1	200482-1 : n : 05/08/2019 : PMG / ma LSA2019-20611
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3	MELSON SUBSTITUTE FOR SB236
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8	SYNOPSIS: Under existing law, unlawful possession of
9	marijuana in the first degree is a Class C or Class
10	D felony, and unlawful possession of marijuana in
11	the second degree is a Class A misdemeanor.
12	This bill would create the CARE Act.
13	This bill would exempt from the crime of
14	unlawful possession of marijuana a person with a
15	qualifying condition who has a valid medical
16	cannabis card for the medical use of cannabis.
17	Carly's Law authorizes the University of
18	Alabama at Birmingham to conduct research on the
19	use of cannabidiol (CBD) in specified circumstances
20	and provides a defense against unlawful possession
21	of marijuana under the research program. The law
22	expires July 1, 2019.
23	This bill would extend Carly's Law until
24	January 1, 2021.
25	Leni's Law provides a defense against
26	unlawful possession of marijuana for an individual

in possession of CBD if the person has a qualifying condition.

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This bill would revise Leni's Law to make conforming changes to the substantive provisions of the law, and repeal the law November 1, 2020.

This bill would authorize residents of this state diagnosed with a qualifying condition and designated caregivers to be registered and obtain a medical cannabis card, thereby authorizing the patient to use cannabis for medical use.

This bill would establish the Alabama Medical Cannabis Commission and provide for its membership.

This bill would require the Alabama Medical Cannabis Commission to establish and administer a patient registry system that registers patients with certain qualifying conditions, to issue medical cannabis cards, to issue licenses for the cultivation, processing, transportation, manufacturing, packaging, dispensing, and sale of cannabis, to adopt rules, and to generally regulate, administer, and enforce a medical cannabis program in the state.

This bill would authorize the Department of Agriculture and Industries to inspect licensed facilities under the program.

This bill would impose sales taxes and privilege taxes.

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This bill would establish a Medical Cannabis
Fund within the General Fund and provide that all
tax proceeds and license fees deposited in the fund
that exceed the costs of the Medical Cannabis
Commission to administer the program would be
deposited in the General Fund.

Amendment 621 of the Constitution of Alabama of 1901, now appearing as Section 111.05 of the Official Recompilation of the Constitution of Alabama of 1901, as amended, prohibits a general law whose purpose or effect would be to require a new or increased expenditure of local funds from becoming effective with regard to a local governmental entity without enactment by a 2/3 vote unless: it comes within one of a number of specified exceptions; it is approved by the affected entity; or the Legislature appropriates funds, or provides a local source of revenue, to the entity for the purpose.

The purpose or effect of this bill would be to require a new or increased expenditure of local funds within the meaning of the amendment. However, the bill does not require approval of a local governmental entity or enactment by a 2/3 vote to

become effective because it comes within one of the specified exceptions contained in the amendment.

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4 A BILL

TO BE ENTITLED

AN ACT

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Relating to the medical use of marijuana; to amend Sections 13A-12-213, 13A-12-214, 13A-12-214.2, 13A-12-214.3, and 20-2-214, Code of Alabama 1975, and to add a new Chapter 2A to Title 20, Code of Alabama 1975; to create the CARE Act; to exempt from the crime of unlawful possession or use of marijuana a resident diagnosed with a qualifying condition who has a valid medical cannabis card for the medical use of cannabis; to establish the Alabama Medical Cannabis Commission and provide for its membership and duties; to provide for a patient registry system of qualified patients and designated caregivers and provide for issuance of medical cannabis cards to registrants; to license the cultivation, processing, transportation, manufacturing, packaging, dispensing, and sale of cannabis; to authorize the Department of Agriculture and Industries to inspect licensed facilities; to impose taxes; to create a Medical Cannabis Fund and provide for its proceeds and expenditures; to provide definitions; to extend Carly's Law; to make conforming changes to Leni's Law; to repeal Leni's Law at a later date; to require reporting to the Legislature; and in connection therewith would have as its

purpose or effect the requirement of a new or increased 2 expenditure of local funds within the meaning of Amendment 621 of the Constitution of Alabama of 1901, now appearing as 3 Section 111.05 of the Official Recompilation of the 5 Constitution of Alabama of 1901, as amended. BE IT ENACTED BY THE LEGISLATURE OF ALABAMA: 6 7 Section 1. Sections 13A-12-213, 13A-12-214, 13A-12-214.2, 13A-12-214.3, and 20-2-214, Code of Alabama 8 1975, are amended to read as follows: 9 10 "\$13A-12-213. "(a) A person commits the crime of unlawful 11 12 possession of marihuana marijuana in the first degree if, 13 except as otherwise authorized: 14 "(1) He or she possesses marihuana marijuana for 15 other than personal use; or 16 "(2) He or she possesses marihuana marijuana for his 17 or her personal use only after having been previously 18 convicted of unlawful possession of marihuana marijuana in the 19 second degree or unlawful possession of marihuana marijuana 20 for his or her personal use only. 21 "(b) Commencing on the effective date of the act 22 adding this subsection, a person has not committed the crime of unlawful possession of marijuana if the person is in 23 24 possession of a valid medical cannabis card issued pursuant to Chapter 2A of Title 20, unless there is reasonable cause to 25

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believe that the information contained on the medical cannabis

card is false or falsified, the medical cannabis card has been

1 obtained by means of fraud, or the person is otherwise in 2 violation of Chapter 32 of Title 2 or a rule adopted pursuant 3 to that chapter. "(b) (c) Unlawful possession of marihuana marijuana 4 5 in the first degree pursuant to subdivision (1) of subsection (a) is a Class C felony. 6 7 "(c) (d) Unlawful possession of marihuana marijuana 8 in the first degree pursuant to subdivision (2) of subsection 9 (a) is a Class D felony. 10 "\$13A-12-214. "(a) A person commits the crime of unlawful 11 12 possession of marihuana marijuana in the second degree if, 13 except as otherwise authorized, he possesses marihuana 14 marijuana for his personal use only. 15 "(b) Commencing on the effective date of the act adding this subsection, a person has not committed the crime 16 17 of unlawful possession of marijuana if the person is in 18 possession of a valid medical cannabis card issued pursuant to Chapter 2A of Title 20, unless there is reasonable cause to 19 20 believe that the information contained on the medical cannabis 21 card is false or falsified, the medical cannabis card has been obtained by means of fraud, or the person is otherwise in 22 violation of Chapter 2A of Title 20 or a rule adopted pursuant 23 24 to that chapter. 25 "(b)(c) Unlawful possession of marihuana marijuana in the second degree is a Class A misdemeanor. 26

"\$13A-12-214.2.

