HB 573-FN - VERSION ADOPTED BY BOTH BODIES

20Mar2013... 0797h 05/23/13 1631s 26June2013... 2098CofC

2013 SESSION

13-0279 04/01

HOUSE BILL 573-FN

AN ACT relative to the use of cannabis for therapeutic purposes.

SPONSORS: Rep. Schlachman, Rock 18; Rep. Vaillancourt, Hills 15; Rep. Robertson, Ches 6;
Rep. Wright, Carr 8; Rep. Renzullo, Hills 37; Rep. LeBrun, Hills 32;
Rep. DeSimone, Rock 14; Rep. Kidder, Merr 5; Rep. Gale, Hills 28; Rep. Lovejoy,
Rock 36; Sen. Woodburn, Dist 1; Sen. Reagan, Dist 17; Sen. Fuller Clark, Dist 21;
Sen. Cataldo, Dist 6

COMMITTEE: Health, Human Services and Elderly Affairs

AMENDED ANALYSIS

This bill authorizes the use of therapeutic cannabis in New Hampshire.

Explanation:Matter added to current law appears in **bold italics.**
Matter removed from current law appears [in brackets and struckthrough.]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Thirteen

AN ACT relative to the use of cannabis for therapeutic purposes.

Be it Enacted by the Senate and House of Representatives in General Court convened:

CHAPTER 126-W USE OF CANNABIS FOR THERAPEUTIC PURPOSES

1 1 New Chapter; Use of Cannabis for Therapeutic Purposes. Amend RSA by inserting after 2 chapter 126-V the following new chapter:

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126-W:1 Definitions. In this chapter:

6 I. "Alternative treatment center" means a not-for-profit entity registered under RSA 126-7 W:7 that acquires, possesses, cultivates, manufactures, delivers, transfers, transports, sells, supplies, 8 and dispenses cannabis, and related supplies and educational materials, to qualifying patients and 9 alternative treatment centers.

II. "Alternative treatment center agent" means a principal officer, board member, employee,
manager, or volunteer of an alternative treatment center who is 21 years of age or older and has not
been convicted of a felony or any felony drug-related offense.

13 III. "Cannabis" means all parts of any plant of the Cannabis genus of plants, whether 14 growing or not; the seeds thereof; the resin extracted from any part of such plant; and every 15 compound, salt, derivative, mixture, or preparation of such plant, its seeds, or resin. Such term shall 16 not include the mature stalks of such plants, fiber produced from such stalks, oil, or cake made from 17 the seeds of such plants, any other compound, salt, derivative, mixture, or preparation of such 18 mature stalks (except the resin extracted therefrom), fiber, oil or cake, or the sterilized seeds of such 19 plants which are incapable of germination.

IV. "Cultivation location" means a locked and enclosed site, under the control of an alternative treatment center where cannabis is cultivated, secured with one or more locks or other security devices in accordance with the provisions of this chapter.

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V. "Department" means the department of health and human services.

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(a) Is at least 21 years of age;

VI. "Designated caregiver" means an individual who:

26 (b) Has agreed to assist with one or more (not to exceed 5) qualifying patient's 27 therapeutic use of cannabis, except if the qualifying patient and designated caregiver each live 28 greater than 50 miles from the nearest alternative treatment center, in which case the designated

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1 caregiver may assist with the therapeutic use of cannabis for up to 9 qualifying patients; $\mathbf{2}$ (c) Has never been convicted of a felony or any felony drug-related offense; and 3 (d) Possesses a valid registry identification card issued pursuant to RSA 126-W:4. VII.(a) "Provider" means a physician licensed to prescribe drugs to humans under RSA 329 4 and who possesses certification from the United States Drug Enforcement Administration to $\mathbf{5}$ prescribe controlled substances. "Provider" shall also mean an advanced practice registered nurse 6 $\overline{7}$ licensed pursuant to RSA 326-B:18. 8 (b) For a visiting qualifying patient, "provider" means an individual licensed to prescribe 9 drugs to humans in the state of the patient's residence and who possesses certification from the 10 United States Drug Enforcement Administration to prescribe controlled substances. Such visiting 11 patient shall not be eligible to purchase or transfer cannabis from an eligible New Hampshire 12patient. 13VIII. "Provider-patient relationship" means at least a 3-month medical relationship between a licensed provider and a patient that includes an in-person exam, a history, a diagnosis, and a 1415treatment plan appropriate for the licensee's medical specialty. 16IX.(a) "Qualifying medical condition" means the presence of: 17(1) Cancer, glaucoma, positive status for human immunodeficiency virus, acquired 18immune deficiency syndrome, hepatitis C currently receiving antiviral treatment, amyotrophic 19lateral sclerosis, muscular dystrophy, Crohn's disease, agitation of Alzheimer's disease, multiple 20sclerosis, chronic pancreatitis, spinal cord injury or disease, traumatic brain injury, or one or more 21injuries that significantly interferes with daily activities as documented by the patient's provider; 22and 23(2) A severely debilitating or terminal medical condition or its treatment that has produced at least one of the following: elevated intraocular pressure, cachexia, chemotherapy-2425induced anorexia, wasting syndrome, severe pain that has not responded to previously prescribed 26medication or surgical measures or for which other treatment options produced serious side effects, 27constant or severe nausea, moderate to severe vomiting, seizures, or severe, persistent muscle 28spasms. 29(b) The department may include a medical condition that is not listed in subparagraph 30 (a) that the department determines, on a case by case basis, is severely debilitating or terminal, 31based upon the written request of a provider who furnishes written certification to the department.

32 X. "Qualifying patient" means a resident of New Hampshire who has been diagnosed by a 33 provider as having a qualifying medical condition and who possesses a valid registry identification 34 card issued pursuant to RSA 126-W:4.

35 XI. "Registry identification card" means a document indicating the date issued and 36 expiration date by the department pursuant to RSA 126-W:4 that identifies an individual as a 37 qualifying patient or a designated caregiver.

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1 XII. "Seedling" means a cannabis plant that has no flowers and is less than 12 inches in 2 height and less than 12 inches in diameter.

3 XIII. "Therapeutic use" means the acquisition, possession, cultivation, preparation, use, 4 delivery, transfer, or transportation of cannabis or paraphernalia relating to the administration of 5 cannabis to treat or alleviate a qualifying patient's qualifying medical condition or symptoms or 6 results of treatment associated with the qualifying patient's qualifying medical condition. It shall 7 not include:

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(a) The use of cannabis by a designated caregiver who is not a qualifying patient; or

9 10 (b) Cultivation or purchase by a visiting qualifying patient; or

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(c) Cultivation by a designated caregiver or qualifying patient.

11 XIV. "Unusable cannabis" means any cannabis, other than usable cannabis, including the 12 seeds, stalks, and roots of the plant.

13 XV. "Usable cannabis" means the dried leaves and flowers of the cannabis plant and any 14 mixture or preparation thereof, but does not include the seeds, stalks, and roots of the plant and does 15 not include the weight of any non-cannabis ingredients combined with cannabis and prepared for 16 consumption as food or drink.

