHALL BE SUBJECT TO THE RIGHT-TO-KNOW LAW:

(1) APPLICATIONS FOR PERMITS SUBMITTED BY MEDICAL MARIJUANA ORGANIZATIONS.

(2) THE NAMES, BUSINESS ADDRESSES AND MEDICAL CREDENTIALS OF PRACTITIONERS AUTHORIZED TO PROVIDE CERTIFICATIONS TO PATIENTS TO ENABLE THEM TO OBTAIN AND USE MEDICAL MARIJUANA IN THIS COMMONWEALTH. ALL OTHER PRACTITIONER REGISTRATION INFORMATION SHALL BE CONFIDENTIAL AND EXEMPT FROM PUBLIC DISCLOSURE UNDER THE RIGHT-TO-KNOW LAW.

(3) INFORMATION RELATING TO PENALTIES OR OTHER DISCIPLINARY ACTIONS TAKEN AGAINST A MEDICAL MARIJUANA ORGANIZATION OR PRACTITIONER BY THE DEPARTMENT FOR VIOLATION OF THIS ACT.

SECTION 303. LAWFUL USE OF MEDICAL MARIJUANA.

(A) GENERAL RULE.--NOTWITHSTANDING ANY PROVISION OF LAW TO THE CONTRARY, USE OR POSSESSION OF MEDICAL MARIJUANA AS SET FORTH IN THIS ACT IS LAWFUL WITHIN THIS COMMONWEALTH.

(B) REQUIREMENTS.--THE LAWFUL USE OF MEDICAL MARIJUANA IS SUBJECT TO THE FOLLOWING:

(1) MEDICAL MARIJUANA MAY ONLY BE DISPENSED TO:

(I) A PATIENT WHO RECEIVES A CERTIFICATION FROM A PRACTITIONER AND IS IN POSSESSION OF A VALID IDENTIFICATION CARD ISSUED BY THE DEPARTMENT; AND

(II) A CAREGIVER WHO IS IN POSSESSION OF A VALID IDENTIFICATION CARD ISSUED BY THE DEPARTMENT.
(2) SUBJECT TO REGULATIONS PROMULGATED UNDER THIS ACT, MEDICAL MARIJUANA MAY ONLY BE DISPENSED TO A PATIENT OR CAREGIVER IN THE FOLLOWING FORMS:

(I) PILL;

(II) OIL;

(III) TOPICAL FORMS, INCLUDING GEL, CREAMS OR OINTMENTS;

(IV) A FORM MEDICALLY APPROPRIATE FOR ADMINISTRATION BY VAPORIZATION OR NEBULIZATION, EXCLUDING DRY LEAF OR PLANT FORM UNTIL DRY LEAF OR PLANT FORMS BECOME ACCEPTABLE UNDER REGULATIONS ADOPTED UNDER SECTION 1202;

(V) TINCTURE; OR

(VI) LIQUID.

(3) UNLESS OTHERWISE PROVIDED IN REGULATIONS ADOPTED BY THE DEPARTMENT UNDER SECTION 1202, MEDICAL MARIJUANA MAY NOT BE DISPENSED TO A PATIENT OR A CAREGIVER IN DRY LEAF OR PLANT FORM.

(4) AN INDIVIDUAL MAY NOT ACT AS A CAREGIVER FOR MORE THAN FIVE PATIENTS.

(5) A PATIENT MAY DESIGNATE UP TO TWO CAREGIVERS AT ANY ONE TIME.

(6) MEDICAL MARIJUANA THAT HAS NOT BEEN USED BY THE PATIENT SHALL BE KEPT IN THE ORIGINAL PACKAGE IN WHICH IT WAS DISPENSED.

(7) A PATIENT OR CAREGIVER SHALL POSSESS AN IDENTIFICATION CARD WHENEVER THE PATIENT OR CAREGIVER IS IN POSSESSION OF MEDICAL MARIJUANA.

SPECIES OF MEDICAL MARIJUANA, THE PERCENTAGE OF
TETRAHYDROCANNABINOL AND CANNABINOL CONTAINED IN THE PRODUCT
AND ANY OTHER LABELING REQUIRED BY THE DEPARTMENT.

SECTION 304. UNLAWFUL USE OF MEDICAL MARIJUANA.

(A) GENERAL RULE.--EXCEPT AS PROVIDED IN SECTION 303,
SECTION 704, CHAPTER 19 OR CHAPTER 20, THE USE OF MEDICAL
MARIJUANA IS UNLAWFUL AND SHALL, IN ADDITION TO ANY OTHER
PENALTY PROVIDED BY LAW, BE DEEMED A VIOLATION OF THE ACT OF
APRIL 14, 1972 (P.L.233, NO.64), KNOWN AS THE CONTROLLED
SURFACE, DRUG, DEVICE AND COSMETIC ACT.

(B) UNLAWFUL USE DESCRIBED.--IT IS UNLAWFUL TO:

(1) SMOKE MEDICAL MARIJUANA.

(2) EXCEPT AS PROVIDED UNDER SUBSECTION (C), INCORPORATE
MEDICAL MARIJUANA INTO EDIBLE FORM.

(3) GROW MEDICAL MARIJUANA UNLESS THE GROWER/PROCESSOR
HAS RECEIVED A PERMIT FROM THE DEPARTMENT UNDER THIS ACT.

(4) GROW OR DISPENSE MEDICAL MARIJUANA UNLESS AUTHORIZED
AS A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION UNDER CHAPTER
19.

(5) DISPENSE MEDICAL MARIJUANA UNLESS THE DISPENSARY HAS
RECEIVED A PERMIT FROM THE DEPARTMENT UNDER THIS ACT.

(C) EDIBLE MEDICAL MARIJUANA.--NOTHING IN THIS ACT SHALL BE
CONSTRUED TO PRECLUDE THE INCORPORATION OF MEDICAL MARIJUANA
INTO EDIBLE FORM BY A PATIENT OR A CAREGIVER IN ORDER TO AID
INGESTION OF THE MEDICAL MARIJUANA BY THE PATIENT.

CHAPTER 4

PRACTITIONERS

SECTION 401. PRACTITIONER REGISTRATION.

(A) ELIGIBILITY.--A PHYSICIAN INCLUDED IN THE REGISTRY IS
AUTHORIZED TO ISSUE CERTIFICATIONS TO PATIENTS TO USE MEDICAL
MARIJUANA. TO BE ELIGIBLE FOR INCLUSION IN THE REGISTRY:

(1) A PHYSICIAN MUST APPLY FOR REGISTRATION IN THE FORM
AND MANNER REQUIRED BY THE DEPARTMENT.

(2) THE DEPARTMENT MUST DETERMINE THAT THE PHYSICIAN IS,
BY TRAINING OR EXPERIENCE, QUALIFIED TO TREAT A SERIOUS
MEDICAL CONDITION. THE PHYSICIAN SHALL PROVIDE DOCUMENTATION
OF CREDENTIALS, TRAINING OR EXPERIENCE AS REQUIRED BY THE
DEPARTMENT.

(3) THE PHYSICIAN MUST HAVE SUCCESSFULLY COMPLETED THE
COURSE UNDER SECTION 301(A)(6).

(B) DEPARTMENT ACTION.—

(1) THE DEPARTMENT SHALL REVIEW AN APPLICATION SUBMITTED
BY A PHYSICIAN TO DETERMINE WHETHER TO INCLUDE THE PHYSICIAN
IN THE REGISTRY. THE REVIEW SHALL INCLUDE INFORMATION
MAINTAINED BY THE DEPARTMENT OF STATE REGARDING WHETHER THE
PHYSICIAN HAS A VALID, UNEXPIRED, UNREVOKED, UNSUSPENDED
PENNSYLVANIA LICENSE TO PRACTICE MEDICINE AND WHETHER THE
PHYSICIAN HAS BEEN SUBJECT TO DISCIPLINE.

(2) THE INCLUSION OF A PHYSICIAN IN THE REGISTRY SHALL
BE SUBJECT TO ANNUAL REVIEW TO DETERMINE IF THE PHYSICIAN'S
LICENSE IS NO LONGER VALID, HAS EXPIRED OR BEEN REVOKED OR
THE PHYSICIAN HAS BEEN SUBJECT TO DISCIPLINE. IF THE LICENSE
IS NO LONGER VALID, THE DEPARTMENT SHALL REMOVE THE PHYSICIAN
FROM THE REGISTRY UNTIL THE PHYSICIAN HOLDS A VALID,
UNEXPIRED, UNREVOKED, UNSUSPENDED PENNSYLVANIA LICENSE TO
PRACTICE MEDICINE.

(3) THE DEPARTMENT OF STATE SHALL REPORT TO THE
DEPARTMENT THE EXPIRATION, SUSPENSION OR REVOCATION OF A
PHYSICIAN'S LICENSE AND ANY DISCIPLINARY ACTIONS IN A TIMELY
FASHION.
(C) PRACTITIONER REQUIREMENTS.--A PRACTITIONER INCLUDED IN
 THE REGISTRY SHALL HAVE AN ONGOING RESPONSIBILITY TO IMMEDIATELY
 NOTIFY THE DEPARTMENT IN WRITING IF THE PRACTITIONER KNOWS OR
 HAS REASON TO KNOW THAT ANY OF THE FOLLOWING IS TRUE WITH
 RESPECT TO A PATIENT FOR WHOM THE PRACTITIONER HAS ISSUED A
 CERTIFICATION:

 (1) THE PATIENT NO LONGER HAS THE SERIOUS MEDICAL
     CONDITION FOR WHICH THE CERTIFICATION WAS ISSUED.
 (2) MEDICAL MARIJUANA WOULD NO LONGER BE THERAPEUTIC OR
     PALLIATIVE.
 (3) THE PATIENT HAS DIED.

SECTION 402. PRACTITIONER RESTRICTIONS.

(A) PRACTICES PROHIBITED.--THE FOLLOWING APPLY WITH RESPECT
 TO PRACTITIONERS:

 (1) A PRACTITIONER MAY NOT ACCEPT, SOLICIT OR OFFER ANY
     FORM OF REMUNERATION FROM OR TO A PROSPECTIVE PATIENT,
     PATIENT, PROSPECTIVE CAREGIVER, CAREGIVER OR MEDICAL
     MARIJUANA ORGANIZATION, INCLUDING AN EMPLOYEE, FINANCIAL
     BACKER OR PRINCIPAL, TO CERTIFY A PATIENT, OTHER THAN
     ACCEPTING A FEE FOR SERVICE WITH RESPECT TO THE EXAMINATION
     OF THE PROSPECTIVE PATIENT TO DETERMINE IF THE PROSPECTIVE
     PATIENT SHOULD BE ISSUED A CERTIFICATION TO USE MEDICAL
     MARIJUANA.
 (2) A PRACTITIONER MAY NOT HOLD A DIRECT OR ECONOMIC
     INTEREST IN A MEDICAL MARIJUANA ORGANIZATION.
 (3) A PRACTITIONER MAY NOT ADVERTISE THE PRACTITIONER'S
     SERVICES AS A PRACTITIONER WHO CAN CERTIFY A PATIENT TO
     RECEIVE MEDICAL MARIJUANA.

(B) UNPROFESSIONAL CONDUCT.--A PRACTITIONER WHO VIOLATES
 SUBSECTION (A) SHALL NOT BE PERMITTED TO ISSUE CERTIFICATIONS TO

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PATIENTS. THE PRACTITIONER SHALL BE REMOVED FROM THE REGISTRY.

(C) DISCIPLINE.--IN ADDITION TO ANY OTHER PENALTY THAT MAY
BE IMPOSED UNDER THIS ACT, A VIOLATION OF SUBSECTION (A) OR
SECTION 403(E) SHALL BE DEEMED UNPROFESSIONAL CONDUCT UNDER
SECTION 41(8) OF THE ACT OF DECEMBER 20, 1985 (P.L.457, NO.112),
KNOWN AS THE MEDICAL PRACTICE ACT OF 1985, OR SECTION 15(A)(8)
OF THE ACT OF OCTOBER 5, 1978 (P.L.1109, NO.261), KNOWN AS THE
OSTEOPATHIC MEDICAL PRACTICE ACT, AND SHALL SUBJECT THE
PRACTITIONER TO DISCIPLINE BY THE STATE BOARD OF MEDICINE OR THE
STATE BOARD OF OSTEOPATHIC MEDICINE, AS APPROPRIATE.

SECTION 403. ISSUANCE OF CERTIFICATION.

(A) CONDITIONS FOR ISSUANCE.--A CERTIFICATION TO USE MEDICAL
MARIJUANA MAY BE ISSUED BY A PRACTITIONER TO A PATIENT IF ALL OF
THE FOLLOWING REQUIREMENTS ARE MET:

(1) THE PRACTITIONER HAS BEEN APPROVED BY THE DEPARTMENT
   FOR INCLUSION IN THE REGISTRY-- AND HAS A VALID, UNEXPIRED,Validators
   UNREVOKED, UNSUSPENDED PENNSYLVANIA LICENSE TO PRACTICE
   MEDICINE AT THE TIME OF THE ISSUANCE OF THE CERTIFICATION.

(2) THE PRACTITIONER HAS DETERMINED THAT THE PATIENT HAS
   A SERIOUS MEDICAL CONDITION AND HAS INCLUDED THE CONDITION IN
   THE PATIENT'S HEALTH CARE RECORD.

(3) THE PATIENT IS UNDER THE PRACTITIONER'S CONTINUING
   CARE FOR THE SERIOUS MEDICAL CONDITION.

(4) IN THE PRACTITIONER'S PROFESSIONAL OPINION AND
   REVIEW OF PAST TREATMENTS, THE PRACTITIONER DETERMINES THE
   PATIENT IS LIKELY TO RECEIVE THERAPEUTIC OR PALLIATIVE
   BENEFIT FROM THE USE OF MEDICAL MARIJUANA.

(B) CONTENTS.--THE CERTIFICATION SHALL INCLUDE:

(1) THE PATIENT'S NAME, DATE OF BIRTH AND ADDRESS.

(2) THE SPECIFIC SERIOUS MEDICAL CONDITION OF THE
PATIENT.

(3) A STATEMENT BY THE PRACTITIONER THAT THE PATIENT HAS A SERIOUS MEDICAL CONDITION AND THE PATIENT IS UNDER THE PRACTITIONER'S CONTINUING CARE FOR THE SERIOUS MEDICAL CONDITION.

(4) THE DATE OF ISSUANCE.

(5) THE NAME, ADDRESS, TELEPHONE NUMBER AND SIGNATURE OF THE PRACTITIONER.

(6) ANY REQUIREMENT OR LIMITATION CONCERNING THE APPROPRIATE FORM OF MEDICAL MARIJUANA AND LIMITATION ON THE DURATION OF USE, IF APPLICABLE, INCLUDING WHETHER THE PATIENT IS TERMINALLY ILL.

(C) CONSULTATION.—A PRACTITIONER SHALL REVIEW THE PRESCRIPTION DRUG MONITORING PROGRAM PRIOR TO:

(1) ISSUING A CERTIFICATION TO DETERMINE THE CONTROLLED SUBSTANCE HISTORY OF A PATIENT.

(2) RECOMMENDING A CHANGE OF AMOUNT OR FORM OF MEDICAL MARIJUANA.

(C.1) OTHER ACCESS BY PRACTITIONER.—A PRACTITIONER MAY ACCESS THE PRESCRIPTION DRUG MONITORING PROGRAM TO DO ANY OF THE FOLLOWING:

(1) DETERMINE WHETHER A PATIENT MAY BE UNDER TREATMENT WITH A CONTROLLED SUBSTANCE BY ANOTHER PHYSICIAN OR OTHER PERSON.

(2) ALLOW THE PRACTITIONER TO REVIEW THE PATIENT'S CONTROLLED SUBSTANCE HISTORY AS DEEMED NECESSARY BY THE PRACTITIONER.

(3) PROVIDE TO THE PATIENT, OR CAREGIVER ON BEHALF OF THE PATIENT IF AUTHORIZED BY THE PATIENT, A COPY OF THE PATIENT'S CONTROLLED SUBSTANCE HISTORY.
(D) DUTIES OF PRACTITIONER.--THE PRACTITIONER SHALL:

(1) PROVIDE THE CERTIFICATION TO THE PATIENT.

(2) PROVIDE A COPY OF THE CERTIFICATION TO THE DEPARTMENT, WHICH SHALL PLACE THE INFORMATION IN THE PATIENT DIRECTORY WITHIN THE DEPARTMENT'S ELECTRONIC DATABASE. THE DEPARTMENT SHALL PERMIT ELECTRONIC SUBMISSION OF THE CERTIFICATION.

(3) FILE A COPY OF THE CERTIFICATION IN THE PATIENT'S HEALTH CARE RECORD.

(E) PROHIBITION.--A PRACTITIONER MAY NOT ISSUE A CERTIFICATION FOR THE PRACTITIONER'S OWN USE OR FOR THE USE OF A FAMILY OR HOUSEHOLD MEMBER.

SECTION 404. CERTIFICATION FORM.

THE DEPARTMENT SHALL DEVELOP A STANDARD CERTIFICATION FORM, WHICH SHALL BE AVAILABLE TO PRACTITIONERS UPON REQUEST. THE FORM SHALL BE AVAILABLE ELECTRONICALLY. THE FORM SHALL INCLUDE A STATEMENT THAT A FALSE STATEMENT MADE BY A PRACTITIONER IS PUNISHABLE UNDER THE APPLICABLE PROVISIONS OF 18 PA.C.S. CH. 49 (RELATING TO FALSIFICATION AND INTIMIDATION).

SECTION 405. DURATION.

RECEIPT OF MEDICAL MARIJUANA BY A PATIENT OR CAREGIVER FROM A DISPENSARY MAY NOT EXCEED A 30-DAY SUPPLY OF INDIVIDUAL DOSES. DURING THE LAST SEVEN DAYS OF ANY 30-DAY PERIOD DURING THE TERM OF THE IDENTIFICATION CARD, A PATIENT MAY OBTAIN AND POSSESS A 30-DAY SUPPLY FOR THE SUBSEQUENT 30-DAY PERIOD. ADDITIONAL 30-DAY SUPPLIES MAY BE PROVIDED IN ACCORDANCE WITH THIS SECTION FOR THE DURATION OF THE AUTHORIZED PERIOD OF THE IDENTIFICATION CARD UNLESS A SHORTER PERIOD IS INDICATED ON THE CERTIFICATION.
SECTION 501. IDENTIFICATION CARDS.

(A) ISSUANCE.--THE DEPARTMENT MAY ISSUE AN IDENTIFICATION CARD TO A PATIENT WHO HAS A CERTIFICATION APPROVED BY THE DEPARTMENT AND TO A CAREGIVER DESIGNATED BY THE PATIENT. AN IDENTIFICATION CARD ISSUED TO A PATIENT SHALL AUTHORIZE THE PATIENT TO OBTAIN AND USE MEDICAL MARIJUANA AS AUTHORIZED BY THIS ACT. AN IDENTIFICATION CARD ISSUED TO A CAREGIVER SHALL AUTHORIZE THE CAREGIVER TO OBTAIN MEDICAL MARIJUANA ON BEHALF OF THE PATIENT.

(B) PROCEDURE FOR ISSUANCE.--THE DEPARTMENT SHALL DEVELOP AND IMPLEMENT PROCEDURES FOR:

(1) REVIEW AND APPROVAL OF APPLICATIONS FOR IDENTIFICATION CARDS.

