

HOUSE BILL No. 2303

By Representatives Finney, Alcalá, Ballard, Benson, Carlin, Carmichael, Clayton, Henderson, Highberger, Holscher, Horn, Moore, Ohaebosim, Ousley, Parker, Probst, S. Ruiz, Sawyer, Stogsdill, Victors, Warfield, Winn, Woodard and Xu

2-13

1 AN ACT enacting the Kansas safe access act; providing for the safe, legal,
2 humanitarian and therapeutic use of cannabis for medical conditions;
3 providing for the registration and functions of compassion centers;
4 authorizing the issuance of identification cards; establishing the
5 compassion board; providing for administration of the act by the
6 department of health and environment.

7
8 WHEREAS, Cannabis has been used as a medicine for at least 5,000
9 years and can be effective for serious medical conditions for which
10 conventional medications fail to provide relief; and

11 WHEREAS, Modern medical research has shown that cannabis can
12 slow the progression of such serious diseases as Alzheimer's and
13 Parkinson's, stop HIV and cancer cells from spreading; has both anti-
14 inflammatory and pain-relieving properties; can alleviate the symptoms of
15 epilepsy, post traumatic stress disorder and multiple sclerosis; is useful in
16 the treatment of depression, anxiety and other mental disorders; and can
17 help reverse neurological damage from brain injuries and stroke; and

18 WHEREAS, The world health organization has acknowledged the
19 therapeutic effects of cannabinoids, the primary active compounds found
20 in cannabis, including as an anti-depressant, appetite stimulant,
21 anticonvulsant and anti-spasmodic, and identified cannabinoids as
22 beneficial in the treatment of asthma, glaucoma, and nausea and vomiting
23 related to illnesses such as cancer and AIDS; and

24 WHEREAS, The national institutes of health, the institute of medicine
25 and the American college of physicians have issued statements of support
26 for further research and development of cannabis medicine; and

27 WHEREAS, The American medical association has called for the
28 review of the classification of cannabis as a schedule I controlled
29 substance to allow for clinical research and the development of
30 cannabinoid-based medicines; and

31 WHEREAS, The national cancer institute has concluded that cannabis
32 has antiemetic effects and is beneficial for appetite stimulation, pain relief
33 and improved sleep among cancer patients; and

34 WHEREAS, The American herbal pharmacopoeia and the American

1 herbal products association have developed qualitative standards for the
2 use of cannabis as a botanical medicine; and

3 WHEREAS, The United States supreme court has long noted that states
4 may operate as "laboratories of democracy" in the development of
5 innovative public policies; and

6 WHEREAS, Twenty-eight states and the District of Columbia have
7 enacted laws that allow for the medical use of cannabis; and

8 WHEREAS, Seventeen additional states have enacted laws authorizing
9 the medical use of therapeutic compounds extracted from the cannabis
10 plant; and

11 WHEREAS, More than 17 years of state-level experimentation
12 provides a guide for state, and federal law and policy related to the
13 medical use of cannabis; and

14 WHEREAS, the American legion, America's oldest veteran
15 organization, has passed a resolution calling on congress to amend its laws
16 to "at a minimum recognize cannabis as a drug with potential medical
17 value"; and

18 WHEREAS, Accredited educational curricula concerning the medical
19 use of cannabis have been established, which meet continuing medical
20 education requirements for practicing physicians; and

21 WHEREAS, Congress has prohibited the federal department of justice
22 from using funds to interfere with and prosecute those acting in
23 compliance with their state medical cannabis laws, and the department of
24 justice has issued guidance to U.S. attorneys indicating that enforcement
25 of the controlled substances act is not a priority when individual patients
26 and their medical care providers are in compliance with state law, and that
27 federal prosecutors should defer to state and local enforcement so long as a
28 viable state regulatory scheme is in place; and

29 WHEREAS, Data from the federal bureau of investigation's uniform
30 crime reports and the compendium of federal justice statistics show that
31 approximately 99 out of every 100 cannabis arrests in the United States are
32 made under state law, rather than under federal law therefore,
33 consequently, changing state law will have the practical effect of
34 protecting from arrest the vast majority of seriously ill patients who have a
35 medical need to use cannabis.

36 Now, therefore:

37 *Be it enacted by the Legislature of the State of Kansas:*

38 Section 1. (a) Sections 1 through 22, and amendments thereto, shall
39 be known as the Kansas safe act access act.

40 (b) The legislature of the state of Kansas declares that the Kansas safe
41 access act is enacted pursuant to the police power of the state, to protect
42 the health of its citizens that is reserved to the state of Kansas and its
43 people under the 10th amendment to the constitution of the United States.

1 Sec. 2. Definitions. The following definitions of terms shall apply to
2 all rules promulgated pursuant to the Kansas safe access act, unless the
3 context requires otherwise:

4 (a) "Adverse employment action" means refusing to hire or employ a
5 qualified registered patient, barring or discharging a qualified registered
6 patient from employment, requiring a qualified registered patient to retire
7 from employment or discriminating against a qualified registered patient in
8 compensation or in terms, conditions or privileges of employment.

9 (b) "Cannabinoid potency profile" means the results of a liquid
10 chromatography (HPLC) column with diode array detector (DAD) testing
11 of a specific batch of medical cannabis and medical cannabis products to
12 ensure accurate quantification of cannabinoids for dosing and labeling
13 accuracy

14 (c) "Cannabis" or "Medical cannabis" means all parts of all varieties
15 of the plant cannabis whether growing or not, the seeds thereof, the resin
16 extracted from any part of the plant and every compound, manufacture,
17 salt, derivative, mixture or preparation of the plant, its seeds or resin. It
18 does not include the mature stalks of the plant, fiber produced from the
19 stalks, oil or cake made from the seeds of the plant, any other compound,
20 manufacture, salt, derivative, mixture or preparation of the mature stalks,
21 except the resin extracted therefrom, fiber, oil, cake or the sterilized seed
22 of the plant which is incapable of germination, used for medical
23 therapeutics.