17 XVI. "Visiting qualifying patient" means a patient with a qualifying medical condition who 18 is not a resident of New Hampshire or who has been a resident of New Hampshire for fewer than 30 19 days and is not eligible to purchase therapeutic cannabis in New Hampshire or receive cannabis 20 from a qualifying New Hampshire patient.

XVII. "Written certification" means documentation of a qualifying medical condition by a 2122provider pursuant to rules adopted by the department pursuant to RSA 541-A for the purpose of 23issuing registry identification cards, after having completed a full assessment of the patient's 24medical history and current medical condition made in the course of a provider-patient relationship 25of at least 3 months in duration. The 3-month requirement for the provider-patient relationship 26required in this paragraph shall not apply if the provider issuing the written certification certifies 27that the onset of the patient's qualifying medical condition occurred within the past 3 months, and 28the certifying provider is primarily responsible for the patient's care related to his or her qualifying 29medical condition. The date of issuance and the patient's qualifying medical condition, symptoms or 30 side effects, the certifying provider's name, medical specialty, and signature shall be specified on the 31written certification.

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126-W:2 Therapeutic Use of Cannabis Protections.

I. A qualifying patient shall not be subject to arrest by state or local law enforcement, prosecution or penalty under state or municipal law, or be denied any right or privilege for the therapeutic use of cannabis in accordance with this chapter, if the qualifying patient possesses an amount of cannabis that does not exceed the following:

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(1) Two ounces of usable cannabis; and

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II. A designated caregiver shall not be subject to arrest by state or local law enforcement,

(2) Any amount of unusable cannabis.

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prosecution or penalty under state or municipal law, or denied any right or privilege for the therapeutic use of cannabis in accordance with this chapter on behalf of a qualifying patient if the designated caregiver possesses an amount of cannabis that does not exceed the following: (1) Two ounces of usable cannabis, or the total amount allowable for the number of qualifying patients for which he or she is a designated caregiver; and (2) Any amount of unusable cannabis. A designated caregiver may receive compensation for costs, not including labor, III. associated with assisting a qualifying patient who has designated the designated caregiver to assist him or her with the therapeutic use of cannabis. Such compensation shall not constitute the sale of controlled substances. IV.(a) A qualifying patient is presumed to be lawfully engaged in the therapeutic use of cannabis in accordance with this chapter if the qualifying patient possesses a valid registry identification card and possesses an amount of cannabis that does not exceed the amount allowed under this chapter. (b) A designated caregiver is presumed to be lawfully engaged in assisting with the therapeutic use of cannabis in accordance with this chapter if the designated caregiver possesses a valid registry identification card and possesses an amount of cannabis that does not exceed the amount allowed under this chapter. (c) The presumptions made in subparagraphs (a) and (b) may be rebutted by evidence that conduct related to cannabis was not for the purpose of treating or alleviating the qualifying patient's qualifying medical condition or symptoms or effects of the treatment associated with the qualifying medical condition, in accordance with this chapter.

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

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

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

36 VI. A person otherwise entitled to custody of, or visitation or parenting time with, a minor 37 shall not be denied such a right solely for conduct allowed under this chapter, and there shall be no

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1 presumption of neglect or child endangerment.

VII. For the purposes of medical care, including organ transplants, a qualifying patient's authorized use of cannabis in accordance with this chapter shall be considered the equivalent of the authorized use of any other medication used at the direction of a provider, and shall not constitute the use of an illicit substance.

6 VIII. A provider shall not be subject to arrest by state or local law enforcement, prosecution 7 or penalty under state or municipal law, or be denied any right or privilege, including but not limited 8 to a civil penalty or disciplinary action by the New Hampshire board of medicine or any other 9 occupational or professional licensing entity, solely for providing written certifications, provided that 10 nothing shall prevent a professional licensing entity from sanctioning a provider for failing to 11 properly evaluate a patient's medical condition.

12 IX. An alternative treatment center shall not be subject to prosecution under state or 13 municipal law, search, or inspection, except by the department pursuant to RSA 126-W:7, IX; 14 seizure; or penalty in any manner under state or municipal law for acting pursuant to this chapter 15 and department rules to:

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(a) Acquire or purchase cannabis seeds or seedlings;

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(b) Possess, cultivate, manufacture, or transport cannabis and seedlings; or

18 (c) Deliver, transfer, supply, sell, or dispense cannabis and related supplies and 19 educational materials to qualifying patients who have designated the alternative treatment center to 20 provide for them, to designated caregivers on behalf of the qualifying patients who have designated 21 the alternative treatment center, or to other alternative treatment centers.

22 X. An alternative treatment center agent shall not be subject to arrest by state or local law 23 enforcement, prosecution or penalty in any manner under state or municipal law, search, or be 24 denied any right or privilege for working for an alternative treatment center pursuant to this 25 chapter and department rules to engage in any of the actions listed in paragraph IX.

XI. Any cannabis, cannabis paraphernalia, licit property, or interest in licit property that is possessed, owned, or used in connection with the therapeutic use of cannabis as allowed under this chapter, or acts incidental to such use, shall not be seized or forfeited if the basis for the seizure or forfeiture is activity related to cannabis that is exempt from state criminal penalties under this chapter.

31 XII. An individual shall not be subject to arrest by state or local law enforcement, 32 prosecution or penalty under state or municipal law, or be denied any right or privilege, including 33 but not limited to a civil penalty or disciplinary action by a court or occupational or professional 34 licensing entity, simply for being in the presence or vicinity of the therapeutic use of cannabis as 35 allowed under this chapter.

36 XIII. If a state or local law enforcement officer encounters an alternative treatment center or
 37 an individual who the officer knows is an alternative treatment center agent, a designated caregiver,

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1 or a qualifying patient, or who credibly asserts he or she is an alternative treatment center agent, a $\mathbf{2}$ designated caregiver, or a qualifying patient, the law enforcement officer shall not provide any information concerning any cannabis-related activity involving the individual or entity, except 3 pursuant to a lawfully-issued subpoena, to any law enforcement agency that does not recognize the 4 protection of this chapter, and any prosecution of the individual or entity for a violation of this 56 chapter shall be conducted pursuant to the laws of this state. This paragraph shall not apply in $\overline{7}$ cases where the state or local law enforcement agency has probable cause to believe the person is 8 distributing cannabis to a person who is not allowed to possess it under this chapter. Any seizure of 9 cannabis by law enforcement officers for a violation of this chapter shall be limited to the amount of 10 cannabis in excess of the quantities permitted under this chapter and any such cannabis seized shall 11 not be returned.

12 XIV. A person who ceases to be a qualifying patient or designated caregiver shall have 10 13 days after notification by the department to dispose of cannabis in one of the following ways:

(a) If the person was a designated caregiver and the qualifying patient who designated
the caregiver is still a qualifying patient, but has designated a new caregiver, the designated
caregiver may transfer cannabis to the new designated caregiver;

17 (b) The person may notify local law enforcement and request that they dispose of the18 cannabis; or

(c) The person may dispose of the cannabis, after mixing the cannabis with otheringredients such as soil to render it unusable.

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126-W:3 Prohibitions and Limitations on the Therapeutic Use of Cannabis.

