# ASSEMBLY, No. 3421 STATE OF NEW JERSEY 218th LEGISLATURE

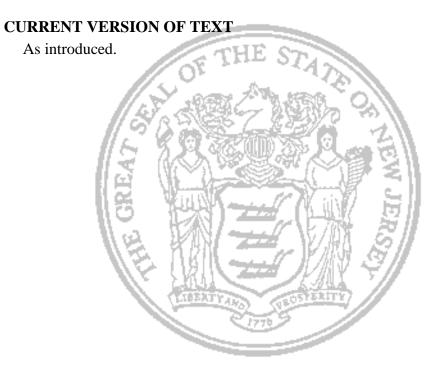
INTRODUCED FEBRUARY 15, 2018

Sponsored by: Assemblywoman JOANN DOWNEY District 11 (Monmouth) Assemblyman ERIC HOUGHTALING District 11 (Monmouth) Assemblyman JAMEL C. HOLLEY District 20 (Union)

Co-Sponsored by: Assemblywoman Vainieri Huttle and Assemblyman Eustace

### **SYNOPSIS**

"Jake Honig's Law"; removes limits on amount of medical marijuana that may be dispensed at one time and expands access to edible forms, including oils.



(Sponsorship Updated As Of: 3/6/2018)

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AN ACT concerning medical marijuana and amending P.L.2009,

**BE IT ENACTED** by the Senate and General Assembly of the State

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c.307.

of New Jersey:

1. Section 7 of P.L.2009, c.307 (C.24:6I-7) is amended to read as follows: 7. a. The department shall accept applications from entities for permits to operate as alternative treatment centers, and may charge a reasonable fee for the issuance of a permit under this section. The department shall seek to ensure the availability of a sufficient number of alternative treatment centers throughout the State, pursuant to need, including at least two each in the northern, central, and southern regions of the State. The first two centers issued a permit in each region shall be nonprofit entities, and centers subsequently issued permits may be nonprofit or for-profit entities. An alternative treatment center shall be authorized to acquire a reasonable initial and ongoing inventory, as determined by the department, of marijuana seeds or seedlings and paraphernalia, possess, cultivate, plant, grow, harvest, process, display, manufacture, deliver, transfer, transport, distribute, supply, sell, or dispense marijuana, or related supplies to qualifying patients or their primary caregivers who are registered with the department pursuant to section 4 of this act. An alternative treatment center shall not be limited in the number of strains of medical marijuana cultivated, and may package and directly dispense marijuana to qualifying patients in dried form, oral lozenges, topical formulations, or edible form, or any other form as authorized by the commissioner. Edible form shall include tablets, capsules, oils, drops or syrups, and any other form as authorized by the commissioner. [Edible forms shall be available only to qualifying patients who are minors.] Applicants for authorization as nonprofit alternative treatment centers shall be subject to all applicable State laws governing nonprofit entities, but need not be recognized as a 501(c)(3)organization by the federal Internal Revenue Service. b. The department shall require that an applicant provide such information as the department determines to be necessary pursuant to regulations adopted pursuant to this act. c. A person who has been convicted of a crime involving any controlled dangerous substance or controlled substance analog as set forth in chapter 35 of Title 2C of the New Jersey Statutes except paragraph (4) of subsection a. of N.J.S.2C:35-10, or any similar law EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law. Matter underlined thus is new matter.

of the United States or any other state shall not be issued a permit to operate as an alternative treatment center or be a director, officer, or employee of an alternative treatment center, unless such conviction occurred after the effective date of this act and was for a violation of federal law relating to possession or sale of marijuana for conduct that is authorized under this act.

7 d. (1) The commissioner shall require each applicant seeking a 8 permit to operate as an alternative treatment center to undergo a 9 criminal history record background check. For purposes of this 10 section, the term "applicant" shall include any owner, director, 11 officer, or employee of an alternative treatment center. The commissioner is authorized to exchange fingerprint data with and 12 receive criminal history record background information from the 13 14 Division of State Police and the Federal Bureau of Investigation 15 consistent with the provisions of applicable federal and State laws, 16 rules, and regulations. The Division of State Police shall forward 17 criminal history record background information to the 18 commissioner in a timely manner when requested pursuant to the 19 provisions of this section.

