- 1 HB2
- 2 143639-1
- 3 By Representative Todd
- 4 RFD: Health
- 5 First Read: 05-FEB-13
- 6 PFD: 12/07/2012

1	143639-1:n:05/21/2012:LLR/th LRS2012-3399
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8	SYNOPSIS: Under existing law, the possession and use
9	of marijuana is a criminal act.
10	This bill would authorize the medical use of
11	marijuana only for certain qualifying patients who
12	have been diagnosed by a physician as having a
13	serious medical condition.
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15	A BILL
16	TO BE ENTITLED
17	AN ACT
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19	To authorize the medical use of marijuana only for
20	certain qualifying patients who have been diagnosed by a
21	physician as having a serious medical condition.
22	BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:
23	Section 1. This act shall be known and may be cited
24	as "The Alabama Medical Marijuana Patients Rights Act."
25	Section 2. As used in this act the following words
26	and terms shall have the following meanings:

1 (1) CANNABIS PLANT. A plant of the species Cannabis
2 Sativa that has flowers or is greater than 12 inches in height
3 and 12 inches in diameter.

- (2) DEFINED RELATIONSHIP. An agreement in which the parties have agreed to become collective members and shall cultivate, manufacture, sell, dispense, distribute, transport, or deliver cannabis and cannabis products on behalf of other members who are qualified patients or designated caregivers, as provided under this act.
- (3) DEPARTMENT. The Alabama State Department of Public Health.
- (4) DESIGNATED CAREGIVER. A person, over the age of 18, who has been designated by a qualified patient to assist in the cultivation, procurement, production, transportation, storage, and administration of medical cannabis and has received an identification card issued by the department.
- (5) DISPENSE. The selection, measuring, packaging, labeling, delivery, or distribution or sale of cannabis by a medical cannabis dispensing center, a medical cannabis delivery service, a medical cannabis manufacturer, or a medical cannabis cultivator, as defined by this act, to a qualifying patient or a designated caregiver.
- (6) FULL MEDICAL EVALUATION. The standard of care that applies when certifying individuals as candidates for the use of medical marijuana is the same as that expected in any other situation in which an individual is being evaluated for medical services. A special standard, higher or lower, is not

- called for in certifying patients for the use of medical
- 2 marijuana which has the following:
- 3 a. Accepted components of a full medical evaluation
- 4 to determine suitability and appropriateness for recommending
- 5 treatment of any kind, including certification for medical
- 6 marijuana, include:
- 7 1. A hands on physician patient encounter.
- 8 2. Full assessment and recording of patient's
- 9 medical history.
- 10 3. Relevant physical examination.
- 11 4. Review of prior records of relevant examinations
- 12 and treatments.
- 13 5. Receipt and review of relevant diagnostic test
- results.
- 15 6. Discussion of advantages, disadvantages,
- alternatives, potential adverse effects, and expected response
- 17 to treatment.
- 7. Development of a plan of care with stated goals
- of therapy.
- 8. Monitoring of the response to treatment and
- 21 possible adverse effects.
- 22 9. Creation and maintenance of patient records
- documenting the information above.
- 10. These medical encounters are to take place in
- 25 permanent locations that enable the patient to return for
- follow-up, consultation, or assistance as needed.

b. A physician failing to meet generally accepted

standards of practice when certifying a patient to use

marijuana for a medical condition may be found to be

practicing below the acceptable standard of care and therefore

may be subject to disciplinary action.

- (7) LABELING. All labels and other written, printed, or graphic matter upon any cannabis intended for medical use, or accompanying the cannabis.
- (8) MEDICAL CANNABIS CULTIVATOR. Any nonprofit entity organized to cultivate, dispense, and deliver cannabis and cannabis products for medical use to medical cannabis delivery services, medical cannabis dispensing centers, or medical cannabis product manufacturers, or their qualifying patients or designated caregiver members.
- (9) MEDICAL CANNABIS DELIVERY SERVICE. A nonprofit entity organized to cultivate, dispense, and deliver cannabis and cannabis products for medical use to patients and their designated caregivers.
- (10) MEDICAL CANNABIS DISPENSING CENTER. A nonprofit entity organized to cultivate and dispense cannabis and cannabis products through storefronts for medical use to patients and their designated caregivers who are members.
- (11) MEDICAL CANNABIS LABORATORY. A non-residential facility licensed by the Department of Public Health to analyze dried, extracted, cured, food-based, any other forms of cannabis for any of the following:
 - a. Contaminants, such as mold and insects.

b. Concentrations of cannabinoids, such as

Tetrahydrocannabinol (THC) and Cannabidiol (CBD) and other

chemical constituents.