- "(a) This section shall be known and may be cited as
 "Carly's Law."
- "(b) As used in this section, the following words shall have the following meanings:
- "(1) AUTHORIZED BY THE UAB DEPARTMENT. Authorized by
 the UAB Department means that Cannabidiol (CBD) has been
 prescribed by a health care practitioner employed by or on
 behalf of the UAB Department.
- "(2) CANNABIDIOL (CBD). [13956-29-1]. A

 (nonpsychoactive) cannabinoid found in the plant Cannabis

 sativa L. or any other preparation thereof that is essentially

 free from plant material, and has a THC level of no more than

 3 percent. Also known as (synonyms):

 2-[(1R,6R)-3-Methyl-6-(1-methylethenyl)-2-cyclohexen-1-yl]-5-p
- entyl-1,3-benzenediol;

trans-(-)-2-p-mentha-1,8-dien-3-yl-5-pentylresorcinol;

- (-)-Cannabidiol; (-)-trans-Cannabidiol; Cannabidiol (7CI);
- D1(2)-trans-Cannabidiol.

- "(3) DEBILITATING EPILEPTIC CONDITION. Epilepsy or

 other neurological disorder, or the treatment of epilepsy or

 other neurological disorder that, as diagnosed by a

 board-certified neurologist under the employment or authority

 of the UAB Department, produces serious, debilitating, or

 life-threatening seizures.
- "(4) UAB DEPARTMENT. The Department of Neurology at the University of Alabama at Birmingham, its successors, or any subdivisions.

"(c) In a prosecution for the unlawful possession of marijuana under the laws of this state, it is an affirmative and complete defense to the prosecution that the defendant has a debilitating epileptic condition and used or possessed cannabidiol (CBD) pursuant to a prescription authorized by the UAB Department.

- "(d) In a prosecution for the unlawful possession of marijuana under the laws of this state, it is an affirmative and complete defense to the prosecution that the defendant possessed cannabidiol (CBD) because he or she is the parent or caretaker of an individual who has a debilitating epileptic condition and who has a prescription for the possession and use of cannabidiol (CBD) as authorized by the UAB Department, and where the parent or caretaker's possession of the CBD is on behalf of and otherwise for the prescribed person's use only.
- "(e) An agency of this state or a political subdivision thereof, including any law enforcement agency, may not initiate proceedings to remove a child from the home of a parent based solely upon the parent's or child's possession or use of cannabidiol (CBD) as authorized by this section.
- "(f) A prescription for the possession or use of cannabidiol (CBD) as authorized by this section shall be provided exclusively by the UAB Department for a debilitating epileptic condition. Health care practitioners of the UAB Department shall be the sole authorized source of any prescription for the use of cannabidiol (CBD), and shall be

the sole authorized source to use cannabidiol (CBD) in or as a

part of the treatment of a person diagnosed with a

debilitating epileptic condition. A health care practitioner

of the UAB Department shall have the sole authority to

determine the use or amount of cannabidiol (CBD), if any, in

the treatment of an individual diagnosed with a debilitating

epileptic condition.

- "(g) The UAB Department and any UAB School of Medicine affiliated pediatric training entity, including any authorized physician, nurse, attendant, or agent thereof, shall not be subject to prosecution for the unlawful possession, use, distribution, or prescription of marijuana under the laws of this state for its activities arising directly out of or directly related to the prescription or use of cannabidiol (CBD) in the treatment of individuals diagnosed with a debilitating epileptic condition.
 - "(h) The UAB Department will establish a research and development study purposed to determine medical uses and benefits of cannabidiol (CBD) for individuals with debilitating epileptic conditions.
 - "(i) The UAB Department and any UAB School of Medicine affiliated pediatric training entity, including any authorized physician, nurse, attendant or agent thereof, shall not be subject to prosecution for the unlawful possession, use, or distribution of marijuana under the laws of this state for its activities arising directly out of or directly related to the department's research and development activities in

pursuit of medical benefits and uses of cannabidiol (CBD), as long as the prescription, treatment or use of cannabidiol (CBD) is provided only to individuals diagnosed with a

debilitating epileptic condition.

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- "(j) Pursuant to the filing requirements of Rule

 15.3 of the Alabama Rules of Criminal Procedure, the defendant

 shall produce a valid prescription, certification of a

 debilitating epileptic condition, and the name of the

 prescribing health care professional authorized by the UAB

 Department.
- 11 "(k) This section is repealed July 1, 2019 <u>January</u>
 12 <u>1, 2021</u>.
 - "(1) The Alabama Medical Cannabis Commission created pursuant to Section 2-2A-7, added by Section 2 of the act adding this amendatory language, may recommend to the Legislature other potential studies that universities in the state may wish to conduct regarding the medical use of cannabidiol (CBD).
 - " $\frac{(1)}{(m)}$ Nothing in this section shall be construed to allow or accommodate the prescription, testing, medical use, or possession of any other form of Cannabis other than that defined by this section.
- 23 "\$13A-12-214.3.
- "(a)(1) This section shall be known and may be cited as Leni's Law.
- "(2) For the purposes of this section, the following terms shall have the following meanings:

"a. CANNABIDIOL (CBD). [13956-29-1]. A 1 2 (nonpsychoactive) cannabinoid found in the plant Cannabis sativa L. or any other preparation thereof that is free from 3 plant material, and has a THC level 4 5 (delta-9-tetrahydrocannibinol) of no more than three percent 6 relative to CBD according to the rules adopted by the Alabama 7 Department of Forensic Sciences. Also known as (synonyms): 2-[(1R,6R)-3-Methyl-6-(1-methylethenyl)-2-cyclohexen-1-yl]-5-p9 entyl-1,3-benzenediol; 10 trans-(-)-2-p-mentha-1,8-dien-3-yl-5-pentylresorcinol; (-)-Cannabidiol; (-)-trans-Cannabidiol; Cannabidiol (7CI); 11 D1(2)-tran-Cannabidiol and that is tested by a independent 12 13 third-party laboratory. "b. DEBILITATING MEDICAL CONDITION. A chronic or 14 15 debilitating disease or medical condition including one that 16 produces seizures for which a person is under treatment. 17 "(3) In addition to the affirmative defense provided 18 in Section 13A-12-214.2, in a prosecution for the unlawful possession of marijuana in the second degree under Section 19 20 13A-12-214, it is an affirmative and complete defense that the 21 defendant used or possessed CBD if the defendant satisfies 22 either of the following: "a. He or she has a debilitating medical condition. 23 24 "b. He or she is the parent or legal guardian of a 25 minor who has a debilitating medical condition, and the CBD is being used by the minor. 26

"(4) An agency of this state or a political subdivision thereof, including any law enforcement agency, may not initiate proceedings to remove a child from the home of a parent or guardian, nor initiate any child protection action or proceedings, based solely upon the parent's or child's possession or use of CBD as allowed by this section.

