GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2021

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SENATE BILL 711 PROPOSED COMMITTEE SUBSTITUTE S711-PCS15315-BPf-15

Short Title: N	C Compassionate Care Act.	(Public)
Sponsors:		
Referred to:		
April 8, 2021		
A BILL TO BE ENTITLED AN ACT ENACTING THE NORTH CAROLINA COMPASSIONATE CARE ACT. The General Assembly of North Carolina enacts:		
	TION 1. Chapter 90 of the General Statutes is amended	l by adding a new Article
to read:	"Autiala 5II	
	"North Carolina Composionata Caro Act	
" <u>§ 90-113.110.</u>	"North Carolina Compassionate Care Act.	
	shall be known and may be cited as the "North Carol	ina Compassionate Care
Act."	shari de kilowir and may de erect as the Troth Carol	ma compassionate care
·	Legislative findings and purpose.	
	Assembly makes the following findings:	
(1)	Modern medical research has found that can	nabis and cannabinoid
	compounds are effective at alleviating pain, nause	•
	associated with several debilitating medical condition	ns.
<u>(2)</u>	As of May 2021, 36 states and the District of C	Columbia have removed
	state-level criminal penalties for the medical use, cul	tivation, and distribution
	of cannabis, and in enacting this Article, North Ca	
	action to preserve and enhance the health and welfar	
<u>(3)</u>	This Article is intended to make only those changes to	_
	laws that are necessary to protect patients and their d	
	civil penalties and is not intended to change current	•
(4)	governing the use of cannabis for nonmedical purpos	_
<u>(4)</u>	The General Assembly enacts this Article pursuant to	
	legislation for the protection of the health of its cit	
# 00 112 114 ·	State in the Tenth Amendment of the United States (onstitution.
"§ 90-113.114. Definitions. The following definitions apply in this Article:		
	=	dominad cololy from an
<u>(1)</u>	Adequate supply. – An amount of usable cannabis	
	intrastate source that is possessed by a qualified possessed by a qualified patient and the qualified	<u> </u>
	caregiver, in an amount that does not exceed what is	
	assure the uninterrupted availability of cannabis for a	
	form recommended by the qualified patient's phys	
	alleviating the symptoms or effects of the qualifi	
	medical condition	ea patients decintating



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1 (10)Medical cannabis center. – A facility owned and operated by a supplier that 2 possesses and dispenses cannabis and cannabis-infused products to registry 3 identification cardholders for human consumption. Medical use of cannabis or medical use. - The acquisition, administration, 4 <u>(11)</u> 5 possession, preparation, transportation, or use of cannabis 6 cannabis-infused products, or paraphernalia used to administer cannabis 7 products, to treat or alleviate a qualifying patient's debilitating medical 8 condition or symptoms associated with the qualifying patient's debilitating 9 medical condition and includes the transfer of cannabis products from a 10 designated caregiver to a qualifying patient whom the designated caregiver is 11 authorized to assist. "Medical use" does not include the extraction of resin 12 from cannabis by solvent extraction other than water, glycerin, propylene glycol, vegetable oil, or food grade ethanol (ethyl alcohol), unless the 13 14 extraction is done by a processing facility. Physician. – A person licensed under Article 1 of Chapter 90 of the General 15 (12)Statutes who is in good standing to practice medicine in the State. A physician 16 17 shall complete a three-hour continuing medical education course on cannabis 18 and an annual one-hour supplemental medical education course thereafter, as 19 approved by the North Carolina Medical Board. 20 (13)Production facility. - A facility owned and operated by a supplier that 21 cultivates, possesses, and produces cannabis and cannabis-infused products. Qualified patient. – A person who has been diagnosed by a physician as 22 <u>(14)</u> 23 having a debilitating medical condition and has received a written 24 certification. 25 Registry identification card. – A document issued by the North Carolina (15)26 Department of Health and Human Services pursuant to G.S. 90-113.118 that 27 identifies a person as a qualified patient or a designated caregiver. 28 Registry identification cardholder. – A qualified patient or a designated (16)29 caregiver who holds a valid registry identification card issued by the North 30 Carolina Department of Health and Human Services pursuant to 31 G.S. 90-113.118. 32 Regulated medical cannabis supply system or system. – A system established <u>(17)</u> 33 by the North Carolina Department of Health and Human Services pursuant to 34 G.S. 90-113.120 to provide a safe method for producing and distributing 35 cannabis and cannabis-infused products to registry identification cardholders. 36 Supplier. – A person licensed pursuant to G.S. 90-113.120 to supply cannabis (18)37 and cannabis-infused products as authorized by this Article. A supplier 38 cultivates cannabis, owns and operates one or more medical cannabis centers, 39 and owns and operates one or more production facilities as set forth in 40 G.S. 90-113.120. 41 Usable cannabis. – The dried buds and mature female flowers of the plant of <u>(19)</u> 42 the genus Cannabis, and any mixture or preparation thereof, that are 43 appropriate for medical use as provided in this Article. Written certification. - A statement signed by a physician with whom the 44 (20)45 patient has a bona fide physician-patient relationship indicating the following: 46 In the physician's professional opinion, the patient has a debilitating <u>a.</u> 47 medical condition. 48 In the physician's professional opinion, the potential health benefits of <u>b.</u> 49 the medical use of cannabis would likely outweigh the health risk for 50 the patient.

<u>c.</u>

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The delivery method of the cannabis.