(2) ISSUANCE OF IDENTIFICATION CARDS TO PATIENTS AND CAREGIVERS.

(3) REVIEW OF THE CERTIFICATION SUBMITTED BY THE PRACTITIONER AND THE PATIENT.

(C) APPLICATION.--A PATIENT OR A CAREGIVER MAY APPLY, IN A FORM AND MANNER PRESCRIBED BY THE DEPARTMENT, FOR ISSUANCE OR RENEWAL OF AN IDENTIFICATION CARD. A CAREGIVER MUST SUBMIT A SEPARATE APPLICATION FOR ISSUANCE OR RENEWAL. EACH APPLICATION MUST INCLUDE:

(1) THE NAME, ADDRESS AND DATE OF BIRTH OF THE PATIENT.

(2) THE NAME, ADDRESS AND DATE OF BIRTH OF A CAREGIVER.

(3) THE CERTIFICATION ISSUED BY THE PRACTITIONER.

(4) THE NAME, ADDRESS AND TELEPHONE NUMBER OF THE PRACTITIONER AND DOCUMENTATION FROM THE PRACTITIONER THAT ALL OF THE REQUIREMENTS OF SECTION 403(A) HAVE BEEN MET.

(5) A $50 PROCESSING FEE. THE DEPARTMENT MAY WAIVE OR REDUCE THE FEE IF THE APPLICANT DEMONSTRATES FINANCIAL
HARDSHIP.

(6) THE SIGNATURE OF THE APPLICANT AND DATE SIGNED.
(7) OTHER INFORMATION REQUIRED BY THE DEPARTMENT.

(D) FORMS.--APPLICATION AND RENEWAL FORMS SHALL BE AVAILABLE ON THE DEPARTMENT'S PUBLICLY ACCESSIBLE INTERNET WEBSITE.

(E) EXPIRATION.--AN IDENTIFICATION CARD OF A PATIENT OR CAREGIVER SHALL EXPIRE WITHIN ONE YEAR FROM THE DATE OF ISSUANCE, UPON THE DEATH OF THE PATIENT, OR AS OTHERWISE PROVIDED IN THIS SECTION.

(F) SEPARATE CARDS TO BE ISSUED.--THE DEPARTMENT SHALL ISSUE SEPARATE IDENTIFICATION CARDS FOR PATIENTS AND CAREGIVERS AS SOON AS REASONABLY PRACTICABLE AFTER RECEIVING COMPLETED APPLICATIONS, UNLESS IT DETERMINES THAT AN APPLICATION IS INCOMPLETE OR FACTUALLY INACCURATE, IN WHICH CASE IT SHALL PROMPTLY NOTIFY THE APPLICANT.

(G) (RESERVED).

(H) CHANGE IN NAME OR ADDRESS.--A PATIENT OR CAREGIVER WHO HAS BEEN ISSUED AN IDENTIFICATION CARD SHALL NOTIFY THE DEPARTMENT WITHIN 10 DAYS OF ANY CHANGE OF NAME OR ADDRESS. IN ADDITION, THE PATIENT SHALL NOTIFY THE DEPARTMENT WITHIN 10 DAYS IF THE PATIENT NO LONGER HAS THE SERIOUS MEDICAL CONDITION NOTED ON THE CERTIFICATION.

DEPARTMENT MAY WAIVE OR REDUCE THE FEE IN CASES OF DEMONSTRATED
FINANCIAL HARDSHIP. THE DEPARTMENT SHALL ISSUE A REPLACEMENT
IDENTIFICATION CARD AS SOON AS PRACTICABLE. A PATIENT OR
CAREGIVER MAY NOT OBTAIN MEDICAL MARIJUANA UNTIL THE DEPARTMENT
ISSUES THE REPLACEMENT CARD.

SECTION 502. CAREGIVERS.

(A) REQUIREMENTS.--

(1) IF THE PATIENT DESIGNATES A CAREGIVER, THE
APPLICATION SHALL INCLUDE THE NAME, ADDRESS AND DATE OF
BIRTH OF THE CAREGIVER, AND OTHER INDIVIDUAL IDENTIFYING
INFORMATION REQUIRED BY THE DEPARTMENT
AND THE FOLLOWING:

(I) FEDERAL AND COMMONWEALTH CRIMINAL HISTORY RECORD
INFORMATION AS SET FORTH IN SUBSECTION (B).

(II) IF THE CAREGIVER HAS AN IDENTIFICATION CARD FOR
THE CAREGIVER OR ANOTHER PATIENT, THE EXPIRATION DATE OF
THE IDENTIFICATION CARD.

(III) OTHER INFORMATION REQUIRED BY THE DEPARTMENT.

(2) THE APPLICATION SHALL BE ACCOMPANIED BY A FEE OF
$50. THE DEPARTMENT MAY WAIVE OR REDUCE THE FEE IN CASES OF
DEMONSTRATED FINANCIAL HARDSHIP.

(3) THE DEPARTMENT MAY REQUIRE ADDITIONAL INFORMATION
FOR THE APPLICATION.

(4) THE APPLICATION SHALL BE SIGNED AND DATED BY THE
APPLICANT.

(B) CRIMINAL HISTORY.--A CAREGIVER SHALL SUBMIT FINGERPRINTS
FOR THE PURPOSE OF OBTAINING CRIMINAL HISTORY RECORD CHECKS AND
THE PENNSYLVANIA STATE POLICE OR ITS AUTHORIZED AGENT SHALL
SUBMIT THE FINGERPRINTS TO THE FEDERAL BUREAU OF INVESTIGATION
FOR THE PURPOSE OF VERIFYING THE IDENTITY OF THE APPLICANT AND
OBTAINING A CURRENT RECORD OF ANY CRIMINAL ARRESTS AND
CONVICTIONS. ANY CRIMINAL HISTORY RECORD INFORMATION RELATING TO
A CAREGIVER OBTAINED UNDER THIS SECTION BY THE DEPARTMENT MAY BE
INTERPRETED AND USED BY THE DEPARTMENT ONLY TO DETERMINE THE
APPLICANT'S CHARACTER, FITNESS AND SUITABILITY TO SERVE AS A
CAREGIVER UNDER THIS ACT. THE DEPARTMENT SHALL ALSO REVIEW THE
PRESCRIPTION DRUG MONITORING PROGRAM RELATING TO THE CAREGIVER.
THE DEPARTMENT SHALL DENY THE APPLICATION OF A CAREGIVER WHO HAS
BEEN CONVICTED OF A CRIMINAL OFFENSE THAT OCCURRED WITHIN THE
PAST FIVE YEARS RELATING TO THE SALE OR POSSESSION OF DRUGS,
NARCOTICS OR CONTROLLED SUBSTANCES. THE DEPARTMENT MAY DENY AN
APPLICATION IF THE APPLICANT HAS A HISTORY OF DRUG ABUSE OR OF
DIVERTING CONTROLLED SUBSTANCES OR ILLEGAL DRUGS.
SECTION 503. NOTICE.
AN APPLICATION FOR AN IDENTIFICATION CARD SHALL INCLUDE
NOTICE THAT A FALSE STATEMENT MADE IN THE APPLICATION IS
PUNISHABLE UNDER THE APPLICABLE PROVISIONS OF 18 PA.C.S. CH. 49
(RELATING TO FALSIFICATION AND INTIMIDATION).
SECTION 503.1. VERIFICATION.
THE DEPARTMENT SHALL VERIFY THE INFORMATION IN A PATIENT OR
CAREGIVER'S APPLICATION AND ON ANY RENEWAL FORM.
SECTION 504. SPECIAL CONDITIONS.
THE FOLLOWING APPLY:
(1) IF THE PRACTITIONER STATES IN THE CERTIFICATION
THAT, IN THE PRACTITIONER'S PROFESSIONAL OPINION, THE PATIENT
WOULD BENEFIT FROM MEDICAL MARIJUANA ONLY UNTIL A SPECIFIED
EARLIER DATE, THEN THE IDENTIFICATION CARD SHALL EXPIRE ON
THAT DATE.
(2) IF THE CERTIFICATION SO PROVIDES, THE IDENTIFICATION
CARD SHALL STATE ANY REQUIREMENT OR LIMITATION BY THE
SECTION 505. (RESERVED).

SECTION 506. MINORS.

IF A PATIENT IS UNDER 18 YEARS OF AGE, THE FOLLOWING APPLY:

(1) THE PATIENT SHALL HAVE A CAREGIVER.

(2) A CAREGIVER MUST BE ONE OF THE FOLLOWING:

   (I) A PARENT OR LEGAL GUARDIAN OF THE PATIENT.

   (II) AN INDIVIDUAL DESIGNATED BY A PARENT OR LEGAL

        GUARDIAN.

   (III) AN APPROPRIATE INDIVIDUAL APPROVED BY THE

          DEPARTMENT UPON A SUFFICIENT SHOWING THAT NO PARENT OR

          LEGAL GUARDIAN IS APPROPRIATE OR AVAILABLE.

SECTION 507. CAREGIVER AUTHORIZATION AND LIMITATIONS.

(A) AGE.--AN INDIVIDUAL WHO IS UNDER 21 YEARS OF AGE MAY NOT

     BE A CAREGIVER UNLESS A SUFFICIENT SHOWING, AS DETERMINED BY THE

     DEPARTMENT, IS MADE TO THE DEPARTMENT THAT THE INDIVIDUAL SHOULD

     BE PERMITTED TO SERVE AS A CAREGIVER.

(B) CHANGING CAREGIVER.--IF A PATIENT WISHES TO CHANGE OR

     TERMINATE THE DESIGNATION OF THE PATIENT'S CAREGIVER, FOR

     WHATEVER REASON, THE PATIENT SHALL NOTIFY THE DEPARTMENT AS SOON

     AS PRACTICABLE. THE DEPARTMENT SHALL ISSUE A NOTIFICATION TO THE

     CAREGIVER THAT THE CAREGIVER'S IDENTIFICATION CARD IS INVALID

     AND MUST BE PROMPTLY RETURNED TO THE DEPARTMENT.

(C) DENIAL IN PART.--IF AN APPLICATION OF A PATIENT

     DESIGNATES AN INDIVIDUAL AS A CAREGIVER WHO IS NOT AUTHORIZED TO

     BE A CAREGIVER, THAT PORTION OF THE APPLICATION SHALL BE DENIED

     BY THE DEPARTMENT. THE DEPARTMENT SHALL REVIEW THE BALANCE OF

     THE APPLICATION AND MAY APPROVE THAT PORTION OF IT.

SECTION 508. CONTENTS OF IDENTIFICATION CARD.
AN IDENTIFICATION CARD SHALL CONTAIN THE FOLLOWING:

(1) THE NAME OF THE CAREGIVER OR THE PATIENT, AS APPROPRIATE. THE IDENTIFICATION CARD SHALL ALSO STATE WHETHER THE INDIVIDUAL IS DESIGNATED AS A PATIENT OR AS A CAREGIVER.

(2) THE DATE OF ISSUANCE AND EXPIRATION DATE.

(3) AN IDENTIFICATION NUMBER FOR THE PATIENT OR CAREGIVER, AS APPROPRIATE.

(4) A PHOTOGRAPH OF THE INDIVIDUAL TO WHOM THE IDENTIFICATION CARD IS BEING ISSUED, WHETHER THE INDIVIDUAL IS A PATIENT OR A CAREGIVER. THE METHOD OF OBTAINING THE PHOTOGRAPH SHALL BE SPECIFIED BY THE DEPARTMENT BY REGULATION. THE DEPARTMENT SHALL PROVIDE REASONABLE ACCOMMODATION FOR A PATIENT WHO IS CONFINED TO THE PATIENT'S HOME OR IS IN INPATIENT CARE.

(5) ANY REQUIREMENT OR LIMITATION SET BY THE PRACTITIONER AS TO THE FORM OF MEDICAL MARIJUANA.

(6) ANY OTHER REQUIREMENTS DETERMINED BY THE DEPARTMENT, EXCEPT THE DEPARTMENT MAY NOT REQUIRE THAT AN IDENTIFICATION CARD DISCLOSE THE PATIENT'S SERIOUS MEDICAL CONDITION.

SECTION 509. SUSPENSION.

IF A PATIENT OR CAREGIVER INTENTIONALLY, KNOWINGLY OR RECKLESSLY VIOLATES ANY PROVISION OF THIS ACT AS DETERMINED BY THE DEPARTMENT, THE IDENTIFICATION CARD OF THE PATIENT OR CAREGIVER MAY BE SUSPENDED OR REVOKED. THE SUSPENSION OR REVOCATION SHALL BE IN ADDITION TO ANY CRIMINAL OR OTHER PENALTY THAT MAY APPLY.

SECTION 510. PROHIBITIONS.

THE FOLLOWING PROHIBITIONS SHALL APPLY:

(1) A PATIENT MAY NOT OPERATE OR BE IN PHYSICAL CONTROL OF ANY OF THE FOLLOWING WHILE UNDER THE INFLUENCE WITH A
BLOOD CONTENT OF MORE THAN 10 NANOGRAMS OF ACTIVE
TETRAHYDROCANNABIS PER MILLILITER OF BLOOD IN SERUM:

(I) CHEMICALS WHICH REQUIRE A PERMIT ISSUED BY THE
FEDERAL GOVERNMENT OR A STATE GOVERNMENT OR AN AGENCY OF
THE FEDERAL GOVERNMENT OR A STATE GOVERNMENT.

(II) HIGH-VOLTAGE ELECTRICITY OR ANY OTHER PUBLIC
UTILITY.

(2) A PATIENT MAY NOT PERFORM ANY EMPLOYMENT DUTIES AT
HEIGHTS OR IN CONFINED SPACES, INCLUDING, BUT NOT LIMITED TO,
MINING WHILE UNDER THE INFLUENCE OF MEDICAL MARIJUANA.

(3) A PATIENT MAY BE PROHIBITED BY AN EMPLOYER FROM
PERFORMING ANY TASK WHICH THE EMPLOYER DEEMS LIFE-
THREATENING, TO EITHER THE EMPLOYEE OR ANY OF THE EMPLOYEES
OF THE EMPLOYER, WHILE UNDER THE INFLUENCE OF MEDICAL
MARIJUANA. THE PROHIBITION SHALL NOT BE DEEMED AN ADVERSE
EMPLOYMENT DECISION EVEN IF THE PROHIBITION RESULTS IN
FINANCIAL HARM FOR THE PATIENT.

(4) A PATIENT MAY BE PROHIBITED BY AN EMPLOYER FROM
PERFORMING ANY DUTY WHICH COULD RESULT IN A PUBLIC HEALTH OR
SAFETY RISK WHILE UNDER THE INFLUENCE OF MEDICAL MARIJUANA.
THE PROHIBITION SHALL NOT BE DEEMED AN ADVERSE EMPLOYMENT
DECISION EVEN IF THE PROHIBITION RESULTS IN FINANCIAL HARM
FOR THE PATIENT.

CHAPTER 6
MEDICAL MARIJUANA ORGANIZATIONS

SECTION 601. MEDICAL MARIJUANA ORGANIZATIONS.
THE FOLLOWING ENTITIES SHALL BE AUTHORIZED TO RECEIVE A
PERMIT TO OPERATE AS A MEDICAL MARIJUANA ORGANIZATION TO GROW,
PROCESS OR DISPENSE MEDICAL MARIJUANA:

(1) GROWER/PROCESSORS.
(2) DISPENSARIES.

SECTION 602. PERMITS.

(A) APPLICATION.--AN APPLICATION FOR A GROWER/PROCESSOR OR DISPENSARY PERMIT TO GROW, PROCESS OR DISPENSE MEDICAL MARIJUANA SHALL BE IN A FORM AND MANNER PRESCRIBED BY THE DEPARTMENT AND SHALL INCLUDE:

(1) VERIFICATION OF ALL PRINCIPALS, OPERATORS, FINANCIAL BACKERS OR EMPLOYEES OF A MEDICAL MARIJUANA GROWER/PROCESSOR OR DISPENSARY.

(2) A DESCRIPTION OF RESPONSIBILITIES AS A PRINCIPAL, OPERATOR, FINANCIAL BACKER OR EMPLOYEE.

(3) ANY RELEASE NECESSARY TO OBTAIN INFORMATION FROM GOVERNMENTAL AGENCIES, EMPLOYERS AND OTHER ORGANIZATIONS.

(4) A CRIMINAL HISTORY RECORD CHECK. MEDICAL MARIJUANA ORGANIZATIONS APPLYING FOR A PERMIT SHALL SUBMIT FINGERPRINTS OF PRINCIPALS, FINANCIAL BACKERS, OPERATORS AND EMPLOYEES TO THE PENNSYLVANIA STATE POLICE FOR THE PURPOSE OF OBTAINING CRIMINAL HISTORY RECORD CHECKS AND THE PENNSYLVANIA STATE POLICE OR ITS AUTHORIZED AGENT SHALL SUBMIT THE FINGERPRINTS TO THE FEDERAL BUREAU OF INVESTIGATION FOR THE PURPOSE OF VERIFYING THE IDENTITY OF THE PRINCIPALS, FINANCIAL BACKERS, OPERATORS AND EMPLOYEES AND OBTAINING A CURRENT RECORD OF ANY CRIMINAL ARRESTS AND CONVICTIONS. ANY CRIMINAL HISTORY RECORD INFORMATION RELATING TO PRINCIPALS, FINANCIAL BACKERS, OPERATORS AND EMPLOYEES OBTAINED UNDER THIS SECTION BY THE DEPARTMENT MAY BE INTERPRETED AND USED BY THE DEPARTMENT ONLY TO DETERMINE THE PRINCIPAL'S, FINANCIAL BACKER'S, OPERATOR'S AND EMPLOYEE'S CHARACTER, FITNESS AND SUITABILITY TO SERVE AS A PRINCIPAL, FINANCIAL BACKER, OPERATOR AND EMPLOYEE UNDER THIS ACT. THIS PARAGRAPH SHALL NOT APPLY TO AN OWNER OF
SEcurities in a publicly traded corporation if the department determined that the owner of the securities is not substantially involved in the activities of the medical marijuana organization.

(5) Details relating to a similar license, permit or other authorization obtained in another jurisdiction, including any suspensions, revocations or discipline in that jurisdiction.

(6) A description of the business activities in which it intends to engage as a medical marijuana organization.

(7) A statement that the applicant:

(I) is of good moral character. For purposes of this subparagraph, an applicant shall include each financial backer, operator, employee and principal of the medical marijuana organization.

(II) possesses the ability to obtain in an expeditious manner the right to use sufficient land, buildings and other premises and equipment to properly carry on the activity described in the application and any proposed location for a facility.

(III) is able to maintain effective security and control to prevent diversion, abuse and other illegal conduct relating to medical marijuana.

(IV) is able to comply with all applicable commonwealth laws and regulations relating to the activities in which it intends to engage under this act.

(8) The name, residential address and title of each financial backer and principal of the applicant. Each individual, or lawful representative of a legal entity, shall submit an affidavit with the application setting forth:
(I) ANY POSITION OF MANAGEMENT OR OWNERSHIP DURING
THE PRECEDING 10 YEARS OF A CONTROLLING INTEREST IN ANY
OTHER BUSINESS, LOCATED INSIDE OR OUTSIDE THIS
COMMONWEALTH, MANUFACTURING OR DISTRIBUTING CONTROLLED
SUBSTANCES.