24 (d) "Cannabis compliance agency" or "agency" means agency created
25 under section 21, and amendments thereto. The cannabis compliance
26 agency oversees all components of licensing, compliance and regulation
27 enforcement; is not a resource for the growing process and does not have
28 to give information pertaining to the growing process to patients or
29 caregivers as part of this act. The agency works in consultation with the
30 compassion board and is established as an agency under the Kansas
31 department of health and environment.

32 (e) "Cannabis infused products" or "cannabis-based products" or
33 "cannabis products" means products containing medical cannabis.

34 (f) "Certification" or "recommendation" means a document given by
35 medical provider to a patient which states patient has a condition or illness
36 that may be helped by medical cannabis.

37 (g) "Child-resistant" means special packaging that is designed or
38 constructed to be significantly difficult for children under five years of age
39 to open and not difficult for normal adults to use properly as defined by 16
40 C.F.R. 1700.20 (1995) and ASTM classification standard D3475-13,
41 <http://www.astm.org/Standards/D3475.htm>

42 (h) "Cannabis resource commission" means the board created under
43 section 13, and amendments thereto. The cannabis resource commission

1 will report to the governor, be responsible for advising on and acting as a
2 resource for policy on behalf of patients, medical providers and the public;
3 with focus on continuous process improvement to better serve the needs of
4 all; to facilitate research, work with researchers, liaison with other Kansas
5 agencies and organizations, liaison with law enforcement, the Kansas
6 legislature and the cannabis compliance agency.

7 (i) "Compassion center" means a local, government regulated,
8 physical location, typically inside a retail storefront or office building in
9 which a person can purchase medical cannabis and medical cannabis
10 products for therapeutic use. A patient receives cannabis medication as
11 allowed per the patient's medical provider's recommendation.

12 (j) "Compassion center staff" means a principal officer, board
13 member, employee, volunteer or agent of a compassion center who has
14 been issued and possesses a valid identification card.

15 (k) "Cultivating caregiver" means the individual or entity, such as a
16 nursing home or hospice, designated by a registered qualifying patient
17 with an identification card, or primary caregiver with an identification
18 card, able to cultivate a patient's recommended amount of medical
19 cannabis on their behalf. Cultivating caregivers shall not exceed a limit of
20 10 patients without purchasing and implementing a seed to sale tracking
21 system and following ecologically sustainable guidelines.

22 (l) "Cultivation facility" means an entity licensed to cultivate, prepare
23 and package medical cannabis, and sell to compassion centers and medical
24 cannabis product manufacturers but not to consumers.

25 (m) "Cultivar" means a cannabis plant variety that has been produced
26 in cultivation by selective breeding.

27 (n) "Department" means the department of health and environment.

28 (o) "Distillation process material" means food grade alcohol and
29 CO₂, a liquid that has a flashpoint below 100 degrees Fahrenheit.

30 (p) "Ecologically sustainable pesticides" means pesticides approved
31 for organic agriculture. Banned pesticides include but are not limited to:
32 Myclobutanil, imidacloprid, avermectin, bifentazate, etoxazole, and
33 azadirachtin.

34 (q) "Extract" is defined as the final product, derived by various
35 methods of separating plant material from chemical compounds.

36 (r) "Harvest batch lot" means a specifically identified quantity of
37 processed medical cannabis that is uniform in cultivar, cultivated using the
38 same ecologically sustainable herbicides, pesticides and fungicides and
39 harvested at the same time.

40 (s) "Identification card" means a document issued by the department
41 that identifies a person as a registered qualifying patient, registered
42 designated primary caregiver or employee of a registered compassion
43 center.

1 (t) "Identity statement and standardized graphic symbol," "identity
2 statement" means the name, or logo of the business as it is commonly
3 known and used in market positioning. A licensee may elect to have its
4 identity statement also serve as its standardized graphic symbol for
5 purposes of complying with this rule. The licensee shall maintain a record
6 of its identity statement and standardized graphic symbol and make such
7 information available to the cannabis compliance agency upon request.

8 (u) "Licensee" means any person or entity holding a license to
9 operate a compassion center, medical cannabis cultivation facility, medical
10 cannabis testing facility or manufacture medical cannabis products.

11 (v) "Medical cannabis concentrate" means a medical cannabis
12 concentrated form, manufactured by extraction, decoction or distillation,
13 available for purchase at compassion centers.

14 (w) "Medical cannabis products manufacturing facility" means any
15 site that manufactures medical cannabis based products.

16 (x) "Medical cannabis testing facility" means a testing laboratory that
17 is licensed by the cannabis compliance agency to conduct sampling and
18 analysis of medical cannabis and medical cannabis products.

19 (y) "Medical condition" means either a temporary disability or
20 illness, due to injury or surgery, or a permanent disability or illness which:

21 (1) Substantially limits the ability of the person to conduct one or
22 more major life activities as defined in the Americans with disabilities act
23 of 1990 (ADA)(public law 101-336); or

24 (2) if not alleviated, may cause serious harm to the patient's safety,
25 physical, or mental health.

26 (z) "Medical provider" means a physician, physician's assistant or an
27 advanced practice registered nurse who possesses a license in good
28 standing to practice medicine or osteopathy issued by the Kansas board of
29 healing arts or board of nursing and who has taken responsibility for an
30 aspect of the medical care, treatment, diagnosis, counseling or referral of a
31 patient and who has conducted a medical examination of that patient
32 before recording in the patient's medical record the physician's or
33 advanced practice registered nurse's assessment of whether the patient has
34 a medical condition where the medical use of cannabis is appropriate.