"§ 90-113.116. Medical Cannabis Advisory Board; membership; terms; meetings; quorum; 1 2 expenses. 3 Advisory Board Established. – The Medical Cannabis Advisory Board is established (a) 4 and shall consist of 13 members as follows: 5 The Governor shall appoint members to the Advisory Board as follows: (1) 6 A physician specializing in pain management. 7 A general physician. b. 8 A physician specializing in osteopathic medicine. <u>c.</u> 9 A physician who is board-certified to practice addiction medicine in d. 10 North Carolina. 11 A research scientist with expertise in the field of cannabinoid <u>e.</u> 12 medicine. 13 A licensed pharmacist. <u>f.</u> 14 A registry identification cardholder or, for an appointment made g. before registry identification cards are issued, one person with a 15 debilitating medical condition who intends to use cannabis. 16 17 A parent of a minor qualified patient or, for an appointment made <u>h.</u> before registry identification cards are issued, one parent of a minor 18 19 with a debilitating medical condition who intends to use cannabis. 20 A representative of a supplier or, for an appointment made before i. 21 suppliers are licensed, a prospective supplier. 22 **(2)** Two members appointed by the General Assembly upon recommendation of 23 the Speaker of the House of Representatives in accordance with G.S. 120-121. 24 (3) Two members appointed by the General Assembly upon recommendation of 25 the President Pro Tempore of the Senate in accordance with G.S. 120-121. 26 Terms. – Members of the Advisory Board shall serve a four-year term, beginning 27 effective July 1 of the year of appointment, and may be reappointed to a second four-year term. 28 Chair. – The members of the Advisory Board shall elect a chair. The chair shall serve (c) 29 a two-year term and may be reelected. 30 Meetings. – The Advisory Board shall meet at least two times per year for the purpose 31 of reviewing petitions to add debilitating medical conditions. 32 Power. – The Advisory Board shall have the power to approve adding a debilitating 33 medical condition by a majority vote of the members present and voting. 34 Quorum. – Seven members of the Advisory Board shall constitute a quorum for the (f) 35 transaction of business. 36 Expenses. – The members of the Advisory Board shall receive per diem and necessary 37 travel and subsistence expenses in accordance with the provisions of G.S. 138-5. 38 "§ 90-113.118. Registry identification cards for qualified patients and designated 39 caregivers. 40 Applications, Issuance, and Expiration of Registry Identification Cards. – The 41 Department shall issue or renew a registry identification card to the following individuals: 42 Any individual who applies to the Department on forms prescribed by the (1) 43 Department demonstrating that the individual is a qualified patient with a debilitating medical condition for which a physician has issued a written 44 45 certification. 46 (2) Any individual who is at least 21 years of age who has (i) been named as a designated caregiver in a registry identification card application submitted by 47 48 a qualified patient and (ii) agreed to serve as that qualified patient's designated 49 caregiver. The Department may issue a registry identification card to a 50 maximum of two designated caregivers named in a qualified patient's approved application. 51

The Department shall issue a registry identification card to an applicant within 14 business days after approving an application or renewal. The initial or renewal registry identification card expires one year after the date of issuance.

(b) Oualified Patients Under Age 18. – The Department may not issue or renew a registry

- (b) Qualified Patients Under Age 18. The Department may not issue or renew a registry identification card to a qualified patient under 18 years of age unless each of the following criteria is met:
 - (1) The qualified patient's physician has explained the potential risks and benefits of the medical use of cannabis to the qualified patient and to a parent, guardian, or person having legal custody of the qualified patient.
 - (2) The qualified patient's physician restricts the qualified patient's use of cannabis to a noninhalation consumption method, and the qualified patient and the qualified patient's designated caregivers agree to comply with this restriction.
 - (3) A parent, guardian, or person having legal custody of the qualified patient consents in writing to (i) allow the qualified patient's medical use of cannabis, (ii) serve as one of the qualified patient's designated caregivers, and (iii) control the acquisition of the cannabis, the dosage, and the frequency of the medical use of cannabis by the qualified patient.
- (c) Review of Applications. The Department shall verify the information contained in a registry identification card application or renewal application submitted pursuant to this section and shall approve or deny an application or renewal application within 45 days after receipt.
- (d) Denials and Appeals. The Department may deny a registry identification card application or renewal application only if the applicant fails to provide the information required pursuant to this section or if the Department determines that the application or renewal application contains false information. Denials may be appealed by filing a contested case petition under Article 3 of Chapter 150B of the General Statutes. Article 4 of Chapter 150B of the General Statutes governs judicial review of an administrative decision made under this section.
- (e) Registry Identification Card Information. Each registry identification card issued by the Department shall be printed with tamper-resistant technology and shall contain at least all of the following information:
 - (1) The name of the cardholder.
 - (2) The address of the cardholder.
 - (3) The cardholder's date of birth.
 - (4) A designation of whether the cardholder is a designated caregiver or qualifying patient.
 - (5) The date of issuance and expiration date of the registry identification card.
 - (6) A random alphanumeric identification number that is unique to the cardholder.
 - (7) If the cardholder is a designated caregiver, the random alphanumeric identification number of the qualifying patients that the designated caregiver is authorized to assist.
 - (8) A photograph of the cardholder.
 - (9) The delivery method of the cannabis.
- (f) Notification of Changes. Individuals issued registry identification cards are subject to all of the following:
 - (1) A qualified patient who has been issued a registry identification card shall notify the Department of any change in the qualified patient's name, address, or designated caregiver and submit a fifty dollar (\$50.00) fee to the Department within 15 days after the change occurs. A qualified patient who fails to notify the Department of any of these changes within the specified