(II) WHETHER THE PERSON OR BUSINESS HAS BEEN
CONVICTED OF A CRIMINAL OFFENSE GRADED HIGHER THAN A
SUMMARY OFFENSE OR HAS HAD A PERMIT RELATING TO MEDICAL
MARIJUANA SUSPENDED OR REVOKED IN ANY ADMINISTRATIVE OR
JUDICIAL PROCEEDING.

(9) ANY OTHER INFORMATION THE DEPARTMENT MAY REQUIRE.

(B) NOTICE.--AN APPLICATION SHALL INCLUDE NOTICE THAT A
FALSE STATEMENT MADE IN THE APPLICATION IS PUNISHABLE UNDER THE
APPLICABLE PROVISIONS OF 18 PA.C.S. CH. 49 (RELATING TO
FALSIFICATION AND INTIMIDATION).

SECTION 603. GRANTING OF PERMIT.

(A) GENERAL RULE.--THE DEPARTMENT MAY GRANT OR DENY A PERMIT
TO A GROWER/PROCESSOR OR DISPENSARY.

(A.1) DETERMINATION.--IN MAKING A DECISION UNDER SUBSECTION
(A), THE DEPARTMENT SHALL DETERMINE THAT:

(1) THE APPLICANT WILL MAINTAIN EFFECTIVE CONTROL OF AND
PREVENT DIVERSION OF MEDICAL MARIJUANA.

(2) THE APPLICANT WILL COMPLY WITH ALL APPLICABLE LAWS
OF THIS COMMONWEALTH.

(3) THE APPLICANT IS READY, WILLING AND ABLE TO PROPERLY
CARRY ON THE ACTIVITY FOR WHICH A PERMIT IS SOUGHT.

(4) THE APPLICANT POSSESSES THE ABILITY TO OBTAIN IN AN
EXPEDITIOUS MANNER SUFFICIENT LAND, BUILDINGS AND EQUIPMENT
TO PROPERLY GROW, PROCESS OR DISPENSE MEDICAL MARIJUANA.

(5) IT IS IN THE PUBLIC INTEREST TO GRANT THE PERMIT.
(6) THE APPLICANT, INCLUDING THE FINANCIAL BACKER OR PRINCIPAL, ARE OF GOOD MORAL CHARACTER AND HAVE THE FINANCIAL FITNESS NECESSARY TO OPERATE.

(7) THE APPLICANT IS ABLE TO IMPLEMENT AND MAINTAIN SECURITY, TRACKING, RECORDKEEPING AND SURVEILLANCE SYSTEMS RELATING TO THE ACQUISITION, POSSESSION, GROWTH, MANUFACTURE, SALE, DELIVERY, TRANSPORTATION, DISTRIBUTION OR THE DISPENSING OF MEDICAL MARIJUANA AS REQUIRED BY THE DEPARTMENT.

(8) THE APPLICANT SATISFIES ANY OTHER CONDITIONS AS DETERMINED BY THE DEPARTMENT.

(B) NONTRANSFERABILITY.--A PERMIT ISSUED UNDER THIS CHAPTER SHALL BE NONTRANSFERABLE.

(C) PRIVILEGE.--THE ISSUANCE OR RENEWAL OF A PERMIT SHALL BE A REVOCABLE PRIVILEGE.

(D) REGIONS.--THE DEPARTMENT SHALL ESTABLISH A MINIMUM OF THREE REGIONS WITHIN THIS COMMONWEALTH FOR THE PURPOSE OF GRANTING PERMITS TO GROWER/PROCESSORS AND DISPENSARIES AND ENFORCING THIS ACT. THE DEPARTMENT SHALL APPROVE PERMITS FOR GROWER/PROCESSORS AND DISPENSARIES IN A MANNER WHICH WILL PROVIDE AN ADEQUATE AMOUNT OF MEDICAL MARIJUANA TO PATIENTS AND CAREGIVERS IN ALL AREAS OF THIS COMMONWEALTH. THE DEPARTMENT SHALL CONSIDER THE FOLLOWING WHEN ISSUING A PERMIT:

(1) REGIONAL POPULATION.

(2) THE NUMBER OF PATIENTS SUFFERING FROM SERIOUS MEDICAL CONDITIONS.

(3) THE TYPES OF SERIOUS MEDICAL CONDITIONS.

(4) ACCESS TO PUBLIC TRANSPORTATION.

(5) ANY OTHER FACTOR THE DEPARTMENT DEEMS RELEVANT.

SECTION 604. NOTICE.
WHEN THE BOUNDARIES UNDER SECTION 603(D) ARE ESTABLISHED, THE
DEPARTMENT SHALL PUBLISH NOTICE OF THE DETERMINATION IN THE
PENNSYLVANIA BULLETIN. THE DEPARTMENT MAY ADJUST THE BOUNDARIES
AS NECESSARY EVERY TWO YEARS. NOTICE OF ANY ADJUSTMENT TO THE
BOUNDARIES SHALL BE PUBLISHED IN THE PENNSYLVANIA BULLETIN.

SECTION 606. APPLICATION AND ISSUANCE.

(A) DUTY TO REPORT.--AN APPLICANT TO BE A GROWER/PROCESSOR
OR TO OPERATE A DISPENSARY IS UNDER A CONTINUING DUTY TO:

(1) REPORT TO THE DEPARTMENT ANY CHANGE IN FACTS OR
CIRCUMSTANCES REFLECTED IN THE APPLICATION OR ANY NEWLY
DISCOVERED OR OCCURRING FACT OR CIRCUMSTANCE WHICH IS
REQUIRED TO BE INCLUDED IN THE APPLICATION, INCLUDING A
CHANGE IN CONTROL OF THE MEDICAL MARIJUANA ORGANIZATION.

(2) REPORT TO LAW ENFORCEMENT, WITHIN 24 HOURS, ANY LOSS
OR THEFT OF MEDICAL MARIJUANA.

(3) SUBMIT TO ANNOUNCED OR UNANNOUNCED INSPECTIONS BY
THE DEPARTMENT OF THE FACILITIES FOR GROWING, PROCESSING,
DISPENSING OR SELLING MEDICAL MARIJUANA, INCLUDING ALL
RECORDS OF THE ORGANIZATION.

(B) ADDITIONAL INFORMATION.--IF THE DEPARTMENT IS NOT
SATISFIED THAT THE APPLICANT SHOULD BE ISSUED A PERMIT, THE
DEPARTMENT SHALL NOTIFY THE APPLICANT IN WRITING OF THE FACTORS
FOR WHICH FURTHER DOCUMENTATION IS REQUIRED. WITHIN 30 DAYS OF
THE RECEIPT OF THE NOTIFICATION, THE APPLICANT MAY SUBMIT
ADDITIONAL MATERIAL TO THE DEPARTMENT.

SECTION 607. FEES AND OTHER REQUIREMENTS.

THE FOLLOWING APPLY:

(1) FOR A GROWER/PROCESSOR:

(I) AN INITIAL APPLICATION FEE IN THE AMOUNT OF
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(II) A fee for a permit as a grower/processor in the amount of $200,000 shall be paid. The permit shall be valid for one year. Applicants shall submit the permit fee at the time of submission of the application. The fee shall be returned if the permit is not granted.

(III) A renewal fee for the permit as a grower/processor in the amount of $10,000 shall be paid and shall cover renewal for all locations. The renewal fee shall be returned if the renewal is not granted.

(IV) An application to renew a permit must be filed with the department not more than six months nor less than four months prior to expiration.

(V) All fees shall be paid by certified check or money order.

(VI) Before issuing an initial permit under this paragraph, the department shall verify that the applicant has at least $2,000,000 in capital, $500,000 of which must be on deposit with a financial institution.

(2) For a dispensary:

(I) An initial application fee in the amount of $5,000 shall be paid. The fee is nonrefundable.

(II) A permit fee for a dispensary shall be $30,000 for each location. The period of the permit is one year. An applicant shall submit the permit fee at the time of submission of the application. The fee shall be returned if the application is not granted.

(III) A renewal fee for the permit as a dispensary in the amount of $5,000 shall be paid. The fee shall be returned if the renewal is not granted and shall cover
RENEWAL FOR ALL LOCATIONS.

(IV) AN APPLICATION TO RENEW A PERMIT MUST BE FILED WITH THE DEPARTMENT NOT MORE THAN SIX MONTHS NOR LESS THAN FOUR MONTHS PRIOR TO EXPIRATION.

(V) ALL FEES SHALL BE PAID BY CERTIFIED CHECK OR MONEY ORDER.

(VI) BEFORE ISSUING AN INITIAL PERMIT UNDER THIS PARAGRAPH, THE DEPARTMENT SHALL VERIFY THAT THE APPLICANT HAS AT LEAST $150,000 IN CAPITAL, WHICH MUST BE ON DEPOSIT WITH A FINANCIAL INSTITUTION.

(3) A FEE OF $250 SHALL BE REQUIRED WHEN AMENDING THE APPLICATION TO INDICATE RELOCATION WITHIN THIS COMMONWEALTH OR THE ADDITION OR DELETION OF APPROVED ACTIVITIES BY THE MEDICAL MARIJUANA ORGANIZATION.

(4) FEES PAYABLE UNDER THIS SECTION SHALL BE DEPOSITED INTO THE FUND.

SECTION 608. ISSUANCE.

A PERMIT ISSUED BY THE DEPARTMENT TO A MEDICAL MARIJUANA ORGANIZATION SHALL BE EFFECTIVE ONLY FOR THAT ORGANIZATION AND SHALL SPECIFY THE FOLLOWING:

(1) THE NAME AND ADDRESS OF THE MEDICAL MARIJUANA ORGANIZATION.

(2) THE ACTIVITIES OF THE MEDICAL MARIJUANA ORGANIZATION PERMITTED UNDER THIS ACT.

(3) THE LAND, BUILDINGS, FACILITIES OR LOCATION TO BE USED BY THE MEDICAL MARIJUANA ORGANIZATION.

(4) ANY OTHER INFORMATION REQUIRED BY THE DEPARTMENT.

SECTION 609. RELOCATION.

THE DEPARTMENT MAY APPROVE AN APPLICATION FROM A MEDICAL MARIJUANA ORGANIZATION TO RELOCATE WITHIN THIS COMMONWEALTH OR
TO ADD OR DELETE ACTIVITIES OR FACILITIES.

SECTION 610. TERMS OF PERMIT.

A PERMIT ISSUED BY THE DEPARTMENT SHALL BE VALID FOR ONE YEAR FROM THE DATE OF ISSUANCE.

SECTION 611. (RESERVED).

SECTION 612. PERMIT RENEWALS.

(A) RENEWAL.--AN APPLICATION FOR RENEWAL SHALL INCLUDE THE FOLLOWING INFORMATION:

(1) ANY MATERIAL CHANGE IN THE INFORMATION PROVIDED BY THE MEDICAL MARIJUANA ORGANIZATION IN A PRIOR APPLICATION OR RENEWAL OF A PERMIT.

(2) ANY CHARGE OR INITIATED, PENDING OR CONCLUDED INVESTIGATION, DURING THE PERIOD OF THE PERMIT, BY ANY GOVERNMENTAL OR ADMINISTRATIVE AGENCY WITH RESPECT TO:

(I) ANY INCIDENT INVOLVING THE THEFT, LOSS OR POSSIBLE DIVERSION OF MEDICAL MARIJUANA GROWN, PROCESSED OR DISPENSED BY THE APPLICANT; AND

(II) COMPLIANCE BY THE APPLICANT WITH THE LAWS OF THIS COMMONWEALTH WITH RESPECT TO ANY SUBSTANCE LISTED IN SECTION 4 OF THE ACT OF APRIL 14, 1972 (P.L.233, NO.64), KNOWN AS THE CONTROLLED SUBSTANCE, DRUG, DEVICE AND COSMETIC ACT.

(B) APPROVAL.--THE DEPARTMENT SHALL RENEW A PERMIT UNLESS THE DEPARTMENT DETERMINES THAT:

(1) THE APPLICANT IS UNLIKELY TO MAINTAIN OR BE ABLE TO MAINTAIN EFFECTIVE CONTROL AGAINST DIVERSION OF MEDICAL MARIJUANA.

(2) THE APPLICANT IS UNLIKELY TO COMPLY WITH ALL LAWS OF THIS COMMONWEALTH APPLICABLE TO THE ACTIVITIES IN WHICH IT MAY ENGAGE UNDER THE PERMIT.
(C) NONRENEWAL DECISION.--THE DENIAL OR NONRENEWAL SHALL SPECIFY IN DETAIL HOW THE APPLICANT HAS NOT SATISFIED THE DEPARTMENT'S REQUIREMENTS FOR RENEWAL. WITHIN 30 DAYS OF THE DEPARTMENT'S DECISION, THE APPLICANT MAY SUBMIT ADDITIONAL MATERIAL TO THE DEPARTMENT OR DEMAND A HEARING, OR BOTH. IF A HEARING IS DEMANDED, THE DEPARTMENT SHALL FIX A DATE AS SOON AS PRACTICABLE.

SECTION 613. SUSPENSION OR REVOCATION.

THE DEPARTMENT MAY SUSPEND OR REVOKE A MEDICAL MARIJUANA ORGANIZATION PERMIT IF:

1. THE DEPARTMENT HAS EVIDENCE THAT THE MEDICAL MARIJUANA ORGANIZATION HAS FAILED TO MAINTAIN EFFECTIVE CONTROL AGAINST DIVERSION OF MEDICAL MARIJUANA.

2. THE ORGANIZATION VIOLATES ANY PROVISION OF THIS ACT OR A REGULATION OF THE DEPARTMENT.

3. THE ORGANIZATION HAS INTENTIONALLY, KNOWINGLY, RECKLESSLY OR NEGLIGENTLY FAILED TO COMPLY WITH APPLICABLE LAWS OF THIS COMMONWEALTH RELATING TO MEDICAL MARIJUANA.

SECTION 614. CONVICTIONS PROHIBITED.

THE FOLLOWING INDIVIDUALS MAY NOT HOLD VOLUNTEER POSITIONS OR POSITIONS WITH REMUNERATION IN OR BE AFFILIATED WITH A MEDICAL MARIJUANA ORGANIZATION, INCLUDING A CLINICAL REGISTRANT UNDER CHAPTER 20, IN ANY WAY IF THE INDIVIDUAL HAS BEEN CONVICTED OF ANY CRIMINAL OFFENSE RELATED TO THE SALE OR POSSESSION OF ILLEGAL DRUGS, NARCOTICS OR CONTROLLED SUBSTANCES:

1. FINANCIAL BACKERS.

2. PRINCIPALS.

3. EMPLOYEES.

SECTION 615. DIVERSITY GOALS.

(A) GOALS.--IT IS THE INTENT AND GOAL OF THE GENERAL
ASSEMBLY THAT THE DEPARTMENT PROMOTE DIVERSITY AND THE
PARTICIPATION BY DIVERSE GROUPS IN THE ACTIVITIES AUTHORIZED
UNDER THIS ACT. IN ORDER TO FURTHER THIS GOAL, THE DEPARTMENT
SHALL ADOPT AND IMPLEMENT POLICIES ENSURING THE FOLLOWING:

(1) THAT DIVERSE GROUPS ARE ACCORDED EQUAL OPPORTUNITY
IN THE PERMITTING PROCESS.

(2) THAT PERMITTEES PROMOTE THE PARTICIPATION OF DIVERSE
GROUPS IN THEIR OPERATIONS BY AFFORDING EQUAL ACCESS TO
EMPLOYMENT OPPORTUNITIES.

(B) DUTIES OF DEPARTMENT.—TO FACILITATE PARTICIPATION BY
DIVERSE GROUPS IN THE ACTIVITIES AUTHORIZED UNDER THIS ACT, THE
DEPARTMENT SHALL:

(1) CONDUCT NECESSARY AND APPROPRIATE OUTREACH
INCLUDING, IF NECESSARY, CONSULTING WITH OTHER COMMONWEALTH
AGENCIES TO IDENTIFY DIVERSE GROUPS WHO MAY QUALIFY FOR
PARTICIPATION IN ACTIVITIES UNDER THIS ACT.

(2) PROVIDE SUFFICIENT AND CONTINUOUS NOTICE OF THE
PARTICIPATION OPPORTUNITIES AFFORDED UNDER THIS ACT BY
PUBLISHING NOTICE ON THE DEPARTMENT'S PUBLICLY ACCESSIBLE
INTERNET WEBSITE.

(3) INCLUDE IN THE APPLICATIONS FOR PERMIT UNDER THIS
ACT LANGUAGE TO ENCOURAGE APPLICANTS TO UTILIZE AND GIVE
CONSIDERATION TO DIVERSE GROUPS FOR CONTRACTING OR
PROFESSIONAL SERVICES OPPORTUNITIES.

(C) REPORTS.—NO LATER THAN MARCH 1, 2018, AND EACH MARCH 1
THEREAFTER, THE DEPARTMENT SHALL SUBMIT A REPORT TO THE
CHAIRPERSON AND MINORITY CHAIRPERSON OF THE PUBLIC HEALTH AND
WELFARE COMMITTEE OF THE SENATE AND THE CHAIRPERSON AND MINORITY
CHAIRPERSON OF THE HEALTH COMMITTEE OF THE HOUSE OF
REPRESENTATIVES SUMMARIZING THE PARTICIPATION AND UTILIZATION OF
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DIVERSE GROUPS IN THE ACTIVITIES AUTHORIZED UNDER THIS ACT. THE
REPORT SHALL INCLUDE:

(1) THE PARTICIPATION LEVEL, BY PERCENTAGE, OF DIVERSE
GROUPS IN THE ACTIVITIES AUTHORIZED UNDER THIS ACT.

(2) A SUMMARY OF HOW DIVERSE GROUPS ARE UTILIZED BY
PERMITTEES, INCLUDING IN THE PROVISION OF GOODS OR SERVICES.

(3) ANY OTHER INFORMATION THE DEPARTMENT DEEMS
APPROPRIATE.

(D) DEFINITIONS.--THE FOLLOWING WORDS AND PHRASES WHEN USED
IN THIS SECTION SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS
SUBSECTION UNLESS THE CONTEXT CLEARLY INDICATES OTHERWISE:

"DISADVANTAGED BUSINESS." AS DEFINED IN 74 PA.C.S. § 303(B)
(RELATING TO DIVERSE BUSINESS PARTICIPATION).

"DIVERSE GROUP." A DISADVANTAGED BUSINESS, MINORITY-OWNED
BUSINESS, WOMEN-OWNED BUSINESS, SERVICE-DISABLED VETERAN-OWNED
SMALL BUSINESS OR VETERAN-OWNED SMALL BUSINESS THAT HAS BEEN
CERTIFIED BY A THIRD-PARTY CERTIFYING ORGANIZATION.

"MINORITY-OWNED BUSINESS." AS DEFINED IN 74 PA.C.S. §
303(B).

"SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS." AS DEFINED
IN 51 PA.C.S. § 9601 (RELATING TO DEFINITIONS).

"THIRD-PARTY CERTIFYING ORGANIZATION." AS DEFINED IN 74
PA.C.S. § 303(B).

"VETERAN-OWNED SMALL BUSINESS." AS DEFINED IN 51 PA.C.S. §
9601.

"WOMEN-OWNED BUSINESS." AS DEFINED IN 74 PA.C.S. § 303(B).

SECTION 616. LIMITATIONS ON PERMITS.