- (12) MEDICAL CANNABIS PRODUCTS. Products that contain cannabis or cannabis extracts and are intended for human consumption or application, including, but not limited to, edible products, tinctures, and lotions.
- (13) MEDICAL CANNABIS PRODUCT MANUFACTURER. A nonprofit entity organized to manufacture medical cannabis products meant for dispensing within medical cannabis dispensing centers or medical cannabis delivery service or directly to the manufacturer's qualified patient or designated caregiver members, if organized as a collective. Medical cannabis product manufacturers shall be members or have a defined relationship with medical cannabis dispensing centers or medical cannabis delivery services, as provided for under this chapter. Medical cannabis product manufacturers may be members or have a defined relationship with medical cannabis cultivators. Medical cannabis product manufacturers do not include qualified patients and designated caregivers who produce medical cannabis products for their own individual use or for the use of a patient under their care.
- (14) NONPROFIT. An organization registered with the State of Alabama as a nonprofit entity.
- (15) QUALIFIED PATIENT. A person who has been diagnosed with a serious medical condition and, having been given a full medical evaluation by a physician, it has been

determined would benefit from the use of cannabis and has 1 obtained an identification card from the department. 2 (16) SEEDLING. A cannabis plant that has no flowers 3 or that is less than 12 inches in height or less than 12 inches in diameter. 5 (17) SERIOUS MEDICAL CONDITION. All of the following 6 7 medical conditions: a. Acquired immune deficiency syndrome (AIDS). 8 b. Amyotrophic lateral sclerosis (ALS - Lou Gehrig's 9 10 disease). 11 c. Anorexia. 12 d. Attention deficit hyperactivity disorder (ADHD) / 13 Attention deficit disorder (ADD). e. Autism. 14 15 f. Bipolar disorder. q. Cachexia. 16 17 h. Cancer. 18 i. Cerebral palsy. 19 j. Chronic depression. 20 k. Chronic pain. 21 1. Dystonia. 22 m. Fibromyalgia. n. Gastrointestinal disorders, including, but not 23 24 limited to, colitis, Crohns disease, and irritable bowel 25 syndrome (IBS). 26 o. Glaucoma.

p. Lupus

- 1 q. Migraine.
- 2 r. Obsessive-compulsive disorder.
- s. Parkinson's disease. 3
- t. Persistent muscle spasms, including, but not 5 limited to, spasms associated with Amyotrophic lateral sclerosis (ALS-Lou Gehrig's disease), multiple sclerosis, and 6 7 Parkinson's disease.
- u. Post-traumatic stress disorder. 8
- v. Rheumatoid arthritis. 9
- 10 w. Seizures, including, but not limited to, seizures 11 associated with epilepsy.
- 12 x. Severe nausea.

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- 13 y. Tourette's syndrome.
- 14 z. Any other chronic or persistent medical symptom 15 that either:
- (i) Substantially limits the ability of the person 17 to conduct one or more major life activities as defined in the Americans with Disabilities Act of 1990 (Public Law 101-336).
 - (ii) If not alleviated, may cause serious harm to the patient's safety or physical or mental health.
 - (18) UNKNOWN SOURCES. Any individual patient, collective, law enforcement agency, or any other agent authorized by this act to sell cannabis that is not required to meet the same quality standards as a medical cannabis dispensing center, medical cannabis delivery service, medical cannabis manufacturer, or medical cannabis cultivator.

(19) VISITING QUALIFIED PATIENT. A person with a medical condition who is currently participating in another state's medical cannabis program and is in possession of a valid out-of-state medical cannabis program identification card or its equivalent.

Section 3. (a) Sections 13A-12-213 and 13A-12-214 of the Code of Alabama 1975, relating to the possession of marijuana, and Section 13A-12-231 of the Code of Alabama 1975, relating to the cultivation of marijuana, shall not apply to a qualified patient, or to the designated caregiver of the patient, who possesses or cultivates cannabis for the personal medical purposes of the qualified patient upon the written recommendation or approval of a physician.