- time frame commits an infraction and is subject to a fine not to exceed one hundred dollars (\$100.00).
 - A designated caregiver shall notify the Department of any change in name or address and submit a fifty dollar (\$50.00) fee to the Department within 15 days after the change occurs. A designated caregiver who fails to notify the Department of any of these changes within the specified time frame commits an infraction and is subject to a fine not to exceed one hundred dollars (\$100.00).
 - When a qualified patient or designated caregiver notifies the Department of any change, as required by this subsection, the Department shall issue the qualified patient and each designated caregiver a new registry identification card within 10 days after receiving the updated information and the fifty dollar (\$50.00) fee.
 - When a qualified patient who possesses a registry identification card notifies the Department of a change in designated caregiver, the Department shall notify the designated caregiver of record of the change within 15 days after receiving notification of the change. The protections afforded under this Article to the designated caregiver of record shall expire 30 days after the designated caregiver of record is notified by the Department of the change in designated caregiver.
 - (5) If a qualified patient or a designated caregiver loses a registry identification card, the cardholder shall notify the Department within 15 days after losing the card. The notification shall include a fifty dollar (\$50.00) replacement fee for a new card. Within five days after receiving notification of a lost registry identification card, the Department shall issue the cardholder a new registry identification card with a new random identification number.
 - (g) Suspensions or Revocations. If the Department determines that a qualified patient or designated caregiver has violated any provision of this Article, the Department shall suspend or revoke the qualified patient's or designated caregiver's registry identification card. Suspensions or revocations may be appealed by filing a contested case petition under Article 3 of Chapter 150B of the General Statutes.
 - (h) Confidential Medical Cannabis Registry Database. The Department shall create a secure, confidential, electronic medical cannabis registry database of all qualified patients and designated caregivers to whom the Department has issued registry identification cards. Law enforcement agencies may contact the Department to confirm registry identification cardholders. The Department shall monitor the medical cannabis registry database and in the event that the Department finds patterns of written certifications that are unusual, the Department shall inform the Attorney General's Office of its findings. The Office of the Attorney General shall review the Department's findings to determine if the findings should be reported to the State Bureau of Investigation and the appropriate sheriff for investigation of possible violations of State or federal law. The database shall consist of at least the following information:
 - (1) The name and address of the registry identification cardholder.
 - (2) The name, address, and hospital affiliation of the physician who issued the written certification of the qualified patient's debilitating condition.
 - (3) A photograph of the registry identification cardholder.
 - (i) Confidential Nature of Information Collected by Department. Applications and supporting information submitted by qualified patients, including information regarding their designated caregivers and physicians, individual names, and other identifying information in the medical cannabis registry database, are confidential, exempt from the provisions of Chapter 132 of the General Statutes, and are not subject to disclosure, except to authorized employees of the

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Department as necessary to perform official duties of the Department and law enforcement agencies as allowed in subsection (h) of this section.

- (j) Penalty for Confidentiality Breaches. Any person, including an employee or official of the Department or another State agency or local government, who breaches the confidentiality of information obtained pursuant to this section is guilty of a Class 2 misdemeanor; however, any fine imposed for a violation under this subsection shall not exceed one thousand dollars (\$1,000).
- (k) Reports of Falsified or Fraudulent Application Information to Law Enforcement Personnel. Nothing in this section shall be construed to prevent Department employees from notifying law enforcement personnel about falsified or fraudulent information submitted to the Department by any individual in support of an application for a registry identification card.
- (*I*) Rules. Not later than 270 days after the effective date of this act, the North Carolina Medical Care Commission shall adopt rules to implement the provisions of this section. The rules shall establish requirements for the issuance of registry identification cards to qualified patients and designated caregivers, which shall include at least all of the following:
 - (1) The method of demonstrating written certification, as defined in G.S. 90-113.114.
 - (2) The amount of the initial or renewal application fee, which shall not exceed fifty dollars (\$50.00) per application or renewal application.
 - (3) The name, address, and date of birth of the qualified patient.
 - (4) The name, address, and telephone number of the qualified patient's physician.
 - (5) The name, address, and date of birth of each of the qualified patient's designated caregivers, if any.

"§ 90-113.120. Regulated medical cannabis supply system.

- (a) Definitions. The following definitions apply in this section:
 - (1) Nonresident business. An entity that has not been required to file an income or franchise tax return with the State for three years prior to filing an initial application for a medical cannabis supplier license that meets one or more of the following conditions:
 - a. Is a nonresident entity.
 - <u>b.</u> <u>Is a nonresident individual who owns an unincorporated business as a sole proprietor.</u>
 - (2) Nonresident entity. Defined in G.S. 105-163.1.
 - (3) Nonresident individual. Defined in G.S. 105-153.3.
- Medical Cannabis Supply System; Funding. Not later than 270 days after the effective date of this act, the Medical Cannabis Production Commission established in G.S. 90-113.122 shall establish a medical cannabis supply system that authorizes suppliers to produce cannabis and cannabis-infused products in licensed cannabis products facilities and distribute them through medical cannabis centers. In establishing the medical cannabis supply system, the Commission shall (i) provide a safe, regulated supply of cannabis appropriate for medical use by qualified registry identification cardholders issued under G.S. 90-113.118, (ii) ensure statewide access to safe and affordable cannabis to registry identification cardholders, (iii) establish a system that is well regulated, includes a seed-to-sale tracking system, and is financially viable for suppliers to ensure the highest quality cannabis and cannabis-infused products for patients, and (iv) generate sufficient revenue for the Commission to oversee and for the Department to maintain and operate the system. The General Assembly may appropriate funds for the initial development and implementation of the medical cannabis supply system, but neither the Department nor the Commission shall use any appropriations from the General Fund to operate the system. The intent of the General Assembly is that the system shall be funded solely by the fees authorized in this section.
 - (c) Medical Cannabis Supplier License. –