22I. A qualifying patient may use cannabis on privately-owned real property only with written 23permission of the property owner or, in the case of leased property, with the permission of the tenant 24in possession of the property, except that a tenant shall not allow a qualifying patient to smoke 25cannabis on rented property if smoking on the property violates the lease or the lessor's rental 26policies that apply to all tenants at the property. However, a tenant may permit a qualifying patient 27to use cannabis on leased property by ingestion or inhalation through vaporization even if smoking is 28prohibited by the lease or rental policies. For purposes of this chapter, vaporization shall mean the 29inhalation of cannabis without the combustion of the cannabis.

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II. Nothing in this chapter shall exempt any person from arrest or prosecution for:

(a) Being under the influence of cannabis while:

32 (1) Operating a motor vehicle, commercial vehicle, boat, vessel, or any other vehicle
 33 propelled or drawn by power other than muscular power; or

34 (2) In his or her place of employment, without the written permission of the35 employer; or

36 37 (3) Operating heavy machinery or handling a dangerous instrumentality.

(b) The use or possession of cannabis by a qualifying patient or designated caregiver for

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1	purposes other than for therapeutic use as permitted by this chapter;
2	(c) The smoking or vaporization of cannabis in any public place, including:
3	(1) A public bus or other public vehicle; or
4	(2) Any public park, public beach, or public field.
5	(d) The possession of cannabis in any of the following:
6	(1) The building and grounds of any preschool, elementary, or secondary school,
7	which are located in an area designated as a drug free zone; or
8	(2) A place of employment, without the written permission of the employer; or
9	(3) Any correctional facility; or
10	(4) Any public recreation center or youth center; or
11	(5) Any law enforcement facility.
12	III. Nothing in this chapter shall be construed to require:
13	(a) Any health insurance provider, health care plan, or medical assistance program to be
14	liable for any claim for reimbursement for the therapeutic use of cannabis; or
15	(b) Any individual or entity in lawful possession of property to allow a guest, client,
16	customer, or other visitor to use cannabis on or in that property; or
17	(c) Any accommodation of the therapeutic use of cannabis on the property or premises of
18	any place of employment or on the property or premises of any jail, correctional facility, or other type
19	of penal institution where prisoners reside or persons under arrest are detained. This chapter shall
20	in no way limit an employer's ability to discipline an employee for ingesting cannabis in the
21	workplace or for working while under the influence of cannabis.
22	IV. Any person who makes a fraudulent representation to a law enforcement official of any
23	fact or circumstance relating to the therapeutic use of cannabis to avoid arrest or prosecution shall
24	be guilty of a violation and may be fined \$500, which shall be in addition to any other penalties that
25	may apply for making a false statement to a law enforcement officer or for the use of cannabis other
26	than use undertaken pursuant to this chapter.
27	V. A qualifying patient or designated caregiver who is found to be in possession of cannabis
28	outside of his or her home and is not in possession of his or her registry identification card may be
29	subject to a fine of up to \$100.
30	VI. Any qualifying patient or designated caregiver who sells cannabis to another person who
31	is not a qualifying patient or designated caregiver under this chapter shall be subject to the penalties
32	specified in RSA 318-B:26, IX-a, shall have his or her registry identification card revoked, and shall
33	be subject to other penalties as provided in RSA 318-B:26.
34	VII. The department may revoke the registry identification card of a qualifying patient or
35	designated caregiver for violation of rules adopted by the department or for violation of any other
36	provision of this chapter, and the qualifying patient or designated caregiver shall be subject to any
37	other penalties established in law for the violation.

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1	126-W:4 Departmental Administration; Registry Identification Cards.
2	I. Except as provided in paragraph V, the department shall create and issue a registry
3	identification card to a person applying as a qualifying patient who submits all of the following
4	information:
5	(a) Written certification as defined in RSA 126-W:1.
6	(b) An application or a renewal application accompanied by the application or renewal
7	fee.
8	(c) A recent passport-sized photograph of the applicant's face.
9	(d) Name, residential and mailing address, and date of birth of the applicant, except that
10	if the applicant is homeless, no residential address is required.
11	(e) Name, address, and telephone number of the applicant's provider.
12	(f) Name, address, and date of birth of the applicant's designated caregiver, if any. A
13	qualifying patient shall have only one designated caregiver.
14	(g) Name of the alternative treatment center that the qualifying patient designates. A
15	qualifying patient may designate no more than one alternative treatment center at any time.
16	(h) A statement signed by the applicant, pledging not to divert cannabis to anyone who
17	is not allowed to possess cannabis pursuant to this chapter and acknowledging that his or her
18	diversion of cannabis is punishable as a class B felony and revocation of his or her registry
19	identification card, in addition to other penalties for the illegal sale of cannabis.
20	II. Except as provided in paragraph V, the department shall create and issue a registry
21	identification card to a person applying as a designated caregiver who submits all of the following
22	information:
23	(a) An application or a renewal application.
24	(b) A recent passport-sized photograph of the applicant's face.
25	(c) Name, residential and mailing address, and date of birth of the applicant.
26	(d) Name, residential and mailing address, and date of birth of each qualifying patient
27	for whom the applicant will act as designated caregiver, except that if the qualifying patient is
28	homeless, no residential address is required. An applicant shall not act as a designated caregiver for
29	more than 5 qualifying patients.
30	(e) Street address of the alternative treatment center.
31	(f) A signed statement from the applicant agreeing to act as the designated caregiver for
32	the qualifying patient named in the application and pledging not to divert cannabis to anyone who is
33	not allowed to possess cannabis pursuant to this chapter and acknowledging that the diversion of
34	cannabis is punishable as a class B felony and revocation of one's registry identification card, in
35	addition to other penalties for the illegal sale of cannabis.
36	(g) A notarized criminal history record release form, as provided by the New Hampshire
37	division of state police, department of safety, which authorizes the release of his or her criminal

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1 history record, if any, to the department. The applicant shall submit with the release from a $\mathbf{2}$ complete set of fingerprints taken by a qualified law enforcement agency or an authorized employee of the department of safety. In the event that the first set of fingerprints is invalid due to 3 insufficient pattern, a second set of fingerprints shall be necessary in order to complete the criminal 4 history records check. If, after 2 attempts, a set of fingerprints is invalid due to insufficient pattern, $\mathbf{5}$ 6 the department may, in lieu of the criminal history records check, accept police clearances from $\overline{7}$ every city, town, or county where the person has lived during the past 5 years. The department shall 8 submit the criminal history records release form and fingerprint form to the division of state police 9 which shall conduct a criminal history records check through its records and through the Federal 10 Bureau of Investigation. Upon completion of the records check, the division of state police shall 11 release copies of the criminal history records to the department. The department shall maintain the 12confidentiality of all criminal history records information received pursuant to this section. The 13applicant shall bear the cost of a criminal history record check.

III. The department shall verify the information contained in an application or renewal 1415submitted pursuant to this section. The department shall approve or deny an application or renewal 16for a qualifying patient within 15 days of receipt of the application. The department shall approve or 17deny an application or renewal to serve as a designated caregiver within 15 days of receipt of the 18application. The department may deny an application or renewal only if the applicant did not 19provide the information required pursuant to this section, or if the applicant previously had a 20registry identification card revoked for violating the provisions of this chapter or rules adopted by 21the department, or if the department determines that the information provided was falsified or did 22not meet the requirements of this chapter or rules adopted by the department. The department shall 23notify an applicant of the denial of an application. An applicant who is aggrieved by a department 24decision may request an administrative hearing at the department.