(b) Notwithstanding any other provision of law, a physician in this state may not be punished, or denied any right or privilege, for having recommended cannabis to a patient for medical purposes.

Section 4. (a) Recommendation Classes. There shall be three classes of recommendations that can be made by a physician:

- (1)a. A class 1 recommendation allows a qualified patient or designated caregiver to purchase no more than 2.5 ounces of cannabis per month.
- b. A class 1 recommendation allows a qualified patient or designated caregiver with a patient grow license to possess no more than eight ounces of cannabis. In addition, a qualified patient or primary caregiver may also maintain no

more than eight cannabis plants per qualified patient;

cannabis plants that fall under the definition of seedling do

not count towards that total.

- (2) a. A class 2 recommendation allows a qualified patient or designated caregiver to purchase no more than five ounces of cannabis per month.
- b. A class 2 recommendation allows a qualified patient or designated caregiver with a patient grow license to possess no more than 12 ounces of cannabis. In addition, a qualified patient or primary caregiver may also maintain no more than 12 cannabis plants per qualified patient; cannabis plants that fall under the definition of seedling do not count towards that total.
- (3)a. A class 3 recommendation allows a qualified patient or designated caregiver to purchase no more than 10 ounces of cannabis per month.
- b. A class 3 recommendation allows a qualified patient or designated caregiver with a patient grow license to possess no more than 16 ounces of cannabis. In addition, a qualified patient or primary caregiver may also maintain no more than 16 cannabis plants per qualified patient; cannabis plants that fall under the definition of seedling do not count towards that total.
- (b) Only the dried mature processed flowers of a female cannabis plant or the plant conversion shall be considered when determining allowable quantities of cannabis under this section. Qualified patients, persons with valid

identification cards, and the designated primary caregivers of qualified patients and persons with identification cards, who associate within this state in order, collectively or cooperatively, to cultivate cannabis for medical purposes, may not, solely on the basis of that fact, be subject to criminal sanctions under the laws of this state. A state or local law enforcement agency or officer may not refuse to accept an identification card issued by the department unless the state or local law enforcement agency or officer has reasonable cause to believe that the information contained on the card is false or fraudulent, or the card is being used fraudulently.

Section 5. (a) The department shall establish and maintain a program for the issuance of identification cards to qualified patients who satisfy the requirements of this article and apply to the identification card program.

- (b) The department shall establish and maintain a 24-hour, toll-free telephone number, as well as a secure, web-based verification system, that will enable state and local law enforcement officers to have immediate access to information necessary to verify the validity of an identification card issued by the department.
- (c) Each county health department, or the county's
 designee, shall do all of the following:
- (1) Provide applications upon request to individuals seeking to join the identification card program.
 - (2) Receive and process completed applications.

1 (3) Maintain records of identification card 2 programs.

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- (4) Utilize protocols developed by the department.
- (5) Issue identification cards developed by the department to approved applicants and designated primary caregivers.
- 7 (d) The department shall develop all of the following:
 - (1) Protocols that shall be used by a county health department, or the county's designee, to implement the responsibilities described in subsection (b), including, but not limited to, protocols to confirm the accuracy of information contained in an application and to protect the confidentiality of program records.
 - (2) Application forms that shall be issued to requesting applicants.
 - (3) An identification card that identifies a person authorized to engage in the medical use of cannabis and an identification card that identifies the person's designated caregiver, if any. The two identification cards developed pursuant to this paragraph shall be easily distinguishable from each other.
 - (e) No person or designated caregiver in possession of a valid identification card shall be subject to arrest for possession, transportation, delivery, or cultivation of medical cannabis in an amount established pursuant to this article, unless there is reasonable cause to believe that the

information contained on the card is false or falsified, the card has been obtained by means of fraud, or the person is otherwise in violation of the provisions of this article.