- "(5) Nothing in this section shall be construed to require the various individual or group insurance organizations providing protection, indemnity, or insurance against hospital, medical, or surgical expenses, or health maintenance organizations to provide payment or reimbursement for prescriptions of CBD.
- "(6) Nothing in this section shall be construed to allow or accommodate the prescription, testing, medical use, or possession of any other form of Cannabis other than that defined in this section.
- "(b) The Legislature finds and declares the following:
- "(1) This section is intended to authorize only the limited use of nonpsychoactive CBD as defined in this section only for specified debilitating medical conditions that produce seizures, and is not intended as a generalized authorization of medical marijuana.
- "(2) It is the intent of the Legislature to maintain existing criminal prohibitions of marijuana, except as expressly provided in existing law or as expressly provided in this section.

1 "\$20-2-214.

"(a) The following persons or entities shall be permitted access to the information in the controlled substances database, subject to the limitations indicated below:

- "(1) Authorized representatives of the certifying boards; provided, however, that access shall be limited to information concerning the licensees of the certifying board, however, authorized representatives from the Board of Medical Examiners may access the database to inquire about certified registered nurse practitioners (CRNPs), or certified nurse midwives (CNMs) that hold a Qualified Alabama Controlled Substances Registration Certificate (QACSC).
- "(2) A licensed practitioner approved by the department who has authority to prescribe, dispense, or administer controlled substances. The licensed practitioner's access shall be limited to information concerning himself or herself, registrants who possess a Qualified Alabama Controlled Substances Registration Certificate over whom the practitioner exercises physician supervision or with whom they have a joint practice agreement, a certified registered nurse practitioner and a certified nurse midwife with a Qualified Alabama Controlled Substances Registration Certificate over whom the practitioner exercises professional oversight and direction pursuant to an approved collaborative practice agreement, a current patient of the practitioner, and individuals seeking treatment from the practitioner.

Practitioners shall have no requirement or obligation under 1 2 this article to access or check the information in the controlled substances database prior to prescribing, dispensing, or administering medications or as part of their professional practice. However, the applicable licensing boards, in their discretion, may impose such a requirement or 7 obligation by regulations.

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"(3) A qualified physician concerning a qualified patient, as those terms are defined in Section 2-2A-1, and where access is made pursuant to Section 2-2A-21.

"(3)(4) A licensed physician approved by the department who has authority to prescribe, dispense, or administer controlled substances may designate up to two employees who may access the database on the physician's behalf.

"(4)(5) A licensed certified registered nurse practitioner or a licensed certified nurse midwife approved by the department who is authorized to prescribe, administer, or dispense pursuant to a Qualified Alabama Controlled Substances Registration Certificate; provided, however, that access shall be limited to information concerning a current or prospective patient of the certified registered nurse practitioner or certified nurse midwife.

"(5)(6) A licensed assistant to physician approved by the department who is authorized to prescribe, administer, or dispense pursuant to a Qualified Alabama Controlled Substances Registration Certificate; provided, however, that

access shall be limited to information concerning a current patient of the assistant to the physician or an individual seeking treatment from the assistant to physician.

"(6)(7) A licensed pharmacist approved by the department, provided, however, that access is limited to information related to the patient or prescribing practitioner designated on a controlled substance prescription that a pharmacist has been asked to fill. Pharmacists shall have no requirement or obligation to access or check the information in the controlled substances database prior to dispensing or administering medications or as part of their professional practices.

"(7)(8) State and local law enforcement authorities as authorized under Section 20-2-91, and federal law enforcement authorities authorized to access prescription information upon application to the department accompanied by a declaration that probable cause exists for the use of the requested information.

"(8)(9) Employees of the department and consultants engaged by the department to operate the controlled substances database; provided, however, that access shall be limited to operating and administering the database, conducting departmental research when approved by the Information Release Review Committee, and implementing a research request authorized under subsection (b).

" $\frac{(9)}{(10)}$ The prescription drug monitoring program of any of the other states or territories of the United States,

if recognized by the Alliance for Prescription Drug Monitoring
Programs under procedures developed, certified, or approved by
the United States Department of Justice or the Integrated
Justice Information Systems Institute or successor entity
subject to or consistent with limitations for access
prescribed by this chapter for the Alabama Prescription Drug

Monitoring Program.

"(10)(11) Authorized representatives of the Alabama Medicaid Agency; provided, however, that access shall be limited to inquiries concerning possible misuse or abuse of controlled substances by Medicaid recipients.

- "(b) Subject to the approval of the Information

 Release Review Committee, the department may release or

 publish de-identified aggregate statewide and regional

 information for statistical, research, or educational

 purposes.
- "(1) Prior to being released or published, all information that identifies, or could reasonably be used to identify, a patient, a prescriber, a dispenser, or any other person who is the subject of the information, shall be removed, and at a minimum, such de-identification of the information shall comply with 45 C.F.R. §164.514(b)(2), as amended.
- "(2) Release of information shall be made pursuant to a written data use agreement between the requesting individual or entity and the department."

Section 2. Chapter 2A commencing with Section

2 20-2A-1, is added to Title 20, Code of Alabama 1975, to read

3 as follows:

4 Article 1. General Provisions.

5 \$20-2A-1.

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This chapter shall be known and may be cited as the Compassionate Access, Research Expansion Act or CARE Act.

\$20-2A-2.

As used in this chapter, the following terms have the following meanings:

- (1) CANNABIS. All parts of any plant of the genus cannabis, whether growing or not, including the seeds, extractions of any kind from any part of the plant, and every compound, derivative, mixture, product, or preparation of the plant.
- (2) CAREGIVER. A resident of this state who meets the requirements of subsection (c) of Section 20-2A-5 and has agreed to assist with the medical use of cannabis of another individual with, or by applying for, a medical cannabis card.
- (3) COMMISSION. The Alabama Medical Cannabis Commission created pursuant to Section 20-2A-7.
- (4) DISPENSARY. A licensed, enclosed, secure building that may include attached storage units, where cannabis and related supplies are maintained, stored, and sold to patients and caregivers, which is not physically connected to a cannabis cultivation, processing, or manufacturing facility.

1 (5) MEDICAL CANNABIS CARD. A valid card issued 2 pursuant to this chapter or a valid card from another state 3 that has legalized the use of medical cannabis.