IV. The department shall create and issue a registry identification card to a person applying as a qualifying patient or designated caregiver within 5 days of approving an application or renewal. Each registry identification card shall expire one year after the date of issuance, unless the provider states in the written certification that the certification should expire at an earlier specified date, then the registry identification card shall expire on that date. Registry identification cards shall contain all of the following:

- 31 (a) Name, mailing address, and date of birth of the qualifying patient or designated32 caregiver.
- 33 34
- (b) The date of issuance and expiration date of the registry identification card.
- (c) A random 10-digit identification number, containing at least
- 35 4 numbers and at least 4 letters, that is unique to the qualifying patient or the designated caregiver.
- 36 (d) A designation that the person is either a "qualifying patient" or a "designated 37 caregiver." If the person is a designated caregiver, the identification card shall include the random

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1 10-digit identification number for each qualifying patient for whom he or she is providing care. $\mathbf{2}$ (e) The registry identification number corresponding with the alternative treatment 3 center the qualifying patient designated, if any. (f) A passport-sized photograph of the qualifying patient's or designated caregiver's face. 4 (g) A statement that the qualifying patient or designated caregiver is permitted under 56 state law to possess cannabis pursuant to this chapter for the therapeutic use of the qualifying 7patient. 8 V. The department shall not issue a registry identification card to an applicant under 18 9 years of age who is applying as a qualifying patient unless: 10 (a) A custodial parent or legal guardian responsible for health care decisions for the 11 qualifying patient submits a written certification from 2 providers, one of whom shall be a 12pediatrician. 13The applicant's provider has explained the potential risks and benefits of the (b) 14therapeutic use of cannabis to the custodial parent or legal guardian with responsibility for health 15care decisions for the applicant. 16(c) The custodial parent or legal guardian with responsibility for health care decisions 17for the applicant consents in writing to: 18(1) Allow the applicant's therapeutic use of cannabis; and 19(2) Serve as the applicant's designated caregiver and control the acquisition of the 20cannabis and the frequency of the therapeutic use of cannabis by the applicant. 21(d) The custodial parent or legal guardian completes an application in accordance with 22the requirements of paragraph I on behalf of the applicant. 23VI. The department shall provide each approved qualifying patient and designated caregiver 24a statement with the registry identification card explaining federal law on the possession of cannabis 25and that possession of a state registry identification card does not protect a person from federal 26criminal penalties. 27VII.(a) The department shall track the number of qualifying patients who have designated 28each alternative treatment center and issue a monthly written statement to the alternative 29treatment center identifying the number of qualifying patients who have designated that alternative 30 treatment center along with the registry identification numbers of each qualifying patient and each 31qualifying patient's designated caregiver. 32(b) The department shall track the number of qualifying patients certified by each 33 provider and registered with the department. Any concerns regarding provider conduct shall be 34referred to the New Hampshire board of medicine or the New Hampshire board of nursing. 35VIII. In addition to the monthly reports, the department shall also provide written notice to 36 an alternative treatment center which identifies the names and registration identification numbers

37 of a qualifying patient and his or her designated caregiver whenever any of the following events

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1 occur:

- $\mathbf{2}$ (a) A qualifying patient designates the alternative treatment center to serve his or her 3 needs under this chapter;
- 4

(b) A qualifying patient revokes the designation of the alternative treatment center; or

(c) A qualifying patient who has designated the alternative treatment center loses his or $\mathbf{5}$ 6 her status as a qualifying patient under this chapter.

7IX.(a) A qualifying patient shall notify the department before changing his or her designated 8 caregiver or alternative treatment center.

9 (b) A qualifying patient shall notify the department of any change in his or her name or 10 address within 10 days of such change. If the qualifying patient's certifying provider notifies the 11 department in writing that the qualifying patient no longer suffers from a qualifying medical 12condition or should discontinue using cannabis for another compelling reason, the registry 13identification card shall become void upon notification by the department to the qualifying patient.

14(c) When a qualifying patient or a designated caregiver notifies the department of any 15change to a name, address, or alternative treatment center, the department shall issue the 16qualifying patient or designated caregiver a new registry identification card with a new random 10-17digit identification number within 20 days of receiving the updated information.

18(d) If a qualifying patient notifies the department of a change in his or her designated 19caregiver and the prospective designated caregiver meets the requirements of this chapter, the 20department shall issue the designated caregiver a registry identification card with a new random 10-21digit identification number within 50 days of receiving the designated caregiver's application.

22(e) A qualifying patient or designated caregiver who fails to notify the department of any 23changes to his or her name, address, or designated caregiver shall be guilty of a violation and may be 24subject to a fine not to exceed \$150 under rules adopted by the department.

25(f) If a qualifying patient or designated caregiver loses his or her registry identification 26card, he or she shall notify the department within 10 days of losing the card. Within 5 days after 27such notification, the department shall issue a new registry identification card with a new random 2810-digit identification number. The fee for new registry cards shall be established in rules set by the 29department pursuant to RSA 541-A.

30 X. Mere possession of, or application for, a registry identification card shall not constitute 31probable cause or reasonable suspicion, nor shall it be used to support the search of the individual or 32property of the individual possessing or applying for the registry identification card. The possession 33 of, or application for, a registry identification card shall not preclude the existence of probable cause 34if probable cause exists on other grounds.

35XI.(a) The department shall create and maintain a confidential registry of each individual 36 who has applied for and received a registry identification card as a qualifying patient or a designated caregiver in accordance with the provisions of this chapter. Each entry in the registry shall contain 37

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the qualifying patient's or designated caregiver's name, mailing address, date of birth, date of registry identification card issuance, date of registry identification card expiration, random 10-digit identification number, and registry identification number of the qualifying patient's designated alternative treatment center, if any. The confidential registry and the information contained in it shall be exempt from disclosure under RSA 91-A.

6 (b)(1) Except as specifically provided in this chapter, no person shall have access to any 7 information about qualifying patients or designated caregivers in the department's confidential 8 registry, or any information otherwise maintained by the department about providers and 9 alternative treatment centers, except for authorized employees of the department in the course of 10 their official duties and local and state law enforcement personnel who have detained or arrested an 11 individual who claims to be engaged in the therapeutic use of cannabis.

12 (2) If a local or state law enforcement officer submits a sworn affidavit to the 13 department affirming that he or she has probable cause to believe cannabis is possessed at a specific 14 address, an authorized employee for the department may disclose whether the location is associated 15 with a qualifying patient, designated caregiver, or cultivation location of an alternative treatment 16 center.

17 (3) If a local or state law enforcement officer submits a sworn affidavit to the 18 department affirming that he or she has probable cause to believe a specific individual possesses 19 cannabis, an authorized employee for the department may disclose whether the person is a 20 qualifying patient or a designated caregiver, provided that the law enforcement officer provides the 21 person's name and address or name and date of birth.

(4) Counsel for the department may notify law enforcement officials about falsified
or fraudulent information submitted to the department where counsel has made a legal
determination that there is probable cause to believe the information is false or falsified.