- (f) A person who seeks an identification card shall pay the fee and provide all of the following information to the county health department, or the county's designee, on a form developed and provided by the department:
- (1) The name of the person and proof of his or her residency within the county.
- (2) Written documentation by the attending physician in the medical records of the person stating that the person has been given a full medical evaluation and has been diagnosed with a serious medical condition and that the medical use of cannabis is appropriate.
- (3) The name, office address, office telephone number, and medical license number of the person's attending physician.
- (4) The name of up to two designated caregivers, if any.
- (5) A government-issued photo identification card of the person and of the designated caregiver, if any. If the applicant is a person under 18 years of age, a certified copy of a birth certificate shall be deemed sufficient proof of identity.
- (g) Within 30 days of receipt of an application for an identification card, a county health department, or the county's designee, shall do all of the following:

(1) For purposes of processing the application, verify that the information contained in the application is accurate. If the person is less than 18 years of age, the county health department, or its designee, shall also contact the parent with legal authority to make medical decisions, a legal guardian, or other person or entity with legal authority to make medical decisions to verify the information.

- (2) Verify with the Alabama Board of Medical Examiners that the attending physician has a license in good standing to practice medicine or osteopathy in the state, or with the appropriate licensing boards for naturopathic doctors, physicians assistants, chiropractors, acupuncturists, or other medical professionals with diagnostic and treatment responsibilities.
- (3) Contact the attending physician by facsimile, telephone, or mail to confirm that the medical records submitted by the patient are a true and correct copy of those contained in the physician's office records. When contacted by a county health department, or the county's designee, the attending physician shall confirm or deny that the contents of the medical records are accurate.
- (4) Provide a photograph or electronically transmissible image of the applicant and of the designated caregiver, if any.
- (5) Approve or deny the application. During the application process, a certified copy of the application shall be acceptable as a temporary identification card and shall

- provide the applicant with all rights and privileges provided by an identification card.
- a. If the county health department, or the county's

 designee, approves the application, it shall, within 24 hours,

 or by the end of the next working day of approving the

 application, electronically transmit the following information

 to the department:
- 8 1. A unique user identification number of the applicant.
- 10 2. The date of expiration of the identification 11 card.

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- 3. The name and telephone number of the county health department, or the county's designee, that has approved the application.
- b. The county health department, or the county's designee, shall issue an identification card to the applicant and to his or her designated caregiver, if any, within five working days of approving the application.
- c. In any case involving an incomplete application, the applicant shall assume responsibility for rectifying the deficiency. The county shall have 14 days from the receipt of information from the applicant pursuant to this subdivision to approve or deny the application.
- (h) An identification card issued by the county health department shall be serially numbered and shall contain all of the following:

- a. A unique user identification number of the cardholder.
- b. The date of expiration of the identification
 4 card.

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- 5 c. The name and telephone number of the county
 6 health department, or the county's designee, that approved the
 7 application.
 - d. A 24-hour, toll-free telephone number, and the address of the secure web-based verification system, to be maintained by the department that will enable state and local law enforcement officers to have immediate access to information necessary to verify the validity of the card.
 - e. Photo identification of the cardholder.
 - (i) A separate identification card shall be issued to the person's designated caregiver, if any, and shall include a photo identification of the caregiver.
 - (j) An identification card shall be valid for a period of two years.
 - (k) The county health department, or the county's designee, may deny an application only for any of the following reasons:
 - (1) The applicant did not provide the information required and, upon notice of the deficiency, did not provide the information within 30 days.
 - (2) The county health department, or the county's designee, determined that the information provided was false.

1 (3) The applicant did not meet the criteria set 2 forth in this article.

- (1) Any person whose application has been denied pursuant to subsection (k) may appeal that decision to the department. The county health department, or the county's designee, shall make available a telephone number or address to which the denied applicant can direct an appeal.
- (m) Upon renewal of an identification card, the county health department, or its designee, shall verify all new information and may verify any other information that has not changed. The county health department, or the county's designee, shall transmit its determination of approval or denial of a renewal to the department.
- (n) The department shall establish application and renewal fees for persons seeking to obtain or renew identification cards that are sufficient to cover the expenses incurred by the department, including the startup cost, the cost of reduced fees for those who qualify, the cost of identifying and developing a cost-effective Internet web-based system, and the cost of maintaining the 24-hour, toll-free telephone number. Each county health department, or the county's designee, may charge an additional fee for all costs incurred by the county, or the county's designee, for administering the program pursuant to this article.
- (o) Upon satisfactory proof of participation and eligibility in a social services program, an applicant shall

receive a 50 percent reduction in the fees established pursuant to this section.