35 (aa) "Occupational licensee" means an individual trained in various
36 aspects of cannabis compliance, or cannabis product manufacturing
37 compliance.

38 (bb) "Optional premises" means a site for cultivation or
39 manufacturing other than the primary business site of a licensee.

40 (cc) "Patient," "qualifying patient" and "registered qualifying patient"
41 means a person who has been diagnosed by a medical provider as having a
42 debilitating medical condition and as such have qualified for coverage
43 under the Kansas safe access act, whether a temporary disability or illness,

1 due to injury or surgery, or a permanent disability or illness which
2 substantially limits the ability of the person to conduct one or more major
3 life activities, as defined in the Americans with disabilities act of 1990
4 (ADA)(public law 101-336); or if not alleviated, may cause serious harm
5 to the patient's safety or physical or mental health.

6 (dd) "Patient owned cooperative" or "cooperative" means an
7 organization that merely facilitates the collaborative efforts of patient and
8 caregiver members, including the allocation of costs and revenues. As
9 such, a cooperative is not a statutory entity, but as a practical matter it
10 might have to organize as some form of business to carry out its activities.
11 The cooperative should not purchase medical cannabis from, or sell to,
12 non-members; instead, it should only provide a means for facilitating or
13 coordinating transactions between members. Not every member of a
14 cooperative must participate in cultivation. Cities cannot use nuisance
15 abatement ordinances to impose a blanket ban on cooperatives, if the
16 cooperative cultivates on-site.

17 (ee) "Philanthropic equity investors" means enterprise level investors
18 seeking to provide nonprofits with the capital they need to scale impact
19 and intended to subsidize organizations until they reach a point when their
20 activities are fully sustained by commerce of cooperative members.

21 (ff) "Primary caregiver" means the individual or entity, designated by
22 a registered, qualifying patient who has consistently assumed
23 responsibility for the housing, health or safety of that patient or person,
24 and may include any of the following:

25 (1) A registered qualifying patient receives medical care or supportive
26 services, or both, from a licensed clinic, a licensed state government
27 institution clinic, a licensed health care facility, a licensed residential care
28 facility for persons with chronic life-threatening illness, a licensed
29 residential care facility for the elderly, a hospice or a licensed home health
30 agency, the owner or operator and any trained staff of a licensed clinic,
31 facility, hospice, or home health agency, group home or halfway house, if
32 designated as a primary caregiver by a registered qualifying patient;

33 (2) an individual who has been designated as a primary caregiver by
34 one or more registered qualifying patient(s);

35 (3) a primary caregiver shall be at least 18 years of age, unless the
36 primary caregiver is the parent of a minor child who is a registered
37 qualifying patient, or the primary caregiver is a person otherwise entitled
38 to make medical decisions under state law or it can be proven to the
39 cannabis compliance agency that no other viable option for a caregiver is
40 available.

41 (gg) "Production batch lots" means a group of medical cannabis-
42 based products created from the same production run.

43 (hh) "Radio Frequency Identification Tag" (RDIF Tag) means an

1 electronic tag that exchanges data with a RDIF reader through radio
2 waves; used for identification and tracking. An RFID system includes the
3 tag itself, a read/write device and a host system application for data
4 collection, processing and transmission.

5 (ii) "Seed to sale tracking system" means a technology platform
6 designed specifically for governments and regulatory agencies that will
7 collect and monitor the critical data needed to track compliance with
8 jurisdictional rules, laws and regulations governing cannabis-related
9 businesses. It is a software tracking system used to track the production,
10 transportation, destruction, and sales of legal cannabis in a system
11 allowing regulatory agencies to view reports in real time. It allows medical
12 cannabis businesses to utilize the commercial system as a business
13 platform which supports them in remaining fully compliant when tracking
14 all aspects of their day-to-day operations.

15 (jj) "Shipping container" means any container or wrapping used
16 solely for the transport of medical cannabis or medical cannabis-infused
17 product in bulk or in a quantity for other medical cannabis business.

18 (kk) "Third-party certification agencies" means third-party
19 certification agencies that offer certification for producers of ecologically
20 sustainably grown cannabis products to a private standard that is similar to
21 internationally accepted organic standards.

22 (ll) "Visiting qualifying patient" means a patient with a debilitating
23 medical condition who is not a resident of Kansas or who has been a
24 resident of Kansas less than 30 days.

25 (mm) "Written documentation" means accurate reproductions of
26 those portions of a patient's medical records that have been created by the
27 attending medical provider, that contain the information that the patient
28 may submit to the cannabis compliance agency or its designee as part of an
29 application for an identification card.

30 Sec. 3. The purpose of the Kansas safe access act. The purpose of this
31 act is to: (a) Provide legal protections to persons with medical conditions,
32 that medicate with cannabis to alleviate the symptoms of such medical
33 conditions under the supervision of a medical provider, and prohibits the
34 provisions of law making unlawful the possession, or cultivation of
35 cannabis from applying to a patient's primary caregiver, who possesses or
36 cultivates cannabis for the medical purposes of the patient upon the written
37 recommendation of their medical provider;

38 (b) allow for the regulated cultivation, processing, manufacture,
39 delivery, distribution and possession of cannabis as permitted by this act;

40 (c) make illegal the property seizure and forfeiture of qualifying
41 patients who use cannabis as a medical treatment, family members in their
42 homes or for the personal caregivers who may assist those patients, the
43 physicians and healthcare professionals who certify patients as qualifying

1 for medical use or the individuals who provide medical cannabis to
2 qualified patients or otherwise participate in accordance with state law and
3 regulations in the medical cannabis program;