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- (6) MEDICAL USE. The acquisition, possession, use, delivery, transfer, or administration of cannabis authorized by this chapter. The term does not include possession, use, or administration of cannabis that was not purchased or acquired from a licensed dispensary.
- (7) PATIENT REGISTRY. A documented, electronic, and integrated system for receiving physician certifications and patient registrations and issuing medical cannabis cards.
- (8) PHYSICIAN CERTIFICATION. A qualified physician's authorization for a qualified patient to use cannabis for medical use.
- (9) QUALIFIED PATIENT. A resident of this state who has been diagnosed by a qualified physician with a qualifying condition, who receives a physician certification, and who otherwise meets the requirements to obtain a medical cannabis card.
- (10) QUALIFIED PHYSICIAN. A physician who holds an active license to practice medicine under Chapter 24 of Title 34 who meets the qualifications under Section 20-2A-20.
- (11) QUALIFYING CONDITION. Any of the following conditions diagnosed by a qualified physician who may recommend the use of cannabis to treat the symptoms associated with the condition:
 - a. Autism Spectrum Disorder (ASD).

Τ	p. Epilepsy.
2	c. Cancer.
3	d. Degenerative or pervasive neurological disorders.
4	e. Glaucoma.
5	f. HIV/AIDS.
6	g. Multiple sclerosis.
7	h. Muscle disorders, including those associated with
8	muscle spasms.
9	i. Opioid addiction.
10	j. Pain syndromes or pain associated with other
11	medical conditions.
12	k. Post Traumatic Stress Disorder (PTSD).
13	1. Any additional conditions approved by the
14	commission by rule.
15	\$20-2A-3.
16	(a) The Alabama Medical Cannabis Commission shall
17	implement this chapter by making medical grade cannabis grown
18	in Alabama available to qualified patients.
19	(b) The commission shall administer and enforce this
20	chapter and all rules adopted pursuant to this chapter.
21	(c) This chapter supersedes state criminal and civil
22	laws pertaining to the acquisition, possession, use,
23	cultivation, manufacturing, processing, research and
24	development, and sale of medical cannabis. The acquisition,
25	possession, use, cultivation, manufacturing, processing,
26	research and development, or sale of medical cannabis in

compliance with this chapter, and as approved by the

commission, does not constitute a violation of Article 5 of Chapter 12 of Title 13A, or any other law to the contrary.

3 \$20-2A-4.

All data related to the implementation of this chapter, including, but not limited to, application forms, licensing information, physician certifications, registration of medical cannabis card holders and caregivers, compliance, and the status of cannabis research programs must be maintained in a secure system developed or procured by the commission. Data may not be sold, and patient information shall remain confidential and not be transferred or sold.

\$20-2A-5.

- (a) An individual may not acquire, possess, or use a medical cannabis product without a valid medical cannabis card issued pursuant to this chapter, except as provided in subsection (d). A medical cannabis card may only be issued to a qualified patient or designated caregiver.
- (b) A qualified patient must be 19 years of age or older; a resident of this state; and be diagnosed with a qualifying condition by a qualified physician. If a qualified patient is under 19 years of age, only a caregiver may purchase or administer cannabis to the qualified patient.
- (c) A designated caregiver must be 19 years of age or older, a resident of this state, have no ownership interest in or contract or employment relationship with a licensed dispensary, and either be designated by a qualified patient as the caregiver or be the parent or legal guardian of a minor

diagnosed with a qualifying condition. A designated caregiver
may lawfully acquire and possess cannabis, but not use
cannabis under this chapter without the caregiver actually
being diagnosed with a qualifying condition and issued a
medical cannabis card as a qualified patient.

(d) This state shall recognize and give reciprocity to medical cannabis cards issued in other states. A cardholder from another state is allowed temporary access to dispensaries in this state under the conditions authorized by the commission in accordance with rules adopted pursuant to the Alabama Administrative Procedure Act.

\$20-2A-6.

This chapter does not do any of the following:

- (1) Require an insurer, organization for managed care, health benefit plan, or any person who provides coverage for a medical or health care service to pay for or reimburse a person for costs associated with the medical use of cannabis.
- (2) Require any employer to permit or accommodate an employee's use or possession of medical cannabis, to allow the medical use of cannabis in the workplace, or to modify the job or working conditions of an individual who engages in the medical use of cannabis that are based upon the reasonable business purposes of the employer.
- (3) Prohibit an employer from refusing to hire, discharging, disciplining, or otherwise taking an adverse employment action against an individual with respect to hire,

- tenure, terms, conditions, or privileges of employment because of that individual's use or possession of medical cannabis.
 - (4) Prohibit an employer from establishing and enforcing a drug testing policy or from implementing a drug-free workforce program established in accordance with Article 13, commencing with Section 25-5-330, of Chapter 5 of Title 25.
 - (5) Interfere with any federal restrictions on employment, including, but not limited to regulations adopted by the United States Department of Transportation in Title 49, Code of Federal Regulations.
 - (6) Permit an individual to commence a cause of action against an employer for refusing to hire, discharging, disciplining, or otherwise taking an adverse employment action against an individual with respect to hire, tenure, terms, conditions, or privileges of employment related to medical cannabis.

\$20-2A-7.

- (a) There is created the Alabama Medical Cannabis Commission. Members of the commission shall be as follows, with initial members appointed not later than August 30, 2019:
- (1) Three members appointed by the Governor, one of whom is a physician licensed to practice medicine in this state, certified in the specialty of neurology; one of whom is a physician licensed to practice medicine in this state with a practice that involves pain management; and one of whom is a

licensed pharmacist. The initial terms shall be four, three, and two years, respectively.

- Tempore of the Senate, one of whom is a physician licensed to practice medicine in this state, certified in the specialty of oncology; one of whom is a general physician licensed to practice medicine in this state and practices in a rural, underserved community; and one of whom has experience in multiple crop development and agricultural practices. The initial terms shall be one, four, and three years, respectively.
 - (3) Three members appointed by the Speaker of the House of Representatives, one of whom is a physician licensed to practice medicine in this state, certified in the specialty of psychiatry; one of whom has a background and experience in mental health or substance abuse; and one of whom has professional experience in agricultural systems management. Initial terms shall be two, one, and four years, respectively.
 - (4) Two members appointed by the Attorney General, one of whom has experience advocating for patients in a health care setting. Initial terms shall be three and two years, respectively.
 - (b) A member may not have any interest, financial or otherwise, direct or indirect, in any dispensary, cultivator, or manufacturer licensed as such in this state. Any current public official, candidate for public office, current public employee, or registered lobbyist may not serve as a member.

(c) Members must be at least 30 years of age, citizens of the United States, and residents of this state for at least five continuous years immediately preceding their appointment. The appointing officers shall coordinate their appointments so that diversity of gender, race, and geographical areas is reflective of the makeup of this state.