- 3 (p) A person who possesses an identification card shall do the following:
 - (1) Within seven days, notify the county health department, or the county's designee, of any change in the person's attending physician or designated primary caregiver, if any.
 - (2) If the designated caregiver has been changed, the previous designated caregiver shall return his or her identification card to the department or to the county health department, or the county's designee.

Section 6. (a) Nothing in this article shall require any accommodation of any medical use of cannabis on the property or premises of any place of employment or during the hours of employment, or on the property or premises of any jail, correctional facility, or other type of penal institution in which prisoners reside or persons under arrest are detained.

- (b) Nothing in this article shall require a governmental, private, or any other health insurance provider or health care service plan to be liable for any claim for reimbursement for the medical use of cannabis.
- (c) It shall be unlawful for an employer to discriminate against a person in hiring, terminating, or any term or condition of employment or otherwise penalize a person

- if the discrimination or penalty is based solely upon either of the following:
- 3 (1) The person's status as a qualified patient or a 4 designated caregiver.

- (2) The person's positive drug test for cannabis, provided the person is a qualified patient and the medical use of cannabis does not occur on the property or premises of the place of employment or during the hours of employment.
- (d) A person who has suffered discrimination in violation of subsection (c) may institute and prosecute in his or her own name and on his or her own behalf a civil action for damages, injunctive relief, and any other appropriate equitable relief to protect the peaceable exercise of the right or rights secured.
- (e) Subdivision (2) of subsection (c) shall not apply when an employer employs a person in a safety-sensitive position. For purposes of this section, a safety-sensitive position means a position in law enforcement or a position in which medical cannabis-affected performance could clearly endanger the health and safety of others. A safety-sensitive position shall have all of the following general characteristics:
- (1) Its duties involve a greater than normal level of trust, responsibility for, or impact on the health and safety of others.
- (2) Errors in judgment, inattentiveness, or diminished coordination, dexterity, or composure while

performing its duties could clearly result in mistakes that would endanger the health and safety of others.

- (3) An employee in a safety-sensitive position works independently or performs tasks of a nature that it cannot safely be assumed that mistakes like those described in subdivision (2) could be prevented by a supervisor or another employee.
 - Section 7. (a) Nothing in this act shall be construed as authorizing the operation of a vehicle by a person while the person is under the influence of cannabis.
 - (b) A qualified patient shall not be considered to be operating a vehicle under the influence solely for having cannabis metabolites in his or her system, being a qualified patient, or being in possession of cannabis.
 - Section 8. A qualified patient or designated caregiver shall not be subject to any civil penalty, including, but not limited to, the loss of property or eviction solely for one or more of the following:
 - (1) Testing positive for cannabis use.
 - (2) Being a qualified patient or designated caregiver.
 - (3) Exercising rights as provided in this act.
 - (4) Use of cannabis.
 - (5) Being an employee or agent of a medical cannabis dispensing center, medical cannabis delivery service, medical cannabis cultivator, or medical cannabis product manufacturer.

- Section 9. As used in this act, the term "habitual or continual illegal use of controlled substances" does not include the following:
 - (1) Testing positive for cannabis use.
 - (2) Being a qualified patient or designated caregiver.
 - (3) Exercising rights as provided in this act.
 - (4) Use of cannabis.

- (5) Being an employee or agent of a medical cannabis dispensing center, medical cannabis delivery service, medical cannabis cultivator, or medical cannabis product manufacturer.
- Section 10. A visiting qualified patient shall have the same rights and privileges under the laws of this state as a qualified patient.
- Section 11. (a) The fact that a person is a qualified patient or designated caregiver or is the employee or agent of a medical cannabis dispensing center, medical cannabis delivery service, medical cannabis cultivator, or medical cannabis product manufacturer does not, alone:
- (1) Constitute probable cause to search the person or the person's property.
- (2) Subject the person or the person's property to inspection by any governmental agency.
- (b) (1) Except as otherwise provided in this section, if officers of a state or local law enforcement agency seize cannabis, drug paraphernalia, or other related property from a person engaged or assisting in the medical use of cannabis,

the law enforcement agency shall ensure that the cannabis,

drug paraphernalia, or other related property is not destroyed

while in the possession of the law enforcement agency.