25 XII. Within 5 days of learning of the death of a qualifying patient, a surviving family 26 member, caretaker, executor, or the patient's designated caregiver shall notify the department that 27 the qualifying patient has died. Within 5 days of learning of the death of a qualifying patient, the 28 surviving family member, caretaker, executor, or the patient's designated caregiver shall either 29 request that the local law enforcement agency remove any remaining cannabis or shall dispose of the 30 cannabis in a manner that is specified in 126-W:2, XIV.

31

126-W:5 Affirmative Defense.

I. It shall be an affirmative defense for any person charged with manufacturing, possessing, having under his or her control, selling, purchasing, prescribing, administering, transporting, or possessing with intent to sell, dispense, or compound cannabis, cannabis analog, or any preparation containing cannabis, if:

36 (a) The actor is a qualifying patient who has been issued a valid registry identification
 37 card, was in possession of cannabis in a quantity and location permitted pursuant to this chapter,

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1 and was engaged in the therapeutic use of cannabis; or $\mathbf{2}$ (b) The actor is a designated caregiver who has been issued a valid registry identification 3 card was in possession of a cannabis in a quantity and location permitted pursuant to this chapter, and was engaged in the therapeutic use of cannabis on behalf of a qualifying patient. 4 II. This section shall not be construed as an affirmative defense for any offense other than $\mathbf{5}$ 6 those acts as set forth in paragraph I. $\overline{7}$ 126-W:6 Departmental Rules. 8 I. Not later than one year after the effective date of this chapter, the department shall adopt 9 rules, pursuant to RSA 541-A, governing: 10 The form and content of applications for issuance and renewals of registry (a)11 identification cards for qualifying patients and designated caregivers. 12(b) The form and content of providers' written certifications. 13(c) Procedures for considering, approving, and denying applications for issuance and 14renewals of registry identification cards, and for revoking registry identification cards. 15(d) Fees pursuant to RSA 126-W:4, I(b) and paragraph II of this section for applications 16for registry identification cards, and pursuant to RSA 126-W:4, IX(f) for re-issuance of replacement 17registry identification cards. 18(e) Fines pursuant to RSA 126-W:4, IX(e) for failure of the qualifying patient or 19designated caregiver to notify the department of any changes to his or her name, address, designated 20caregiver in the case of a qualifying patient, or alternative treatment center. 21II. The department's rules shall establish application and renewal fees for registry 22identification cards in accordance with the following: 23(a) The fee structure by the department for alternative treatment centers and registry 24identification cards shall generate revenues sufficient to offset all department expenses of 25implementing and administering this chapter; however, 26(b) The department may accept donations from private sources without the approval of 27the governor and council in order to reduce the application and renewal fees for qualifying patients. III.(a) Not later than 18 months after the effective date of this section, the department shall 2829adopt rules, pursuant to RSA 541-A, governing alternative treatment centers and the manner in 30 which it shall consider applications for registration certificates for alternative treatment centers, 31including, but not limited to: 32(1) The form and content of registration and renewal applications. 33 (2) Administrative requirements. 34(3) Security requirements, which shall include at a minimum, lighting, physical 35security, video security, alarm requirements, measures to prevent loitering, and on-site parking. 36 (4) Liability insurance. 37

(5) Sanitary requirements.

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1 (6) Electrical safety requirements. $\mathbf{2}$ (7) The specification of acceptable forms of picture identification that an alternative 3 treatment center may accept when verifying a sale. (8) Personnel requirements including how many volunteers an alternative treatment 4 center is permitted to have and requirements for supervision. 56 (9) Labeling standards. $\overline{7}$ (10) Procedures for suspending or terminating the registration of alternative 8 treatment centers that violate the provisions of this chapter or the rules adopted pursuant to this 9 chapter, a schedule of fines for such violations, and procedures for appealing any enforcement 10 actions. 11 (11) Procedures for inspections and investigations. 12(12) Advertising restrictions, including a prohibition of misrepresentation and unfair 13practices. 14(13) Permissible hours of operation. 15(14) The fees for the processing and review of applications for registration as an 16alternative treatment center and regulation of an alternative treatment center after it has been 17approved by the department. Such fees shall be established in an amount that covers all costs of the 18department for the review, registration, and regulation of alternative treatment centers. 19(15) Procedures for determining and enforcing the daily maximum amount of 20therapeutic cannabis which an alternative treatment center may cultivate or possess pursuant to 21RSA 126-W:8, XV(a). 22(b) The department shall adopt rules with the goal of protecting against diversion and 23theft, without imposing an undue burden on the alternative treatment centers or compromising the 24confidentiality of qualifying patients and their designated caregivers. 25126-W:7 Departmental Administration; Alternative Treatment Centers. 26I. Within 18 months of the effective date of this section, provided that at least 2 applications 27have been submitted that score sufficiently high to receive a certificate, the department shall issue 28alternative treatment center registration certificates to the 2 highest-scoring applicants. Each 29registration certificate shall include a registry number that is unique to the alternative treatment 30 center. 31II. Any time an alternative treatment center registration certificate is revoked, relinquished, 32or expires without a renewal application being submitted, the department shall accept applications 33 for a new alternative treatment center and issue a registration certificate to the applicant who scores 34the highest. 35III. If at any time after 2 years after the effective date of this section, fewer than 4 36 alternative treatment centers hold valid registration certificates in New Hampshire, the department shall accept applications for a new alternative treatment center. No more than 4 alternative 37

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1 treatment centers shall hold valid registration certificates at one time.

IV.(a) An alternative treatment center applicant shall submit a completed departmentapproved application form with all required documentation and a non-refundable fee in an amount set by department rule. The alternative treatment center application and supporting materials shall include, at a minimum:

6 7 (1) The legal name, articles of incorporation, and bylaws of the alternative treatment center.

8 (2) The proposed physical address of the alternative treatment center, if a precise 9 address has been determined, or, if not, the general location where it would be located. This may 10 include a second location for the cultivation of cannabis.

(3) A description of the enclosed, locked facility that would be used in the cultivationof cannabis by the alternative treatment center.

(4) The name, address, and date of birth of each principal officer and board member of the alternative treatment center. The board of directors for the non-profit shall include at least one physician, advance practice registered nurse, or pharmacist licensed to practice in New Hampshire and at least one patient qualified to register as a qualifying patient. The majority of board members shall be New Hampshire residents. A medical professional listed in this subparagraph may be a member of the alternative treatment center board but shall not maintain an ownership interest in the center.

20 (5) Proposed security and safety measures that comply with the rules adopted 21 pursuant to RSA 126-W:6, including a description of interior and exterior lighting and security 22 systems.

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(6) The distance from any pre-existing private or public school.

24 (7) A copy of the proposed policy regarding services to qualifying patients who cannot25 afford to purchase cannabis for therapeutic use.

26 (8) Information demonstrating the applicant's knowledge of organic growing27 methods to be used in the growing and cultivation of cannabis.

(9) Steps that will be taken to ensure the quality of the cannabis, including purityand consistency of dose.

(10) A start-up timetable that provides an estimated time from registration of the
 alternative treatment center to full operation and the assumptions used for the basis of those
 estimates.

(11) Information showing the applicant's experience running a non-profit or otherbusiness.