THE FOLLOWING LIMITATIONS APPLY TO APPROVAL OF PERMITS FOR
GROWER/PROCESSORS AND DISPENSARIES:

(1) THE DEPARTMENT MAY NOT INITIALLY ISSUE PERMITS TO
MORE THAN 25 GROWERS/PROCESSORS.

(2) THE DEPARTMENT MAY NOT INITIALLY ISSUE PERMITS TO MORE THAN 50 DISPENSARIES. EACH DISPENSARY MAY PROVIDE MEDICAL MARIJUANA AT NO MORE THAN THREE SEPARATE LOCATIONS.

(3) THE DEPARTMENT MAY NOT ISSUE MORE THAN FIVE INDIVIDUAL DISPENSARY PERMITS TO ONE PERSON.

(4) THE DEPARTMENT MAY NOT ISSUE MORE THAN ONE INDIVIDUAL GROWER/PROCESSOR PERMIT TO ONE PERSON.

(5) NO MORE THAN FIVE GROWER/PROCESSORS MAY BE ISSUED PERMITS AS DISPENSARIES. IF THE NUMBER OF GROWERS/PROCESSORS IS INCREASED UNDER SECTION 1202, NO MORE THAN 20% OF THE TOTAL NUMBER OF GROWERS/PROCESSORS MAY ALSO BE ISSUED PERMITS AS DISPENSARIES.

(6) A DISPENSARY MAY ONLY OBTAIN MEDICAL MARIJUANA FROM A GROWER/PROCESSOR HOLDING A VALID PERMIT UNDER THIS ACT.

(7) A GROWER/PROCESSOR MAY ONLY PROVIDE MEDICAL MARIJUANA TO A DISPENSARY HOLDING A VALID PERMIT UNDER THIS ACT.

CHAPTER 7
MEDICAL MARIJUANA CONTROLS

SECTION 701. ELECTRONIC TRACKING.

(A) REQUIREMENT.—A GROWER/PROCESSOR OR DISPENSARY MUST IMPLEMENT AN ELECTRONIC INVENTORY TRACKING SYSTEM WHICH SHALL BE DIRECTLY ACCESSIBLE TO THE DEPARTMENT THROUGH ITS ELECTRONIC DATABASE THAT ELECTRONICALLY TRACKS ALL MEDICAL MARIJUANA ON A DAILY BASIS. THE SYSTEM SHALL INCLUDE TRACKING OF ALL OF THE FOLLOWING:

(1) FOR A GROWER/PROCESSOR, A SEED-TO-SALE TRACKING SYSTEM THAT TRACKS THE MEDICAL MARIJUANA FROM SEED TO PLANT UNTIL THE MEDICAL MARIJUANA IS SOLD TO A DISPENSARY.
(2) FOR A DISPENSARY, MEDICAL MARIJUANA FROM PURCHASE
FROM THE GROWER/PROCESSOR TO SALE TO A PATIENT OR CAREGIVER
AND THAT INCLUDES INFORMATION THAT VERIFIES THE VALIDITY OF
AN IDENTIFICATION CARD PRESENTED BY THE PATIENT OR CAREGIVER.

(3) FOR A GROWER/PROCESSOR AND A DISPENSARY, A DAILY LOG
OF EACH DAY'S BEGINNING INVENTORY, ACQUISITIONS, AMOUNTS
PURCHASED AND SOLD, DISBURSEMENTS, DISPOSALS AND ENDING
INVENTORY. THE TRACKING SYSTEM SHALL INCLUDE PRICES PAID AND
AMOUNTS COLLECTED FROM PATIENTS AND CAREGIVERS.

(4) FOR A GROWER/PROCESSOR AND A DISPENSARY, A SYSTEM
FOR RECALL OF DEFECTIVE MEDICAL MARIJUANA.

(5) FOR A GROWER/PROCESSOR AND A DISPENSARY, A SYSTEM
TO TRACK THE PLANT WASTE RESULTING FROM THE GROWTH OF MEDICAL
MARIJUANA OR OTHER DISPOSAL, INCLUDING THE NAME AND ADDRESS
OF ANY DISPOSAL SERVICE.

(B) ADDITIONAL REQUIREMENTS.--IN ADDITION TO THE INFORMATION
UNDER SUBSECTION (A), EACH MEDICAL MARIJUANA ORGANIZATION SHALL
TRACK THE FOLLOWING:

(1) SECURITY AND SURVEILLANCE.

(2) RECORDKEEPING AND RECORD RETENTION.

(3) THE ACQUISITION, POSSESSION, GROWING AND PROCESSING
OF MEDICAL MARIJUANA.

(4) DELIVERY AND TRANSPORTATION, INCLUDING AMOUNTS AND
METHOD OF DELIVERY.

(5) DISPENSING, INCLUDING AMOUNTS, PRICING AND AMOUNTS
COLLECTED FROM PATIENTS AND CAREGIVERS.

(C) ACCESS.--INFORMATION MAINTAINED IN ELECTRONIC TRACKING
SYSTEMS UNDER SUBSECTION (A) SHALL BE CONFIDENTIAL AND NOT
SUBJECT TO THE ACT OF FEBRUARY 14, 2008 (P.L.6, NO.3), KNOWN AS
THE RIGHT-TO-KNOW LAW.
(D) REPORTS.——WITHIN ONE YEAR OF THE ISSUANCE OF THE FIRST
PERMIT TO A GROWER/PROCESSOR OR DISPENSARY, AND EVERY THREE
MONTHS THEREAFTER IN A FORM AND MANNER PRESCRIBED BY THE
DEPARTMENT, THE FOLLOWING INFORMATION SHALL BE PROVIDED TO THE
DEPARTMENT, WHICH SHALL COMPILE THE INFORMATION AND POST IT ON
THE DEPARTMENT'S PUBLICLY ACCESSIBLE INTERNET WEBSITE:

(1) THE AMOUNT OF MEDICAL MARIJUANA SOLD BY A
GROWER/PROCESSOR DURING EACH THREE-MONTH PERIOD.

(2) THE PRICE OF AMOUNTS OF MEDICAL MARIJUANA SOLD BY
GROWER/PROCESSORS AS DETERMINED BY THE DEPARTMENT.

(3) THE AMOUNT OF MEDICAL MARIJUANA PURCHASED BY EACH
DISPENSARY IN THIS COMMONWEALTH.

(4) THE COST OF AMOUNTS OF MEDICAL MARIJUANA TO EACH
DISPENSARY IN AMOUNTS AS DETERMINED BY THE DEPARTMENT.

(5) THE TOTAL AMOUNT AND DOLLAR VALUE OF MEDICAL MARIJUANA
SOLD BY EACH DISPENSARY IN THE THREE-MONTH PERIOD.

SECTION 702. GROWER/PROCESSORS.

(A) AUTHORIZATION.——SUBJECT TO SUBSECTION (B), A
GROWER/PROCESSOR MAY DO ALL OF THE FOLLOWING IN ACCORDANCE WITH
DEPARTMENT REGULATIONS:

(1) OBTAIN SEED FROM OUTSIDE THIS COMMONWEALTH TO
INITIALLY GROW MEDICAL MARIJUANA.

(2) OBTAIN SEED AND PLANT MATERIAL FROM ANOTHER
GROWER/PROCESSOR WITHIN THIS COMMONWEALTH TO GROW MEDICAL
MARIJUANA.

(B) LIMITATIONS.—

(1) A GROWER/PROCESSOR MAY ONLY GROW, STORE, HARVEST OR
PROCESS MEDICAL MARIJUANA IN AN INDOOR, ENCLOSED, SECURE
FACILITY WHICH:

(I) INCLUDES ELECTRONIC LOCKING SYSTEMS, ELECTRONIC
SURVEILLANCE AND OTHER FEATURES REQUIRED BY THE
DEPARTMENT; AND

(II) IS LOCATED WITHIN THIS COMMONWEALTH.

(2) (RESERVED).

SECTION 703. STORAGE AND TRANSPORTATION.

THE DEPARTMENT SHALL DEVELOP REGULATIONS RELATING TO THE
STORAGE AND TRANSPORTATION OF MEDICAL MARIJUANA AMONG
GROWER/PROCESSORS, TESTING LABORATORIES AND DISPENSARIES WHICH
ENSURE ADEQUATE SECURITY TO GUARD AGAINST IN-TRANSIT LOSSES. THE
TRACKING SYSTEM DEVELOPED BY THE DEPARTMENT SHALL INCLUDE ALL
TRANSPORTATION AND STORAGE OF MEDICAL MARIJUANA. THE REGULATIONS
SHALL PROVIDE FOR THE FOLLOWING:

(1) REQUIREMENTS RELATING TO SHIPPING CONTAINERS AND
PACKAGING.

(2) THE MANNER IN WHICH TRUCKS, VANS, TRAILERS OR OTHER
CARRIERS WILL BE SECURED.

(3) SECURITY SYSTEMS THAT INCLUDE A NUMBERED SEAL ON THE
TRAILER.

(4) OBTAINING COPIES OF DRIVERS' LICENSES AND
REGISTRATIONS AND OTHER INFORMATION RELATED TO SECURITY AND
TRACKING.

(5) USE OF GPS SYSTEMS.

(6) NUMBER OF DRIVERS OR OTHER SECURITY REQUIRED TO
ENSURE AGAINST STORAGE OR IN-TRANSIT LOSSES.

(7) RECORDKEEPING FOR DELIVERY AND RECEIPT OF MEDICAL
MARIJUANA PRODUCTS.

(8) REQUIREMENTS TO UTILIZE ANY ELECTRONIC TRACKING
SYSTEM REQUIRED BY THE DEPARTMENT.

(9) TRANSPORTING MEDICAL MARIJUANA TO A
GROWER/PROCESSOR, APPROVED LABORATORY OR DISPENSARY.
SECTION 704. LABORATORY.

A GROWER/PROCESSOR SHALL CONTRACT WITH AN INDEPENDENT LABORATORY TO TEST THE MEDICAL MARIJUANA PRODUCED BY THE GROWER/PROCESSOR. THE DEPARTMENT SHALL APPROVE THE LABORATORY AND REQUIRE THAT THE LABORATORY REPORT TESTING RESULTS IN A MANNER AS THE DEPARTMENT SHALL DETERMINE, INCLUDING REQUIRING A TEST AT HARVEST AND A TEST AT FINAL PROCESSING. THE POSSESSION BY A LABORATORY OF MEDICAL MARIJUANA SHALL BE A LAWFUL USE.

SECTION 705. PRICES.


CHAPTER 8

DISPENSARIES

SECTION 801. DISPENSING TO PATIENTS AND CAREGIVERS.

(A) GENERAL RULE.--A DISPENSARY THAT HAS BEEN ISSUED A PERMIT UNDER CHAPTER 6 MAY LAWFULLY DISPENSE MEDICAL MARIJUANA TO A PATIENT OR CAREGIVER UPON PRESENTATION TO THE DISPENSARY OF A VALID IDENTIFICATION CARD FOR THAT PATIENT OR CAREGIVER. THE DISPENSARY SHALL PROVIDE TO THE PATIENT OR CAREGIVER A RECEIPT, AS APPROPRIATE. THE RECEIPT SHALL INCLUDE ALL OF THE FOLLOWING:

(1) THE NAME, ADDRESS AND ANY IDENTIFICATION NUMBER
ASSIGNED TO THE DISPENSARY BY THE DEPARTMENT.

(2) THE NAME AND ADDRESS OF THE PATIENT AND CAREGIVER.

(3) THE DATE THE MEDICAL MARIJUANA WAS DISPENSED.

(4) ANY REQUIREMENT OR LIMITATION BY THE PRACTITIONER AS TO THE FORM OF MEDICAL MARIJUANA FOR THE PATIENT.

(5) THE FORM AND THE QUANTITY OF MEDICAL MARIJUANA DISPENSED.

(B) REQUIREMENTS.—A DISPENSARY SHALL HAVE A PHYSICIAN OR A PHARMACIST ONSITE AT ALL TIMES DURING THE HOURS THE DISPENSARY IS OPEN TO RECEIVE PATIENTS AND CAREGIVERS. IF A DISPENSARY HAS MORE THAN ONE SEPARATE LOCATION, A PHYSICIAN ASSISTANT OR A CERTIFIED REGISTERED NURSE PRACTITIONER MAY BE ONSITE AT EACH OF THE OTHER LOCATIONS IN LIEU OF THE PHYSICIAN OR PHARMACIST. A PHYSICIAN, A PHARMACIST, A PHYSICIAN ASSISTANT OR A CERTIFIED REGISTERED NURSE PRACTITIONER SHALL, PRIOR TO ASSUMING DUTIES UNDER THIS PARAGRAPH, SUCCESSFULLY COMPLETE THE COURSE ESTABLISHED IN SECTION 301(A)(6). A PHYSICIAN MAY NOT ISSUE A CERTIFICATION TO AUTHORIZE PATIENTS TO RECEIVE MEDICAL MARIJUANA OR OTHERWISE TREAT PATIENTS AT THE DISPENSARY.

(C) FILING WITH DEPARTMENT.—PRIOR TO DISPENSING MEDICAL MARIJUANA TO A PATIENT OR CAREGIVER, THE DISPENSARY SHALL FILE THE RECEIPT INFORMATION WITH THE DEPARTMENT UTILIZING THE ELECTRONIC TRACKING SYSTEM. WHEN FILING RECEIPTS UNDER THIS SUBSECTION, THE DISPENSARY SHALL DISPOSE OF ANY ELECTRONICALLY RECORDED CERTIFICATION INFORMATION AS PROVIDED BY REGULATION.

(D) LIMITATIONS.—NO DISPENSARY MAY DISPENSE TO A PATIENT OR CAREGIVER:

(1) A QUANTITY OF MEDICAL MARIJUANA GREATER THAN THAT WHICH THE PATIENT OR CAREGIVER IS PERMITTED TO POSSESS UNDER THE CERTIFICATION; OR
(2) A FORM OF MEDICAL MARIJUANA PROHIBITED BY THIS ACT.

(E) SUPPLY.--WHEN DISPENSING MEDICAL MARIJUANA TO A PATIENT
OR CAREGIVER, THE DISPENSARY MAY NOT DISPENSE AN AMOUNT GREATER
THAN A 30-DAY SUPPLY UNTIL THE PATIENT HAS EXHAUSTED ALL BUT A
SEVEN-DAY SUPPLY PROVIDED PURSUANT TO A PREVIOUSLY ISSUED
CERTIFICATION UNTIL ADDITIONAL CERTIFICATION IS PRESENTED UNDER
SECTION 405.

(F) VERIFICATION.--PRIOR TO DISPENSING MEDICAL MARIJUANA TO
A PATIENT OR CAREGIVER, THE DISPENSARY SHALL VERIFY THE
INFORMATION IN SUBSECTIONS (E) AND (G) BY CONSULTING THE
ELECTRONIC TRACKING SYSTEM INCLUDED IN THE DEPARTMENT'S
ELECTRONIC DATABASE ESTABLISHED UNDER SECTION 301(A)(4)(V) AND
THE DISPENSARY TRACKING SYSTEM UNDER SECTION 701(A)(2).

(G) FORM OF MEDICAL MARIJUANA.--MEDICAL MARIJUANA DISPENSED
TO A PATIENT OR CAREGIVER BY A DISPENSARY SHALL CONFORM TO ANY
REQUIREMENT OR LIMITATION SET BY THE PRACTITIONER AS TO THE FORM
OF MEDICAL MARIJUANA FOR THE PATIENT.

(H) SAFETY INSERT.--WHEN A DISPENSARY DISPENSES MEDICAL
MARIJUANA TO A PATIENT OR CAREGIVER, THE DISPENSARY SHALL
PROVIDE TO THAT PATIENT OR CAREGIVER, AS APPROPRIATE, A SAFETY
INSERT. THE INSERT SHALL BE DEVELOPED AND APPROVED BY THE
DEPARTMENT. THE INSERT SHALL PROVIDE THE FOLLOWING INFORMATION:

(1) LAWFUL METHODS FOR ADMINISTERING MEDICAL MARIJUANA
IN INDIVIDUAL DOSES.

(2) ANY POTENTIAL DANGERS STEMMING FROM THE USE OF
MEDICAL MARIJUANA.

(3) HOW TO RECOGNIZE WHAT MAY BE PROBLEMATIC USAGE OF
MEDICAL MARIJUANA AND HOW TO OBTAIN APPROPRIATE SERVICES OR
TREATMENT FOR PROBLEMATIC USAGE.

(4) HOW TO PREVENT OR DETER THE MISUSE OF MEDICAL
MARIJUANA BY MINORS OR OTHERS.

(5) ANY OTHER INFORMATION AS DETERMINED BY THE DEPARTMENT.

(I) SEALED AND LABELED PACKAGE.--MEDICAL MARIJUANA SHALL BE DISPENSED BY A DISPENSARY TO A PATIENT OR CAREGIVER IN A SEALED AND PROPERLY LABELED PACKAGE. THE LABELING SHALL CONTAIN THE FOLLOWING:

(1) THE INFORMATION REQUIRED TO BE INCLUDED IN THE RECEIPT PROVIDED TO THE PATIENT OR CAREGIVER, AS APPROPRIATE, BY THE DISPENSARY.

(2) THE PACKAGING DATE.

(3) ANY APPLICABLE DATE BY WHICH THE MEDICAL MARIJUANA SHOULD BE USED.

(4) A WARNING STATING:

"THIS PRODUCT IS FOR MEDICINAL USE ONLY. WOMEN SHOULD NOT CONSUME DURING PREGNANCY OR WHILE BREASTFEEDING EXCEPT ON THE ADVICE OF THE PRACTITIONER WHO ISSUED THE CERTIFICATION AND IN THE CASE OF BREASTFEEDING, THE INFANT'S PEDIATRICIAN. THIS PRODUCT MIGHT IMPAIR THE ABILITY TO DRIVE OR OPERATE HEAVY MACHINERY. KEEP OUT OF REACH OF CHILDREN."

(5) THE AMOUNT OF INDIVIDUAL DOSES CONTAINED WITHIN THE PACKAGE AND THE SPECIES AND PERCENTAGE OF TETRAHYDROCANNABINOL AND CANNABIDIOL.

(6) A WARNING THAT THE MEDICAL MARIJUANA MUST BE KEPT IN THE ORIGINAL CONTAINER IN WHICH IT WAS DISPENSED.

(7) A WARNING THAT UNAUTHORIZED USE IS UNLAWFUL AND WILL SUBJECT THE PERSON TO CRIMINAL PENALTIES.

(8) ANY OTHER INFORMATION REQUIRED BY THE DEPARTMENT.

SECTION 802. FACILITY REQUIREMENTS.

(A) GENERAL RULE.--
(1) A DISPENSARY MAY ONLY DISPENSE MEDICAL MARIJUANA IN AN INDOOR, ENCLOSED, SECURE FACILITY LOCATED WITHIN THIS COMMONWEALTH, AS DETERMINED BY THE DEPARTMENT.

(2) A DISPENSARY MAY NOT OPERATE ON THE SAME SITE AS A FACILITY USED FOR GROWING AND PROCESSING MEDICAL MARIJUANA.

(3) A DISPENSARY MAY NOT BE LOCATED WITHIN 1,000 FEET OF THE PROPERTY LINE OF A PUBLIC, PRIVATE OR PAROCHIAL SCHOOL OR A DAY-CARE CENTER.