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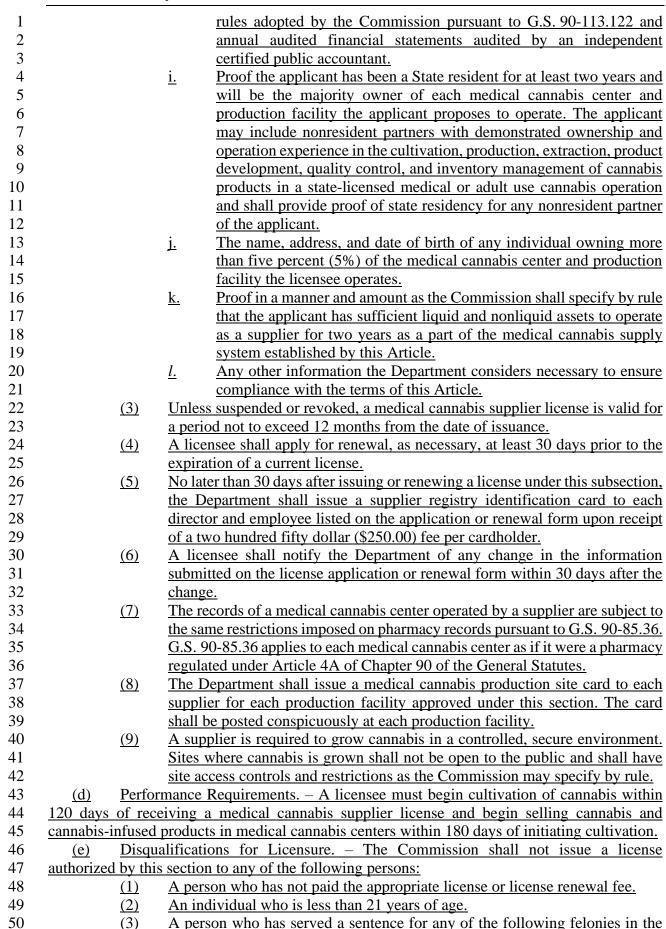
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- requirements as the Commission shall specify by rule.
- The name, address, and date of birth of each principal officer and <u>e.</u> board member of the supplier.
- The name, address, and date of birth of each employee of the supplier. <u>f.</u>
- For first-year licensees, a nonrefundable license fee in the amount of g. fifty thousand dollars (\$50,000) plus five thousand dollars (\$5,000) for each production facility or medical cannabis center the applicant proposes to operate under the license.
- For licensees seeking license renewal, a nonrefundable renewal fee in h. an amount not less than ten thousand dollars (\$10,000) plus one thousand dollars (\$1,000) for each production facility or medical cannabis center the licensee operates under the license as specified in

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five years immediately preceding the date of license application: any Class A

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- through E felony; any felony that includes assault as an essential element of the offense; any felony under Article 14 (Burglary and Other Housebreakings) of Chapter 14 of the General Statutes; any felony under Article 16 (Larceny), Article 16A (Organized Retail Theft), Article 17 (Robbery), Article 18 (Embezzlement), Article 19 (False Pretenses and Cheats), Article 19A (Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means), Article 19B (Financial Transaction Card Crime Act), or Article 19C (Financial Identity Theft) of Chapter 14 of the General Statutes.
- (4) A person (or, with respect to a person who is not an individual, an owner, director, or employee of the person) who at any time has been convicted of a felony violation for manufacturing, selling, delivering, or possessing with intent to manufacture, sell, deliver, or possess a Schedule I or II controlled substance, in violation of G.S. 90-95(b)(1).
- (5) Except as otherwise provided in this subdivision, a person who has not been a resident of North Carolina for at least two years prior to the date of the license application, unless that person is a minority partner of a State resident who is the majority owner of the applicant. With respect to a person who is not an individual, a person that is a nonresident business.
- Criminal History Record Check. In order to ensure compliance with this section, the Department shall conduct a criminal history record check of any person whose name is submitted on an application as an owner, director, or an employee of the supplier. When requested by the Department, the North Carolina Department of Public Safety may provide to the Department a person's criminal history from the State Repository of Criminal Histories. Such requests shall not be due to a person's age, sex, race, color, national origin, religion, creed, political affiliation, or handicapping condition as defined in G.S. 168A-3. For requests for a State criminal history record check only, the Department shall provide to the Department of Public Safety a form consenting to the check signed by the person to be checked and any additional information required by the Department of Public Safety. National criminal record checks are authorized for applicants who have not resided in the State of North Carolina during the past five years. For national checks, the Department shall provide to the North Carolina Department of Public Safety the fingerprints of the person to be checked, any additional information required by the Department of Public Safety, and a form signed by the person to be checked consenting to the check of the criminal record and to the use of fingerprints and other identifying information required by the State or National Repositories. The fingerprints of the individual shall be forwarded to the State Bureau of Investigation for a search of the State criminal history record file and the State Bureau of Investigation shall forward a set of fingerprints to the Federal Bureau of Investigation for a national criminal history record check. The Department of Health and Human Services shall keep all information pursuant to this section confidential. The Department of Public Safety shall charge a reasonable fee for conducting the checks of the criminal history records authorized by this section. All releases of criminal history information to the Department shall be subject to, and in compliance with, rules governing the dissemination of criminal history record checks as adopted by the North Carolina Department of Public Safety. All of the information either department receives through the checking of the criminal history is privileged information and for the exclusive use of that department.
- (g) Restrictions on Sales and Supply. A person licensed as a supplier under this section is subject to the following sales and supply restrictions:
 - (1) The supplier may sell cannabis and cannabis-infused products only through the medical cannabis center that the supplier is licensed to operate under this section. A medical cannabis center shall not sell cannabis, cannabis-infused products, or paraphernalia relating to the administration of cannabis to any person other than a qualified patient, designated caregiver, or except as