20 An applicant shall submit to being fingerprinted in accordance 21 with applicable State and federal laws, rules, and regulations. No 22 check of criminal history record background information shall be 23 performed pursuant to this section unless the applicant has 24 furnished his written consent to that check. An applicant who 25 refuses to consent to, or cooperate in, the securing of a check of 26 criminal history record background information shall not be 27 considered for a permit to operate, or authorization to be employed at, an alternative treatment center. An applicant shall bear the cost 28 29 for the criminal history record background check, including all 30 costs of administering and processing the check.

(2) The commissioner shall not approve an applicant for a
permit to operate, or authorization to be employed at, an alternative
treatment center if the criminal history record background
information of the applicant reveals a disqualifying conviction as
set forth in subsection c. of this section.

36 (3) Upon receipt of the criminal history record background
37 information from the Division of State Police and the Federal
38 Bureau of Investigation, the commissioner shall provide written
39 notification to the applicant of his qualification for or
40 disqualification for a permit to operate or be a director, officer, or
41 employee of an alternative treatment center.

If the applicant is disqualified because of a disqualifying
conviction pursuant to the provisions of this section, the conviction
that constitutes the basis for the disqualification shall be identified
in the written notice.

46 (4) The Division of State Police shall promptly notify the
47 commissioner in the event that an individual who was the subject of
48 a criminal history record background check conducted pursuant to

this section is convicted of a crime or offense in this State after the date the background check was performed. Upon receipt of that notification, the commissioner shall make a determination regarding the continued eligibility to operate or be a director, officer, or employee of an alternative treatment center.

6 (5) Notwithstanding the provisions of subsection b. of this 7 section to the contrary, the commissioner may offer provisional 8 authority for an applicant to be an employee of an alternative 9 treatment center for a period not to exceed three months if the 10 applicant submits to the commissioner a sworn statement attesting 11 that the person has not been convicted of any disqualifying 12 conviction pursuant to this section.

(6) Notwithstanding the provisions of subsection b. of this 13 14 section to the contrary, no employee of an alternative treatment 15 center shall be disqualified on the basis of any conviction disclosed 16 by a criminal history record background check conducted pursuant 17 to this section if the individual has affirmatively demonstrated to 18 the commissioner clear and convincing evidence of rehabilitation. 19 In determining whether clear and convincing evidence of 20 rehabilitation has been demonstrated, the following factors shall be 21 considered:

(a) the nature and responsibility of the position which theconvicted individual would hold, has held or currently holds;

24 (b) the nature and seriousness of the crime or offense;

25 (c) the circumstances under which the crime or offense26 occurred;

27 (d) the date of the crime or offense;

(e) the age of the individual when the crime or offense wascommitted;

30 (f) whether the crime or offense was an isolated or repeated31 incident;

32 (g) any social conditions which may have contributed to the33 commission of the crime or offense; and

(h) any evidence of rehabilitation, including good conduct in
prison or in the community, counseling or psychiatric treatment
received, acquisition of additional academic or vocational
schooling, successful participation in correctional work-release
programs, or the recommendation of those who have had the
individual under their supervision.

40 The department shall issue a permit to a person to operate as e. 41 an alternative treatment center if the department finds that issuing 42 such a permit would be consistent with the purposes of this act and 43 the requirements of this section are met and the department has 44 verified the information contained in the application. The 45 department shall approve or deny an application within 60 days 46 after receipt of a completed application. The denial of an application shall be considered a final agency decision, subject to 47 48 review by the Appellate Division of the Superior Court. The

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department may suspend or revoke a permit to operate as an
 alternative treatment center for cause, which shall be subject to
 review by the Appellate Division of the Superior Court.

f. A person who has been issued a permit pursuant to this
section shall display the permit at the premises of the alternative
treatment center at all times when marijuana is being produced, or
dispensed to a registered qualifying patient or the patient's primary
caregiver.

9 g. An alternative treatment center shall report any change in 10 information to the department not later than 10 days after such 11 change, or the permit shall be deemed null and void.

h. An alternative treatment center may charge a registered
qualifying patient or primary caregiver for the reasonable costs
associated with the production and distribution of marijuana for the
cardholder.