(4) A DISPENSARY MAY SELL MEDICAL DEVICES AND INSTRUMENTS WHICH ARE NEEDED TO ADMINISTER MEDICAL MARIJUANA UNDER THIS ACT.

(5) A DISPENSARY MAY SELL SERVICES APPROVED BY THE DEPARTMENT RELATED TO THE USE OF MEDICAL MARIJUANA.

(B) ADJUSTMENT OR WAIVER OF PROHIBITION.--THE DEPARTMENT MAY AMEND A PROHIBITION UNDER SUBSECTION (A)(3) IF IT IS SHOWN BY CLEAR AND CONVINCING EVIDENCE THAT THE AMENDMENT IS NECESSARY TO PROVIDE ADEQUATE ACCESS TO PATIENTS. AN AMENDMENT MAY INCLUDE ADDITIONAL SECURITY, PHYSICAL PLANT OF A FACILITY OR OTHER CONDITIONS NECESSARY TO PROTECT CHILDREN.

SECTION 803. POSTING.

A DISPENSARY SHALL POST A COPY OF ITS PERMIT IN A LOCATION WITHIN ITS FACILITY IN A MANNER THAT IS EASILY OBSERVABLE BY PATIENTS, CAREGIVERS, LAW ENFORCEMENT OFFICERS AND AGENTS OF THE DEPARTMENT.

CHAPTER 9

TAX ON MEDICAL MARIJUANA

SECTION 901. TAX ON MEDICAL MARIJUANA.

(A) TAX IMPOSED.--A TAX IS IMPOSED ON THE GROSS RECEIPTS OF A GROWER/PROCESSOR RECEIVED FROM THE SALE OF MEDICAL MARIJUANA BY A GROWER/PROCESSOR TO A DISPENSARY, TO BE PAID BY THE
GROWER/PROCESSOR, AT THE RATE OF 5%. THE TAX SHALL BE CHARGED AGAINST AND BE PAID BY THE GROWER/PROCESSOR AND SHALL NOT BE ADDED AS A SEPARATE CHARGE OR LINE ITEM ON ANY SALES SLIP, INVOICE, RECEIPT OR OTHER STATEMENT OR MEMORANDUM OF THE PRICE PAID BY A DISPENSARY, PATIENT OR CAREGIVER.


(C) (RESERVED).

(D) DEPOSIT OF PROCEEDS.--ALL MONEY RECEIVED FROM THE TAX IMPOSED UNDER SUBSECTION (A) SHALL BE DEPOSITED IN THE FUND.


(F) INFORMATION.--A GROWER/PROCESSOR THAT SELLS MEDICAL MARIJUANA SHALL PROVIDE TO THE DEPARTMENT OF REVENUE INFORMATION REQUIRED BY THE DEPARTMENT.

SECTION 902. MEDICAL MARIJUANA PROGRAM FUND.

(A) FUND ESTABLISHED.--THE MEDICAL MARIJUANA PROGRAM FUND IS ESTABLISHED AS A SPECIAL FUND IN THE STATE TREASURY. MONEY IN THE FUND IS APPROPRIATED AS SET FORTH IN SUBSECTION (C).
AMOUNT UNSPENT AT THE END OF A FISCAL YEAR SHALL BE APPROPRIATED TO THE DEPARTMENT FOR ITS OPERATIONS.

(B) SOURCE OF FUNDS.--FEES AND TAXES PAYABLE UNDER THIS ACT SHALL BE DEPOSITED INTO THE FUND. THE MONEY DEPOSITED INTO THE FUND MAY ONLY BE USED FOR THE PURPOSES SET FORTH IN THIS SECTION. ANY INTEREST ACCRUED SHALL BE DEPOSITED INTO THE FUND.

(C) USE OF PROCEEDS.--AFTER ANY REPAYMENT MADE UNDER SUBSECTION (D), MONEY IN THE FUND IS APPROPRIATED IN ACCORDANCE WITH THE FOLLOWING PERCENTAGES:

(1) TO THE DEPARTMENT, 55% OF THE REVENUE IN THE FUND. FORTY PERCENT OF THE REVENUE IN THE FUND SHALL BE EXPENDED FOR OPERATIONS OF THE DEPARTMENT, INCLUDING OUTREACH EFFORTS AND OTHER PROJECTS, AS REQUIRED BY THIS ACT. FIFTEEN PERCENT OF THE AMOUNT IN THE FUND SHALL BE USED BY THE DEPARTMENT TO ESTABLISH THE FOLLOWING:

(I) A PROGRAM TO ASSIST PATIENTS WITH THE COST OF PROVIDING MEDICAL MARIJUANA TO PATIENTS WHO DEMONSTRATE FINANCIAL HARDSHIP OR NEED UNDER THIS ACT, AND THE DEPARTMENT SHALL DEVELOP GUIDELINES AND PROCEDURES TO ENSURE MAXIMUM AVAILABILITY TO INDIVIDUALS WITH FINANCIAL NEED;

(II) A PROGRAM TO ASSIST PATIENTS AND CAREGIVERS WITH THE COST ASSOCIATED WITH THE WAIVER OR REDUCTION OF FEES FOR IDENTIFICATION CARDS UNDER SECTIONS 501(C)(5) AND 502(A)(2); AND

(III) A PROGRAM TO REIMBURSE CAREGIVERS FOR THE COST OF PROVIDING BACKGROUND CHECKS FOR CAREGIVERS.

(2) TO THE DEPARTMENT OF DRUG AND ALCOHOL PROGRAMS, FOR DRUG ABUSE PREVENTION AND COUNSELING AND TREATMENT SERVICES, 10% OF THE REVENUE IN THE FUND.
(3) TO THE DEPARTMENT, FOR FURTHER RESEARCH RELATED TO
THE USE OF MEDICAL MARIJUANA, INCLUDING THE RESEARCH PROGRAM
ESTABLISHED UNDER CHAPTER 19, 30% OF THE REVENUE IN THE FUND.
FUNDING SHALL BE PROVIDED FOR RESEARCH INTO THE TREATMENT OF
THOSE SERIOUS MEDICAL CONDITIONS FOR WHICH MEDICAL MARIJUANA
IS AVAILABLE FOR TREATMENT WITHIN THIS COMMONWEALTH AND FOR
RESEARCH INTO THE USE OF MEDICAL MARIJUANA TO TREAT OTHER
MEDICAL CONDITIONS FOR WHICH MEDICAL MARIJUANA MAY HAVE
LEGITIMATE MEDICINAL VALUE. MONEY SHALL BE USED TO SUBSIDIZE
THE COST OF, OR PROVIDE, MEDICAL MARIJUANA TO PATIENTS
PARTICIPATING IN THE PROGRAM. HOWEVER, MONEY IN THE FUND MAY
NOT BE EXPENDED ON ACTIVITY UNDER CHAPTER 20.

(4) TO THE PENNSYLVANIA COMMISSION ON CRIME AND
DELINQUENCY, FOR DISTRIBUTION TO LOCAL POLICE DEPARTMENTS
WHICH DEMONSTRATE A NEED RELATING TO THE ENFORCEMENT OF THIS
ACT, 5% OF THE REVENUE IN THE FUND.

(D) REPAYMENT OF INITIAL FUNDING.--THE DEPARTMENT SHALL
REPAY FROM THE FEES, TAXES AND INVESTMENT EARNINGS OF THE FUND
TO THE GENERAL FUND ANY MONEY APPROPRIATED FOR THE INITIAL
PLANNING, ORGANIZATION AND ADMINISTRATION BY THE DEPARTMENT WITH
RESPECT TO THE ESTABLISHMENT OF THE PROGRAM AT THE TIME OF THE
ORIGINAL ENACTMENT OF THIS ACT. REPAYMENT SHALL TAKE PLACE
WITHIN A 10-YEAR PERIOD COMMENCING ONE YEAR AFTER THE DATE OF
PUBLICATION IN THE PENNSYLVANIA BULLETIN OF THE FINAL
REGULATIONS.

CHAPTER 11
ADMINISTRATION

SECTION 1101. GOVERNING PRACTICE AND PROCEDURE.
THE PROVISIONS OF 2 PA.C.S. (RELATING TO ADMINISTRATIVE LAW
AND PROCEDURE) SHALL APPLY TO ALL ACTIONS OF THE DEPARTMENT
UNDER THIS ACT CONSTITUTING AN ADJUDICATION AS DEFINED IN 2
PA.C.S. § 101 (RELATING TO DEFINITIONS).

SECTION 1102. REPORTS BY MEDICAL MARIJUANA ORGANIZATIONS.

A MEDICAL MARIJUANA ORGANIZATION SHALL PERIODICALLY FILE
REPORTS RELATED TO ITS ACTIVITIES. THE DEPARTMENT SHALL
DETERMINE THE INFORMATION REQUIRED IN AND THE FREQUENCY OF
FILING THE REPORTS.

SECTION 1103. LAW ENFORCEMENT NOTIFICATION.

NOTWITHSTANDING ANY PROVISION OF THIS ACT OR ANY OTHER LAW TO
THE CONTRARY, THE DEPARTMENT MAY NOTIFY ANY APPROPRIATE LAW
ENFORCEMENT AGENCY OF INFORMATION RELATING TO ANY VIOLATION OR
SUSPECTED VIOLATION OF THIS ACT. IN ADDITION, THE DEPARTMENT
SHALL VERIFY TO LAW ENFORCEMENT PERSONNEL IN AN APPROPRIATE CASE
WHETHER A CERTIFICATION, PERMIT, REGISTRATION OR AN
IDENTIFICATION CARD IS VALID, INCLUDING RELEASE OF THE NAME OF
THE PATIENT.

SECTION 1104. EVALUATION.

THE DEPARTMENT MAY PROVIDE FOR AN ANALYSIS AND EVALUATION OF
THE IMPLEMENTATION AND EFFECTIVENESS OF THIS ACT, INCLUDING
WHETHER THE INTENT AND STATED POLICY OF THE GENERAL ASSEMBLY
HAVE BEEN ACHIEVED. THE DEPARTMENT MAY ENTER INTO AGREEMENTS
WITH ONE OR MORE PERSONS FOR THE PERFORMANCE OF AN EVALUATION OF
THE IMPLEMENTATION AND EFFECTIVENESS OF THIS ACT.

SECTION 1105. REPORT.

(A) REPORT REQUIRED.—THE DEPARTMENT SHALL SUBMIT A WRITTEN
REPORT UNDER SUBSECTION (B) EVERY TWO YEARS, BEGINNING TWO YEARS
AFTER THE EFFECTIVE DATE OF THIS SECTION, TO THE FOLLOWING:

(1) THE GOVERNOR.

(2) THE PRESIDENT PRO TEMPORE OF THE SENATE.

(3) THE MAJORITY LEADER AND THE MINORITY LEADER OF THE
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SENATE.

(4) THE SPEAKER OF THE HOUSE OF REPRESENTATIVES.

(5) THE MAJORITY LEADER AND THE MINORITY LEADER OF THE
HOUSE OF REPRESENTATIVES.

(6) THE CHAIRMAN AND MINORITY CHAIRMAN OF THE JUDICIARY
COMMITTEE OF THE SENATE.

(7) THE CHAIRMAN AND MINORITY CHAIRMAN OF THE PUBLIC
HEALTH AND WELFARE COMMITTEE OF THE SENATE.

(8) THE CHAIRMAN AND MINORITY CHAIRMAN OF THE JUDICIARY
COMMITTEE OF THE HOUSE OF REPRESENTATIVES.

(9) THE CHAIRMAN AND MINORITY CHAIRMAN OF THE HEALTH
COMMITTEE OF THE HOUSE OF REPRESENTATIVES.

(10) THE ATTORNEY GENERAL OF THE COMMONWEALTH.

(B) CONTENTS OF REPORT.--THE FOLLOWING INFORMATION SHALL BE
INCLUDED IN THE REPORT:

(1) AN ASSESSMENT OF THE USE OF MEDICAL MARIJUANA AS A
RESULT OF THE ENACTMENT OF THIS ACT.

(2) AN ASSESSMENT OF THE BENEFITS AND RISKS TO PATIENTS
USING MEDICAL MARIJUANA UNDER THIS ACT, INCLUDING ADVERSE
EVENTS.

(3) RECOMMENDATIONS FOR AMENDMENTS TO THIS ACT FOR
REASONS OF PATIENT SAFETY OR TO AID THE GENERAL WELFARE OF
THE CITIZENS OF THIS COMMONWEALTH.

SECTION 1106. (RESERVED).

SECTION 1107. TEMPORARY REGULATIONS.

(A) PROMULGATION.--IN ORDER TO FACILITATE THE PROMPT
IMPLEMENTATION OF THIS ACT, THE DEPARTMENT MAY PROMULGATE
TEMPORARY REGULATIONS THAT SHALL EXPIRE NOT LATER THAN TWO YEARS
FOLLOWING THE PUBLICATION OF THE TEMPORARY REGULATION. THE
DEPARTMENT MAY PROMULGATE TEMPORARY REGULATIONS NOT SUBJECT TO:
(1) SECTIONS 201, 202, 203, 204 AND 205 OF THE ACT OF
JULY 31, 1968 (P.L.769, NO.240), REFERRED TO AS THE
COMMONWEALTH DOCUMENTS LAW.

(2) THE ACT OF JUNE 25, 1982 (P.L.633, NO.181), KNOWN AS
THE REGULATORY REVIEW ACT.

(3) SECTIONS 204(B) AND 301(10) OF THE ACT OF OCTOBER
15, 1980 (P.L.950, NO.164), KNOWN AS THE COMMONWEALTH
ATTORNEYS ACT.

(B) EXPIRATION.--THE DEPARTMENT'S AUTHORITY TO ADOPT
TEMPORARY REGULATIONS UNDER SUBSECTION (A) SHALL EXPIRE TWO
YEARS AFTER THE EFFECTIVE DATE OF THIS SECTION. REGULATIONS
ADOPTED AFTER THIS PERIOD SHALL BE PROMULGATED AS PROVIDED BY
LAW.

(C) PUBLICATION.--THE DEPARTMENT SHALL BEGIN PUBLISHING
TEMPORARY REGULATIONS IN THE PENNSYLVANIA BULLETIN NO LATER THAN
SIX MONTHS AFTER THE EFFECTIVE DATE OF THIS SECTION.

CHAPTER 12
MEDICAL MARIJUANA ADVISORY BOARD

SECTION 1201. ADVISORY BOARD.

(A) ESTABLISHMENT.--THE MEDICAL MARIJUANA ADVISORY BOARD IS
ESTABLISHED WITHIN THE DEPARTMENT. THE ADVISORY BOARD SHALL
CONSIST OF THE FOLLOWING MEMBERS:

(1) THE SECRETARY OR A DESIGNEE.

(2) THE COMMISSIONER OF THE PENNSYLVANIA STATE POLICE OR
A DESIGNEE.

(3) THE CHAIRMAN OF THE STATE BOARD OF PHARMACY OR A
DESIGNEE.

(4) THE COMMISSIONER OF PROFESSIONAL AND OCCUPATIONAL
AFFAIRS OR A DESIGNEE.

(5) THE PHYSICIAN GENERAL OR A DESIGNEE.
(6) THE PRESIDENT OF THE PENNSYLVANIA CHIEFS OF POLICE ASSOCIATION OR A DESIGNEE.

(7) THE PRESIDENT OF THE PENNSYLVANIA DISTRICT ATTORNEYS ASSOCIATION OR A DESIGNEE.

(8) ONE MEMBER TO BE APPOINTED BY EACH OF THE FOLLOWING, WHICH MEMBERS SHALL BE KNOWLEDGEABLE AND EXPERIENCED IN ISSUES RELATING TO CARE AND TREATMENT OF INDIVIDUALS WITH A SERIOUS MEDICAL CONDITION, GERIATRIC OR PEDIATRIC MEDICINE OR CLINICAL RESEARCH:

   (I) THE GOVERNOR.
   (II) THE PRESIDENT PRO TEMPORE OF THE SENATE.
   (III) THE MAJORITY LEADER OF THE SENATE.
   (IV) THE MINORITY LEADER OF THE SENATE.
   (V) THE SPEAKER OF THE HOUSE OF REPRESENTATIVES.
   (VI) THE MAJORITY LEADER OF THE HOUSE OF REPRESENTATIVES.
   (VII) THE MINORITY LEADER OF THE HOUSE OF REPRESENTATIVES.

(9) ONE MEMBER APPOINTED BY THE GOVERNOR, WHO SHALL BE A PATIENT, A FAMILY OR HOUSEHOLD MEMBER OF A PATIENT OR A PATIENT ADVOCATE.

(B) TERMS.--EXCEPT AS PROVIDED UNDER SUBSECTION (G), THE MEMBERS APPOINTED UNDER SUBSECTION (A)(8) AND (9) SHALL SERVE A TERM OF FOUR YEARS OR UNTIL A SUCCESSOR HAS BEEN APPOINTED AND QUALIFIED, BUT NO LONGER THAN SIX MONTHS BEYOND THE FOUR-YEAR PERIOD.

(C) CHAIR.--THE SECRETARY, OR A DESIGNEE, SHALL SERVE AS CHAIR OF THE ADVISORY BOARD.

(D) VOTING; QUORUM.--THE MEMBERS UNDER SUBSECTION (A)(1), (2), (3), (4), (5), (6) AND (7) SHALL SERVE EX OFFICIO AND SHALL
HAVE VOTING RIGHTS. A MAJORITY OF THE MEMBERS SHALL CONSTITUTE A
QUORUM FOR THE PURPOSE OF ORGANIZING THE ADVISORY BOARD,
CONDUCTING ITS BUSINESS AND FULFILLING ITS DUTIES. A VOTE OF THE
MAJORITY OF THE MEMBERS PRESENT SHALL BE SUFFICIENT FOR ALL
ACTIONS OF THE ADVISORY BOARD UNLESS THE BYLAWS REQUIRE A
GREATER NUMBER.

(E) ATTENDANCE.--A MEMBER OF THE ADVISORY BOARD APPOINTED
UNDER SUBSECTION (A)(8) OR (9) WHO FAILS TO ATTEND THREE
CONSECUTIVE MEETINGS SHALL FORFEIT HIS SEAT UNLESS THE
SECRETARY, UPON WRITTEN REQUEST FROM THE MEMBER, FINDS THAT THE
MEMBER SHOULD BE EXCUSED FROM A MEETING FOR GOOD CAUSE. A MEMBER
WHO CANNOT BE PHYSICALLY PRESENT MAY ATTEND MEETINGS VIA
ELECTRONIC MEANS, INCLUDING VIDEO CONFERENCE.

(F) GOVERNANCE.--THE ADVISORY BOARD SHALL HAVE THE POWER TO
PRESCRIBE, AMEND AND REPEAL BYLAWS, RULES AND REGULATIONS
GOVERNING THE MANNER IN WHICH THE BUSINESS OF THE ADVISORY BOARD
IS CONDUCTED AND THE MANNER IN WHICH THE DUTIES GRANTED TO IT
ARE FULFILLED. THE ADVISORY BOARD MAY DELEGATE SUPERVISION OF
THE ADMINISTRATION OF ADVISORY BOARD ACTIVITIES TO AN
ADMINISTRATIVE SECRETARY AND OTHER EMPLOYEES OF THE DEPARTMENT
AS THE SECRETARY SHALL APPOINT.