- 35 (12) A description of any additional services that will be available to patients.
 - (13) The applicant's plans for record keeping and inventory control.

(b) Any time one or more alternative treatment center registration applications are

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being considered, the department shall, in partnership with the local governing body of the town or city where the alternative treatment center would be located, solicit input from qualifying patients, designated caregivers, and the residents of the towns or cities in which the alternative treatment center would be located.

5 (c) Each time an alternative treatment center certificate is granted, the decision shall be 6 based on the overall health needs of qualifying patients and the safety of the public. The department 7 shall evaluate applications for alternative treatment center registration certificates using an 8 impartial and numerically-scored competitive bidding process developed by the department in 9 accordance with this chapter. The department shall require applicants to meet a minimum score to 10 be considered. The registration considerations shall include the following criteria:

(1) The suitability of the proposed location, including compliance with any local zoning laws, and geographic convenience for qualifying patients from throughout the state of New Hampshire to alternative treatment centers if the application is approved. The department shall, to the greatest extent practicable, ensure that alternative treatment centers are geographically located so as to best serve the needs of qualifying patients.

16 (2) The proposed alternative treatment center's plan for operations and services, 17 whether it has sufficient capital to operate, and its ability to provide a steady supply of cannabis to 18 the qualifying patients in the state.

19 (3) The principal officer and board members' character and relevant experience, 20 including any training or professional licensing related to medicine, pharmaceuticals, natural 21 treatments, botany, or cannabis cultivation and preparation, and their experience operating a non-22 profit organization or business.

(4) The applicant's plan for making cannabis available on an affordable basis to
qualifying patients enrolled in Medicaid or receiving Supplemental Security Income or Social
Security Disability Insurance.

(5) The applicant's plan for safe and accurate packaging and labeling of cannabis,
including the applicant's plan for ensuring that all cannabis is free of contaminants.

(6) The sufficiency of the applicant's plans for recordkeeping and inventory control. Records shall be considered confidential health care information under New Hampshire law and shall be deemed protected health care information for purposes of the federal Health Insurance Portability and Accountability Act of 1996, as amended. Any dispensing records that an alternative treatment center is required to keep shall document transactions according to qualifying patients' and designated caregivers' registry identification numbers, rather than their names, to protect their confidentiality.

35 (7) The sufficiency of the applicant's plans for safety and security, including
 36 proposed location and security devices employed.

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(8) Whether the entity possesses or has the right to use sufficient land, buildings,

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1 and equipment to properly carry out its duties as an alternative treatment center.

V. After an alternative treatment center is approved, but before it begins operations, it shall submit the registration fee paid to the department in accordance with the rules adopted by the department. Annual fees thereafter shall be paid in accordance with the rules adopted by the department.

6 VI. Information required to be submitted to the department on an application for an 7 alternative treatment center identifying the locations where cannabis is proposed to be grown, 8 cultivated, harvested, and otherwise prepared for distribution to qualifying patients, designated 9 caregivers, and alternative treatment centers, and any other department records identifying such 10 location, shall be considered to be confidential information and not subject to disclosure pursuant to 11 RSA 91-A, except that:

12 (a) Such information may be disclosed to a state or local law enforcement agency upon
13 request for purposes of enforcement under this chapter;

(b) The location may be disclosed to towns and cities when seeking input on locations,provided that town and city representatives keep the information confidential; and

16 (c) The name, address, and phone number of alternative treatment centers may be17 disclosed to qualifying patients.

VII. The alternative treatment center's certificate may be revoked at any time it commits a violation of this chapter or rules adopted by the department, including if it negligently or knowingly allows cannabis to be distributed to someone who is not exempt from penalties pursuant to this chapter.

VIII. Not more than one year after an alternative treatment center receives it first registry
 certificate, the department shall evaluate an alternative treatment center's operations. A
 registration certificate may be revoked if the alternative treatment center:

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(a) Committed violations of this act or department rules; or

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(a) committee violations of this act of depart

(b) Is not operational.

IX. Alternative treatment centers shall be subject to inspection by the department. During an inspection, the department may review the alternative treatment center's records, including its confidential dispensing and data collection records, which shall track transactions and product effectiveness according to qualifying patients' registry identification numbers to protect their confidentiality.

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126-W:8 Alternative Treatment Centers; Requirements.

I. An alternative treatment center shall be operated on a not-for-profit basis for the benefit
 of its patients. An alternative treatment center need not be recognized as a tax-exempt organization
 by the Internal Revenue Service.

II. An alternative treatment center shall not be located in a residential district or within
 1,000 feet of the property line of a pre-existing public or private elementary or secondary school or

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1 designated drug free school zones.

 $\mathbf{2}$ III. An alternative treatment center shall implement appropriate security measures to deter 3 and prevent the unauthorized entrance into areas containing cannabis and the theft of cannabis and shall ensure that each location has an operational security alarm system. 4

 $\mathbf{5}$

IV.(a) An alternative treatment center shall conduct a state and federal criminal records 6 check for every person seeking to become a principal officer, board member, agent, volunteer, or $\overline{7}$ employee before the person begins working at the alternative treatment center pursuant to RSA 126-8 W:4, II(g). An alternative treatment center shall not allow any person to be an alternative treatment 9 center agent who:

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(1) Was convicted of a felony or felony drug-related offense; or

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(2) Is under 21 years of age.

12(b) An alternative treatment center shall create an identification badge for each 13alternative treatment center agent before the alternative treatment center agent possesses, 14cultivates, or transports cannabis on behalf of the alternative treatment center. The badges may 15include the alternative treatment center's registration certificate number and either a unique 16number for each agent or his or her name.

17(c) An alternative treatment center agent shall wear his or her badge at all times when 18working at an alternative treatment center, including at any cultivation location.

19V. No person who has been convicted of a felony or felony drug-related offense shall be an 20alternative treatment center agent. A person who is employed by or is an agent, volunteer, principal 21officer, or board member of an alternative treatment center who violates this paragraph shall be 22guilty of a violation punishable by a fine of up to \$1,000. A subsequent violation of this paragraph 23shall be a misdemeanor.

24VI. The operating documents of an alternative treatment center shall include procedures for 25the oversight of the alternative treatment center and procedures to ensure accurate recordkeeping.

26VII. Each alternative treatment center shall keep the following records, in accordance with a 27records retention schedule established by the department:

28(a) Records of the disposal of cannabis that is not distributed by the alternative 29treatment center to qualifying patients who have designated the alternative treatment center to 30 cultivate for them.

31(b) A record of each transaction, including the amount of cannabis dispensed, the 32amount of consideration, and the registry identification number of the qualifying patient, designated 33 caregiver, or alternative treatment center, and the qualifying patient's provider.