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- provided in subdivision (3) of this subsection. A medical cannabis center shall not sell cannabis or cannabis-infused products in an amount that exceeds an adequate supply to any qualified patient or designated caregiver.
- The supplier may sell only cannabis grown by the supplier at the production (2) facilities approved under this section. Except as provided in subdivision (3) of this subsection, the supplier shall not sell cannabis, cannabis plants, cannabis seeds, or cultivation equipment to any other person other than through the medical cannabis center that the supplier is licensed to operate.
- The supplier may sell cannabis or cannabis-infused products for resale to (3) another licensed supplier.
- Exemption from Criminal Laws. A supplier is exempt from the criminal laws of this (h) State for possession, production, delivery, or transportation of cannabis, or aiding and abetting another in the possession, production, delivery, or transportation of cannabis, or any other criminal offense in which possession, production, delivery, or transportation of cannabis is an element if the individual is in compliance with this Article and rules adopted under this Article.
- Loss of Exemption from Criminal Laws. A person who is not a qualified patient or a designated caregiver but who is otherwise authorized to possess, produce, deliver, or transport cannabis for medical use pursuant to this Article ceases to be exempt as provided in subsection (h) of this section upon committing any of the following acts:
 - Driving while impaired in violation of G.S. 20-138.1, 20-138.2, or 20-138.5. (1)
 - (2) Delivering cannabis to any individual who the person knows or has reason to know is not a qualified patient or designated caregiver who holds a valid registry identification card issued under G.S. 90-113.118, or a supplier who holds a license under this section.
 - Manufacturing or distributing cannabis at an address not registered with the (3) Department.
 - Failing to report transfer of cannabis authorized under this section to the <u>(4)</u> Department.
 - Reporting and Monthly Fees. <u>(j)</u>
 - (1) Each supplier licensed under this section shall submit quarterly reports to the Department on all financial transactions, including, but not limited to, production, sales and purchases of cannabis and cannabis-infused products, and transfers of cannabis and cannabis-infused products for no consideration with respect to each medical cannabis center and production facility operated by the supplier.
 - Each supplier licensed under this section shall pay to the Department a (2) monthly fee equal to ten percent (10%) of the gross revenue derived from the sale of cannabis and cannabis-infused products at all medical cannabis centers operated by the supplier.
 - Nothing in this subsection shall be construed to exempt persons licensed under (3) this section from the reporting or remittance of sales tax for any transaction upon which a sales tax may be levied.
- Duty to Update. In order to continue to hold a license under this Article, a medical cannabis licensee shall notify the Commission of any change in criminal history of any person required to be evaluated by the Department under this section. The Commission may reevaluate the licensee's eligibility for a license based on the notification and may modify or revoke the license or require issuance of a new license with appropriate terms to exclude disqualifying persons.
- <u>Self-Supporting Requirement. The Commission shall use system revenues from</u> license fees and monthly gross revenue fees to fund, in the following order of priority:

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- 1 (1) Costs associated with establishing and operating the regulated medical 2 cannabis supply system established under this section. 3
 - The registry system established under G.S. 90-113.118. **(2)**
 - The North Carolina Cannabis Research Program established under (3) G.S. 90-113.132, limited to an amount of funding to be determined by the Commission.
 - Use of Excess Revenues. Any revenues remaining after the Commission fully funds (m) the priorities set forth in this subsection shall be transferred by the Commission to the General Fund.
 - (n) Inspection. – The Department shall perform annual inspections of the premises of any person licensed under this section, including any production facility or medical cannabis center.
 - Security Measures and Inspection.
 - Suppliers shall implement appropriate security measures in accordance with (1) rules adopted by the Commission, which shall be developed by the Commission after consulting with and receiving input from the North Carolina State Bureau of Investigation, designed to deter and prevent the theft of cannabis and cannabis-infused products and unauthorized entrance into areas containing cannabis or cannabis-infused products.
 - All production facilities shall conduct cultivation, harvesting, processing, and (2) packaging of cannabis and cannabis products in a controlled, secure facility at a physical address provided to the Commission during the medical cannabis supplier license application process. A production facility may only be accessed by a supplier or a supplier's employee or agent, authorized Department personnel, law enforcement personnel, emergency personnel, and adults who are 21 years of age and older who are accompanied by a supplier or supplier's agents or principals.
 - All production facilities and medical cannabis centers owned and operated by (3) a supplier are subject to random inspection by the Department, and the North Carolina State Bureau of Investigation in accordance with rules adopted by the Commission, which shall be developed by the Commission after consulting with and receiving input from the North Carolina State Bureau of Investigation.
 - Limitation. The Commission shall issue no more than 10 supplier licenses pursuant (p) to this section. In awarding the licenses, the Commission shall require each supplier own and operate no more than four medical cannabis centers. Of the medical cannabis centers operated by each supplier, at least two shall be located in Tier 1 counties.
 - Administrative and Judicial Review. Articles 3 and 4 of Chapter 150B of the General Statutes govern administrative and judicial review of an administrative decision made under this section.

"§ 90-113.121. Violations; penalties; and enhanced sentence for trafficking related to medical cannabis.

- Any person who manufactures, sells, delivers, or possesses with intent to (a) manufacture, sell, or deliver cannabis in violation of this Article at a medical cannabis center or production facility shall be punished as a Class G felon.
- Any person who creates, sells, delivers, or possesses with intent to sell or deliver counterfeit cannabis in violation of this Article at a medical cannabis center or production facility shall be punished as a Class H felon.
- Any person who possesses an amount of cannabis up to 1 1/2 ounces in violation of this Article, at a medical cannabis center or production facility, shall be deemed guilty of a Class A1 misdemeanor.

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(d)

violation of this Article, at a medical cannabis center or production facility, shall be punished as a Class H felon.

(e) Any person that provides the Department with false or misleading information in relation to a registry identification and on ligance shall be deemed englished.