4 (d) establish that neither the presence of cannabinoid components or
5 metabolites in a person's bodily fluids, nor conduct related to the medical
6 use of cannabis by a custodial or noncustodial parent, grandparent,
7 pregnant woman, breastfeeding mother, legal guardian, or other person
8 charged with the wellbeing of a child, or infant shall form the sole or
9 primary basis for any action or proceeding by a child welfare agency,
10 family or juvenile court because their child, or ward, is a medical cannabis
11 patient, or a newborn, or child of breastfeeding mother has presence of
12 cannabinoids because the mother is a medical cannabis patient. This
13 subsection shall apply only to conduct in compliance with the Kansas safe
14 access act;

15 (e) establish patient protection for the purposes of medical care,
16 including organ transplants, a qualifying patient's medical use of cannabis
17 does not constitute the use of an illicit substance, or otherwise disqualify a
18 registered qualifying patient from medical care, nor be used to violate a
19 registered qualifying patient on probation, or parole;

20 (f) establish protection for patients and caregivers, that unless
21 required by federal law, or required to obtain federal funding, no landlord
22 may refuse to rent a dwelling unit to a person or take action against a
23 tenant solely on the basis of an individual's status of a qualifying patient,
24 or identification card holder under this act;

25 (g) ensure that patient and caregiver insurance coverage of any type
26 shall not be endangered because of a person's status as a medical cannabis
27 patient;

28 (h) guarantee that medicine availability shall not be hampered to any
29 patient and that it shall be available to all medical cannabis patients in any
30 environment where other medications are allowed;

31 (i) establish that a patient or caregiver may assert the medical purpose
32 for using cannabis as a defense, or appeal, to any prosecution, or
33 conviction, of an offense involving cannabis intended for the patient's
34 medical use, and that this defense shall be presumed valid where the
35 evidence shows that:

36 (1) A medical provider has stated that, in the medical provider's
37 professional opinion, after having completed a full assessment of the
38 patient's medical history and current medical condition, the patient is likely
39 to receive, or would have received therapeutic or palliative benefit from
40 the medical use of cannabis to treat or alleviate the patient's medical
41 condition or symptoms associated with the patient's medical condition;

42 (2) the patient and the patient's designated primary caregiver, or
43 cultivating caregiver if any, were collectively in possession of a quantity of

1 cannabis that was no more than was reasonably necessary to ensure the
2 uninterrupted availability of cannabis for the purpose of treating or
3 alleviating the patient's medical condition or symptoms associated with the
4 patient's medical condition;

5 (3) the registered qualifying patient, cultivating caregiver, or
6 designated primary caregiver was engaged in the acquisition, possession,
7 cultivation, manufacture, use or transportation of cannabis, paraphernalia,
8 or both, relating to the administration of cannabis solely to treat or
9 alleviate the patient's medical condition or symptoms associated with the
10 patient's medical condition;

11 (4) the person may assert the medical purpose for using cannabis in a
12 motion to dismiss, and the charges shall be dismissed following an
13 evidentiary hearing where the person shows the elements listed in
14 paragraphs (1), (2) and (3); and

15 (5) if a patient demonstrates the patient's medical purpose for using
16 cannabis pursuant to this section the patient and the patient's designated
17 caregiver, or cultivating caregiver shall not be subject to the following for
18 the registered qualifying patient's use of cannabis for medical purposes:

19 (A) Disciplinary action by an occupational or professional licensing
20 board or bureau; or

21 (B) forfeiture of any interest in or right to property;

22 (j) recognize established federal protection for native American
23 growers, collectives and compassion centers. Kansas shall in no way
24 impede the rights of indigenous peoples;

25 (k) recognize that worker's compensation should cover medical
26 cannabis as it would all other medications;

27 (l) guarantee medical cannabis patients shall fully retain all rights,
28 including their second amendment rights; and

29 (m) establish that medical cannabis patients will be protected from
30 warrantless drug enforcement administration's medical record searches.

31 (n) This act shall remove cannabis (and all places listed as medical
32 cannabis) and all parts of all varieties of the plant cannabis whether
33 growing or not, the seeds thereof, the resin extracted from any part of the
34 plant and every compound, manufacture, salt, derivative, mixture or
35 preparation of the plant, its seeds or resin. It does not include the mature
36 stalks of the plant, fiber produced from the stalks, oil or cake made from
37 the seeds of the plant, any other compound, manufacture, salt, derivative,
38 mixture or preparation of the mature stalks, the resin extracted therefrom,
39 fiber, oil, or cake or the sterilized seed of the plant which is incapable of
40 germination, from K.S.A. 65-4105, 65-4101, 65-4107, 65-4109, 65-4111
41 and 65-4113, and amendments thereto.

42 (o) The Kansas safe access act shall not prevent the seizure or
43 forfeiture of cannabis exceeding the amounts allowed under such act; and

1 not meeting exceptions listed in section 8, and amendments thereto.

2 (p) Any cannabis, cannabis paraphernalia, illicit property or interest
3 in illicit property that is possessed, owned or used in connection with the
4 medical use of cannabis as allowed under the Kansas safe access act, or
5 acts incidental to such use, shall not be seized or forfeited.

6 (q) A person shall not be subject to arrest, prosecution or penalty in
7 any manner, or denied any right or privilege, including, but not limited to,
8 civil penalty or disciplinary action by a court or occupational or
9 professional licensing board or bureau, simply for being in the presence or
10 vicinity of the medical use of cannabis as allowed under the Kansas safe
11 access act, or for assisting a patient with using or administering cannabis.

12 (r) A person shall not be subject to arrest, prosecution or penalty in
13 any manner or denied any right or privilege including, but not limited to,
14 civil penalty or disciplinary action by a court or occupational or
15 professional licensing board or bureau, for providing a registered
16 qualifying patient or a registered designated primary caregiver, or
17 cultivating caregiver with cannabis paraphernalia for purposes of a
18 registered patient's medical use of cannabis.