- (d) After initial appointments, each member shall serve a term of four years, but may be reappointed for one additional term. If at any time there is a vacancy, a successor member shall be appointed by the respective appointing officer to serve for the remainder of the term. Members may be removed for cause by the Governor.
- (e) The commission shall elect from the membership one member to serve as chair and one member to serve as vice-chair.
- (f) While serving on business of the commission, members shall be entitled to a per diem of five hundred dollars (\$500) per day, as well as actual travel expenses incurred in the performance of duties as a member, as other state employees are paid, when approved by the chair.
- (g) Except as provided in subsection (h), the commission shall meet each month and hold other meetings for any period of time as may be necessary for the commission to transact and perform its official duties and functions. A majority of members of the commission constitutes a quorum for the transaction of any business, or in the performance of any duty, power, or function of the commission, and the

concurrence of a majority of those present and voting in any 1 2 matter within its duties is required for a determination of matters within its jurisdiction. The commission may hold a 3 special meeting at any time it deems necessary and advisable 4 5 in the performance of its official duties. A special meeting may be called by the chair, or upon the written request of two 6 7 or more members. All members shall be duly notified by the commission director of the time and place of any regular or 9 special meeting at least five days in advance of any meeting. 10 The chair is responsible for setting and keeping a meeting schedule that ensures the commission meets the requirements of 11 12 this chapter. Members may not miss more than three meetings in 13 one calendar year.

- (h) (1) The commission shall hold a minimum of two regularly scheduled meetings each month in the first 12 months commencing no later than November 1, 2019, in order to do all of the following:
- a. Expeditiously create and publish an application form for medical cannabis cards.
- b. Establish a website for public access and 21 information.

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- c. Review, approve, or deny fast track license 22 23 applications.
 - d. Adopt rules pursuant to the Alabama Administrative Procedure Act to implement this chapter.
 - (2) After adopting initial rules, issuing the fast track licenses, establishing a patient registry, and

publishing the patient medical cannabis card application forms and procedures, the commission may reduce meetings to one per month or vote on a schedule appropriate for meeting all obligations under this chapter regarding patient medical cannabis cards.

- (i) (1) The commission may appoint a director to serve at the pleasure of the commission. The director's salary shall be fixed by the commission. The director shall be at least 30 years of age and have been a citizen and resident of this state for at least five years prior to appointment. The director shall be licensed to practice law in this state. The director is the chief administrative officer of the commission, and all personnel employed by the commission shall be under the director's direct supervision. The director is solely responsible to the commission for the administration and enforcement of this chapter and is responsible for the performance of all duties and functions delegated by the commission.
- (2) The director shall maintain all records of the commission and also serve as secretary of the commission. The director shall prepare and keep the minutes of all meetings held by the commission, including a record of all business transacted and decisions rendered by the commission. A copy of the record of the minutes and business transacted and decisions rendered shall be kept on file at the commission's main office and shall be available for public inspection.

(3) The director shall act and serve as hearing officer when designated by the commission and shall perform such duties as the regular hearing officer.

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- (j) The commission may appoint an assistant director who shall perform all duties and functions which may be assigned by the director or the commission. The assistant director, if licensed to practice law in this state, may also be designated by the commission to sit, act, and serve as a hearing officer, and when designated as a hearing officer, the assistant director may perform the same duties and functions as the regular hearing officer.
- (k) In any action or suit brought against the members of the commission in their official capacity in a court of competent jurisdiction, to review any decision or order issued by the commission, service of process issued against the commission may be lawfully served or accepted by the director on behalf of the commission as though the members of the commission were personally served with process.
- (1) The commission, in consultation with the Department of Agriculture and Industries, shall appoint a chief inspection and enforcement officer who meets all of the following qualifications and requirements:
- (1) Be under the immediate supervision of the director.
 - (2) Be at least 30 years of age.
 - (3) Has been a citizen and resident of this state for at least five years prior to appointment.

- 1 (4) Has experience and training in agricultural inspections.
 - (m) The chief inspection and enforcement officer shall be reimbursed for travel expenses in a manner similar to state employees.
 - (n) The director, assistant director, and chief inspection and enforcement officer shall be reimbursed for actual travel expenses as other state employees are paid, when approved by the chair. The director, chief inspection and enforcement officer, and all other inspection and enforcement personnel shall be employed on a full-time basis only.
 - (o) The commission shall retain legal counsel familiar with the requirements of this chapter and medical cannabis licensing and best practices in other states in order to assist the commission and staff with establishing a functional program and achieving compliance with applicable laws.

\$20-2A-8.

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(a) A member of the commission and any individual employed by the commission may not have any interest, financial or otherwise, either direct or indirect, in any dispensary, cultivator, or manufacturer licensed under this chapter. In addition, a member or employee of the commission may not have any family member who is employed by any dispensary, cultivator, or manufacturer or who holds any cannabis license in this state. A member or employee of the commission or his or her family member may not have an

- interest of any kind in any building, fixture, or premises

 ccupied by any person licensed under this chapter; and may

 not own any stock or have any interest of any kind, direct or

 indirect, pecuniary or otherwise, by a loan, mortgage, gift,

 or guarantee of payment of a loan, in any dispensary,

 cultivator, or manufacturer licensed under this chapter.
- 7 (b) A member or employee of the commission may not 8 accept any gift, favor, merchandise, donation, contribution, 9 or any article or thing of value, from any person licensed 10 under this chapter.
 - (c) Any individual violating this section shall be terminated from employment or position, and as a consequence, the individual shall forfeit any pay or compensation which might be due.
 - (d) For purposes of this section, family member includes a spouse, child, parent, or sibling, by blood or marriage.
 - (e) A violation of this section is a Class C misdemeanor.
 - Article 2. Medical Cannabis Patient Registry and Medical Cannabis Cards.

22 \$20-2A-20.

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Before being approved as a qualified physician, and before each license renewal, a physician must successfully complete 10 hours of continuing medical education that addresses cannabis treatment for medical conditions and encompasses the requirements of this chapter and any rules

adopted pursuant to this chapter. Any course and examination, if applicable, shall be administered at least annually and may be offered in a distance learning format, including an electronic, online format that is available upon request. The commission may contract with a third party or the Board of Medical Examiners to administer this section, provided the commission approves any course material and examination. The price of the training may not exceed five hundred dollars (\$500).

\$20-2A-21.