(G) INITIAL TERMS.--THE INITIAL TERMS OF MEMBERS APPOINTED
UNDER SUBSECTION (A)(8) AND (9) SHALL BE FOR TERMS OF ONE, TWO,
THREE OR FOUR YEARS, THE PARTICULAR TERM OF EACH MEMBER TO BE
DESIGNATED BY THE SECRETARY AT THE TIME OF APPOINTMENT. ALL
OTHER MEMBERS SHALL SERVE FOR A TERM OF FOUR YEARS.

(H) VACANCY.--IN THE EVENT THAT ANY MEMBER APPOINTED UNDER
SUBSECTION (A)(8) OR (9) SHALL DIE OR RESIGN OR OTHERWISE BECOME
DISQUALIFIED DURING THE MEMBER'S TERM OF OFFICE, A SUCCESSOR
SHALL BE APPOINTED IN THE SAME WAY AND WITH THE SAME
QUALIFICATIONS AS SET FORTH IN THIS SECTION AND SHALL HOLD OFFICE FOR THE UNEXPIRED TERM. AN APPOINTED MEMBER OF THE ADVISORY BOARD SHALL BE ELIGIBLE FOR REAPPOINTMENT.

(I) EXPENSES.--A MEMBER APPOINTED UNDER SUBSECTION (A)(8) OR (9) SHALL RECEIVE THE AMOUNT OF REASONABLE TRAVEL, HOTEL AND OTHER NECESSARY EXPENSES INCURRED IN THE PERFORMANCE OF THE DUTIES OF THE MEMBER IN ACCORDANCE WITH COMMONWEALTH REGULATIONS, BUT SHALL RECEIVE NO OTHER COMPENSATION FOR THE MEMBER'S SERVICE ON THE BOARD.

(J) DUTIES.--THE ADVISORY BOARD SHALL HAVE THE FOLLOWING DUTIES:

(1) TO EXAMINE AND ANALYZE THE STATUTORY AND REGULATORY LAW RELATING TO MEDICAL MARIJUANA WITHIN THIS COMMONWEALTH.

(2) TO EXAMINE AND ANALYZE THE LAW AND EVENTS IN OTHER STATES AND THE NATION WITH RESPECT TO MEDICAL MARIJUANA.

(3) TO ACCEPT AND REVIEW WRITTEN COMMENTS FROM INDIVIDUALS AND ORGANIZATIONS ABOUT MEDICAL MARIJUANA.

(4) TO ISSUE TWO YEARS AFTER THE EFFECTIVE DATE OF THIS SECTION A WRITTEN REPORT TO THE GOVERNOR, THE SENATE AND THE HOUSE OF REPRESENTATIVES.

(5) THE WRITTEN REPORT UNDER PARAGRAPH (4) SHALL INCLUDE RECOMMENDATIONS AND FINDINGS AS TO THE FOLLOWING:

(I) WHETHER TO CHANGE THE TYPES OF MEDICAL PROFESSIONALS WHO CAN ISSUE CERTIFICATIONS TO PATIENTS.

(II) WHETHER TO CHANGE, ADD OR REDUCE THE TYPES OF MEDICAL CONDITIONS WHICH QUALIFY AS SERIOUS MEDICAL CONDITIONS UNDER THIS ACT.

(III) WHETHER TO CHANGE THE FORM OF MEDICAL MARIJUANA PERMITTED UNDER THIS ACT.

(IV) WHETHER TO CHANGE, ADD OR REDUCE THE NUMBER OF
GROWERS/PROCESSORS OR DISPENSARIES.

(V) HOW TO ENSURE AFFORDABLE PATIENT ACCESS TO MEDICAL MARIJUANA.

(VI) WHETHER TO PERMIT MEDICAL MARIJUANA TO BE DISPENSED IN DRY LEAF OR PLANT FORM, FOR ADMINISTRATION BY VAPORIZATION.

(6) THE FINAL WRITTEN REPORT UNDER THIS SECTION SHALL BE ADOPTED AT A PUBLIC MEETING. THE REPORT SHALL BE A PUBLIC RECORD UNDER THE ACT OF FEBRUARY 14, 2008 (P.L.6, NO.3), KNOWN AS THE RIGHT-TO-KNOW LAW.

SECTION 1202. REGULATIONS BASED ON RECOMMENDATIONS OF ADVISORY BOARD.


CHAPTER 13

OFFENSES RELATED TO MEDICAL MARIJUANA

SECTION 1301. CRIMINAL DIVERSION OF MEDICAL MARIJUANA BY PRACTITIONERS.

IN ADDITION TO ANY OTHER PENALTY PROVIDED BY LAW, A PRACTITIONER COMMITS A MISDEMEANOR OF THE FIRST DEGREE IF THE PRACTITIONER INTENTIONALLY, KNOWINGLY OR RECKLESSLY CERTIFIES A PERSON AS BEING ABLE TO LAWFULLY RECEIVE MEDICAL MARIJUANA OR OTHERWISE PROVIDES MEDICAL MARIJUANA TO A PERSON WHO IS NOT
LAWFULLY PERMITTED TO RECEIVE MEDICAL MARIJUANA.

SECTION 1302. CRIMINAL DIVERSION OF MEDICAL MARIJUANA BY MEDICAL MARIJUANA ORGANIZATIONS.

IN ADDITION TO ANY OTHER PENALTY PROVIDED BY LAW, AN EMPLOYEE, FINANCIAL BACKER, OPERATOR OR PRINCIPAL OF ANY OF THE FOLLOWING COMMITS A MISDEMEANOR OF THE FIRST DEGREE IF THE PERSON INTENTIONALLY, KNOWINGLY OR RECKLESSLY SELLS, DISPENSES, TRADES, DELIVERS OR OTHERWISE PROVIDES MEDICAL MARIJUANA TO A PERSON WHO IS NOT LAWFULLY PERMITTED TO RECEIVE MEDICAL MARIJUANA:

(1) A MEDICAL MARIJUANA ORGANIZATION.

(2) A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION OR UNIVERSITY PARTICIPATING IN A RESEARCH STUDY UNDER CHAPTER 19.

(3) A CLINICAL REGISTRANT OR ACADEMIC CLINICAL RESEARCH CENTER UNDER CHAPTER 20.

(4) A LABORATORY UTILIZED TO TEST MEDICAL MARIJUANA UNDER SECTION 704.

SECTION 1303. CRIMINAL RETENTION OF MEDICAL MARIJUANA.

IN ADDITION TO ANY OTHER PENALTY PROVIDED BY LAW, A PATIENT OR CAREGIVER COMMITS A MISDEMEANOR OF THE THIRD DEGREE IF THE PATIENT OR CAREGIVER INTENTIONALLY, KNOWINGLY OR RECKLESSLY POSSESSES, STORES OR MAINTAINS AN AMOUNT OF MEDICAL MARIJUANA IN EXCESS OF THE AMOUNT LEGALLY PERMITTED.

SECTION 1304. CRIMINAL DIVERSION OF MEDICAL MARIJUANA BY PATIENT OR CAREGIVER.

(A) OFFENSE DEFINED.—IN ADDITION TO ANY OTHER PENALTY PROVIDED BY LAW, A PATIENT OR CAREGIVER COMMITS AN OFFENSE IF THE PATIENT OR CAREGIVER INTENTIONALLY, KNOWINGLY OR RECKLESSLY PROVIDES MEDICAL MARIJUANA TO A PERSON WHO IS NOT LAWFULLY PERMITTED TO RECEIVE MEDICAL MARIJUANA.
PERMITTED TO RECEIVE MEDICAL MARIJUANA.

(B) GRADING.--A FIRST OFFENSE UNDER THIS SECTION CONSTITUTES A MISDEMEANOR OF THE SECOND DEGREE. A SECOND OR SUBSEQUENT OFFENSE CONSTITUTES A MISDEMEANOR OF THE FIRST DEGREE.

SECTION 1305. FALSIFICATION OF IDENTIFICATION CARDS.

(A) OFFENSE DEFINED.--IN ADDITION TO ANY OTHER PENALTY PROVIDED BY LAW, A PERSON COMMITS AN OFFENSE IF, KNOWING HE IS NOT PRIVILEGED TO HOLD AN IDENTIFICATION CARD, THE PERSON:

(1) POSSESSES AN IDENTIFICATION CARD AND EITHER ATTEMPTS TO USE THE CARD TO OBTAIN MEDICAL MARIJUANA OR OBTAINS MEDICAL MARIJUANA;

(2) POSSESSES AN IDENTIFICATION CARD WHICH FALSELY IDENTIFIES THE PERSON AS BEING LAWFULLY ENTITLED TO RECEIVE MEDICAL MARIJUANA AND EITHER ATTEMPTS TO USE THE CARD TO OBTAIN MEDICAL MARIJUANA OR OBTAINS MEDICAL MARIJUANA; OR

(3) POSSESSES AN IDENTIFICATION CARD WHICH CONTAINS ANY FALSE INFORMATION ON THE CARD AND THE PERSON EITHER ATTEMPTS TO USE THE CARD TO OBTAIN MEDICAL MARIJUANA OR OBTAINS MEDICAL MARIJUANA.

(B) GRADING.--A FIRST OFFENSE UNDER THIS SECTION CONSTITUTES A MISDEMEANOR OF THE SECOND DEGREE. A SECOND OR SUBSEQUENT OFFENSE UNDER THIS SECTION CONSTITUTES A MISDEMEANOR OF THE FIRST DEGREE.

SECTION 1306. ADULTERATION OF MEDICAL MARIJUANA.

(A) GENERAL RULE.--IN ADDITION TO ANY OTHER PENALTY PROVIDED BY LAW, A PERSON COMMITS AN OFFENSE IF THE PERSON ADULTERATES, FORTIFIES, CONTAMINATES OR CHANGES THE CHARACTER OR PURITY OF MEDICAL MARIJUANA FROM THAT SET FORTH ON THE PATIENT'S OR CAREGIVER'S IDENTIFICATION CARD.

(B) GRADING.--A FIRST OFFENSE UNDER THIS SECTION CONSTITUTES A MISDEMEANOR OF THE SECOND DEGREE. A SECOND OR SUBSEQUENT OFFENSE UNDER THIS SECTION CONSTITUTES A MISDEMEANOR OF THE FIRST DEGREE.
A MISDEMEANOR OF THE SECOND DEGREE. A SECOND OR SUBSEQUENT OFFENSE UNDER THIS SECTION CONSTITUTES A MISDEMEANOR OF THE FIRST DEGREE.

SECTION 1307. DISCLOSURE OF INFORMATION PROHIBITED.

(A) OFFENSE DEFINED.--IN ADDITION TO ANY OTHER PENALTY PROVIDED BY LAW, AN EMPLOYEE, FINANCIAL BACKER, OPERATOR OR PRINCIPAL OF ANY OF THE FOLLOWING Commits a MISDEMEANOR OF THE THIRD DEGREE IF THE PERSON DISCLOSES, EXCEPT TO AUTHORIZED PERSONS FOR OFFICIAL GOVERNMENTAL OR HEALTH CARE PURPOSES, ANY INFORMATION RELATED TO THE USE OF MEDICAL MARIJUANA:

(1) A MEDICAL MARIJUANA ORGANIZATION.

(2) A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION OR UNIVERSITY PARTICIPATING IN A RESEARCH STUDY UNDER CHAPTER 19.

(3) A CLINICAL REGISTRANT OR ACADEMIC CLINICAL RESEARCH CENTER UNDER CHAPTER 20.

(4) AN EMPLOYEE OF THE DEPARTMENT.

(B) EXCEPTION.--SUBSECTION (A) SHALL NOT APPLY WHERE DISCLOSURE IS PERMITTED OR REQUIRED BY LAW OR BY COURT ORDER.

SECTION 1308. ADDITIONAL PENALTIES.

(A) CRIMINAL PENALTIES.--IN ADDITION TO ANY OTHER PENALTY PROVIDED BY LAW, A PRACTITIONER, CAREGIVER, PATIENT, EMPLOYEE, FINANCIAL BACKER, OPERATOR OR PRINCIPAL OF ANY MEDICAL MARIJUANA ORGANIZATION, HEALTH CARE MEDICAL ORGANIZATION OR UNIVERSITY PARTICIPATING IN A RESEARCH STUDY UNDER CHAPTER 19, AND AN EMPLOYEE, FINANCIAL BACKER, OPERATOR OR PRINCIPAL OF A CLINICAL REGISTRANT OR ACADEMIC CLINICAL RESEARCH CENTER UNDER CHAPTER 20, WHO VIOLATES ANY OF THE PROVISIONS OF THIS ACT, OTHER THAN THOSE SPECIFIED IN SECTION 1301, 1302, 1303, 1304, 1305, 1306 OR 1307, OR ANY REGULATION PROMULGATED UNDER THIS ACT:
(1) For a first offense, commits a misdemeanor of the third degree and shall, upon conviction, be sentenced to pay a fine of not more than $5,000, or to imprisonment for not more than six months.

(2) For a second or subsequent offense, commits a misdemeanor of the third degree and shall, upon conviction, be sentenced to pay a fine of not more than $10,000, or to imprisonment for not less than six months or more than one year, or both.

(B) Civil penalties.--In addition to any other remedy available to the department, the department may assess a civil penalty for a violation of this act, a regulation promulgated under this act or an order issued under this act or regulation as provided in this subsection. The following shall apply:

(1) The department may assess a penalty of not more than $10,000 for each violation and an additional penalty of not more than $1,000 for each day of a continuing violation. In determining the amount of each penalty, the department shall take the following factors into consideration:

   (I) The gravity of the violation.

   (II) The potential harm resulting from the violation to patients, caregivers or the general public.

   (III) The willfulness of the violation.

   (IV) Previous violations, if any, by the person being assessed.

   (V) The economic benefit to the person being assessed for failing to comply with the requirements of this act, a regulation promulgated under this act or an order issued under this act or regulation.

(2) If the department finds that the violation did not
THREATEN THE SAFETY OR HEALTH OF A PATIENT, CAREGIVER OR THE
GENERAL PUBLIC AND THE VIOLATOR TOOK IMMEDIATE ACTION TO
REMEDY THE VIOLATION UPON LEARNING OF IT, THE DEPARTMENT MAY
ISSUE A WRITTEN WARNING IN LIEU OF ASSESSING A CIVIL PENALTY.

(3) A PERSON WHO AIDS, ABETS, COUNSELS, INDUCES,
PROCURES OR CAUSES ANOTHER PERSON TO VIOLATE THIS ACT, A
REGULATION PROMULGATED UNDER THIS ACT OR AN ORDER ISSUED
UNDER THIS ACT OR REGULATION SHALL BE SUBJECT TO THE CIVIL
PENALTIES PROVIDED UNDER THIS SUBSECTION.

(C) SANCTIONS.--

(1) IN ADDITION TO THE PENALTIES PROVIDED IN SUBSECTION
(B) AND ANY OTHER PENALTY AUTHORIZED BY LAW, THE DEPARTMENT
MAY IMPOSE THE FOLLOWING SANCTIONS:

(I) REVOKE OR SUSPEND THE PERMIT OF A PERSON FOUND
TO BE IN VIOLATION OF THIS ACT, A REGULATION PROMULGATED
UNDER THIS ACT OR AN ORDER ISSUED UNDER THIS ACT OR
REGULATION.

(II) REVOKE OR SUSPEND THE PERMIT OF A PERSON FOR
CONDUCT OR ACTIVITY OR THE OCCURRENCE OF AN EVENT THAT
WOULD HAVE DISQUALIFIED THE PERSON FROM RECEIVING THE
PERMIT.

(III) REVOKE OR SUSPEND THE REGISTRATION OF A
PRACTITIONER FOR A VIOLATION OF THIS ACT OR A REGULATION
PROMULGATED OR AN ORDER ISSUED UNDER THIS ACT OR FOR
CONDUCT OR ACTIVITY WHICH WOULD HAVE DISQUALIFIED THE
PRACTITIONER FROM RECEIVING A REGISTRATION.

(IV) SUSPEND A PERMIT OR REGISTRATION OF A PERSON
PENDING THE OUTCOME OF A HEARING IN A CASE IN WHICH THE
PERMIT OR REGISTRATION COULD BE REVOKED.

(V) ORDER RESTITUTION OF FUNDS OR PROPERTY
UNLAWFULLY OBTAINED OR RETAINED BY A PERMITTEE OR
REGISTRANT.

(VI) ISSUE A CEASE AND DESIST ORDER.

(2) A PERSON WHO AIDS, ABETS, COUNSELS, INDUCES,
PROCURES OR CAUSES ANOTHER PERSON TO VIOLATE THIS ACT SHALL
BE SUBJECT TO THE SANCTIONS PROVIDED UNDER THIS SUBSECTION.
(D) COSTS OF ACTION.--THE DEPARTMENT MAY ASSESS AGAINST A
PERSON DETERMINED TO BE IN VIOLATION OF THIS ACT THE COSTS OF
INVESTIGATION OF THE VIOLATION.
(E) MINOR VIOLATIONS.--NOTHING IN THIS SECTION SHALL BE
CONSTRUED TO REQUIRE THE ASSESSMENT OF A CIVIL PENALTY OR THE
IMPOSITION OF A SANCTION FOR A MINOR VIOLATION OF THIS ACT IF
THE DEPARTMENT DETERMINES THAT THE PUBLIC INTEREST WILL BE
ADEQUATELY SERVED UNDER THE CIRCUMSTANCES BY THE ISSUANCE OF A
WRITTEN WARNING.

SECTION 1309. OTHER RESTRICTIONS.

This Act does not permit any person to engage in and does not
prevent the imposition of any civil, criminal or other penalty
for the following:

(1) Undertaking any task under the influence of medical
marijuana when doing so would constitute negligence,
professional malpractice or professional misconduct.
(2) Possessing or using medical marijuana in a state or
county correctional facility, including a facility owned or
operated or under contract with the Department of Corrections
or the county which houses inmates serving a portion of their
sentences on parole or other community correction program.
Nothing in this paragraph shall be construed to apply to
employees of the facilities set forth in this paragraph. The
Department of Corrections shall adopt a written policy no
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LATER THAN 18 MONTHS FROM THE EFFECTIVE DATE OF THIS SECTION REGARDING THE POSSESSION AND USE OF MEDICAL MARIJUANA BY EMPLOYEES IN STATE CORRECTIONAL FACILITIES. THE GOVERNING AUTHORITY OF A COUNTY MAY ADOPT A RESOLUTION NO LATER THAN 18 MONTHS FROM THE EFFECTIVE DATE OF THIS SECTION REGARDING THE POSSESSION AND USE OF MEDICAL MARIJUANA BY EMPLOYEES IN A COUNTY CORRECTIONAL FACILITY.

(3) POSSESSING OR USING MEDICAL MARIJUANA IN A YOUTH DETENTION CENTER OR OTHER FACILITY WHICH HOUSES CHILDREN ADJUDICATED DELINQUENT, INCLUDING THE SEPARATE, SECURE STATE-OWNED FACILITY OR UNIT UTILIZED FOR SEXUALLY VIOLENT DELINQUENT CHILDREN UNDER 42 PA.C.S. § 6404 (RELATING TO DURATION OF INPATIENT COMMITMENT AND REVIEW). AS USED IN THIS PARAGRAPH, THE TERM "SEXUALLY VIOLENT DELINQUENT CHILDREN" SHALL HAVE THE MEANING GIVEN TO IT IN 42 PA.C.S. § 6402 (RELATING TO DEFINITIONS). NOTHING IN THIS PARAGRAPH SHALL BE CONSTRUED TO APPLY TO EMPLOYEES OF THE FACILITIES SET FORTH IN THIS PARAGRAPH.