19 (s) Fraudulent representation to a law enforcement official of any fact
20 or circumstance relating to the medical use of cannabis to avoid arrest or
21 prosecution shall be punishable by a fine of \$500, which shall be in
22 addition to any other penalties that may apply for making a false statement
23 or for the use of cannabis other than use undertaken pursuant to the Kansas
24 safe access act.

25 (t) Any identification cardholder who sells cannabis to a person who
26 is not allowed to possess cannabis for medical purposes under the Kansas
27 safe access act shall have the cardholder's identification card revoked and
28 shall be subject to other penalties for the unauthorized sale of cannabis.

29 (u) Where a state-funded or locally-funded law enforcement agency
30 encounters an individual who, during the course of the investigation,
31 credibly asserts that such individual is an identification cardholder or an
32 entity whose personnel credibly assert that it is a compassion center, the
33 law enforcement agency shall not provide any information from any
34 cannabis-related investigation of the person to any law enforcement
35 authority that does not recognize the protection of the Kansas safe access
36 act and any prosecution of the individual, individuals or entity for a
37 violation of the Kansas safe access act shall be conducted pursuant to the
38 laws of this state.

39 (v) The act will establish protection of card holding, nonresident
40 patients from other states with an established medical cannabis program
41 traveling through the state of Kansas.

42 (w) If the department fails to adopt temporary rules and regulations to
43 implement the Kansas safe access act within 180 business days of the

1 effective date of the Kansas safe access act, a patient, prospective board
2 member, or prospective principal officer of a compassion center may
3 commence an action in a court of competent jurisdiction to compel the
4 department to perform the actions mandated pursuant to the provisions of
5 the Kansas safe access act.

6 (x) If the cannabis compliance agency fails to issue a valid
7 identification card in response to a valid application or renewal submitted
8 pursuant to the Kansas safe access act within 30 business days of its
9 submission, the identification card shall be deemed granted and a copy of
10 the identification application, copy of renewal application, receipt from
11 application submittal or receipt from application renewal shall be deemed
12 a valid identification card.

13 (y) If at any time after the 180 business days following the effective
14 date of the Kansas safe access act, the department is not accepting
15 applications, including if it has not created rules and regulations allowing
16 patients to submit applications, a notarized statement by a patient
17 containing the information required in an application, pursuant to section
18 5, and amendments thereto, together with a written certification from their
19 medical provider, these together shall be deemed a valid identification
20 card.

21 (z) The act prohibits the provisions of law making unlawful the
22 possession, therapeutic use, manufacture or cultivation of cannabis from
23 applying to a registered qualifying patient, a registered qualifying patient's
24 primary caregiver or cultivating caregiver, who possesses or cultivates
25 cannabis for the personal medical purposes of the patient upon the written
26 or oral recommendation or approval of a medical provider.

27 (aa) Patient owned cooperatives are allowed to grow, distribute and/or
28 sell medical cannabis and medical cannabis products on a non-profit basis
29 to their members.

30 (bb) Duly designated primary caregivers, and cultivating caregivers,
31 who consistently attend to registered qualifying patients' needs, are
32 allowed to charge for their labor and services in providing medical
33 cannabis.

34 (cc) Nothing in this act shall be construed as interfering with a
35 Kansas citizen's right to purchase hemp based products under sec. 7606
36 legitimacy of industrial hemp research, within the 2014 farm act and/or
37 federal guidelines established thereafter.

38 Sec. 4. Medical providers. The purpose of this rule is to prohibit any
39 medical provider from being punished, or denied any right or privilege, for
40 having recommended cannabis to a qualifying patient for medical
41 therapeutic use. It sets forth general standards and requirements for
42 medical providers and establishes guidelines for diagnosing registered
43 qualifying patients as having a debilitating medical condition and as such

1 have coverage under the Kansas safe access act, whether a temporary
2 disability or illness, due to injury or surgery, or a permanent disability or
3 illness which substantially limits the ability of the person to conduct one or
4 more major life activities, as defined in the Americans with disabilities act
5 of 1990 (ADA)(public law 101-336); or if not alleviated, may cause
6 serious harm to the patient's safety or physical or mental health.

7 The cannabis compliance agency intends the guidelines in this section
8 to help maintain the integrity of Kansas medical providers recommending
9 medical cannabis.

10 (a) A medical provider shall not be subject to arrest, prosecution or
11 penalty in any manner or denied any right or privilege, including, but not
12 limited to, civil penalty or disciplinary action by the state board of healing
13 arts or by any other occupational or professional licensing board or bureau,
14 solely for providing written certifications, or otherwise stating that, in the
15 medical provider's professional opinion, a patient is likely to receive
16 therapeutic benefit from the medical use of cannabis to treat, or alleviate
17 the patient's medical condition(s) or symptoms associated with the medical
18 condition.

19 (b) Nothing in the Kansas safe access act shall prevent a professional
20 licensing board from sanctioning a medical provider for failing to properly
21 evaluate a patient's medical condition or otherwise violating the standard
22 of care for evaluating medical conditions.

23 (c) For medical providers to qualify to recommend medical cannabis
24 they must fulfill requirements as outlined by the cannabis compliance
25 agency.

26 (d) Continuing education units covering medical cannabis are
27 available online and if approved by the board of healing arts or the board
28 of nursing, medical providers will be required to take courses in the
29 endocannabinoid system (ECS), basic cannabis science, cannabis and
30 palliative care and classes on dosage and delivery systems.

31 (e) Medical providers must reevaluate registered qualifying patients
32 annually and provide the registered qualifying patient with an updated
33 recommendation.

34 (f) Recommendations shall not be for any specific total weight but an
35 individualized dosage plan.

