PRINTER'S NO. 924

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 835 Session of 2023

INTRODUCED BY REGAN AND BREWSTER, JUNE 20, 2023

REFERRED TO LAW AND JUSTICE, JUNE 20, 2023

AN ACT

Amending the act of April 17, 2016 (P.L.84, No.16), entitled "An act establishing a medical marijuana program; providing for patient and caregiver certification and for medical marijuana organization registration; imposing duties on the Department of Health; providing for a tax on medical marijuana organization gross receipts; establishing the Medical Marijuana Program Fund; establishing the Medical Marijuana Advisory Board; establishing a medical marijuana research program; imposing duties on the Department of Corrections, the Department of Education and the Department of Human Services; and providing for academic clinical research centers and for penalties and enforcement," in preliminary provisions, further providing for definitions; in program, further providing for program established, for confidentiality and public disclosure, for lawful use of medical marijuana and for unlawful use of medical marijuana; in practitioners, further providing for practitioner registration, for practitioner restrictions, for issuance of certification and for duration; in patients, further providing for identification cards, for verification and for contents of identification card; in medical marijuana organizations, further providing for granting of permit, for relocation and for limitations on permits; in medical marijuana controls, further providing for electronic tracking, for grower/processors, for storage and transportation, for laboratory and for prices and providing for recalls; in dispensaries, further providing for dispensing to patients and caregivers and for facility requirements; in tax on medical marijuana, further providing for Medical Marijuana Program Fund; in Medical Marijuana Advisory Board, further providing for advisory board; in research program, further providing for establishment of medical marijuana research program, for medical marijuana research program administration and for approval; in academic clinical research centers and clinical registrants, further

providing for legislative findings and declaration of policy, for definitions and for clinical registrants and providing for termination of contract; and, in miscellaneous provisions, further providing for applicability.

The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

Section 1. The definitions of "certified medical use," "excipients," "harvest batch," "harvest lot," "patient," "process lot" and "serious medical condition" in section 103 of the act of April 17, 2016 (P.L.84, No.16), known as the Medical Marijuana Act, are amended and the section is amended by adding a definition to read:

Section 103. Definitions.

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

* * *

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

* * *

"Excipients." Solvents, chemicals or materials reported by a medical marijuana organization [and approved by] to the department for use in the processing of medical marijuana.

* * *

["Harvest batch." A specifically identified quantity of

medical marijuana plant that is uniform in strain, cultivated utilizing the same growing practices, harvested at the same time and at the same location and cured under uniform conditions.

"Harvest lot." A specifically identified quantity of medical marijuana plant taken from a harvest batch.]

* * *

"Office." The Office of Medical Marijuana within the department.

"Patient." An individual who:

(1) has a [serious] medical condition;

(2) has met the requirements for certification under this act; and

(3) is a resident of this Commonwealth.

* * *

"Process lot." An amount of a medical marijuana product of the same type and processed using the same medical marijuana extract, standard operating procedures [and the same or combination of different harvest lots].

* * *

["Serious medical condition." Any of the following:

(1) Cancer, including remission therapy.

(2) Positive status for human immunodeficiency virus or acquired immune deficiency syndrome.

(3) Amyotrophic lateral sclerosis.

(4) Parkinson's disease.

(5) Multiple sclerosis.

(6) Damage to the nervous tissue of the central nervous system (brain-spinal cord) with objective neurological indication of intractable spasticity and other associated neuropathies.

(7) Epilepsy.

(8) Inflammatory bowel disease.

(9) Neuropathies.

(10) Huntington's disease.

(11) Crohn's disease.

(12) Post-traumatic stress disorder.

(13) Intractable seizures.

(14) Glaucoma.

(15) Sickle cell anemia.

(16) Severe chronic or intractable pain of neuropathic origin or severe chronic or intractable pain.

(17) Autism.

(18) Other conditions that are recommended by the advisory board and approved by the secretary under section 1202.]

* * *

Section 2. Section 301(a) introductory paragraph, (4)(v), (9), (13) and (14) of the act are amended, the subsection is amended by adding a paragraph and the section is amended by adding a subsection to read:

Section 301. Program established.