CHAPTER 19

RESEARCH PROGRAM

SECTION 1901. DEFINITIONS.

THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS CHAPTER SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE CONTEXT CLEARLY INDICATES OTHERWISE:

"HEALTH CARE MEDICAL MARIJUANA ORGANIZATION." A VERTICALLY INTEGRATED HEALTH SYSTEM APPROVED BY THE DEPARTMENT TO DISPENSE MEDICAL MARIJUANA OR GROW AND PROCESS MEDICAL MARIJUANA, OR BOTH, IN ACCORDANCE WITH A RESEARCH STUDY UNDER THIS CHAPTER.

"VERTICALLY INTEGRATED HEALTH SYSTEM." A HEALTH DELIVERY SYSTEM LICENSED UNDER THE ACT OF JULY 19, 1979 (P.L.130, NO.48), 20150SB0003PN1690
KNOWN AS THE HEALTH CARE FACILITIES ACT, IN WHICH THE COMPLETE
SPECTRUM OF CARE, INCLUDING PRIMARY AND SPECIALTY CARE,
HOSPITALIZATION AND PHARMACEUTICAL CARE, IS PROVIDED WITHIN A
SINGLE ORGANIZATION.

SECTION 1902. ESTABLISHMENT OF MEDICAL MARIJUANA RESEARCH
PROGRAM.

(A) PROGRAM TO BE ESTABLISHED.—THE DEPARTMENT SHALL
ESTABLISH AND DEVELOP A RESEARCH PROGRAM TO STUDY THE IMPACT OF
MEDICAL MARIJUANA ON THE TREATMENT AND SYMPTOM MANAGEMENT OF
SERIOUS MEDICAL CONDITIONS. THE PROGRAM SHALL NOT INCLUDE A
CLINICAL REGISTRANT OR ACADEMIC CLINICAL RESEARCH CENTER UNDER
CHAPTER 20.

(B) DEPARTMENT DUTIES.—THE DEPARTMENT SHALL:

(1) REVIEW ALL SERIOUS MEDICAL CONDITIONS WHICH ARE
CITED BY A PRACTITIONER UPON THE PRACTITIONER'S CERTIFICATION
THAT A PATIENT BE GRANTED AN IDENTIFICATION CARD.

(2) CREATE A DATABASE OF ALL SERIOUS MEDICAL CONDITIONS,
INCLUDING COMORBIDITIES, WHICH ARE CITED BY PRACTITIONERS IN
THE CERTIFICATIONS OF PATIENTS. THE DATABASE SHALL ALSO
INCLUDE THE FORM OF MEDICAL MARIJUANA CERTIFIED TO TREAT EACH
SERIOUS MEDICAL CONDITION.

(3) WHEN THE DATABASE CONTAINS 25 OR MORE PATIENTS WITH
THE SAME SERIOUS MEDICAL CONDITION, PETITION THE UNITED
STATES FOOD AND DRUG ADMINISTRATION AND THE UNITED STATES
DRUG ENFORCEMENT ADMINISTRATION FOR APPROVAL TO STUDY THE
CONDITION AND THE IMPACT OF MEDICAL MARIJUANA ON THE
CONDITION.

(4) CONCURRENT WITH THE REQUEST TO THE UNITED STATES
FOOD AND DRUG ADMINISTRATION AND UNITED STATES DRUG
ENFORCEMENT ADMINISTRATION, PUBLICLY ANNOUNCE THE FORMATION
OF A RESEARCH STUDY TO WHICH A VERTICALLY INTEGRATED HEALTH
SYSTEM AND A UNIVERSITY WITHIN THIS COMMONWEALTH MAY SUBMIT A
REQUEST TO PARTICIPATE.

(5) UPON APPROVAL OF A RESEARCH STUDY BY THE UNITED
STATES FOOD AND DRUG ADMINISTRATION AND THE UNITED STATES
DRUG ENFORCEMENT ADMINISTRATION, SELECT A VERTICALLY
INTEGRATED HEALTH SYSTEM OR SYSTEMS TO CONDUCT THE RESEARCH
STUDY AND DESIGNATE THE FORM OR FORMS OF MEDICAL MARIJUANA
WHICH WILL BE USED TO TREAT THE SERIOUS MEDICAL CONDITION.

(6) NOTIFY A PATIENT WHO HAS BEEN ISSUED AN
IDENTIFICATION CARD:

(I) THAT THE PATIENT HAS BEEN SELECTED TO
PARTICIPATE, AT THE PATIENT'S OPTION, IN A RESEARCH STUDY
TO STUDY MEDICAL MARIJUANA AS A TREATMENT; AND

(II) WHERE THE PATIENT MAY SECURE MEDICAL MARIJUANA
THROUGH A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION AT
NO COST TO THE PATIENT IN ACCORDANCE WITH SUBSECTION (C).

(7) IF THE UNITED STATES FOOD AND DRUG ADMINISTRATION
AND THE UNITED STATES DRUG ENFORCEMENT ADMINISTRATION REJECT
THE PROPOSAL FOR THE RESEARCH STUDY, TAKE ALL REASONABLE
STEPS TO COLLECT AND COLLATE DATA ON THE SERIOUS MEDICAL
CONDITION AND THE USE OF MEDICAL MARIJUANA AS A TREATMENT FOR
THE SERIOUS MEDICAL CONDITION AND CONSIDER SUBMITTING AN
ADDITIONAL REQUEST TO THE UNITED STATES FOOD AND DRUG
ADMINISTRATION AND UNITED STATES DRUG ENFORCEMENT
ADMINISTRATION FOR A RESEARCH STUDY ON THE SAME CONDITION.

(C) COSTS.--THE COST OF THE MEDICAL MARIJUANA WHICH IS
DISPENSED TO PATIENTS IN ACCORDANCE WITH AN APPROVED RESEARCH
STUDY SHALL BE PAID FOR BY THE FUND.

(D) GEOGRAPHIC ACCESSIBILITY.--THE DEPARTMENT SHALL TAKE
INTO CONSIDERATION THE GEOGRAPHIC LOCATION OF THE HEALTH CARE
MEDICAL MARIJUANA ORGANIZATION WHEN ASSIGNING A PATIENT TO A
HEALTH CARE MEDICAL MARIJUANA ORGANIZATION. THE DEPARTMENT SHALL
MAKE AN EFFORT TO ASSIGN A PATIENT TO A HEALTH CARE MEDICAL
MARIJUANA ORGANIZATION THAT IS LOCATED WITHIN 50 MILES OF THE
PATIENT'S RESIDENCE.

(E) DATA.--DATA COLLECTED BY THE HEALTH CARE MEDICAL
MARIJUANA ORGANIZATION SHALL BE PROVIDED TO THE UNIVERSITY
PARTICIPATING IN THE RESEARCH STUDY FOR ANALYSIS.

SECTION 1903. MEDICAL MARIJUANA RESEARCH PROGRAM
_ADMINISTRATION._

(A) GENERAL RULE.--THE DEPARTMENT SHALL ESTABLISH A RESEARCH
STUDY FOR EACH SERIOUS MEDICAL CONDITION. THE DEPARTMENT SHALL
ENGAGE UNIVERSITIES WITHIN THIS COMMONWEALTH TO PARTICIPATE IN
THE COLLECTION, COLLATION, ANALYSIS AND CONCLUSIVE FINDINGS OF
THE RESEARCH STUDIES. THE DEPARTMENT SHALL, BY REGULATION,
ESTABLISH THE PROCEDURE TO BE USED BY HEALTH CARE MEDICAL
MARIJUANA ORGANIZATIONS WITH RESPECT TO:

(1) REAL TIME INVENTORY TRACKING.

(2) REAL TIME TRACKING OF THE MEDICAL MARIJUANA
DISPENSED.

(3) RECALL OF DEFECTIVE MEDICAL MARIJUANA.

(B) REQUEST FOR DISTRIBUTIONS.--THE DEPARTMENT SHALL
ESTABLISH A FORM AND PROCEDURE FOR UNIVERSITIES SELECTED TO
PARTICIPATE IN A RESEARCH STUDY TO REQUEST DISTRIBUTIONS FROM
THE FUND TO CONDUCT RESEARCH ON MEDICAL MARIJUANA, INCLUDING
ADMINISTRATIVE COSTS. THESE DISTRIBUTIONS SHALL ALSO BE USED TO
PAY FOR THE COST OF THE MEDICAL MARIJUANA SO THAT IT IS NOT
BORNE BY THE PATIENT PARTICIPATING IN THE RESEARCH STUDY. THE
FORMS SHALL INCLUDE, AT A MINIMUM, THE FOLLOWING:
(1) THE FORM OR FORMS OF MEDICAL MARIJUANA TO BE STUDIED.
(2) THE SERIOUS MEDICAL CONDITION TO BE STUDIED.
(C) RESEARCH REPORTS.--
(1) A VERTICALLY INTEGRATED HEALTH SYSTEM SHALL REPORT ON THE EFFECTIVENESS OF THE USE OF MEDICAL MARIJUANA FOR THE TREATMENT OF THE SERIOUS MEDICAL CONDITION STUDIED AND ALL COUNTERINDICATIONS AND NOTED SIDE EFFECTS.
(2) THE DEPARTMENT SHALL NOTIFY THE VERTICALLY INTEGRATED HEALTH SYSTEM AND THE UNIVERSITY PARTICIPATING IN THE RESEARCH STUDY OF THE DATA WHICH IS REQUIRED TO MEET THE UNITED STATES FOOD AND DRUG ADMINISTRATION'S AND THE UNITED STATES DRUG ENFORCEMENT ADMINISTRATION'S APPROVAL FOR THE RESEARCH STUDY.
(3) THE FIRST REPORT, INCLUDING THE DATA REQUIRED UNDER PARAGRAPH (2), SHALL BE SUBMITTED TO THE DEPARTMENT AND MADE PUBLICLY AVAILABLE WITHIN 180 DAYS OF THE INITIATION OF A RESEARCH STUDY FOR A SPECIFIC SERIOUS MEDICAL CONDITION.
(4) AN ANNUAL REPORT OF THE DATA REQUIRED UNDER PARAGRAPH (2) SHALL BE SUBMITTED TO THE DEPARTMENT BEGINNING ONE YEAR AFTER THE INITIATION OF A RESEARCH STUDY FOR A SPECIFIC SERIOUS MEDICAL CONDITION AND EACH YEAR THEREAFTER.

SECTION 1904. APPROVAL.
A VERTICALLY INTEGRATED HEALTH SYSTEM LOCATED IN THIS COMMONWEALTH MAY PETITION THE DEPARTMENT TO PARTICIPATE IN A RESEARCH STUDY TO STUDY A SERIOUS MEDICAL CONDITION UNDER SECTION 1903. APPROVAL OF THE VERTICALLY INTEGRATED HEALTH SYSTEM AS A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION BY THE DEPARTMENT SHALL AUTHORIZE ACCESS WITHIN A REGION UNDER SECTION 603(D) TO MEDICAL MARIJUANA FOR ALL PATIENTS INCLUDED IN AN
APPROVED RESEARCH STUDY.

SECTION 1905. REQUIREMENTS.

(A) DISPENSING.—A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION THAT DISPENSES MEDICAL MARIJUANA SHALL:

(1) MAINTAIN LICENSURE WITH THE DEPARTMENT AS REQUIRED UNDER THE ACT OF JULY 19, 1979 (P.L.130, NO.48), KNOWN AS THE HEALTH CARE FACILITIES ACT.

(2) SECURE THE MEDICAL MARIJUANA WITHIN THE ASSOCIATED PHARMACIES OF THE HEALTH CARE MEDICAL MARIJUANA ORGANIZATION IN A MANNER AND METHOD PRESCRIBED BY THE DEPARTMENT.

(3) KEEP A DAILY LOG OF THE MEDICAL MARIJUANA DISPENSED AND THE RESEARCH STUDY WITH WHICH THE PATIENT AND THE MEDICAL MARIJUANA ARE ASSOCIATED. REPORTS SHALL BE DELIVERED TO THE DEPARTMENT AND THE UNIVERSITY PARTICIPATING IN THE RESEARCH STUDY ON A WEEKLY BASIS.

(4) REPORT TO THE PENNSYLVANIA HEALTH CARE COST CONTAINMENT COUNCIL THE UTILIZATION RATES OF THOSE PATIENTS PARTICIPATING IN THE RESEARCH OF MEDICAL MARIJUANA AND TREATMENT OPTIONS.

(5) ONLY DISPENSE MEDICAL MARIJUANA RECEIVED FROM A GROWER/PROCESSOR OR A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION THAT IS APPROVED TO GROW AND PROCESS MEDICAL MARIJUANA.

(6) PROVIDE ALL PATIENTS OR CAREGIVERS WITH THE SAFETY INSERT, PREPARED BY THE DEPARTMENT, WHICH INCLUDES POTENTIAL DANGERS, RECOGNITION AND CORRECTION OF PROBLEMATIC DOSAGE AND ANY OTHER INFORMATION REQUIRED BY THE DEPARTMENT OR WHICH THE DEPARTMENT DEEMS RELEVANT FOR PATIENT SAFETY.

(B) GROWING AND PROCESSING.—A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION THAT GROWS AND PROCESSES MEDICAL MARIJUANA SHALL:

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(1) MAINTAIN LICENSURE WITH THE DEPARTMENT AS REQUIRED UNDER THE HEALTH CARE FACILITIES ACT.

(2) ONLY MAKE AVAILABLE MEDICAL MARIJUANA TO HEALTH CARE MEDICAL MARIJUANA ORGANIZATIONS THAT DISPENSE MEDICAL MARIJUANA.

(3) KEEP A DAILY LOG OF MEDICAL MARIJUANA INTENDED FOR ULTME USE BY PATIENTS PARTICIPATING IN A RESEARCH STUDY.

SECTION 1906. RESTRICTIONS.

A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION MAY NOT PARTICIPATE IN A RESEARCH STUDY OF ANY KIND, INCLUDING THE PROGRAM ESTABLISHED UNDER THIS CHAPTER, OR DISPENSE OR GROW AND PROCESS MEDICAL MARIJUANA IF IT HAS VIOLATED ITS LICENSURE REQUIREMENTS UNDER THE HEALTH CARE FACILITIES ACT.

SECTION 1907. REGULATIONS.

THE DEPARTMENT SHALL, BY REGULATION, ESTABLISH THE PROCEDURE TO BE USED BY A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION THAT GROWS AND PROCESSES MEDICAL MARIJUANA WITH RESPECT TO:

(1) REAL TIME INVENTORY TRACKING, INCLUDING A SEED-TO-DISPENSING TRACKING SYSTEM THAT TRACKS MEDICAL MARIJUANA FROM SEED OR IMMATURE PLANT STAGE UNTIL THE MEDICAL MARIJUANA IS PROVIDED TO A PATIENT IN A RESEARCH STUDY.

(2) SECURITY, RECORDKEEPING, RECORD RETENTION AND SURVEILLANCE SYSTEMS RELATING TO EVERY STAGE OF GROWING AND PROCESSING MEDICAL MARIJUANA.

(3) A DAILY LOG OF EACH DAY’S BEGINNING INVENTORY, ACQUISITIONS, DISBURSEMENTS, DISPOSALS AND ENDING INVENTORY.

(4) A SYSTEM TO RECALL DEFECTIVE MEDICAL MARIJUANA.

(5) A SYSTEM TO TRACK THE PLANT WASTE RESULTING FROM THE GROWTH OF MEDICAL MARIJUANA.

(6) TESTING OF MEDICAL MARIJUANA BY AN INDEPENDENT
LABORATORY TO TEST THE MEDICAL MARIJUANA PRODUCED BY THE
HEALTH CARE MEDICAL MARIJUANA ORGANIZATION, INCLUDING
REQUIRING A TEST AT HARVEST AND A TEST AT FINAL PROCESSING.
(7) ANY OTHER PROCEDURE DEEMED NECESSARY BY THE
DEPARTMENT.

SECTION 1908. NONENTITLEMENT.
NOTHING IN THIS CHAPTER SHALL BE CONSTRUED TO CREATE AN
ENTITLEMENT OR RIGHT OF A PATIENT TO RECEIVE MEDICAL MARIJUANA
OR TO PARTICIPATE IN A RESEARCH STUDY.

CHAPTER 20

ACADEMIC CLINICAL RESEARCH CENTERS

SECTION 2001. DEFINITIONS.
THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS CHAPTER
SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
CONTEXT CLEARLY INDICATES OTHERWISE:
"ACADEMIC CLINICAL RESEARCH CENTER." AN ACCREDITED MEDICAL
SCHOOL WITHIN THIS COMMONWEALTH THAT OPERATES OR PARTNERS WITH
AN ACUTE CARE HOSPITAL LICENSED WITHIN THIS COMMONWEALTH.
"CLINICAL REGISTRANT." AN ENTITY THAT:
(1) HOLDS A PERMIT AS BOTH A GROWER/PROCESSOR AND A
DISPENSARY; AND
(2) HAS A CONTRACTUAL RELATIONSHIP WITH AN ACADEMIC
CLINICAL RESEARCH CENTER UNDER WHICH THE ACADEMIC CLINICAL
RESEARCH CENTER OR ITS AFFILIATE PROVIDES ADVICE TO THE
ENTITY, REGARDING, AMONG OTHER AREAS, PATIENT HEALTH AND
SAFETY, MEDICAL APPLICATIONS AND DISPENSING AND MANAGEMENT OF
CONTROLLED SUBSTANCES.

SECTION 2002. CLINICAL REGISTRANTS.
NOTWITHSTANDING THE LIMITATIONS IN SECTION 616, THE
DEPARTMENT MAY REGISTER UP TO EIGHT CLINICAL REGISTRANTS. EACH
ENTITY MAY PROVIDE MEDICAL MARIJUANA AT NOT MORE THAN SIX
SEPARATE LOCATIONS. THE TOTAL NUMBER OF LOCATIONS AUTHORIZED TO
DISPENSE MEDICAL MARIJUANA UNDER THIS SECTION SHALL NOT EXCEED
48. THE FOLLOWING APPLY WITH RESPECT TO THIS CATEGORY OF
CLINICAL REGISTRANT:

(1) A CLINICAL REGISTRANT MUST PAY THE FEES AND MEET ALL
OTHER REQUIREMENTS UNDER THIS ACT FOR OBTAINING A PERMIT AS A
GROWER/PROCESSOR AND A DISPENSARY, EXCEPT AS PROVIDED UNDER <--
SECTION 607(1)(VI) AND (2)(VI).

(2) THE CLINICAL REGISTRANT MUST HAVE A MINIMUM OF
$15,000,000 IN CAPITAL. THE DEPARTMENT SHALL VERIFY THE
CAPITAL REQUIREMENT.

(3) THE CLINICAL REGISTRANT MUST COMPLY WITH ALL OTHER
REQUIREMENTS OF THIS ACT REGARDING GROWING, PROCESSING AND
DISPENSING MEDICAL MARIJUANA.

SECTION 2003. RESEARCH STUDY.