16 i. The commissioner shall adopt regulations to:

17 (1) require such written documentation of each delivery of marijuana to, and pickup of marijuana for, a registered qualifying 18 19 patient, including the date and amount dispensed, to be maintained 20 in the records of the alternative treatment center, as the effective 21 commissioner determines necessary ensure to 22 documentation of the operations of each alternative treatment 23 center;

24 (2) monitor, oversee, and investigate all activities performed by25 an alternative treatment center; and

(3) ensure adequate security of all facilities 24 hours per day,
including production and retail locations, and security of all
delivery methods to registered qualifying patients.

29 (cf: P.L.2013, c.160, s.2)

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31 2. Section 10 of P.L.2009, c.307 (C.24:6I-10) is amended to 32 read as follows:

33 10. a. A physician shall provide written instructions for a 34 registered qualifying patient or his caregiver to present to an alternative treatment center concerning the total amount of usable 35 36 marijuana that a patient may be dispensed, in weight, in a 30-day period **[**, which amount shall not exceed two ounces **]**. If no amount 37 38 is noted, the maximum amount that may be dispensed at one time [is two ounces] shall be at the discretion of the alternative 39 treatment center, based on the patient's qualifying medical 40 41 condition and an assessment of the patient's treatment needs.

b. A physician may issue multiple written instructions at one
time authorizing the patient to receive a total of up to a 90-day
supply, provided that the following conditions are met:

45 (1) Each separate set of instructions shall be issued for a46 legitimate medical purpose by the physician, as provided in this act;

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(2) Each separate set of instructions shall indicate the earliest
 date on which a center may dispense the marijuana, except for the
 first dispensation if it is to be filled immediately; and

4 (3) The physician has determined that providing the patient with
5 multiple instructions in this manner does not create an undue risk of
6 diversion or abuse.

7 c. A registered qualifying patient or his primary caregiver shall 8 present the patient's or caregiver's registry identification card, as 9 applicable, and these written instructions to the alternative 10 treatment center, which shall verify and log the documentation 11 presented. A physician may provide a copy of a written instruction 12 by electronic or other means, as determined by the commissioner, 13 directly to an alternative treatment center on behalf of a registered qualifying patient. The dispensation of marijuana pursuant to any 14 15 written instructions shall occur within one month of the date that 16 the instructions were written or the instructions are void.

d. A patient may be registered at only one alternative treatmentcenter at any time.

3. This act shall take effect immediately.

19 (cf: P.L.2009, c.307, s.10)

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## STATEMENT

26 This bill revises certain requirements concerning patient access 27 to medical marijuana. Specifically, the bill provides that alternative 28 treatment centers may make medical marijuana available to patients 29 in oil form, removes a restriction that made edible forms of medical 30 marijuana available only to qualifying patients who are minors, and 31 removes the current two ounce limit on the quantity of medical 32 marijuana that may be dispensed in a 30-day supply. The patient's 33 physician may authorize the patient to be dispensed a 30-day supply 34 of medical marijuana in any quantity; if the physician does not 35 specify a quantity, the amount dispensed will be at the discretion of 36 the alternative treatment center, based on the patient's qualifying 37 medical condition and an assessment of the patient's treatment 38 needs.

39 This bill is designated "Jake Honig's Law" in honor of Jake 40 Honig, a seven-year old Howell resident nicknamed "Jake the 41 Tank" who, at the age of two, was diagnosed with a rare and 42 aggressive form of brain cancer with a rare genetic mutation. After 43 undergoing dozens of rounds of chemotherapy, proton radiation 44 therapy, and surgery, his tumor went into remission for four years, 45 until follow-up scans determined that the tumor had returned and 46 spread to other parts of his body. Jake's doctors advised his parents 47 that there was nothing more to be done, and he was released to 48 hospice care in his own home, where, despite being prescribed six

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different medications to treat his various symptoms, medical
 marijuana proved to be the most effective way of stopping his
 nausea, vomiting, agitation, and acid reflux, and improving his
 mood, stimulating his appetite, and restoring his mental well-being.
 Although medical marijuana proved to be an effective treatment

6 for Jake, his parents noted the difficulties they encountered with the 7 cost, quantity limits, and issues related to producing their own 8 cannabis oil to administer to Jake. In honor of Jake, who passed 9 away on January 21, 2018, this bill seeks to remove certain 10 restrictions on access to medical marijuana in order to reduce the suffering experienced by, and improve the quality of life of, New 11 12 Jersey patients, like Jake, seeking treatment for a debilitating 13 medical condition.