(a) Establishment.--A medical marijuana program for patients suffering from [serious] medical conditions is established. The program shall be implemented and administered by the department. The department shall:

* * *

(4) Establish and maintain an electronic database to include activities and information relating to medical marijuana organizations, certifications and identification cards issued, practitioner registration and electronic

tracking of all medical marijuana as required under this act to include:

* * *

(v) [The] Two-way communication between the database and the tracking system under section 701 [must include information under section 801(a) and any other information required by the department to be used by the department and dispensaries to enable a dispensary to lawfully provide medical marijuana. The tracking system and database shall be capable of providing information in real time. The database shall be capable of receiving information from a dispensary regarding the disbursement of medical marijuana to patients and caregivers. This information shall be immediately accessible to the department and other dispensaries to inhibit diversion and ensure compliance with this act.] with immediate access by the department and dispensaries to information, including all of the following:

(A) Receipts as required under section 801(a) and (c).

(B) Supply and form of medical marijuana limitations requiring verification by dispensaries under section 801(g).

(C) Any other information required by the department to be used by the department and dispensaries to enable a dispensary to lawfully provide medical marijuana or to inhibit diversion and ensure compliance with this act.

* * *

(9) Establish a program to authorize the use of medical

marijuana to conduct medical research relating to the use of medical marijuana to treat [serious] medical conditions, including the collection of data and the provision of research grants.

* * *

(13) Develop recordkeeping requirements for all books, papers, any electronic database or tracking system data and other information of a medical marijuana organization. Information shall be retained for a minimum period of [four years] 180 days unless otherwise provided by the department.

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

(15) Define and publish within 30 days of the effective date of this paragraph guidelines for and monitor the advertising and marketing of medical marijuana in accordance with the following:

(i) Medical marijuana organizations must follow the guidelines.

(ii) Advertising or marketing materials produced by or for a medical marijuana organization shall:

(A) Not require preapproval by the department.

(B) Be free of names, colors and images that would be attractive to individuals under 21 years of age.

(C) Only be placed where the audience is reasonably expected to be 21 years of age or older.

(D) Comply with local ordinances pertaining to signs and advertising.

(iii) Permitted activities shall include the development of and ability to provide and sell medical marijuana organization branded materials.

* * *

(c) Office of Medical Marijuana.--The department shall establish an Office of Medical Marijuana in accordance with the following:

(1) The office shall oversee the Medical Marijuana Program.

(2) A full-time director of the office shall be appointed by the Governor, subject to the consent of a majority of the members elected to the Senate.

Section 2.1. Section 302(a)(5) of the act is amended and the section is amended by adding a subsection to read:

Section 302. Confidentiality and public disclosure.

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

* * *

(5) Information relating to the patient's [serious] medical condition.

* * *

(c) Administration.--Nothing in this section shall preclude aggregation of de-identified data for research purposes, operational key performance measures or sharing of the data for the sole purpose of administering services to patients through a

service provider who is contractually obligated to not use the data for anything other than services provided to a medical marijuana organization.

Section 3. Section 303(b)(2), (3) and (8) of the act are amended and the subsection is amended by adding paragraphs to read:

Section 303. Lawful use of medical marijuana.

* * *

(b) Requirements.--The lawful use of medical marijuana is subject to the following:

* * *

(2) [Subject to regulations promulgated under this act, medical] Medical marijuana may only be dispensed to a patient or caregiver in the following forms:

[(i) pill;

(ii) oil;

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

(iv) a form medically appropriate for administration by vaporization or nebulization, excluding dry leaf or plant form until dry leaf or plant forms become acceptable under regulations adopted under section 1202;

(v) tincture; or

(vi) liquid.

(3) Unless otherwise provided in regulations adopted by the department under section 1202, medical marijuana may not be dispensed to a patient or a caregiver in dry leaf or plant form.]

(i) Infused edible forms meant to be chewed, dissolved, taken sublingually or swallowed. This includes

oil, tincture, capsules, tablets, gummies, liquids, including beverages, and other ingestible forms.

(ii) Infused nonedible forms, including gels, creams, patches and ointments.

(iii) Forms for administration by inhalation, vaporization or nebulization, including flower and plant materials.

