[Second Reprint] SENATE, No. 619

STATE OF NEW JERSEY 219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

Sponsored by: Senator DECLAN J. O'SCANLON, JR. District 13 (Monmouth) Assemblywoman PAMELA R. LAMPITT District 6 (Burlington and Camden) Assemblywoman JOANN DOWNEY District 11 (Monmouth)

Co-Sponsored by: Assemblywoman Jasey, Assemblyman Freiman and Assemblywoman Swain

SYNOPSIS

amendments.

Permits use of telemedicine and telehealth to authorize patients for medical cannabis and to issue written instructions for dispensing medical cannabis.

CURRENT VERSION OF TEXT

As reported by the Assembly Health Committee on March 5, 2020, with



(Sponsorship Updated As Of: 9/24/2020)

2

AN ACT concerning medical cannabis and amending P.L.2019, 1 2 c.153 and P.L.2009, c.307. 3 4 **BE IT ENACTED** by the Senate and General Assembly of the State 5 of New Jersey: 6 7 1. Section 5 of P.L.2019, c.153 (C.24:6I-5.1) is amended to read 8 as follows: 9 5. a. A health care practitioner shall not be required to be listed 10 publicly in any medical cannabis practitioner registry as a condition of 11 authorizing patients for the medical use of cannabis. 12 b. No authorization for the medical use of cannabis may be issued 13 by a health care practitioner to the practitioner's own self or to a member of the practitioner's immediate family. 14 15 c. The commission shall establish a process to allow medical 16 cannabis to be dispensed to a patient who has been authorized for the 17 medical use of cannabis and who has initiated the process of 18 registering with the commission pursuant to section 4 of P.L.2009, 19 c.307 (C.24:6I-4), but whose registration has not been completed or 20 subject to other final action by the commission. A patient may be dispensed medical cannabis in quantities of up to a two-week supply 21 22 during the pendency of the patient's registration, after which time the 23 patient may be dispensed medical cannabis in an amount consistent 24 with the requirements of section 10 of P.L.2009, c.307 (C.24:6I-10). 25 The commission shall impose such restrictions on access to medical 26 cannabis pursuant to this subsection as shall be necessary to protect against fraud, abuse, and diversion. 27 d. For ¹a period of <u>270 days following the</u> ¹effective¹ date of 28 ¹[enactment of]¹ P.L., c. (C.) (pending before the Legislature 29 as this bill), a health care practitioner may authorize a patient who is a 30 31 ¹[child,]¹ resident of a long-term care facility, ¹[developmentally disabled] has a developmental disability¹, ¹is¹ terminally ill, ¹is¹ 32 receiving hospice care ¹through a licensed hospice care provider¹, or 33 ¹<u>is</u>¹<u>housebound as certified by the patient's physician, for the medical</u> 34 use of cannabis ¹[in the course of the health care practitioner's 35 practice of <u>using</u>¹ telemedicine or telehealth. ¹[Following the 270] 36 day period after the date of enactment of P.L., c. (C.) (pending 37 before the Legislature as this bill) Thereafter,¹ a health care 38 practitioner may ²initially² authorize any patient for the medical use of 39 cannabis ¹[in the course of the health care practitioner's practice of] 40 using¹ telemedicine or telehealth, provided that, and except in the case 41 42 of a patient who is a ¹[child, developmentally disabled] resident of a long-term care facility, has a developmental disability¹, ¹is¹ 43 terminally ill, ¹is¹ receiving hospice care ¹from a licensed hospice care 44 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 enclosed in superscript numerals has been adopted as follows:

Matter underlined <u>thus</u> is new matter.

¹Senate SHH committee amendments adopted January 27, 2020.

²Assembly AHE committee amendments adopted March 5, 2020.