Any person who possesses an amount of cannabis that exceeds 1 1/2 ounces in

- (e) Any person that provides the Department with false or misleading information in relation to a registry identification card or license shall be deemed guilty of a Class 1 misdemeanor.
- (f) Any person who has been issued a valid registry identification card who is found to be in possession of cannabis in violation of this Article shall be punished as a Class I felon.
- (g) If a person is convicted of a violation of G.S. 90-95(h)(1), and it is found that the offense was committed at a medical cannabis center or production facility or with cannabis from a medical cannabis center or production facility, then the person shall be sentenced at a felony class level one class higher than the principal felony for which the person was convicted, and an additional 12 months will be added to the mandatory minimum sentence. No defendant sentenced pursuant to this section shall be sentenced at a level higher than a Class C felony. An indictment or information for the felony shall allege in that indictment or information the facts that qualify the offense for an enhancement under this section. One pleading is sufficient for all felonies that are tried at a single trial.
- (h) These penalties may be imposed in addition to any other penalties provided by law. "§ 90-113.122. Medical Cannabis Production Commission.
- (a) <u>Commission Established. The Medical Cannabis Production Commission is</u> established and shall consist of nine members as follows:
 - (1) The Governor shall appoint members to the Medical Cannabis Production Commission as follows:
 - a. A qualified patient representative.
 - b. Two industry representatives, subject to the limitation that, although the industry representatives may participate in assisting with the process of adopting rules, the industry representatives must not participate in the license selection process if the industry representatives have applied for or have an affiliation with a medical cannabis supplier license applicant through family or business.
 - (2) The Secretary of the Department, or designee.
 - (3) The Director of the North Carolina State Bureau of Investigation, or designee.
 - (4) A sheriff designated by the North Carolina Sheriffs' Association.
 - (5) A member of the North Carolina Medical Board.
 - (6) A member appointed by the General Assembly upon recommendation of the Speaker of the House of Representatives in accordance with G.S. 120-121.
 - (7) A member appointed by the General Assembly upon recommendation of the President Pro Tempore of the Senate in accordance with G.S. 120-121.
- (b) Terms. Members of the Commission shall serve terms of four years, beginning effective July 1 of the year of appointment, and may be reappointed to a second four-year term. The terms of members designated by subdivisions (a)(1), (a)(2), and (a)(4) of this section shall expire on June 30 of any year evenly divisible by four. The terms of the remaining members shall expire on June 30 of any year that follows by two years a year evenly divisible by four.
- (c) Chair. The members of the Commission shall elect a chair. The chair shall serve a two-year term and may be reelected.
- (d) Vacancies. Any appointment to fill a vacancy on the Commission created by the resignation, dismissal, death, or disability of a member shall be made by the original appointing authority and shall be for the balance of the unexpired term.
- (e) Removal. The appointing authority shall have the power to remove any member of the Commission appointed by that authority from office for misfeasance, malfeasance, or nonfeasance.

- 1 (f) Expenses. The members of the Commission shall receive per diem and necessary
 2 travel and subsistence expenses in accordance with the provisions of G.S. 138-5.
 3 (g) Ouorum. Five members of the Commission shall constitute a quorum for the
 - (g) Quorum. Five members of the Commission shall constitute a quorum for the transaction of business.
 - (h) <u>Licensing Power. The Commission shall have the power to approve applications for medical cannabis supplier licenses upon recommendation of the Department by a majority vote of the members present and voting. The Department shall evaluate the applications in accordance with G.S. 90-113.120 and submit a list of 20 applicants to the Commission. The Commission shall approve 10 licenses from the list by a majority vote of the members present and voting.</u>
 - (i) <u>License Suspension or Revocation.</u> The Commission may suspend or revoke a medical cannabis supplier license if the Commission determines that the licensee is not in substantial compliance with this Chapter or with rules adopted by the Commission under subsection (j) of this section. The Department shall notify a licensee at least 14 days in advance of a proposed suspension or revocation, including the reasons for the suspension or revocation and any possible remedial options available to the licensee. The Commission has the power to administer oaths and issue subpoenas to require the presence of persons and the production of papers, books, and records necessary to conduct a suspension or revocation hearing. The suspension or revocation may be appealed by filing a contested case petition under Article 3 of Chapter 150B of the General Statutes.
 - (j) All administrative support and other services required by the Commission shall be provided by the Department.
 - (k) Rules. Not later than 270 days after the effective date of this act, the Commission, in consultation with the North Carolina Medical Care Commission, shall adopt rules to implement the provisions of this section and G.S. 90-113.120. The rules shall do all of the following:
 - (1) Establish qualifications and requirements for licensure of suppliers, for the production of cannabis by a supplier, and for the proper regulation of medical cannabis centers and production facilities operated by suppliers.
 - Ensure the equitable distribution of medical cannabis centers throughout the State in order for registry identification cardholders to access an adequate supply of cannabis and cannabis-infused products, while preventing an overconcentration of medical cannabis centers in any one area.
 - (3) Establish civil penalties for minor violations of the requirements of this Chapter and rules adopted under the authority provided in this subsection.

"§ 90-113.124. Testing of cannabis and cannabis-infused products.

- (a) The Department shall establish standards for and shall license up to five independent testing laboratories to test cannabis and cannabis-infused products that are to be sold in the State. An independent testing laboratory shall analyze a representative sample of all cannabis or cannabis-infused products before the sale or transfer to a medical cannabis center by a production facility. An independent testing laboratory shall report the results of all testing required by the Department to the Department.
- (b) An independent testing laboratory shall be responsible for selecting, picking up, and testing product samples.
 - (c) The Department shall adopt rules to establish, at a minimum, the following:
 - (1) Standards for testing cannabis and cannabis products, including specifying prohibited concentrations of heavy metals, pesticides, microbes, and other contaminants that are injurious to human health.
 - (2) Standards for independent testing laboratories, including requirements for equipment and qualifications for personnel.
 - (3) Standards and requirements necessary for an independent testing laboratory to be licensed.

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- (4) Remedial actions to be taken if the representative sample does not meet the standards established by the Department.
 - (5) A fee schedule for independent testing laboratories.