36 Sec. 5. Identification cards. The purpose of this rule is to set forth
37 general standards and requirements for the issuance of medical cannabis
38 patient, and caregiver identification cards. The cannabis compliance
39 agency intends this rule to provide unimpeded and legal access to medical
40 cannabis patients and to prevent the diversion of medical cannabis to the
41 black market.

42 (a) This act would require the department to establish and maintain a
43 program under the cannabis compliance agency, for the issuance of

1 identification cards to registered qualified patients, or primary caregivers,
2 who submit the following in accordance with the cannabis compliance
3 agency's rules and regulations:

4 (1) Written certification;

5 (2) application with \$10.00 fee or \$10.00 renewal fee;

6 (3) name, address and date of birth date of the qualifying patient,
7 except that if the applicant is homeless, no address is required;

8 (4) name, address and telephone number of the qualifying patient's
9 medical provider;

10 (5) name, address and date of birth of the designated primary
11 caregiver designated, if any, by the qualifying patient;

12 (6) a statement signed by the registered qualifying patient, pledging
13 not to divert cannabis to anyone who is not allowed to possess cannabis
14 pursuant to the Kansas safe access act; and

15 (7) a signed statement from the designated primary caregiver, if any, a
16 statement signed by the cultivating caregiver if any, agreeing to be
17 designated as the patient's designated primary caregiver or cultivating
18 caregiver, and pledging not to divert cannabis to anyone who is not
19 allowed to possess cannabis pursuant to the Kansas safe access act.

20 (b) The cannabis compliance agency shall not issue an identification
21 card to a qualifying patient who is younger than 18 years of age unless:

22 (1) The qualifying patient's medical provider has explained the
23 potential risks and benefits of the medical use of cannabis to the custodial
24 parent or legal guardian with responsibility for health care decisions for
25 the qualifying patient; and

26 (2) the custodial parent or legal guardian with responsibility for
27 health care decisions for the qualifying patient consents in writing to:

28 (A) Allow the qualifying patient's medical use of cannabis;

29 (B) serve as the qualifying patient's designated primary caregiver; and

30 (C) control the acquisition of the cannabis, the dosage and the
31 frequency of the medical use of cannabis by the qualifying patient.

32 (c) An identification card, or its equivalent, that is issued under the
33 laws of another state, district, territory, commonwealth or insular
34 possession of the United States that allows, in the jurisdiction of issuance,
35 a visiting qualifying patient to possess cannabis for medical purposes, shall
36 have the same force and effect as an identification card issued by the
37 cannabis compliance agency.

38 (1) The cannabis compliance agency may not deny an application or
39 renewal only if the applicant did not provide the information required
40 pursuant to this section, rather, the application must be sent back and the
41 missing information outlined. The application information will not be
42 entered into the system and will be considered as a non-submittal.

43 (2) The cannabis compliance agency may deny an application if the

1 applicant previously had an identification card revoked for violating the
2 Kansas safe access act or if the cannabis compliance agency determines
3 that the information provided was falsified.

4 (3) Applicants will be allowed to appeal first rejections to the
5 compassion board for review. Rejection of an application, or renewal, by
6 the compassion board is considered a final department action, subject to
7 judicial review. All administrative proceedings are subject to the Kansas
8 administrative procedure act and in accordance with the judicial review
9 act.

10 (d) The cannabis compliance agency shall issue an identification card
11 to the designated caregiver, if any, who is named in a qualifying patient's
12 approved application provided that the designated primary caregiver meets
13 the requirements outlined in in this act.

14 (1) The cannabis compliance agency shall notify the qualifying
15 patient who has designated someone to serve as the patient's primary
16 caregiver if an identification card will not be issued to the designated
17 primary caregiver.

18 (2) A designated primary caregiver shall be issued an identification
19 card each time the designated primary caregiver is designated by a
20 qualifying patient; adding the new patient name to card of the designated
21 primary caregiver.

22 (e) The cannabis compliance agency shall issue temporary
23 identification cards to qualifying patients and to designated primary
24 caregivers at the time of approval, upon payment of a \$10.00 fee, and
25 permanent cards within 30 business days of approving an application or
26 renewal.

27 (f) Each identification card shall expire one year after the date of
28 issuance, unless the medical provider states a different time parameter
29 within the written certification, then the identification card shall expire on
30 that date.

31 (g) Identification cards shall contain all of the following:

32 (1) Name, address and date of birth of the qualifying patient; unless
33 homeless, then no address is required;

34 (2) name, address and date of birth of the designated primary
35 caregiver, if any;

36 (3) the date of issuance and expiration date of the identification card;

37 (4) a random 20-digit alphanumeric identification number, containing
38 at least four numbers and at least four letters, that is unique to the
39 cardholder;

40 (5) if the cardholder is a designated primary caregiver, the random
41 identification number of the registered qualifying patient the designated
42 caregiver is assisting;

43 (6) a photograph; and

1 (7) a barcode for scanning.

2 (h) The following notifications and cannabis compliance agency
3 responses are required:

4 (1) A registered qualifying patient shall notify the cannabis
5 compliance agency of any change of name, address or designated primary
6 caregiver or if the registered qualifying patient ceases to have a
7 debilitating medical condition, within 30 business days of such change via
8 the website or customer service phone number;

9 (2) a registered qualifying patient who fails to notify the cannabis
10 compliance agency of any of these changes may be subject to a civil
11 penalty of no more than \$150.00 levied by the department;

12 (3) any registered designated primary caregiver, cultivating caregiver
13 or compassion center staffer must notify the cannabis compliance agency
14 of any change in name or address within 30 business days of such change.
15 A registered designated primary caregiver, cultivating caregiver or
16 compassion center staffer who fails to notify the cannabis compliance
17 agency of any of these changes may be subject to a civil penalty of no
18 more than \$150.00 levied by the cannabis compliance agency;