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VIII. Each alternative treatment center shall:

35Conduct an initial comprehensive inventory of all cannabis, including usable (a)36 cannabis available for dispensing and mature cannabis plants at each authorized location on the date the alternative treatment center first dispenses cannabis. 37

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1 Conduct a monthly comprehensive inventory of all cannabis, including usable (h) $\mathbf{2}$ cannabis available for dispensing, mature cannabis plants, and seedlings at each authorized location. 3 IX. An alternative treatment center shall submit a department-approved incident report 4 form on the next business day after it discovers a reportable incident. The report shall indicate the 56 nature of the breach and the corrective actions taken by the alternative treatment center. $\overline{7}$ Reportable incident shall mean: 8 (a) Confidential information accessed or disclosed in violation of department rules; 9 (b) Loss of inventory by theft or diversion; 10 (c) Unauthorized intrusion into the alternative treatment center or the additional 11 location, if any; 12(d) Any known violation of this chapter or department rules by an alternative treatment 13center agent; or 14(e) Any other incident that the department by rule requires to be reported. 15X. Alternative treatment centers shall only use organic pesticides in cannabis. 16XI. No cannabis or paraphernalia at an alternative treatment center shall be visible from 17outside the property of the alternative treatment center. 18XII. An alternative treatment center shall submit an annual report to the department that 19shall provide information required by the department in order to allow the department to evaluate 20the effectiveness and operations of the alternative treatment center. 21XIII.(a) Each time an alternative treatment center agent dispenses cannabis to a qualifying 22patient directly or through the qualifying patient's designated caregiver, he or she shall consult the 23alternative treatment center's records to verify that the records do not indicate that the dispensing of 24the cannabis would cause the qualifying patient to receive more cannabis than is permitted in a 10-25day period. Each time cannabis is dispensed, the alternative treatment center agent shall record the 26date the cannabis was dispensed and the amount dispensed. All records shall be kept according to 27the registry identification number of the qualifying patient and designated caregiver, if any. 28(b) Except as provided in subparagraph (c), a qualifying patient shall not obtain more 29than 2 ounces of usable cannabis directly or through the qualifying patient's designated caregiver 30 during a 10-day period. 31(c) After providing an opportunity for patients, experts, researchers, and physicians to be 32heard, the department may issue a rule adjusting the limit specified in subparagraph (a) to an 33 amount that is reasonably necessary for a 10-day supply. 34XIV.(a) Except when transporting cannabis in accordance with subparagraphs (b) or (c), an

alternative treatment center agent shall only possess and manufacture cannabis at an alternative treatment center location at which alternative treatment center agents are employed. Volunteers shall only possess and manufacture cannabis at an alternative treatment center location. Volunteers

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1 shall not dispense cannabis.

2 (b) Distributions of cannabis to a qualifying patient or a designated caregiver for use by 3 a qualifying patient shall be labeled with a document to identify the alternative treatment center, 4 the patient's registry number, or the caregiver's number, the amount and form, the time and date of 5 origin, and destination of the product.

6 (c) An alternative treatment center with an additional growing location shall label the 7 cannabis that is being moved between the additional growing location and the alternative treatment 8 center with a document that identifies the alternative treatment center by registry number, the 9 time, date, origin, and destination of the material being transported, and the amount and form of 10 cannabis and cannabis material that is being transported. Cannabis shall be transported only by an 11 alternative treatment center agent who is not a volunteer.

12 XV.(a) An alternative treatment center shall not possess or cultivate cannabis in excess of 13 the following quantities:

14 (1) Eighty cannabis plants, 160 seedlings, and 80 ounces of usable cannabis, or 615 ounces of usable cannabis per qualifying patient; and

16 (2) Three mature cannabis plants, 12 seedlings, and 6 ounces for each qualifying 17 patient who has designated the alternative treatment center to provide him or her with cannabis for 18 therapeutic use.

(b) An alternative treatment center or alternative treatment center agent shall notdispense, deliver, or otherwise transfer cannabis to any person or entity other than:

(1) A qualifying patient who has designated the relevant alternative treatmentcenter; or

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(2) Such patient's designated caregiver; or

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(3) Another alternative treatment center.

(c) All cultivation of cannabis shall take place in an enclosed, locked facility registeredwith the department and which can only be accessed by alternative treatment center agents.

XVI.(a) All cannabis dispensed by an alternative treatment center shall include a label
specifying the weight of the cannabis and any other information the department requires to appear
on the label. The label shall also specify that the cannabis is for therapeutic use and that diversion
is a class B felony requiring revocation of one's registry identification card.

31 (b) Alternative treatment centers shall collect data on strains used and methods of 32 delivery for qualifying conditions and symptoms, any side effects experienced, and therapeutic 33 effectiveness for each patient who is willing to provide the information. Such data collection shall be 34 done under the qualifying patient's registry identification number to protect the patient's 35 confidentiality.

36 (c) An alternative treatment center shall provide educational materials about cannabis
 37 to qualifying patients and their registered primary caregivers. Each alternative treatment center

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1 shall have an adequate supply of up-to-date educational material available for distribution. $\mathbf{2}$ Educational materials shall be available for inspection by the department upon request. The 3 educational material shall at least include information about the following: Strains of cannabis, routes of administration, and their different effects. 4 (1)Alternative treatment centers shall have educational materials available to assist in the selection of 56 prepared cannabis. Alternative treatment centers shall provide tracking sheets to qualifying $\overline{7}$ patients and their providers who request them to keep track of the strains used and their effects. 8 (2) How to achieve proper dosage for different modes of administration. Emphasis 9 shall be on using the smallest amount possible to achieve the desired effect. The impact of potency 10 shall also be explained. 11 (3) Information on tolerance, dependence, and withdrawal shall be provided. 12(4) Information regarding substance abuse signs and symptoms shall be available, as 13well as referral information. 14(5)Information on whether the alternative treatment center's cannabis and 15associated products meet organic certification standards. 16(6) Information about possible side effects from the use of cannabis for therapeutic 17purposes. 18XVII.(a) Each alternative treatment center shall develop, implement, and maintain on the 19premises employee and agent policies and procedures to address the following requirements: 20(1) A job description or employment contract developed for all employees and a 21volunteer agreement for all volunteers, which includes duties, authority, responsibilities, 22qualifications, and supervision. 23(2) Training in and adherence to confidentiality laws. 24(3) The proper use of security measures and controls that have been adopted. 25(4) Specific procedural instructions on how to respond to an emergency. 26(b) All alternative treatment centers shall prepare training documentation for each 27employee and have employees sign a statement indicating the date, time, and place the employee 28received said training and topics discussed, to include name and title of presenters. The alternative 29treatment center shall maintain documentation of an employee's and a volunteer's training for a 30 period of at least 6 months after termination of an employee's period of employment or the 31volunteer's period of voluntary service. 32Each alternative treatment center shall maintain a personnel record for each (c)33 alternative treatment center agent that includes an application for employment or to volunteer and a 34record of any disciplinary action taken. XVIII. A provider shall not: 3536 (a) Accept, solicit, or offer any form of pecuniary remuneration from or to an alternative

37 treatment center, except if the provider is employed by an alternative treatment center.