* * *

(8) Products packaged by a grower/processor or sold by a dispensary shall [only] be identified by the name of the grower/processor, the name of the dispensary, the form and species of medical marijuana, the percentage of tetrahydrocannabinol and cannabinol contained in the product and any other labeling [required by the department.] deemed necessary by the medical marijuana organization.

(9) Grower/processors and dispensaries may source and sell ancillary devices used to administer medical marijuana.

(10) The department shall publish guidelines for packaging and labeling of medical marijuana. Preapproval of packaging and labels by the department shall not be required. All packaging shall be childproof and free of names, colors and images that would be attractive to individuals under 21 years of age and packaging that will be in contact with the medical marijuana must be food grade.

Section 4. Sections 304(b), 401(a) and (c), 402(a), 403(a)(2) and (3) and (b), 405, 501(c), (d), (e) and (h), 503.1, 508, 603(d) and 609(a) of the act are amended to read:

Section 304. Unlawful use of medical marijuana.

* * *

(b) Unlawful use described.--It is unlawful to:

[(1) Smoke medical marijuana.

(2) Except as provided under subsection (c), incorporate medical marijuana into edible form.]

(3) Grow medical marijuana unless the grower/processor has received a permit from the department under this act.

(4) Grow or dispense medical marijuana unless authorized as a health care medical marijuana organization under Chapter 19.

(5) Dispense medical marijuana unless the dispensary has received a permit from the department under this act.

* * *

Section 401. Practitioner registration.

(a) Eligibility.--A physician included in the registry is authorized to issue certifications to patients to use medical marijuana. To be eligible for inclusion in the registry a physician must:

(1) [A physician must apply] Apply for registration in the form and manner required by the department.

(2) [The department must determine that the physician is, by] By training or experience, be qualified to treat [a serious medical condition] medical conditions. The physician shall provide documentation of credentials, training or experience as required by the department.

(3) [The physician must have] Have successfully completed the course under section 301(a)(6).

* * *

(c) Practitioner requirements.--A practitioner included in the registry shall have an ongoing responsibility to immediately notify the department in writing if [the practitioner knows or has reason to know that any of the following is true with

respect to a patient for whom the practitioner has issued a certification:

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

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

(3) The patient has died.]:

(1) The practitioner chooses to no longer certify an individual.

(2) A patient for whom the practitioner issued a certification has died.

Section 402. Practitioner restrictions.

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

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

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

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

* * *

Section 403. Issuance of certification.

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

* * *

(2) The practitioner has determined that the patient has a [serious] medical condition and has included the condition in the patient's health care record.

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

* * *

(b) Contents.--The certification shall include:

(1) The patient's name, date of birth and address.

(2) The specific [serious] medical condition of the patient.

(3) A statement by the practitioner that the patient has a [serious] medical condition and the patient is under the practitioner's continuing care for the [serious] medical condition.

(4) The date of issuance.

(5) The name, address, telephone number and signature of the practitioner.

(6) Any requirement or limitation concerning the appropriate form of medical marijuana and limitation on the duration of use, if applicable, including whether the patient is terminally ill.

* * *

Section 405. Duration.

Receipt of medical marijuana by a patient or caregiver from [a dispensary] dispensaries may not exceed a 90-day supply. [of individual doses. During the last seven days of any 30-day

period during the term of the identification card, a patient may obtain and possess a 90-day supply for the subsequent 30-day period. Additional 90-day supplies may be provided in accordance with this section for the duration of the authorized period of the identification card unless a shorter period is indicated on the certification.]

Section 501. Identification cards.

* * *

(c) Application.--A patient or a caregiver [may apply, in] applying for an issuance of an identification card shall apply in a form and manner prescribed by the department[, for issuance or renewal of an identification card]. A caregiver must submit a separate application for issuance [or renewal]. Each application must include:

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

(2) The name, address and date of birth of a caregiver.

(3) The certification issued by the practitioner.

(4) The name, address and telephone number of the practitioner and documentation from the practitioner that all of the requirements of section 403(a) have been met.

(5) A one time $50 processing fee. The department may waive or reduce the fee if the applicant demonstrates financial hardship.

(6) The signature of the applicant and date signed.

(7) Other information required by the department.

(d) Forms.--Application [and renewal] forms shall be available on the department's publicly accessible Internet website.