3

provider¹, or ¹is¹ housebound ¹as certified by the patient's physician¹, 1 2 the patient has had at least one previous in-office ¹[visit] consultation¹ with the health care practitioner prior to the ¹ [patient's authorization] 3 4 practitioner authorizing the patient¹ for the medical use of cannabis ¹using telemedicine or telehealth¹. ²Following the initial 5 authorization, the patient shall have at least one in-office consultation 6 7 with the practitioner on an annual basis in order for the patient to 8 receive continued authorization for the use of medical cannabis. The 9 practitioner may require more frequent in-office consultations if 10 additional consultations are necessary to continue to authorize the 11 patient's use of medical cannabis.² As used in this subsection, "telehealth" and "telemedicine" shall 12 13 have the same meaning as is provided in section 1 of P.L.2017, c.117 14 <u>(C.45:1-61).</u> 15 (cf: P.L.2019, c.153, s.5) 16 17 2. Section 10 of P.L.2009, c.307 (C.24:6I-10) is amended to 18 read as follows: 19 10. a. A health care practitioner shall provide written 20 instructions for a registered qualifying patient or the patient's 21 designated caregiver, or an institutional caregiver acting on behalf 22 of the patient, to present to a medical cannabis dispensary or a 23 clinical registrant concerning the total amount of usable cannabis 24 that a patient may be dispensed, in weight, in a 30-day period, 25 which amount shall not exceed the maximum amount that may be authorized for the patient pursuant to subsection f. of this section. 26 27 b. A health care practitioner may issue multiple written 28 instructions at one time authorizing the patient to receive a total of 29 up to a one-year supply, provided that the following conditions are 30 met: 31 (1) Each separate set of instructions shall be issued for a 32 legitimate medical purpose by the health care practitioner, as 33 provided in P.L.2009, c.307 (C.24:6I-1 et al.); 34 (2) Each separate set of instructions shall indicate the earliest 35 date on which a dispensary or clinical registrant may dispense the 36 cannabis, except for the first dispensation if it is to be filled 37 immediately; and 38 (3) The health care practitioner has determined that providing 39 the patient with multiple instructions in this manner does not create 40 an undue risk of diversion or abuse. 41 c. A registered qualifying patient or the patient's designated caregiver, or an institutional caregiver acting on behalf of a 42 43 qualifying patient, shall present verification of the patient's or 44 caregiver's registration with the commission, as applicable, and 45 these written instructions to any medical cannabis dispensary or 46 clinical registrant at the time the patient or caregiver requests the 47 dispensing or delivery of medical cannabis, which medical cannabis

dispensary or clinical registrant shall verify and log the 1 2 presented. An institutional caregiver shall documentation 3 additionally present an authorization executed by the patient 4 certifying that the institutional caregiver is authorized to obtain 5 medical cannabis on behalf of the patient. A health care 6 practitioner may provide a copy of a written instruction by electronic or other means, including ¹,¹ but not limited to, 7 8 telemedicine and telehealth, as determined by the commission, 9 directly to a medical cannabis dispensary or a clinical registrant on 10 behalf of a registered qualifying patient. The dispensation of 11 medical cannabis pursuant to any written instructions shall occur 12 within one year of the date that the instructions were written or 13 become eligible for dispensing, whichever is later, or the 14 instructions are void.

15 d. (Deleted by amendment, P.L.2019, c.153)

16 Prior to dispensing medical cannabis to a qualifying patient, e. 17 the patient's designated caregiver, or an institutional caregiver, the 18 medical cannabis dispensary or clinical registrant shall access the 19 system established pursuant to section 11 of P.L.2009, c.307 (C.45:1-45.1) to ascertain whether medical cannabis was dispensed 20 21 to or on behalf of the patient by any medical cannabis dispensary or 22 clinical registrant within the preceding 30 days. Upon dispensing 23 medical cannabis to a qualifying patient, the patient's designated 24 caregiver, or an institutional caregiver, the medical cannabis 25 dispensary or clinical registrant shall transmit to the patient's health 26 care practitioner information concerning the amount, strain, and 27 form of medical cannabis that was dispensed.