19 (4) when a cardholder notifies the cannabis compliance agency of any
20 changes listed in this subsection, the cannabis compliance agency shall
21 issue the cardholder a new identification card within 30 business days of
22 receiving the updated information and a \$10.00 fee;

23 (5) when a registered qualifying patient ceases to be a registered
24 qualifying patient or changes the registered designated primary caregiver,
25 or cultivating caregiver the cannabis compliance agency shall notify the
26 designated primary caregiver, or cultivating caregiver within 30 business
27 days. The registered designated primary caregivers, or cultivating
28 caregiver's protections under the Kansas safe access act as to that
29 qualifying patient shall expire 30 business days after notification by the
30 cannabis compliance agency; and

31 (6) if a cardholder loses the identification card, the cardholder shall
32 notify the cannabis compliance agency within 10 business days of losing
33 the identification card and submit a \$10.00 fee within 30 business days of
34 losing the card. Within 30 business days after such notification, the
35 cannabis compliance agency shall issue a new identification card.

36 (i) Mere possession of, or application for, an identification card shall
37 not constitute probable cause or reasonable suspicion, nor shall it be used
38 to support the search of the person or property of the person possessing or
39 applying for the identification card. The possession of, or application for,
40 an identification card shall not preclude the existence of probable cause if
41 probable cause exists on other grounds.

42 (1) All patient information shall be confidential, and all federal
43 confidentiality rules and guidelines shall be in force:

1 (A) Applications and supporting information submitted by qualifying
2 patients designated primary caregivers, and including information
3 regarding their designated primary caregivers and medical providers, are
4 confidential; and

5 (B) applications and supporting information submitted by compassion
6 centers, and compassion center personnel operating in compliance with the
7 Kansas safe access act, are confidential.

8 (j) The application for qualifying patients' identification cards shall
9 include a question asking whether the patient would like the compassion
10 board to notify the patient of any clinical studies regarding cannabis' risk
11 or efficacy that seek human subjects. The compassion board shall inform
12 those patients who answer in the affirmative of any such studies it is
13 notified of that will be conducted in the United States.

14 (k) Medical providers must re-evaluate registered qualifying patients
15 annually and provide the registered qualifying patient with an updated
16 recommendation. The registered qualifying patient must provide the
17 updated recommendation to the cannabis compliance agency for
18 identification card renewal 30 business days prior to expiration of current
19 identification card.

20 (l) Failure to register an updated recommendation with the cannabis
21 compliance agency may result in suspended ability to purchase medical
22 cannabis or medical cannabis products.

23 (m) The cannabis compliance agency may make exceptions, at their
24 discretion.

25 Sec. 6. Compassion centers. The purpose of this rule is to set forth
26 general standards and requirements for the licensing, and regulation of
27 compassion centers. The cannabis compliance agency intends this rule to
28 provide safe and regulated access to medical cannabis, protect the health
29 of patients, by implementing, and enforcing congruent standard operating
30 procedures for all licensed compassion centers. The following provisions
31 govern the registration of compassion centers:

32 (a) The cannabis compliance agency shall register a compassion
33 center and issue a registration certificate, with a random 20-digit
34 alphanumeric identification number, within 90 business days of receiving
35 an application for a compassion center if the following conditions are met:

36 (1) The prospective compassion center provided the following:

37 (A) An application or renewal fee;

38 (B) the legal name of the compassion center;

39 (C) the physical address of the compassion center and the physical
40 address of one additional location, if any, where cannabis will be
41 cultivated, neither of which may be within 1000 feet of a preexisting
42 public or private school;

43 (D) the name, address and date of birth of each principal officer and

1 board member of the compassion center;

2 (E) the name, address and date of birth of any person who is an agent
3 of or employed by the compassion center, if any;

4 (F) operating regulations that include procedures for the oversight of
5 the compassion center, procedures to ensure accurate record-keeping,
6 patient database security, security of patient paper files and security
7 measures to deter and prevent unauthorized entrance into areas containing
8 cannabis and prevent the theft of cannabis and proof of compliance with
9 any other oversight rules and regulations set forth by the cannabis
10 compliance agency.

11 (G) principal officers and board members will be elected to office by
12 patient and caregiver members of the cooperative; and

13 (2) may be subject to a criminal history check at the time of
14 nomination.

15 (3) Principal officer and board member candidates cannot be
16 excluded for any offense consisting of conduct for which the Kansas safe
17 access act would likely have prevented a conviction, but the conduct
18 which either occurred prior to the enactment of the Kansas safe access act
19 or was prosecuted by an authority other than the state of Kansas, whether
20 as a patient or caregiver. Candidates who can show by medical records that
21 their past convictions would have been negated by the Kansas safe access
22 act cannot be excluded from consideration.

23 (b) Not later than 180 business days after the effective date of the
24 Kansas safe access act, the cannabis compliance agency shall adopt any
25 further rules and regulations establishing application and renewal fees for
26 registry identification cards and compassion center registration certificates,
27 including reasonable rules and regulations governing:

28 (1) The form and content of compassion center registration and
29 renewal applications;

30 (2) minimum oversight requirements for registered compassion
31 centers;

32 (3) minimum record keeping requirements for registered compassion
33 centers;

34 (4) minimum security requirements for registered compassion
35 centers; and

36 (5) procedures for suspending or terminating the registration of
37 registered compassion centers that violate the provisions of the Kansas
38 safe access act or the rules and regulations promulgated pursuant to this
39 section.

40 (c) The cannabis compliance agency shall design rules and
41 regulations with the goal of protecting against diversion and theft, without
42 imposing an undue burden on the registered compassion centers or
43 compromising the confidentiality of registered qualifying patients and

1 their registered designated primary caregivers.

2 (d) Any dispensing records that a registered compassion center is
3 required to keep shall track transactions according to registered qualifying
4 patient's registered designated primary caregivers' and registered
5 compassion centers' registry identification numbers, rather than their
6 names, to protect their confidentiality.