- (a) A qualified physician may issue a physician certification only if the qualified physician does all of the following:
- (1) Conducts a physical examination while physically present in the same room as the patient and a full assessment of the medical history of the patient.
 - (2) Diagnoses the patient with at least one qualifying condition.
 - (3) Determines that the medical use of cannabis would likely outweigh the potential health risks for the patient and documents that determination in the patient's medical record.
 - (4) Reviews the patient's controlled drug prescription history in the controlled substance prescription database established under Article 10 of Chapter 2 of this title.

1 (5) Reviews the patient registry and confirms that
2 the patient does not have an active physician certification
3 from another qualified physician.

- (6) Obtains the voluntary and informed written consent of the patient to use cannabis for medical use each time the qualified physician issues a physician certification for the patient, which shall be maintained in the patient's medical record. The patient, or the patient's parent or legal guardian if the patient is a minor, must sign the informed consent acknowledging that the qualified physician has sufficiently explained its content. The qualified physician shall use a standardized informed consent form adopted by rule by the commission, that must include, at a minimum, information relating to all of the following:
- a. The federal and state classification of cannabis as a Schedule I controlled substance.
 - b. The approval and oversight status of cannabis by the Food and Drug Administration.
 - c. The current state of research on the efficacy of cannabis to treat the qualifying condition or conditions.
 - d. The potential for addiction.
 - e. The potential effect that cannabis may have on a patient's coordination, motor skills, and cognition, including a warning against operating heavy machinery, operating a motor vehicle, or engaging in activities that require a person to be alert or respond quickly.
 - f. The potential side effects of cannabis use.

g. The risks, benefits, and drug interactions of cannabis.

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- h. That the patient's de-identified health information contained in the patient's medical record, physician certification, and patient registry may be used for research purposes or used to monitor compliance with this chapter, as further provided in subsection (h).
 - (b) If medically appropriate, the qualified physician issuing a physician certification shall refer the qualified patient to a physician certified in a speciality relevant to the diagnosis of a qualifying condition.
 - (c) As the issuer of a physician certification, the qualified physician shall register electronically the named qualified patient in the patient registry in a manner determined by the commission.
 - (d) When registering a qualified patient under subsection (c), a qualified physician may limit the cannabis that a qualified patient may obtain from a dispensary based on quantity, type, or dosage.
 - (e) Before a qualified physician may reissue a physician certification, he or she shall do all of the following:
 - (1) Determine if the patient still meets the criteria for issuing a physician certification under subsection (a).

(2) Determine that, over a period of not less than 1 2 six months, the qualified patient's health or the symptoms of the qualifying condition have significantly improved. 3

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- (3) Identify and document in the qualified patient's medical records whether the qualified patient experienced either of the following related to the medical use of cannabis:
- a. An adverse drug interaction with any prescription or nonprescription medication.
 - b. A reduction in the use of, or dependence on, other types of controlled substances.
 - (f) A qualified physician shall update the patient registry within seven days after any change is made to the original physician certification to reflect the change.
 - (g) A qualified physician shall deactivate the registration of a qualified patient and the patient's caregiver in the following circumstances:
 - (1) When the qualified physician no longer recommends cannabis for medical use for the patient.
 - (2) If there is clear evidence, in accordance with rules adopted by the commission, that a patient may be diverting or misusing cannabis.
- (3) When the physician-patient relationship is 23 terminated.
 - (h) The commission may monitor physician certification and patient registration in the patient registry for practices that could facilitate unlawful diversion or

misuse of cannabis and shall recommend disciplinary action to the Board of Medical Examiners as appropriate. Monitoring may include reviewing the medical records of patients, in accordance with state and federal law, on whose behalf a qualified physician issued physician certifications, in order to ascertain whether the patients were diagnosed with the qualifying condition specified by the qualified physician on the physician certification.

(i) The commission shall adopt rules to implement this section which shall include criteria for reissuing physician certifications and may include guidelines on dosage, quantities, and types of cannabis products that may be recommended by qualified physicians for a particular qualifying condition.

\$20-2A-22.

- (a) In order to commence, use, and maintain a reliable patient registry system, by no later than July 31, 2020, the commission shall do all of the following:
- (1) Establish and administer an integrated, electronic patient registry system that does all of the following:
- a. Receives physician certifications from qualified physicians in the registry database.
 - b. Includes in the registry database for each qualified patient registrant the names of the qualified patient and the patient's designated caregiver, if applicable, and information relating to the physician certification,

- including the name of the qualified physician, the diagnosed qualifying condition or conditions, and the type and quantity of cannabis product recommended by the qualified physician.
 - c. Provides a procedure for keeping the information on a qualified patient up-to-date.

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- d. Tracks the medical cannabis card application process through issuance or denial.
- e. Tracks medical cannabis cards that are denied,

 issued, revoked, suspended, or reinstated.
- f. Provides access as further provided in subsection

 (b).
 - (2) Adopt rules to implement this section that include criteria by which medical cannabis cards may be revoked, suspended, and renewed. The rules may not prohibit the issuance or use of a medical cannabis card based on an arrest for any felony or misdemeanor, unless the arrest is for a violation of this chapter.
 - (3) Begin issuing medical cannabis card requests that meet the requirements of this chapter.
 - (b) The patient registry system shall be accessible to the following:
 - (1) Law enforcement agencies in order to verify that an individual in possession of a medical cannabis card is lawfully in possession of the card and to avoid counterfeiting of cards.
 - (2) Health care practitioners licensed to prescribe prescription drugs in order to ensure proper care for patients

before medications are prescribed that may interact with
medical cannabis.

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- (3) Licensed dispensaries in order to verify that an individual in possession of a medical cannabis card is lawfully in possession of the card and to determine whether there are any specific recommendations or limits on quantity, type, or dosage of cannabis products that the cardholder may receive.
 - (c) No later than July 31, 2020, the commission shall ensure that a process is available, as part of the patient registry system, for qualified physicians to register a physician certification, report any change in the status of a qualifying condition, or deactivate a physician certification.
 - (d) A medical cannabis cardholder must be locatable in the registry system with adequate identifying information. \$20-2A-23.
 - (a) The commission shall develop an application form to be completed by qualified patients and designated caregivers in order to be placed on the patient registry and issued a medical cannabis card. The application form shall include all of the following:
 - (1) Proof that the applicant is 19 years of age or older and a resident of this state by means of state-issued photo identification.
 - (2) For an applicant who is a designated caregiver, both of the following:

a. Proof that the caregiver meets the qualifications in subsection (c) of Section 20-2A-5.