"§ 90-113.126. Advertising and packaging of cannabis and cannabis-infused products.

- (a) Definitions. The following definitions apply in this section:
 - (1) Child-resistant packaging. A package that is designed or constructed to be significantly difficult for children under 5 years of age to open and not difficult for normal adults to use properly, substantially similar to those defined by 16 C.F.R. § 1700.20 (1995), opaque so that the packaging does not allow the product to be seen without opening the packaging material, and resealable for any product intended for more than a single use or containing multiple servings.
 - (2) Exit packaging. A sealed, child-resistant packaging receptacle into which pre-packaged cannabis products are placed at the retail point of sale at a medical cannabis center.
- (b) The production facility or medical cannabis center logo, advertising, and signage shall be tasteful, respectful, and medically focused and shall not appeal to minors or contain cartoon-like figures or attempts at humor.
- (c) Suppliers are prohibited from using marijuana leaves or slang for cannabis or cannabis-infused products in or on their signs, logos, packaging, or structures. Suppliers may not use neon-colored signage, logos, or packaging or neon-colored signage or logos on structures. The supplier shall submit any logo or sign for review to the Department in accordance with Department rules.
- (d) All production facilities and medical cannabis centers owned and operated by a supplier shall maintain a discreet, professional appearance that is compatible with existing commercial structures or land uses within the immediate area, including requirements to maintain the production facility or medical cannabis center in a manner to prevent blight, deterioration, diminishment, or impairment of property values within the vicinity.
- (e) Suppliers shall safely package and accurately label cannabis or cannabis-infused products. All items sold at a medical cannabis center shall be properly labeled and contained in child-resistant packaging. Labels shall not include strain names but may include cannabinoid and terpene profiles for identification. Each label shall comply with State laws and rules and, at a minimum, shall include:
 - (1) The name of the medical cannabis center.
 - (2) The percentage of tetrahydrocannabinol and the percentage of cannabidiol within a profile tolerance range of ten percent (10%). For edible cannabis products, the cannabinoid profile should be listed by milligrams per serving.
 - (3) The name of the production facility.
 - (4) A conspicuous statement printed in all capital letters and in a color that provides a clear contrast to the background that reads, "NOT FOR RESALE.

 FOR MEDICAL USE ONLY. KEEP OUT OF THE REACH OF CHILDREN AND ANIMALS.".
 - (5) The length of time it typically takes for the product to take effect.
 - (6) For edible cannabis-infused products, the disclosure of ingredients, possible allergens, nutritional fact panel, and a standard symbol indicating that the product contains cannabis.
- (f) All cannabis products purchased in medical cannabis centers shall be placed in child-resistant exit packaging before leaving the medical cannabis center.
 - (g) The Department shall adopt rules to do, at a minimum, all of the following:
 - (1) Establish requirements and procedures for the safe, appropriate, and accurate packaging and labeling of cannabis and cannabis-infused products for human

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consumption, including prohibiting the use of any images designed or likely to appeal to minors, including cartoons, toys, animals, or children, any other likeness to images, characters, or phrases that are popularly used to advertise to children, or any imitation of candy packaging or labeling.

 (2) Establish requirements to ensure that cannabis and cannabis-infused products for human consumption are designed, marketed, and packaged in a manner that is appropriate for a medicinal product and that does not resemble commercially sold candies or other food that is typically marketed to children.

 (3) Establish restrictions on the forms and appearance of edible cannabis-infused products in order to reduce their appeal to minors, including prohibiting edible cannabis products in the shapes of cartoons, toys, animals, or people.

"§ 90-113.128. Disposal of cannabis.

(a) All production center cannabis by-product, cannabis scrap, and harvested cannabis not intended for distribution to a medical cannabis center or independent testing laboratory shall be destroyed and disposed of in accordance with Department rules. Documentation of destruction and disposal shall be retained by the production center for a period of not less than one year. The production center shall maintain a record of the date of destruction and the amount destroyed.

(b) A medical cannabis center shall destroy all cannabis and cannabis-infused products that are not sold to qualifying patients or designated caregivers in accordance with Department rules. The medical cannabis center shall retain documentation of the destruction and disposal for a period of not less than one year. The medical cannabis center shall maintain a record of the date of destruction and the amount destroyed.

(c) A medical cannabis center shall destroy all unused cannabis products that are returned to the medical cannabis center by a former qualifying patient who no longer qualifies for the use of medical cannabis or the former qualifying patient's caregiver.

"§ 90-113.130. North Carolina medical cannabis verification system.

 (a) <u>Verification System. – The Department shall establish a secure web-based verification system. The verification system shall allow authorized Department personnel, State and local law enforcement personnel, and medical cannabis centers to enter a registry identification card number to determine whether the number corresponds with a current, valid registry identification card. For the purposes of this subsection, the system may disclose only:</u>

(1) Whether the registry identification card is valid.

(2) The name, address, and date of birth of the cardholder.
 (3) A photograph of the cardholder, if required by Department rules.

 (4) Whether the cardholder is a qualifying patient or a designated caregiver.

(5) The registry identification card number of any associated qualifying patients or designated caregivers.

 Only if accessed by a medical cannabis center employee or authorized Department personnel, the amount of cannabis and cannabis-infused products dispensed in the past 30 days.

(7) The delivery method of the cannabis.

 (b) Verification System Access. – No person or entity may have access to information contained in the Department's verification system, except for an authorized employee of the Department in the course of official duties or a State or local law enforcement officer in the course of official duties related to a person who claims to be a qualifying patient, designated caregiver, supplier, or supplier agent engaged in conduct authorized in this Article.

(c) Requirement to Check. – Before cannabis or cannabis-infused products may be dispensed to a registry identification cardholder, a medical cannabis center employee shall access the verification system and determine that:

(1) The registry identification card presented at the medical cannabis center is valid.