(e) Expiration.--An identification card of a patient or caregiver shall not expire [within one year from the date of

issuance, upon the death of the patient, or as otherwise provided in this section].

* * *

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

Section 503.1. Verification.

The department shall verify the information in a patient or caregiver's application [and on any renewal form].

Section 508. Contents of identification card.

An identification card shall contain the following:

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

(2) The date of issuance [and expiration date].

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

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

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

(6) Any other requirements determined by the department,

except the department may not require that an identification card disclose the patient's [serious] medical condition.

Section 603. Granting of permit.

* * *

(d) Regions.--The department shall establish a minimum of three regions within this Commonwealth for the purpose of granting permits to grower/processors and dispensaries and enforcing this act. The department shall approve permits for grower/processors and dispensaries in a manner which will provide an adequate amount of medical marijuana to patients and caregivers in all areas of this Commonwealth. The department shall consider the following when issuing a permit:

(1) Regional population.

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

(3) The types of serious medical conditions.]

(4) Access to public transportation.

(5) Any other factor the department deems relevant.

Section 609. Relocation.

(a) Authorization.--The department may approve an application from a medical marijuana organization to relocate within [this Commonwealth or] the same permitted region as established in section 603(d) to add or delete activities or facilities.

* * *

Section 5. Section 616(3) and (4) of the act are amended and the section is amended by adding paragraphs to read:

Section 616. Limitations on permits.

The following limitations apply to approval of permits for grower/processors and dispensaries:

* * *

(3) The department may not issue more than five individual dispensary permits to one [person] entity.

(4) The department may not issue more than one individual grower/processor permit to one [person] entity.

* * *

(8) After the initial issuance of permits, any additional dispensary permits shall be awarded using the competitive process and shall be issued in underserved regions based upon patient distance to the nearest dispensary and in counties without a dispensary permit as of the effective date of this paragraph.

(9) If Federal or State law permits the sale of adult use marijuana, each medical marijuana organization shall be automatically issued a permit for growing/processing or dispensing, based on the existing permit or permits, of both medical and adult use marijuana products.

Section 6. Section 701(d) of the act is amended to read:

Section 701. Electronic tracking.

* * *

(d) Reports.--Within one year of the issuance of the first permit to a grower/processor or dispensary, and every three months thereafter in a form and manner prescribed by the department, the following information shall be provided to the department, which shall compile the information and post it on the department's publicly accessible Internet website:

(1) The amount of medical marijuana sold in units by a grower/processor during each three-month period.

(2) The [price] wholesale price by unit of amounts of medical marijuana sold by grower/processors [as determined by

the department].

(3) The amount of medical marijuana purchased in units by each dispensary in this Commonwealth.

(4) The [cost of amounts] wholesale price by unit of medical marijuana [to] received in each dispensary in amounts as determined by the department.

(5) The total amount and dollar value of medical marijuana sold by each dispensary in the three-month period.

Section 7. Section 702(a)(1), (3) and (5) and (b)(2) of the act are amended and subsection (a) is amended by adding paragraphs to read:

Section 702. Grower/processors.

(a) Authorization.--Subject to subsection (b), a grower/processor may do all of the following in accordance with department regulations:

(1) Obtain and transport seed and immature plant material from outside this Commonwealth [during at least one 30-day period per year as designated by the department] to grow and process medical marijuana.

* * *

[(3) Apply solvent-based extraction methods and processes to medical marijuana plants that have failed a test conducted by an approved laboratory at harvest, subject to the following:

(i) The test failure shall be limited to yeast and mold.

(ii) The extracted material shall be processed into a topical form.

(iii) The medical marijuana product must pass a final processed test under section 704.

(iv) The medical marijuana product shall be labeled as remediated.

(v) This paragraph shall expire upon the publication in the Pennsylvania Bulletin of a notice of the secretary's approval of the recommendations relating to a research initiative, as prescribed in section 2003.1.]

(3.1) Obtain industrial hemp-derived cannabidiol and other cannabinoids from any commercial source within or from outside of this Commonwealth.