28 f. (1) Except as provided in paragraph (2) of this subsection, 29 for a period of 18 months after the effective date of P.L.2019, 30 c.153 (C.24:6I-5.1 et al.), the maximum amount of usable cannabis 31 that a patient may be dispensed, in weight, in a 30-day period, shall 32 be three ounces. Commencing 18 months after the effective date of 33 P.L.2019, c.153 (C.24:6I-5.1 et al.), the maximum amount of usable 34 cannabis that a patient may be dispensed shall be prescribed by the 35 commission by regulation.

36 (2) The monthly limits set forth in paragraph (1) of this 37 subsection shall not apply to patients who are terminally ill or who 38 are currently receiving hospice care through a licensed hospice, 39 which patients may be dispensed an unlimited amount of medical 40 cannabis. Qualifying patients who are not receiving hospice care or 41 who are not terminally ill may petition the commission, on a form 42 and in a manner as the commission shall require by regulation, for 43 an exemption from the monthly limits set forth in paragraph (1) of 44 this paragraph, which petition the commission shall approve if the 45 commission finds that granting the exemption is necessary to meet 46 the patient's treatment needs and is consistent with the provisions of 47 P.L.2009, c.307 (C.24:6I-1 et al.).

1 g. The commission shall establish, by regulation, curricula for 2 health care practitioners and for staff at medical cannabis 3 dispensaries and clinical registrants:

4 (1) The curriculum for health care practitioners shall be 5 designed to assist practitioners in counseling patients with regard to 6 the quantity, dosing, and administration of medical cannabis as 7 shall be appropriate to treat the patient's qualifying medical 8 condition. Health care practitioners shall complete the curriculum 9 as a condition of authorizing patients for the medical use of 10 cannabis; and

(2) The curriculum for employees of medical cannabis 11 12 dispensaries and clinical registrants shall be designed to assist the 13 employees in counseling patients with regard to determining the 14 strain and form of medical cannabis that is appropriate to treat the 15 patient's qualifying medical condition. Employees of medical 16 cannabis dispensaries and clinical registrants shall be required to 17 complete the curriculum as a condition of registration with the 18 commission. Completion of the curriculum may constitute part of 19 the annual training required pursuant to paragraph (1) of subsection 20 j. of section 7 of P.L.2009, c.307 (C.24:6I-7).

h. Commencing July 1, 2020, the amount of the sales tax that
may be imposed under the "Sales and Use Tax Act," P.L.1966, c.30
(C.54:32B-1 et seq.) on medical cannabis dispensed by a medical
cannabis dispensary or clinical registrant shall not exceed four
percent.

Commencing July 1, 2021, the amount of the sales tax that may be imposed under the "Sales and Use Tax Act," P.L.1966, c.30 (C.54:32B-1 et seq.) on medical cannabis dispensed by a medical cannabis dispensary or clinical registrant shall not exceed two percent.

Commencing July 1, 2022, medical cannabis dispensed by a
medical cannabis dispensary or clinical registrant shall not be
subject to any tax imposed under the "Sales and Use Tax Act,"
P.L.1966, c.30 (C.54:32B-1 et seq.).

Any revenue collected pursuant to a tax imposed on the sale of medical cannabis under the "Sales and Use Tax Act," P.L.1966, c.30 (C.54:32B-1 et seq.), shall be exclusively appropriated to programs for the treatment of mental health and substance use disorders.

i. A municipality in which a medical cannabis dispensary is
located may adopt an ordinance imposing a transfer tax on any
medical cannabis dispensed by the dispensary, including medical
cannabis that is furnished by the dispensary to a medical cannabis
handler for delivery to a registered qualifying patient or the patient's
caregiver. The rate of a transfer tax established pursuant to this
subsection shall be at the discretion of the municipality, except that

S619 [2R] O'SCANLON

- 1 in no case shall the rate exceed two percent of the purchase price of
- 2 the medical cannabis.
- 3 (cf: P.L.2019, c.153, s.18)
- 4
- 5 3. This act shall take effect immediately.