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- b. The names of each qualified patient for whom the caregiver provides care, including a confirmation of the caregiver relationship in writing from each qualified patient, unless the caregiver is the legal quardian of a minor.
- (3) A full-face, passport-type, color photograph taken within 90 days immediately preceding registration.
 - (4) An application fee of sixty-five dollars (\$65), or other amount as determined by the commission.
 - (5) Any other information deemed relevant by the commission.
 - (b) The commission shall issue a medical cannabis card to an individual once the commission has received a completed application and fee from the applicant and a physician certification has been registered by a qualified physician through the patient registry system.
 - (c) Medical cannabis cards shall be resistant to counterfeiting and tampering and, at a minimum, shall include all of the following:
 - (1) The name, address, and date of birth of the qualified patient or caregiver, as applicable.
 - (2) A photograph of the qualified patient or caregiver, as applicable.
- 25 (3) Identification of the cardholder as a qualified patient or a caregiver.
 - (4) The expiration date of the card.

- 1 (d) A medical cannabis card expires two years from 2 the date of issuance.
 - (e) Medical cannabis cards may be renewed in accordance with rules adopted by the commission and upon payment of a renewal fee of sixty-five dollars (\$65), or other amount as determined by the commission.
 - (f) The commission, through a procedure adopted by rule, shall notify the qualified physician who issued a physician certification and registered a qualified patient in the patient registry, that the qualified patient has been issued a medical cannabis card.
 - (g) The commission may suspend or revoke a medical cannabis card if the cardholder does any of the following:
 - (1) Provides misleading, incorrect, false, or fraudulent information to the commission.
 - (2) Falsifies, alters, or otherwise modifies a medical cannabis card.
 - (3) Violates the requirements of this chapter or any rule adopted under this chapter.

\$20-2A-24.

- (a) When a qualified patient has a designated caregiver, only the designated caregiver is authorized to purchase cannabis; a patient with a designated caregiver may not purchase cannabis.
- (b) A caregiver may receive compensation from the qualified patient or other entity for any services provided to the qualified patient.

1 (c) A caregiver may not provide care to more than 10 qualified patients at any given time.

Article 3. Cultivation, Processing, and Dispensing of Medical Cannabis.

\$20-2A-40.

- (a) All of the cultivation, processing, transportation, packaging, and dispensing and selling of any form or derivative of medical cannabis is subject to licensing and regulation under this article.
- (b) The commission shall consult with the Department of Agriculture and Industries when adopting rules relating to the cultivation and processing of cannabis, and the department shall provide assistance and advice to the commission as needed. The commission shall bear the administrative costs incurred by the department pursuant to this subsection.

\$20-2A-41.

This state hereby preemptively regulates medical cannabis from seed to sale to use and shall reasonably regulate and control all aspects of the medical cannabis industry to meet the stated intent of this chapter. Any county or municipality seeking to ban the cultivation, processing, manufacture, or sale of medical cannabis within its jurisdiction is authorized to do so by a two-thirds vote of the local governing body; provided, that the vote occurs no later than July 31, 2020.

\$20-2A-42.

(a) In order to facilitate an initial level of 1 2 medical grade cannabis product availability and avoid a program delay dependent on rulemaking, the commission may 3 review and issue approved provisional fast track licenses for the cultivation, processing, transportation, manufacturing, packaging, and dispensing and selling of medical cannabis, in an expedited manner, before the commission has adopted a final regulatory program as provided in Section 20-2A-43. Any fast track licenses issued by the commission shall be done in a manner that provides access to medical cannabis throughout rural and urban populations, taking into account the racial and economic makeup of the state. A provisional fast track 12 13 license shall not be finally approved or denied until an on-site inspection of all facilities operated by the fast track licensee has been conducted.

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- (b) The commission shall issue a final approval or denial of a fast track license not later than January 1, 2021. \$20-2A-43.
- (a) Not later than July 1, 2021, the commission shall adopt rules that provide for all of the following:
- (1) Determining the various types of licenses and the activities and functions that may be conducted by a licensee and the area of operation of a licensee.
- (2) Qualifications and requirements for licensees, as further provided in subsection (b).
- (3) The number of licenses the commission will issue and locations of facilities, based on market demand for

stand-alone dispensaries, stand-alone cultivation, and stand-alone processing or manufacturing facilities, and for similar vertically integrated operations, and taking into account the racial and economic makeup of the state, the unemployment rate, the need for agricultural and other business opportunities in communities, access to health care, infrastructure, and other factors the commission deems relevant in providing the greatest benefits to the residents of this state.

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- (4) The on-site inspection process to be conducted at each facility of an applicant prior to being issued a license, as well as ongoing on-site inspections of the facilities of a licensee.
- (5) Standards and procedures for the revocation, suspension, and nonrenewal of licenses.
- (6) Standards and procedures for the renewal of licenses, which shall include, but not be limited to, payment of a renewal fee and an additional criminal background check.
- (7) Standards and procedures for the transfer of licenses. Any transfer of a license or change of ownership shall comply with the requirements of a new licensee, including approval by the commission and payment of the license fee.
- (8) Measures or standards to ensure any cannabis product remains secure at all times, including, but not limited to, requirements that licensed facilities remain securely enclosed and locked as appropriate.

- 1 (9) Any other measures necessary to protect health, 2 safety, and welfare.
- 3 (b) When applying for a license under this article,
 4 an applicant shall submit the following information to the
 5 commission:
 - (1) Proof of residence. The applicant's majority ownership must be attributable to an individual with proof of residency in this state for a continuous period of no less than five years preceding the application date.
- 10 (2) A detailed business and operations plan that 11 includes, at a minimum, all of the following:
- a. Identification of each individual with a financial interest in the applicant.

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- b. Identification of each business entity with afinancial interest in the applicant.
 - c. A proposed location with street address, which may not be within a 1,000 foot radius of any pre-kindergarten, elementary, or secondary school.
 - d. A full list of activities such as cultivation, processing, packaging, transporting, or dispensing and selling, to be undertaken by the applicant.
- e. A summary of projected tenant improvements,

 production schedule, products, production capacity, standard

 operating procedures, target customer base, and projected open

 date.

f. Identification of all corporate officers and
summaries of the business experience for each individual
expected to be responsible for facility operations.