* * *

(5) [Add] Produce medical marijuana products using excipients or hemp or hemp-derived additives obtained or cultivated in accordance with paragraph (4). Excipients must be pharmaceutical [grade, unless otherwise approved by the department. In determining whether to approve an added substance, the department shall consider the following:

(i) Whether the added substance is] or food grade, permitted by the United States Food and Drug Administration for use in food or is Generally Recognized as Safe (GRAS) under Federal guidelines[.

(ii) Whether the added substance constitutes a known hazard such as], with residual limitations not to exceed Federal guidelines for the subsequent dosage form under the United States Pharmacopeia and the National Formulary, and not a known hazard, including diacetyl, CAS number 431-03-8, and pentanedione, CAS number 600-14-6.

(6) Produce and sell medical marijuana products without limitation or prior approval if the product:

(i) Is in compliance with paragraph (5).

(ii) Has all ingredients listed on the packaging.

(iii) Is in a form authorized by this act.

(b) Limitations.--

* * *

(2) For the purpose of paragraph (1), a grower/processor shall maintain continuous video surveillance. A grower/processor is required to retain the recordings onsite or offsite for a period of no less than [180] 60 days, unless otherwise required for investigative or litigation purposes.

* * *

Section 8. Sections 703(3), 704 and 705 of the act are amended to read:

Section 703. Storage and transportation.

The department shall develop regulations relating to the storage and transportation of medical marijuana among grower/processors, testing laboratories and dispensaries which ensure adequate security to guard against in-transit losses. The tracking system developed by the department shall include all transportation and storage of medical marijuana. The regulations shall provide for the following:

* * *

[(3) Security systems that include a numbered seal on the trailer.]

* * *

Section 704. Laboratory.

(a) [General testing] Contracting.--A grower/processor shall contract with one or more independent laboratories to test the medical marijuana produced by the grower/processor.

(a.1) Approved laboratories.--The department shall approve a laboratory under this subsection and require that the laboratory

report testing results [in a manner as the department shall determine, including requiring a test at harvest and a test at final processing] within the State tracking system. The possession by a laboratory of medical marijuana shall be a lawful use.

(a.2) Samples.--

(1) A grower/processor shall submit a sample of final products utilizing a statistically relevant sample for the size of the batch to a contracted laboratory for testing.

(2) The batch size shall not be limited.

(3) Products may not be transferred for sale to a dispensary without a passing test result.

(b) [Stability testing.--A laboratory shall perform stability testing to ensure the medical marijuana product's potency and purity.] Testing.--A grower/processor shall retain a sample from each medical marijuana product [derived from a harvest batch and request that a sample be identified and collected by a laboratory approved under subsection (a) from each process lot to perform stability testing] tested for sale and submit the stability sample to a contracted laboratory to perform stability testing to ensure the medical marijuana product's potency and purity under the following conditions:

(1) The medical marijuana product is still in inventory at a dispensary in this Commonwealth as determined by the seed-to-sale system.

(2) The stability testing is done at six-month intervals for the duration of the expiration date period as listed on the medical marijuana product [and once within six months of the expiration date].

Section 705. Prices.

The department and the Department of Revenue shall monitor the price of medical marijuana sold by grower/processors and by dispensaries, including a [per-dose] unit price. If the department and the Department of Revenue determine that the prices are unreasonable or excessive, the department may implement a cap on the price of medical marijuana being sold for a period of six months. The cap may be amended during the six-month period. If the department and the Department of Revenue determine that the prices become unreasonable or excessive following the expiration of a six-month cap, additional caps may be imposed for periods not to exceed six months.

Section 9. The act is amended by adding a section to read:

Section 706. Recalls.

(a) Public health or safety.--A grower/processor shall develop and implement a recall process and shall regularly evaluate the products marketed by the grower/processor for quality issues and defects that may impact public health or safety and determine if a recall is necessary.

(b) Process.--Each grower/processor shall have a process for recalls that includes all the following:

(1) How to assess the need for the recall.

(2) A plan of action while conducting a recall.

(3) How to address the depth of the recall.

(4) Whether public warnings should be issued.

(5) A plan to extend the effectiveness checks for the recall.

(c) Definitions.--As used in this section, the following words and phrases shall have the meanings given to them in this subsection unless the context clearly indicates otherwise:

"Recall." A voluntary action by a grower/processor to remove

a marketed product that is considered to be a risk to the public health or safety.