- (2) Any property interest of the person from whom cannabis, drug paraphernalia, or other related property is seized must not be forfeited pursuant to any provision of law providing for the forfeiture of property, except as part of a sentence imposed after conviction of a criminal offense.
- (c) Upon a determination by the district attorney, or his or her designee, of the county in which the cannabis, drug paraphernalia, or other related property was seized that the person from whom the cannabis, drug paraphernalia, or other related property was seized is engaging in or assisting in the medical use of cannabis in accordance with the provisions of this act, the law enforcement agency shall immediately return to that person any usable cannabis, cannabis plants, drug paraphernalia, or other related property that was seized. The determination of a district attorney, or the district attorney's designee, that a person is engaging in or assisting in the medical use of cannabis in accordance with the provisions of this act shall be deemed to be evidenced by the following:
 - (1) A decision not to prosecute.
 - (2) The dismissal of charges.
 - (3) Acquittal.
- Section 12. For the purposes of medical care, including organ and tissue transplants, a qualified patient's

authorized use of cannabis shall be considered the equivalent of the authorized use of any other medication used at the direction of a physician and may not constitute the use of an illicit substance.

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Section 13. (a) Qualified patients and designated caregivers who associate within this state in order to collectively or cooperatively cultivate cannabis for medical purposes may share responsibility for acquiring and supplying the resources required to produce and process cannabis for medical use such as, for example, money; location for a collective garden; equipment, supplies, and labor necessary to plant, grow, and harvest cannabis; cannabis plants, seeds, and cuttings; and equipment, supplies, and labor necessary for proper construction, plumbing, wiring, and ventilation of a garden of cannabis plants. It is the sole discretion of the collective or cooperative to determine the requirements for membership within the collective or cooperative, and responsibilities and duties may be carried out by any or all members of the collective or cooperative. It is also within the discretion of the collective or cooperative to determine allocation of the costs and benefits of the efforts of the collective or cooperative, including the allocation of reasonable compensation for services rendered amongst those associated. All cannabis purchased by a medical cannabis dispensing center, medical cannabis delivery service, medical cannabis manufacturer, or medical cannabis cultivator from

1 unknown sources must be tested by a medical cannabis 2 laboratory, all other testing shall remain voluntary. 3 (b) All collectives must be organized as a nonprofit 4 entity. 5 Section 14. (a) The fees for patient identification cards and growers' license and suppliers shall be as follows: 6 7 Patient identification cards \$100 Patient growers' license 8 \$100 9 Dispensary Type 10 Class 1 dispensary, more than 500 pa-11 tients \$15,000 Class 2 dispensary, 250 to 500 patients 12 \$10,000 Class 3 dispensary, 0 to 250 patients \$5,000 13 14 Class 1 supplier, over 2,000 15 lbs. grower \$7,500 Class 2 supplier, 1,000 to 16 17 2,000 lbs. grower \$5,000 18 Class 3 supplier, under 2,000 19 lbs. grower \$2,500 20 Class 4 supplier, edible canna-21 bis companies \$2,500

(b) An additional 2.5 percent sales tax will be applied to all medical marijuana sales. The revenue generated by this tax shall be distributed to the state's sheriff's departments to be used to combat the illegal trafficking and production of drugs contained in Schedules I and II of the Alabama Controlled Substances List.

(c) An additional 2.5 percent sales tax will be applied to all medical marijuana sales. The revenue generated by this tax will be distributed to the state's municipal police departments to be used to combat the illegal trafficking and production of drugs contained in Schedules I and II of the Alabama Controlled Substances List.

Section 15. (a) Each municipality and county may enact regulations and ordinances governing medical cannabis dispensing centers and the manufacture and labeling of medical cannabis products. These regulations and ordinances shall not ban, either explicitly or implicitly, the operation of medical cannabis dispensing centers. All cannabis purchased by a medical cannabis dispensing center, medical cannabis delivery service, medical cannabis manufacturer, or medical cannabis cultivator from unknown sources must be tested by a medical cannabis laboratory, all other testing shall remain voluntary. Any violation of these regulations and ordinances shall not be a violation of the medical marijuana program act.

1 (b) This act may not be construed to prevent a
2 municipality from adopting and enforcing laws consistent with
3 this act.