- (2) Each person presenting a registry identification card is the person identified on the registry identification card presented to the medical cannabis center employee.
 - (3) The amount to be dispensed would not cause a qualifying patient, directly or via the qualifying patient's designated caregiver, to exceed the limit on obtaining no more than an adequate supply of cannabis or cannabis-infused products during any 30-day period.
 - (4) The cannabis to be dispensed complies with the delivery method.
 - (5) After making the determinations required in subdivision (3) of this subsection, but before dispensing cannabis or cannabis-infused products to a registry identification cardholder, a medical cannabis center employee shall enter the following information in the verification system:
 - <u>a.</u> How much cannabis or cannabis-infused product is to be dispensed to the registry identification cardholder.
 - b. Whether the cannabis or cannabis-infused product is to be dispensed directly to the qualifying patient or to the qualifying patient's designated caregiver.
 - <u>c.</u> The date and time the cannabis or cannabis-infused product is to be dispensed.
 - <u>d.</u> The registry identification number of the medical cannabis center that dispensed the cannabis or cannabis-infused product.

"§ 90-113.132. North Carolina Cannabis Research Program.

- (a) It is the intent of the General Assembly that The University of North Carolina System undertake objective, scientific research regarding the administration of cannabis or cannabis-infused products as part of medical treatment. The University of North Carolina shall create a program to be known as the North Carolina Cannabis Research Program.
- (b) The research conducted under this section may involve the development of quality control, purity, and labeling standards for cannabis dispensed through the regulated medical cannabis supply system; sound advice and recommendations on the best practices for the safe and efficient cultivation of cannabis; and analysis of genetic and healing properties of the many varied strains of cannabis to determine which strains may be best suited for a particular condition or treatment.

"§ 90-113.134. North Carolina Medical Cannabis Program Fund.

There is established within the Department the North Carolina Medical Cannabis Program Fund to ensure the availability of funds necessary to carry out the Department's responsibilities under this Article. All monies collected pursuant to this Article shall be deposited into the Fund. The Fund shall be used for direct and indirect costs associated with the implementation, administration, and enforcement of this Article. Revenues generated in excess of the amount needed to implement, administer, and enforce this Article shall be annually distributed to the State General Fund.

"§ 90-113.136. Protections for the medical use of cannabis.

- (a) A registry identification cardholder shall not be subject to arrest, prosecution, or penalty in any manner for the possession or purchase of cannabis for medical use by the qualified patient if the quantity of usable cannabis possessed or purchased does not exceed an adequate supply, as determined by the qualified patient's physician.
- (b) If usable cannabis is infused or added as an ingredient to an edible cannabis product, salve, tincture, or any other preparation to be consumed or used by a qualified patient, the weight of the other ingredients that are not usable cannabis shall not be included for the purpose of determining whether a qualified patient is in possession of an amount of cannabis that exceeds the qualified patient's adequate supply.

(c)

producing, possessing, distributing, or dispensing cannabis or cannabis-infused products in a manner consistent with this Article.

(d) Nothing in this Article shall be construed to extend the protections of this Article to any person including a qualified patient, a designated caregiver, or a supplier, to allow that

A supplier shall not be subject to arrest, prosecution, or penalty in any manner for

(d) Nothing in this Article shall be construed to extend the protections of this Article to any person, including a qualified patient, a designated caregiver, or a supplier, to allow that person to acquire, possess, manufacture, produce, use, sell, distribute, dispense, or transport cannabis in a manner that is not consistent with this Article.

"§ 90-113.138. Educational campaign.

- (a) The Department, in consultation with medical professionals, shall develop an educational campaign about the regulated medical cannabis supply system. The educational campaign shall be regularly advertised through television, online, or social media. The educational campaign must include:
 - (1) The debilitating medical conditions which may be treated with medical use.
 - (2) Potential benefits and risks of the use of cannabis and cannabis-infused products.
 - (3) A notification that cannabis and cannabis-infused products are for a qualifying patient's use only and that they should not be donated or otherwise supplied to another individual.
- (b) The Department shall make the information identified in subsection (a) of this section available online with a link to the information conspicuously located on the Department's website.
- "§ 90-113.140. Reserved for future codification purposes.
- "§ 90-113.142. Reserved for future codification purposes.

"§ 90-113.144. Annual report.

- (a) The Department, in consultation with the Commission and the Advisory Board, shall report annually on the effectiveness of the medical cannabis program operated pursuant to this Article and recommendations for any changes to the program. The report shall, without disclosing any identifying information about cardholders, physicians, qualified patients, designated caregivers, or suppliers, contain the following, at a minimum:
 - (1) The number of registry identification card applications submitted, approved, and renewed.
 - (2) The number of qualifying patients and designated caregivers served by each medical cannabis center during the report year.
 - (3) The nature of the debilitating medical conditions of the qualifying patients and a breakdown of qualifying patients by age group.
 - (4) The new debilitating medical conditions added by the Advisory Board, if any.
 - (5) The efficacy of or satisfaction with cannabis and cannabis-infused products on a yes-no questionnaire as submitted by qualifying patients in a voluntary, anonymous survey, which may be conducted online or through medical cannabis centers.
 - (6) The number of registry identification cards denied, suspended, or revoked.
 - (7) The number of physicians providing written certifications for qualifying patients.
 - (8) The number of suppliers, production facilities, and medical cannabis centers by county.
- (b) The report shall be submitted to the Joint Legislative Oversight Committee on Health and Human Services and to the Joint Legislative Oversight Committee on Justice and Public Safety by October 1 of each year, beginning in 2022.

"§ 90-113.146. Construction of Article.

This Article shall not be construed to do any of the following:

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SECTION 6. This act is effective when it becomes law and applies to acts committed on and after that date.

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