Section 10. Sections 801(b), (d), (e), (f) and (h) introductory paragraph, 802(a), 902(c)(3), 1201(a)(8) and (j)(5)(i) and (ii), 1902(a) and (b), 1903, 1904 and 2000(a)(1) of the act are amended to read:

Section 801. Dispensing to patients and caregivers.

* * *

(b) Requirements.--[A dispensary shall have a physician or a pharmacist available, either in person or by synchronous interaction, to verify patient certifications and to consult with patients and caregivers at all times during the hours the dispensary is open to receive patients and caregivers. If a dispensary has more than one separate location, a physician assistant or a certified registered nurse practitioner may verify patient certifications and consult with patients and caregivers, either in person or by synchronous interaction, at each of the other locations in lieu of the physician or pharmacist. A physician, a pharmacist, a physician assistant or a certified registered nurse practitioner shall, prior to assuming duties under this paragraph, successfully complete the course established in section 301(a)(6). A physician may not issue a certification to authorize patients to receive medical marijuana or otherwise treat patients at the dispensary.] The following shall apply:

(1) A dispensary shall verify patient certification upon entry into the dispensary. The verification may be performed by a pharmacy technician, certified medical assistant or certified nurse aide with supervision of a physician or pharmacist.

(2) A dispensary shall have a physician or a pharmacist available, either in person or by synchronous interaction, to supervise verification of patient certifications and to consult with patients and caregivers at all times during the hours the dispensary is open to receive patients and caregivers.

(3) If a dispensary has more than one location:

(i) A physician assistant or certified registered nurse practitioner may verify patient certifications and consult with patients and caregivers, either in person or by synchronous interaction, at each of the other locations in lieu of the physician or pharmacist.

(ii) The dispensary shall maintain a minimum of a one-to-one medical professional-to-location ratio except for brief periods of time that may include lunch breaks, bathroom breaks, unexpected emergencies and unexpected time off, during which the dispensary is permitted to have a medical professional cover no more than two locations at one time, and the dispensary may be required to show a documented customer service process that prevents excessive wait times for patient consultation. For purposes of this subparagraph, the term "medical professional" shall mean a physician, pharmacist, physician assistant or certified registered nurse practitioner.

(4) A physician, pharmacist, physician assistant, certified registered nurse practitioner, pharmacy technician, certified medical assistant or certified nurse aide shall, prior to assuming duties under this subsection, successfully complete the course established

in section 301(a)(6).

(5) A physician may not issue a certification to authorize patients to receive medical marijuana or otherwise treat patients at the dispensary.

* * *

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

(1) a quantity of medical marijuana greater than [that which the patient or caregiver is permitted to possess under the certification] a 90-day supply of individual doses; or

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

[(e) Supply.--When dispensing medical marijuana to a patient or caregiver, the dispensary may not dispense an amount greater than a 90-day supply until the patient has exhausted all but a seven-day supply provided pursuant to a previously issued certification until additional certification is presented under section 405.]

(f) Verification.--Prior to dispensing medical marijuana to a patient or caregiver, the dispensary shall verify any discrepancy of the information in [subsections (e) and] subsection (g) by consulting or receiving communication to the dispensary tracking system under section 701(a)(2) which connects to the electronic tracking system included in the department's electronic database established under section 301(a)(4)(v) [and the dispensary tracking system under section 701(a)(2)].

* * *

(h) Safety insert.--When a dispensary dispenses medical marijuana to a patient or caregiver for the first time, the dispensary shall provide to that patient or caregiver, as

appropriate, a safety insert and the insert shall be available to a patient upon request at any subsequent visit. The insert shall be developed and approved by the department. The insert shall provide the following information:

* * *

Section 802. Facility requirements.

(a) General rule.--

(1) A dispensary may dispense medical marijuana in an indoor, enclosed, secure facility located within this Commonwealth or in accordance with a curbside delivery protocol as determined by the department.

(1.1) For the purposes of paragraph (1), a dispensary shall maintain continuous video surveillance. If the dispensary has more than one location, continuous video surveillance may be performed on-site at the dispensary location or remotely from a centralized security location if the dispensary has a protocol and communication channel for the centralized security location to communicate with each dispensary location. The dispensary is required to retain the recordings onsite or offsite for a period of no less than [180] 60 days, unless otherwise required for investigative or litigation purposes.