- (c) Municipalities that have a population of over 150,000 shall be limited to two medical cannabis dispensing centers within its jurisdiction and all municipalities with a population of over 10,000 shall be limited to one medical cannabis dispensing center. Municipalities and towns with a population of under 10,000 may not have a medical cannabis dispensing center.
- (d) Any county that does not have a city with 10,000 residents will be eligible for one dispensary in the county's largest city or at the county seat.
- Section 16. (a) Retail sales between medical cannabis dispensing centers, medical cannabis delivery services, medical cannabis cultivators, medical cannabis product manufacturers, and qualified patients and designated caregivers shall be permitted under this act.
- (b) A police agency may sell confiscated cannabis to medical cannabis dispensing centers, medical cannabis delivery services, medical cannabis cultivators, and medical cannabis product manufacturers.

Section 17. (a) Each municipality and county may enact regulations and ordinances governing medical cannabis delivery services and the manufacture and labeling of medical cannabis products. These regulations and ordinances shall not ban, either explicitly or implicitly, the operation of medical

cannabis delivery services. All cannabis purchased by a
medical cannabis dispensing center, medical cannabis delivery
service, medical cannabis manufacturer, or medical cannabis
cultivator from unknown sources must be tested by a medical
cannabis laboratory, all other testing shall remain voluntary.
Any violation of these regulations and ordinances shall not be
a violation of the medical marijuana program act.

(b) This act may not be construed to prevent a municipality from adopting and enforcing laws consistent with this act.

Section 18. (a) The manufacture of edible medical cannabis products shall be regulated as the type of food or beverage being manufactured and no additional requirements shall be made.

- (b) Enforcement shall be determined by the Department of Agriculture and Industries. A violation of these regulations and ordinances shall not be a violation of the medical marijuana program act.
- (c) This act may not be construed as preventing a municipality or other local governing body from adopting and enforcing laws consistent with this act.

Section 19. (a) Medical cannabis cultivators wishing to collectively cultivate cannabis plants shall fall within three classes. Class 2 and Class 3 registration shall be renewable annually. Registration classes shall be as follows:

(1) Class 1: Less than 25 qualified patients and designated caregivers wishing to collectively cultivate

cannabis plants and manufacture medical cannabis products for exclusive use by their members. Class 1 cultivators are exempt from registration.

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- (2) Class 2: Collectives of qualified patients and designated caregivers with between 25 and 50 members. The collective shall register with the Department of Agriculture and Industries. The application for a Class 2 registration shall include the name of at least one collective or cooperative member, the address and contact information for that member, a statement that the collective wishes to cultivate collectively and is seeking Class 2 registration, and accompanying payment of five hundred dollars (\$500) to the Department of Agriculture and Industries. The collective shall submit each collective member's identification number or, in the alternative, documentation of a defined relationship with one or more medical cannabis dispensing center or medical cannabis delivery service or medical cannabis product manufacturer. Renewal procedures shall be determined by the Department of Agriculture and Industries.
- (3) Class 3: Collectives of qualified patients and designated caregivers with more than 51 members. The collective shall register with the Department of Agriculture and Industries. The application for a Class 3 registration shall include the name of at least five collective or cooperative members, the address and contact information for those members, a statement that the collective wishes to cultivate collectively and is seeking a Class 3 registration

and accompanying payment of one thousand dollars (\$1,000), plus twenty dollars (\$20) for each member over 50 to the Department of Agriculture and Industries. The collective shall submit each collective member's identification number or, in the alternative, documentation of a defined relationship with one or more medical cannabis dispensing center or medical cannabis delivery service or medical cannabis product manufacturer. Renewal procedures shall be determined by the Department of Agriculture and Industries.

(b) The Department of Agriculture and Industries shall promulgate rules in order to regulate Class 3 registrations. These rules may include inspections and quality controls as well as requirements for defined contractual relationships with medical cannabis dispensing centers and security requirements.

Section 20. The department shall promulgate regulations to authorize and license medical cannabis laboratories in the testing of dried, extracted, cured, food-based, and other forms of cannabis. The testing may include the analysis of contaminants and chemical composition and other methods of investigation intended to advance the understanding of the therapeutic benefits of cannabis and to improve the health and welfare of qualified patients in the state.

Section 21. The Alabama State Board of Pharmacy shall classify cannabis as a controlled substance in Schedule

III, IV, or V. The board shall classify cannabis no later than
later than
days after the effective date of this act.

Section 22. This act shall become effective on the
first day of the third month following its passage and

approval by the Governor, or its otherwise becoming law.