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1	(b) Offer a discount or other thing of value to a patient who uses or agrees to use a
2	particular alternative treatment center.
3	(c) Examine a patient in relation to issuing a written certification at a location where
4	cannabis is sold or distributed.
5	(d) Hold an economic interest in an alternative treatment center if the provider issues
6	written certifications to patients.
7	126-W:9 Therapeutic Use of Cannabis Advisory Council.
8	I. There is hereby established a therapeutic use of cannabis advisory council comprised of:
9	(a) Two members of the house of representatives, appointed by the speaker of the house
10	of representatives.
11	(b) One member of the senate, appointed by the senate president.
12	(c) The commissioner of the department of health and human services, or designee.
13	(d) The commissioner of the department of safety, or designee.
14	(e) The attorney general, or designee.
15	(f) One physician with experience in therapeutic use of cannabis issues, appointed by the
16	New Hampshire Medical Society.
17	(g) One advanced practice registered nurse, appointed by the New Hampshire Nurse
18	Practitioner Association.
19	(h) One representative of a community hospital, appointed by the governor.
20	(i) One representative of the New Hampshire Civil Liberties Union.
21	(j) One qualifying patient, appointed by the governor.
22	(k) One member of the public, appointed by the governor.
23	(l) One member from a hospital in New Hampshire, appointed by the governor.
24	(m) One member from the board of medicine, appointed by the executive director of the
25	board of medicine.
26	(n) One member from the board of nursing, appointed by the executive director of the
27	board of nursing.
28	II. The advisory council shall:
29	(a) Assist the department in adopting and revising rules to implement this chapter.
30	(b) Collect information, including:
31	(1) Satisfaction of qualifying patients with the therapeutic use of cannabis program.
32	(2) Any effect the therapeutic use of cannabis law has had on referrals to regulatory
33	boards.
34	(3) Best practices in other states that allow the therapeutic use of cannabis.
35	(4) The ability of qualifying patients in all areas of the state to obtain timely access
36	to high-quality cannabis.
37	(5) Any research studies regarding health effects of cannabis for patients.

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1 (6) The effectiveness of New Hampshire's therapeutic use of cannabis program. $\mathbf{2}$ (7) Efforts to educate New Hampshire physicians and advanced practice registered 3 nurses about research relating to the therapeutic use of cannabis. (8) The effectiveness of alternative treatment centers, individually and collectively, 4 in serving the needs of qualifying patients, including the therapeutic effectiveness of available $\mathbf{5}$ 6 products, the provision of educational and support services, the reasonableness of their fees, whether $\overline{7}$ they are generating any complaints or security problems, and the sufficiency of the number 8 operating to serve the registered qualifying patients of New Hampshire. 9 The sufficiency of the regulatory and security safeguards contained in this (9)10 chapter and adopted by the department to ensure that access to and use of cannabis cultivated is 11 provided only to persons authorized for such purposes. 12(10) Any illegal distribution or diversion of cannabis cultivated pursuant to this 13chapter to individuals who are not alternative treatment center agents, qualifying patients, or 14designated caregivers. 15(11) Any statutory issues related to the certification of qualifying patients including, 16but not limited to, the definition of qualifying medical conditions, the certification process, and the 17number and location of providers willing and able to certify qualifying patients. 18(c) Make recommendations to the legislature and the department for any additions or 19revisions to the department rules or this chapter. 20(d) Five years after the effective date of this chapter, issue a formal opinion on whether 21the program should be continued or repealed. 22III. The advisory council may meet as often as is necessary to effectuate its goals. The first 23meeting shall be called by the commissioner of the department of health and human services, or 24designee within 45 days of the effective date of this chapter. At the first meeting, a chairman shall 25be elected by the members. 26IV. On or before January 1 of each year, the advisory council shall provide a report to the 27department of health and human services and the health and human services oversight committee 28established under RSA 126-A:13, the board of medicine and the board of nursing on its findings. 29126-W:10 Annual Data Report. 30 I. The commissioner of the department of health and human services shall report annually 31on the therapeutic use of cannabis program established under this chapter to the health and human 32services oversight committee established under RSA 126-A:13, to the board of medicine, and to the 33 board of nursing. 34The report shall be in electronic format to allow for identification of patterns of II. 35certification by patient and caregiver, location, age, medical condition, symptom, or side-effect, and 36 provider, and for analysis and research to inform future policy, educational, and clinical decisions. III. The initial report shall be filed no later than December 1, 2014. 37

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1	IV. The commissioner's data report shall include but not be limited to the following
2	information:
3	(a) The number of designated caregivers and the number of qualifying patients, by town
4	or city and county.
5	(b) The ages of the qualifying patients and the ages of the designated caregivers.
6	(c) The qualifying medical conditions and the number of each qualifying medical
7	condition.
8	(d) The symptoms or side effects and the number of each symptom or side effect.
9	(e) The number of physicians and the number of advanced practice registered nurses
10	issuing written certifications.
11	(f) The number of providers in each medical specialty issuing written certifications.
12	(g) Any other issues related to the therapeutic use of cannabis permitted under this
13	chapter that the health and human services oversight committee shall request.
14	V. A summary of the report submitted by alternative treatment centers as required under
15	RSA 126-W:8, XII.
16	126-W:11 Registry Identification Card and Certificate Fund. There is hereby established in the
17	office of the state treasurer a fund to be known as the registry identification card and certificate fund
18	which shall be kept separate and distinct from all other funds. The fund is established to pay for the
19	operational expenses of permitting the therapeutic use of cannabis as established in this chapter.
20	The moneys in this fund shall be nonlapsing and continually appropriated to the department.
21	Interest on fund balances shall accrue to the fund. All fines and other income received by the
22	department and all monetary fees, gifts, grants, and donations received by the department pursuant
23	to this chapter shall be deposited in the fund.
24	2 New Subparagraph; Application of Receipts; Registry Identification Card and Certificate
25	Fund. Amend RSA 6:12, I(b) by inserting after subparagraph (310) the following new subparagraph:
26	(311) Moneys deposited in the registry identification card and certificate fund
27	established in RSA 126-W:11.
28	3 New Paragraph; Controlled Drug Act; Acts Prohibited. Amend RSA 318-B:2 by inserting after
29	paragraph I-a the following new paragraph:
30	I-b. It shall be unlawful for a qualifying patient or designated caregiver as defined under
31	RSA 126-W:1 to sell cannabis to another person who is not a qualifying patient or designated
32	caregiver. A conviction for the sale of cannabis to a person who is not a qualifying patient or
33	designated caregiver shall not preclude or limit a prosecution or conviction of any person for sale of
34	cannabis or any other offense defined in this chapter.
35	4 New Paragraph; Controlled Drug Act; Penalties. Amend RSA 318-B:26 by inserting after
36	paragraph IX the following new paragraph:
37	IX-a. A qualifying patient or designated caregiver as defined in RSA 126-W:1 who sells

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- 1 cannabis to a person who is not a qualifying patient or a designated caregiver shall be guilty of a
- 2 class B felony and shall be sentenced to a maximum term of imprisonment of not more than 7 years,
- 3 a fine of not more than \$300,000, or both.
- 4 5 Effective Date. This act shall take effect upon its passage.

LBAO 13-0279 Amended 05/28/13

HB 573 FISCAL NOTE

AN ACT relative to the use of cannabis for therapeutic purposes.

FISCAL IMPACT:

The Office of Legislative Budget Assistant is unable to complete a fiscal note for this bill, <u>as</u> <u>amended by the Senate (Amendment #2013-1631s)</u>, as it is awaiting information from the Departments of Health and Human Services, Safety, and Corrections, the Judicial Branch, Judicial Council, New Hampshire Association of Counties and the New Hampshire Municipal Association. When completed, the fiscal note will be forwarded to the House Clerk's Office.