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

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

(4) A dispensary may sell medical devices and instruments which are needed to administer medical marijuana and the dispensary's brand logo products under this act

without prior approval of the department if the dispensary conforms with the advertising guidelines in section 301(a)(15).

(5) A dispensary may sell services [approved by the department] related to the use of medical marijuana.

* * *

Section 902. Medical Marijuana Program Fund.

* * *

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

* * *

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

* * *

Section 1201. Advisory board.

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

* * *

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

(i) The Governor.

(ii) The President pro tempore of the Senate.

(iii) The Majority Leader of the Senate.

(iv) The Minority Leader of the Senate.

(v) The Speaker of the House of Representatives.

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

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

* * *

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

* * *

(5) The written reports under paragraph (4) shall include recommendations and findings as to the following:

[(i) Whether to change the types of medical professionals who can issue certifications to patients.

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

* * *

Section 1902. Establishment of medical marijuana research program.

(a) Program to be established.--The department shall establish and develop a research program to study the impact of

medical marijuana on the treatment and symptom management of [serious] medical conditions. The program shall not include a clinical registrant or academic clinical research center under Chapter 20.

(b) Department duties.--The department shall:

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

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

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

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

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

which will be used to treat the [serious] medical condition.

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

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

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

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

* * *

Section 1903. Medical marijuana research program administration.

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

(1) Real time inventory tracking.

(2) Real time tracking of the medical marijuana

dispensed.

(3) Recall of defective medical marijuana.

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

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

(2) The [serious] medical condition to be studied.

(c) Research reports.--

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

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

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

(4) An annual report of the data required under paragraph (2) shall be submitted to the department beginning

one year after the initiation of a research study for a specific [serious] medical condition and each year thereafter.

Section 1904. Approval.

A vertically integrated health system located in this Commonwealth may petition the department to participate in a research study to study a [serious] medical condition under section 1903. Approval of the vertically integrated health system as a health care medical marijuana organization by the department shall authorize access within a region under section 603(d) to medical marijuana for all patients included in an approved research study.

Section 2000. Legislative findings and declaration of policy.

(a) Legislative findings.--It is determined and declared as a matter of legislative finding:

(1) Patients suffering from [serious] medical conditions deserve the benefit of research conducted in conjunction with the Commonwealth's medical schools to determine whether medical marijuana will improve their conditions or symptoms.

* * *

Section 11. Section 2001 of the act is amended by adding a definition to read:

Section 2001. Definitions.

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

* * *

"Accredited medical school." An institution within this Commonwealth that is accredited by the Liaison Committee of Medical Education or the Commission on Osteopathic College

Accreditation or has gained pre-accreditation or provisional accreditation so that the institution is authorized to enroll students and is affiliated with an accredited institution of higher education within this Commonwealth.

* * *

Section 12. Section 2002 of the act is amended by adding a subsection to read:

Section 2002. Clinical registrants.

* * *

(c) Automatic permits.--If Federal or State law permits the sale of adult use marijuana, each clinical registrant shall be automatically issued permits for growing/processing and dispensing, based on existing permits, of medical and adult use marijuana.

Section 13. The act is amended by adding a section to read:

Section 2005. Termination of contract.

If an academic clinical research center does not renew or terminates a contract with a clinical registrant, the clinical registrant shall retain the grower/processor and dispensary permits and shall be permitted to continue to operate its grower/processor facility and all dispensaries if the facility and dispensaries were operating for a minimum of two years prior to the nonrenewal or termination of the clinical registrant's contract with the academic clinical research center.

Section 14. Section 2109 of the act is amended by adding a subsection to read:

Section 2109. Applicability.

* * *

(c) Required regulations.--If new temporary or permanent regulations are required to implement changes made to this act,

the existing regulations issued by the department will remain in effect until the revised regulations are issued. The department shall transmit notice of the new or revised temporary or permanent regulations to the Legislative Reference Bureau for publication in the next available issue of the Pennsylvania Bulletin within 60 days of the effective date of this subsection.

Section 15. This act shall take effect in 30 days.