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- (3) Payment of a license fee. The commission may alter the fee, by rule, based on guidelines that consider the geographical area or other factors the commission deems relevant in making sure that licensees are representative of the racial and economic makeup of this state; provided, however, a license fee for a stand-alone facility shall be no less than ten thousand dollars (\$10,000).
- (4) Payment of a non-refundable application fee to cover the administrative costs of processing a license application.
- (5) A criminal background check. All owners, officers, board members, and managers of the applicant, shall pass a Federal Bureau of Investigation Level 2 background screening process, which shall be documented on the application materials prior to final review and approval.
- (6) An attestation statement and signature from a responsible corporate officer of an applicant affirming that the contents of any application are true and correct under penalty of perjury to the best of the officer's personal knowledge.
- (7) Any other information the commission deems appropriate.
- (c) When determining whether to issue or deny a license under this section, the commission shall consider the

- applicant's business plan as it relates to all of the following:
 - (1) The applicant's ability to capitalize and conduct operations as proposed in its business plan, including business experience in related fields such as agriculture, real estate, development, manufacturing, or retail sales.
 - (2) The applicant's history of business activities as it applies to the entity and the individuals who are the entity's owners, officers, and managers.
 - (3) The proposed location of all operations as being suitable for all activities, not inconsistent with applicable zoning, and the applicant's ability to serve an identifiable geographic area.

\$20-2A-44.

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- (a) A licensed dispensary shall be required by the commission to inspect a medical cannabis card before dispensing any cannabis product.
- (b) The commission, by rule, shall establish guidelines and standards to ensure that cannabis is only dispensed to individuals holding a valid medical cannabis card and dispensed in accordance with the physician certification with regard to quantity, type, or dosage of cannabis products, if applicable.

\$20-2A-45.

In order to ensure that all cannabis products sold in the state maintain product quality to protect the health and welfare of state residents, the commission shall procure

and use a secure, online system for seed-to-sale tracking of all medical cannabis in the state in order to ensure that medical cannabis may not be produced from, obtained from, sold to, or transferred to, any location outside of this state.

\$20-2A-46.

The commission, by rule, may provide guidelines for establishing a fair market value or base price on the retail sale of cannabis products.

\$20-2A-47.

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The commission shall provide annual written reports, with the first due no later than July 31, 2020, tracking implementation of this chapter. The report shall be made publicly available and posted on the commission's website. The report shall include all of the following:

- (1) The number of patients applying for and receiving medical cannabis cards.
- (2) The qualifying conditions identified to obtain the medical cannabis cards.
 - (3) Comments from physicians and other health care providers and from pharmacists.
- (4) Revenues and expenses of card issuance and business licensing.
- 23 (5) Relevant developments in other states' cannabis 24 laws.
 - (6) Relevant scientific research.
- 26 (7) Applicable tax revenue.
- 27 (8) The commission's operating budget.

(9) Any other information available to the 1 2 commission that would inform public officials of how this chapter affects the public. 3 \$20-2A-48. 4 5 The commission, by rule, shall establish protocols for product testing, which shall be conducted during 6 7 cultivation, processing, and dispensing to ensure that all dispensed medical cannabis is consistently medical grade. The protocols for testing shall include the following, as well as 9 10 a determination of corresponding tolerance limits: (1) Cannabinoid potency. 11 12 (2) Terpene profiles. 13 (3) Heavy metals. 14 (4) Chemical contamination, such as residual 15 solvents remaining after extraction and concentration. 16 (5) Microbials, including pathogenic microbials. 17 (6) Mycotoxins. 18 (7) Residual insecticides, fungicides, herbicides, and growth regulators used during cultivation. 19 2.0 (8) Residual solvents. 21 \$20-2A-49. 22 (a) There is created a special account in the State Treasury to be known as the Medical Cannabis Fund. 23 24 Expenditures from the Medical Cannabis Fund may be made only 25 by the commission to implement and administer this chapter. 26 Specifically, the Medical Cannabis Fund includes all of the

following:

1 (1) Fees collected by the commission.

- 2 (2) Tax proceeds collected pursuant to subsections 3 (b) and (c) of Section 3 of the act adding this language.
 - (3) Any moneys appropriated by the Legislature for the initial operation of the commission.
 - (b) Upon a determination by the Legislature that the commission has established sufficient revenues for the administration of this chapter, the Legislature shall direct the state Comptroller to transfer any excess balance that is in the Medical Cannabis Fund to the General Fund.
 - Section 3. (a) A county or municipality may tax the sale of medical cannabis in accordance with Article 1, commencing with Section 40-23-1, of Chapter 23 of Title 40, Code of Alabama 1975; provided, that the tax may not exceed 2.1 percent of the gross proceeds of the sales.
 - (b) Commencing January 1, 2020, there is levied, in addition to all other taxes of every kind now imposed by law, and shall be collected and remitted in accordance with Article 1, commencing with Section 40-23-1, of Chapter 23 of Title 40, Code of Alabama 1975, a tax on the gross proceeds of the sales of medical cannabis when sold at retail in this state at the rate of nine percent of the gross proceeds of the sales.
 - (c) (1) Commencing January 1, 2021, there is levied an annual privilege tax on every person doing business under Chapter 2A of Title 20, Code of Alabama 1975, in Alabama. The tax shall accrue as of January 1 of every taxable year, or in the case of a taxpayer licensed under Chapter 2A of Title 20,

Code of Alabama 1975, during the year, or doing business in this state for the first time, as of the date the taxpayer is licensed to do business under Chapter 2A of Title 20, Code of Alabama 1975. The rate of tax shall be 10 percent of the net worth in Alabama for the taxable year. For purposes of this subdivision, a taxpayer's net worth in Alabama shall be determined by apportioning the taxpayer's net worth computed under Section 40-14A-23, Code of Alabama 1975, in the same manner as prescribed for apportioning income during the determination period for purposes of the income tax levied by Chapter 18 of Title 40, Code of Alabama 1975, or the manner in which the income would be apportioned if the taxpayer were subject to the income tax.

- (2) The annual return required by this subsection is due no later than the corresponding federal income tax return, as required to be filed under federal law. In the case of a taxpayer's initial return, the annual return shall be due no later than two and one-half months after the taxpayer is licensed to do business, or commences business, in Alabama.
- (3) The Department of Revenue may grant a reasonable extension of time for filing returns under rules adopted by the department. No extension shall be for more than six months.
- (4) The annual medical cannabis privilege tax shall be reported on forms and in the manner as prescribed by rule by the department. The failure to receive a form from the department shall not relieve a taxpayer from liability for any

tax, penalty, or interest otherwise due. The tax due, as
reported, shall constitute an admitted liability for that
amount. The department may compute and assess additional tax,
penalty, and interest against a taxpayer as provided in
Chapter 2A of Title 40, Code of Alabama 1975.

(d) The Department of Revenue shall adopt rules to implement this section.

Section 4. Although this bill would have as its purpose or effect the requirement of a new or increased expenditure of local funds, the bill is excluded from further requirements and application under Amendment 621, now appearing as Section 111.05 of the Official Recompilation of the Constitution of Alabama of 1901, as amended, because the bill defines a new crime or amends the definition of an existing crime.

Section 5. This act shall become effective immediately following its passage and approval by the Governor, or its otherwise becoming law.