NOTWITHSTANDING ANY PROVISION OF THIS ACT TO THE CONTRARY,
THE DEPARTMENT MAY, UPON APPLICATION, APPROVE THE DISPENSING OF
MEDICAL MARIJUANA BY A CLINICAL REGISTRANT TO THE ACADEMIC
CLINICAL RESEARCH CENTER FOR THE PURPOSE OF CONDUCTING A
RESEARCH STUDY. THE DEPARTMENT SHALL DEVELOP THE APPLICATION AND
STANDARDS FOR APPROVAL OF SUCH DISPENSING BY THE CLINICAL
REGISTRANT. THE FOLLOWING APPLY TO THE RESEARCH STUDY:

(1) THE CLINICAL REGISTRANT SHALL DISCLOSE THE FOLLOWING
INFORMATION TO THE DEPARTMENT IN ITS APPLICATION:

(I) THE REASON FOR THE RESEARCH PROJECT, INCLUDING
THE REASON FOR THE TRIAL.

(II) THE STRAIN OF MEDICAL MARIJUANA TO BE USED AND
THE STRENGTH OF THE MEDICAL MARIJUANA TO BE USED IN THE
RESEARCH STUDY.
(III) The anticipated duration of the study.

(IV) Evidence of approval of the trial by an accredited institutional review board, including any other required regulatory approvals.

(V) Other information required by the department, except that the department may not require disclosure of any information that would infringe upon the academic clinical research center's exclusive right to intellectual property or legal obligations for patient confidentiality.

(2) The academic clinical research center shall provide its findings to the department within 365 days of the conclusion of the research study or within 365 days of publication of the results of the research study in a peer-reviewed medical journal, whichever is later.

(3) The department shall allow the exchange of medical marijuana seed between clinical registrants for the conduct of research.

CHAPTER 21
MISCELLANEOUS PROVISIONS

SECTION 2101. CONFLICT.

The growth, processing, manufacture, acquisition, transportation, sale, dispensing, distribution, possession and consumption of medical marijuana permitted under this act shall not be deemed to be a violation of the act of April 14, 1972 (P.L.233, No.64), known as the controlled substance, drug, device and cosmetic act. If a provision of the controlled substance, drug, device and cosmetic act relating to marijuana conflicts with a provision of this act, this act shall take precedence.
SECTION 2101.1. FINANCIAL AND EMPLOYMENT INTERESTS.

(A) FINANCIAL INTERESTS.--EXCEPT AS MAY BE PROVIDED FOR THE JUDICIARY BY RULE OR ORDER OF THE PENNSYLVANIA SUPREME COURT, AN EXECUTIVE-LEVEL PUBLIC EMPLOYEE, PUBLIC OFFICIAL OR PARTY OFFICER, OR AN IMMEDIATE FAMILY MEMBER THEREOF, SHALL NOT INTENTIONALLY OR KNOWINGLY HOLD A FINANCIAL INTEREST IN A MEDICAL MARIJUANA ORGANIZATION OR IN A HOLDING COMPANY, AFFILIATE, INTERMEDIARY OR SUBSIDIARY THEREOF, WHILE THE INDIVIDUAL IS AN EXECUTIVE-LEVEL PUBLIC EMPLOYEE, PUBLIC OFFICIAL OR PARTY OFFICER AND FOR ONE YEAR FOLLOWING TERMINATION OF THE INDIVIDUAL'S STATUS AS AN EXECUTIVE-LEVEL PUBLIC EMPLOYEE, PUBLIC OFFICIAL OR PARTY OFFICER.

(B) EMPLOYMENT.--EXCEPT AS MAY BE PROVIDED BY RULE OR ORDER OF THE PENNSYLVANIA SUPREME COURT, NO EXECUTIVE-LEVEL PUBLIC EMPLOYEE, PUBLIC OFFICIAL OR PARTY OFFICER, OR AN IMMEDIATE FAMILY MEMBER THEREOF, SHALL BE EMPLOYED BY A MEDICAL MARIJUANA ORGANIZATION OR BY ANY HOLDING COMPANY, AFFILIATE, INTERMEDIARY OR SUBSIDIARY THEREOF, WHILE THE INDIVIDUAL IS AN EXECUTIVE-LEVEL PUBLIC EMPLOYEE, PUBLIC OFFICIAL OR PARTY OFFICER AND FOR ONE YEAR FOLLOWING TERMINATION OF THE INDIVIDUAL'S STATUS AS AN EXECUTIVE-LEVEL PUBLIC EMPLOYEE, PUBLIC OFFICIAL OR PARTY OFFICER.

(C) GRADING.--AN INDIVIDUAL WHO VIOLATES THIS SECTION Commits a misdemeanor and shall, upon conviction, be sentenced to pay a fine of not more than $1,000 or to imprisonment for not more than one year, or both.

(D) STATE ETHICS COMMISSION.--THE STATE ETHICS COMMISSION SHALL DO ALL OF THE FOLLOWING:

(1) ISSUE A WRITTEN DETERMINATION OF WHETHER A PERSON IS SUBJECT TO SUBSECTIONS (A) OR (B) UPON THE WRITTEN REQUEST OF
THE PERSON OR ANY OTHER PERSON THAT MAY HAVE LIABILITY FOR AN
ACTION TAKEN WITH RESPECT TO SUCH PERSON. A PERSON THAT
RELIES IN GOOD FAITH ON A DETERMINATION MADE UNDER THIS
PARAGRAPH SHALL NOT BE SUBJECT TO ANY PENALTY FOR AN ACTION
TAKEN, PROVIDED THAT ALL MATERIAL FACTS SET FORTH IN THE
REQUEST FOR THE DETERMINATION ARE CORRECT.

(2) PUBLISH A LIST OF ALL STATE, COUNTY, MUNICIPAL AND
OTHER GOVERNMENT POSITIONS THAT MEET THE DEFINITIONS OF
"PUBLIC OFFICIAL" OR "EXECUTIVE-LEVEL PUBLIC EMPLOYEE" AS
DEFINED UNDER 4 PA.C.S. § 1512(B) (RELATING TO FINANCIAL AND
EMPLOYMENT INTERESTS). THE OFFICE OF ADMINISTRATION SHALL
ASSIST THE STATE ETHICS COMMISSION IN THE DEVELOPMENT OF THE
LIST, WHICH SHALL BE PUBLISHED BY THE STATE ETHICS COMMISSION
IN THE PENNSYLVANIA BULLETIN BIENNIALY AND POSTED BY THE
DEPARTMENT ON THE DEPARTMENT'S INTERNET WEBSITE. UPON
REQUEST, EACH PUBLIC OFFICIAL SHALL HAVE A DUTY TO PROVIDE
THE STATE ETHICS COMMISSION WITH ADEQUATE INFORMATION TO
ACCURATELY DEVELOP AND MAINTAIN THE LIST. THE STATE ETHICS
COMMISSION MAY IMPOSE A CIVIL PENALTY UNDER 65 PA.C.S. §
1109(F) (RELATING TO PENALTIES) UPON ANY INDIVIDUAL,
INCLUDING ANY PUBLIC OFFICIAL OR EXECUTIVE-LEVEL PUBLIC
EMPLOYEE, WHO FAILS TO COOPERATE WITH THE STATE ETHICS
COMMISSION UNDER THIS SUBSECTION. A PERSON THAT RELIES IN
GOOD FAITH ON THE LIST PUBLISHED BY THE STATE ETHICS
COMMISSION SHALL NOT BE SUBJECT TO ANY PENALTY FOR A
VIOLATION OF THIS SECTION.

(E) DEFINITIONS.—AS USED IN THIS SECTION, THE FOLLOWING
WORDS AND PHRASES SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS
SUBSECTION:

"FINANCIAL INTEREST." AS DEFINED IN 4 PA.C.S. § 1512(B)
(RELATING TO FINANCIAL AND EMPLOYMENT INTERESTS).

"IMMEDIATE FAMILY." AS DEFINED IN 4 PA.C.S. § 1512(B).
"PARTY OFFICER." AS DEFINED IN 4 PA.C.S. § 1512(B).
"PUBLIC OFFICIAL." THE TERM SHALL INCLUDE THE FOLLOWING:

(1) THE GOVERNOR, LIEUTENANT GOVERNOR, A MEMBER OF THE
GOVERNOR'S CABINET, TREASURER, AUDITOR GENERAL AND ATTORNEY
GENERAL OF THE COMMONWEALTH.

(2) A MEMBER OF THE SENATE OR HOUSE OF REPRESENTATIVES
OF THE COMMONWEALTH.

(3) AN INDIVIDUAL ELECTED OR APPOINTED TO ANY OFFICE OF
A COUNTY OR MUNICIPALITY THAT DIRECTLY RECEIVES A
DISTRIBUTION OF REVENUE FROM THE FUND.

(4) AN INDIVIDUAL ELECTED OR APPOINTED TO A DEPARTMENT,
AGENCY, BOARD, COMMISSION, AUTHORITY OR OTHER GOVERNMENTAL
BODY NOT INCLUDED IN PARAGRAPH (1), (2) OR (3) THAT DIRECTLY
RECEIVES A DISTRIBUTION OF REVENUE FROM THE FUND.

(5) AN INDIVIDUAL ELECTED OR APPOINTED TO A DEPARTMENT,
AGENCY, BOARD, COMMISSION, AUTHORITY, COUNTY, MUNICIPALITY OR
OTHER GOVERNMENTAL BODY NOT INCLUDED IN PARAGRAPH (1), (2) OR
(3) WITH DISCRETIONARY POWER WHICH MAY INFLUENCE OR AFFECT
THE OUTCOME OF AN ACTION OR DECISION AND WHO IS INVOLVED IN
THE DEVELOPMENT OF REGULATION OR POLICY RELATING TO A MEDICAL
MARIJUANA ORGANIZATION OR WHO IS INVOLVED IN OTHER MATTERS
UNDER THIS ACT.

THE TERM DOES NOT INCLUDE A MEMBER OF A SCHOOL BOARD OR AN
INDIVIDUAL WHO HELD AN UNCOMPENSATED OFFICE WITH A GOVERNMENTAL
BODY PRIOR TO JANUARY 1, 2017, AND WHO NO LONGER HOLDS THE
OFFICE AS OF JANUARY 1, 2017.

SECTION 2102. INSURERS.

NOTHING IN THIS ACT SHALL BE CONSTRUED TO REQUIRE AN INSURER
OR A HEALTH PLAN, WHETHER PAID FOR BY COMMONWEALTH FUNDS OR
PRIVATE FUNDS, TO PROVIDE COVERAGE FOR MEDICAL MARIJUANA.

SECTION 2103. PROTECTIONS FOR PATIENTS AND CAREGIVERS.

(A) LICENSURE.—NONE OF THE FOLLOWING SHALL BE SUBJECT TO
ARREST, PROSECUTION OR PENALTY IN ANY MANNER, OR DENIED ANY
RIGHT OR PRIVILEGE, INCLUDING CIVIL PENALTY OR DISCIPLINARY
ACTION BY A COMMONWEALTH LICENSING BOARD OR COMMISSION, SOLELY
FOR LAWFUL USE OF MEDICAL MARIJUANA OR MANUFACTURE OR SALE OR
DISPENSING OF MEDICAL MARIJUANA, OR FOR ANY OTHER ACTION TAKEN
IN ACCORDANCE WITH THIS ACT:

(1) A PATIENT.
(2) A CAREGIVER.
(3) A PRACTITIONER.
(4) A MEDICAL MARIJUANA ORGANIZATION.
(5) A HEALTH CARE MEDICAL MARIJUANA ORGANIZATION OR
UNIVERSITY PARTICIPATING IN A RESEARCH STUDY UNDER CHAPTER
19.
(6) A CLINICAL REGISTRANT OR ACADEMIC CLINICAL RESEARCH
CENTER UNDER CHAPTER 20.
(7) AN EMPLOYEE, PRINCIPAL OR FINANCIAL BACKER OF A
MEDICAL MARIJUANA ORGANIZATION.
(8) AN EMPLOYEE OF A HEALTH CARE MEDICAL MARIJUANA
ORGANIZATION OR AN EMPLOYEE OF A UNIVERSITY PARTICIPATING IN
A RESEARCH STUDY UNDER CHAPTER 19.
(9) AN EMPLOYEE OF A CLINICAL REGISTRANT OR AN EMPLOYEE
OF AN ACADEMIC CLINICAL RESEARCH CENTER UNDER CHAPTER 20.
(10) A PHARMACIST, PHYSICIAN ASSISTANT OR CERTIFIED
REGISTERED NURSE PRACTITIONER UNDER SECTION 801(B).

(B) EMPLOYMENT.—

(1) NO EMPLOYER MAY DISCHARGE, THREATEN, REFUSE TO HIRE
OR OTHERWISE DISCRIMINATE OR RETALIATE AGAINST AN EMPLOYEE REGARDING AN EMPLOYEE'S COMPENSATION, TERMS, CONDITIONS, LOCATION OR PRIVILEGES SOLELY ON THE BASIS OF SUCH EMPLOYEE'S STATUS AS AN INDIVIDUAL WHO IS CERTIFIED TO USE MEDICAL MARIJUANA.

(2) NOTHING IN THIS ACT SHALL REQUIRE AN EMPLOYER TO MAKE ANY ACCOMMODATION OF THE USE OF MEDICAL MARIJUANA ON THE PROPERTY OR PREMISES OF ANY PLACE OF EMPLOYMENT. THIS ACT SHALL IN NO WAY LIMIT AN EMPLOYER'S ABILITY TO DISCIPLINE AN EMPLOYEE FOR BEING UNDER THE INFLUENCE OF MEDICAL MARIJUANA IN THE WORKPLACE OR FOR WORKING WHILE UNDER THE INFLUENCE OF MEDICAL MARIJUANA WHEN THE EMPLOYEE'S CONDUCT FALLS BELOW THE STANDARD OF CARE NORMALLY ACCEPTED FOR THAT POSITION.

(3) NOTHING IN THIS ACT SHALL REQUIRE AN EMPLOYER TO COMMIT ANY ACT THAT WOULD PUT THE EMPLOYER OR ANY PERSON ACTING ON ITS BEHALF IN VIOLATION OF FEDERAL LAW.

(C) CUSTODY DETERMINATION.--THE FACT THAT AN INDIVIDUAL IS CERTIFIED TO USE MEDICAL MARIJUANA AND ACTING IN ACCORDANCE WITH THIS ACT SHALL NOT BY ITSELF BE CONSIDERED BY A COURT IN A CUSTODY PROCEEDING. IN DETERMINING THE BEST INTEREST OF A CHILD WITH RESPECT TO CUSTODY, THE PROVISIONS OF 23 PA.C.S. CH. 53 (RELATING TO CHILD CUSTODY) SHALL APPLY.

SECTION 2104. SCHOOLS.

THE DEPARTMENT OF EDUCATION SHALL PROMULGATE REGULATIONS WITHIN 18 MONTHS OF THE EFFECTIVE DATE OF THIS SECTION REGARDING THE FOLLOWING:

(1) POSSESSION AND USE OF MEDICAL MARIJUANA BY A STUDENT ON THE GROUNDS OF A PRESCHOOL, PRIMARY SCHOOL AND A SECONDARY SCHOOL.

(2) POSSESSION AND USE OF MEDICAL MARIJUANA BY AN
EMPLOYEE OF A PRESCHOOL, PRIMARY SCHOOL AND A SECONDARY SCHOOL ON THE GROUNDS OF SUCH SCHOOL.

SECTION 2105. DAY-CARE CENTERS.

THE DEPARTMENT OF HUMAN SERVICES SHALL PROMULGATE REGULATIONS WITHIN 18 MONTHS OF THE EFFECTIVE DATE OF THIS SECTION REGARDING THE FOLLOWING:

(1) POSSESSION AND USE OF MEDICAL MARIJUANA BY A CHILD UNDER THE CARE OF A CHILD-CARE OR SOCIAL SERVICE CENTER LICENSED OR OPERATED BY THE DEPARTMENT OF HUMAN SERVICES.

(2) POSSESSION AND USE OF MEDICAL MARIJUANA BY AN EMPLOYEE OF A CHILD-CARE OR SOCIAL SERVICE CENTER LICENSED OR OPERATED BY THE DEPARTMENT OF HUMAN SERVICES.

(3) POSSESSION AND USE OF MEDICAL MARIJUANA BY EMPLOYEES OF A YOUTH DEVELOPMENT CENTER OR OTHER FACILITY WHICH HOUSES CHILDREN ADJUDICATED DELINQUENT, INCLUDING THE SEPARATE, SECURE STATE-OWNED FACILITY OR UNIT FOR SEXUALLY VIOLENT CHILDREN, AS SET FORTH IN SECTION 1309(3).

SECTION 2106. MEDICAL MARIJUANA FROM OTHER STATES.

(A) GENERAL RULE.--IT IS NOT A VIOLATION OF THIS ACT OR THE ACT OF APRIL 14, 1972 (P.L.233, NO.64), KNOWN AS THE CONTROLLED SUBSTANCE, DRUG, DEVICE AND COSMETIC ACT, IF A PARENT OR GUARDIAN OF A MINOR UNDER 18 YEARS OF AGE LAWFULLY OBTAINS MEDICAL MARIJUANA FROM ANOTHER STATE, TERRITORY OF THE UNITED STATES OR ANY OTHER COUNTRY TO BE ADMINISTERED TO THE MINOR.

(B) EXPIRATION.--THIS SECTION SHALL EXPIRE 730 DAYS AFTER THE EFFECTIVE DATE OF THIS SECTION.

SECTION 2107. ZONING.

THE FOLLOWING APPLY:

(1) A GROWER/PROCESSOR SHALL MEET THE SAME MUNICIPAL ZONING AND LAND USE REQUIREMENTS AS OTHER MANUFACTURING,
PROCESSING AND PRODUCTION FACILITIES THAT ARE LOCATED IN THE
SAME ZONING DISTRICT.

(2) A DISPENSARY SHALL MEET THE SAME MUNICIPAL ZONING
AND LAND USE REQUIREMENTS AS OTHER COMMERCIAL FACILITIES THAT
ARE LOCATED IN THE SAME ZONING DISTRICT.

SECTION 2108. NOTICE.

UPON AMENDMENT OF THE CONTROLLED SUBSTANCES ACT (PUBLIC LAW
91-513, 84 STAT. 1236) REMOVING MARIJUANA FROM SCHEDULE I OF THE
CONTROLLED SUBSTANCES ACT, THE DEPARTMENT SHALL PUBLISH NOTICE
OF THE EFFECTIVE DATE OF THE AMENDMENT IN THE PENNSYLVANIA
BULLETIN.

SECTION 2109. APPLICABILITY.

(A) DISPENSARIES.--THE PROVISIONS OF THIS ACT WITH RESPECT
TO DISPENSARIES SHALL NOT APPLY BEGINNING 1,095 DAYS FROM THE
EFFECTIVE DATE OF AN AMENDMENT TO THE CONTROLLED SUBSTANCES ACT
(PUBLIC LAW 91-513, 84 STAT. 1236) REMOVING MARIJUANA FROM
SCHEDULE I OF THE CONTROLLED SUBSTANCES ACT.

(B) ISSUANCE.--THE ISSUANCE OF PERMITS AND OTHER
AUTHORIZATIONS SHALL BEGIN UPON PUBLICATION OF A NOTICE BY THE
DEPARTMENT IN THE PENNSYLVANIA BULLETIN THAT ADEQUATE TEMPORARY
OR PERMANENT REGULATIONS HAVE BEEN ADOPTED TO INITIATE THE
PROGRAM UNDER THIS ACT.

SECTION 2110. EFFECTIVE DATE.

THIS ACT SHALL TAKE EFFECT IN 30 DAYS.