7 (e) Fees shall be in accordance with the following parameters:

8 (1) Compassion center application fees may not exceed \$1,000.00;

9 (2) compassion center renewal fees may not exceed \$1,000.00;

10 (3) the cannabis compliance agency may establish a sliding scale of
11 patient application and renewal fees based upon a qualifying patient's
12 family income;

13 (4) the department may accept donations from private sources in
14 order to reduce the application and renewal fees; and

15 (5) a registered compassion center shall not be subject to prosecution;
16 search, except by the cannabis compliance agency pursuant to section 21,
17 and amendments thereto.

18 (f) Seizure or penalty in any manner or be denied any right or
19 privilege, including, but not limited to, civil penalty or disciplinary action
20 by a court or business licensing board or entity, solely for acting in
21 accordance with the Kansas safe access act and cannabis compliance
22 agency rules and regulations to acquire, possess, cultivate, manufacture,
23 deliver, transfer, transport, supply or dispense cannabis, cannabis based
24 products or related supplies and educational materials to registered
25 qualifying patients, to registered designated primary caregivers on behalf
26 of registered qualifying patients or to other registered compassion centers.

27 (1) A registered compassion center may not dispense, deliver or
28 otherwise transfer cannabis to a person other than another registered
29 compassion center, an identification card-carrying patient, a cultivating
30 caregiver or an identification card-carrying patient's registered designated
31 primary caregiver.

32 (2) Compassion centers will utilize the seed to sale tracking system to
33 be implemented by the cannabis compliance agency.

34 (f) A compassion center shall implement security measures to deter
35 and prevent entry into and theft from restricted access areas containing
36 cannabis or currency.

37 (1) The cannabis compliance agency shall issue a renewal
38 compassion center registration certificate within 30 business days to any
39 registered compassion center that submits a \$1,000.00 renewal fee,
40 provided that its registration is not suspended and has not been revoked.

41 (g) Registered compassion centers are subject to inspection by the
42 cannabis compliance agency.

43 (h) A registered compassion center shall be operated on a not-for-

1 profit basis for the mutual benefit of its cooperative members.

2 (1) The bylaws of a registered compassion center shall contain such
3 provisions relative to the disposition of revenues and receipts as may be
4 necessary and appropriate to establish and maintain its nonprofit character.

5 (2) A registered compassion center need not be recognized as tax
6 exempt by the internal revenue service to qualify as a non for profit.

7 (3) If the entity makes a profit during any period, this excess must be
8 returned to cooperative members via health support services, income
9 based, sliding scale product pricing, free medicine for hospice patients,
10 donated into the broader community or put back into the organization,
11 based on the votes of the cooperative members and board of directors.

12 (4) Wages of management, officers and employees of a compassion
13 center can be increased by a vote of the compassion center board or a vote
14 of cooperative members.

15 (i) A licensed compassion center may not sell medical cannabis over
16 the internet but can allow registered qualifying patients to use the internet
17 to arrange delivery of their purchase.

18 (j) The premises of a compassion center will be the only place where
19 an automatic dispensing machine that contains medical cannabis or
20 medical cannabis products may be located. It must comply with all
21 regulations promulgated by the cannabis compliance agency for its use.

22 (k) Potency quantifications for medical cannabis and medical
23 cannabis products shall be accessible to compassion center patients in
24 three ways:

25 (1) Labels in display cases;

26 (2) labels on products; and

27 (3) a book of complete testing results on each current batch number,
28 and or harvest batch lot number available for sale, to be located at a
29 compassion center.

30 (l) When medical cannabis is received from medical cannabis
31 cultivation facilities, registered qualifying patients or cultivating
32 caregivers for purchase, storage or donation consideration by the collective
33 compassion center and the medical cannabis has not already been tested at
34 a certified testing facility, it must be subjected to an initial contaminants
35 inspection before being sent out to a certified testing facility, or in the case
36 of stored patient overages, be sent to storage:

37 (1) Certified medical cannabis intake processors shall utilize a
38 minimum 30X microscope for a first screening which analyzes and detects
39 contamination of:

40 (A) Pathogenic molds;

41 (B) rot; and

42 (C) insects

43 (2) In the event that the screening results indicate the presence of

1 quantities of any substance determined to be injurious to health, such
2 products shall be immediately quarantined and immediate notification
3 made to the cannabis compliance agency shall be made and the adulterated
4 product shall be documented and properly destroyed according to
5 guidelines to be established by the cannabis compliance agency.

6 (3) Certified medical cannabis processors will follow medical
7 cannabis handling procedures to be defined by the cannabis compliance
8 agency.

9 (m) A compassion center shall establish written policies and
10 procedures addressing inventory controls.

11 (n) A registered compassion center is prohibited from acquiring,
12 possessing, cultivating, manufacturing, delivering, transferring,
13 transporting, supplying or dispensing cannabis for any purpose except to
14 assist registered qualifying patients with the medical use of cannabis
15 directly or through the qualifying patient's designated primary caregivers
16 or to cultivating caregivers. All principal officers and board members of a
17 registered compassion center must be residents of the state of Kansas.

18 (o) County and city governments may enact reasonable limits on the
19 number of registered compassion centers that can operate in their
20 jurisdictions and may enact zoning regulations that reasonably limit
21 registered compassion centers to certain areas of their jurisdictions, after
22 public hearings on the subject.

23 (p) Before cannabis may be dispensed to a designated primary
24 caregiver, a registered qualifying patient or cultivating caregiver, a
25 compassion center staffer must scan the identification card of the
26 registered qualifying patient or the designated primary caregiver and must
27 verify each of the following:

28 (1) That the identification card presented to the registered compassion
29 center is valid; and

30 (2) that the person presenting the card is the person identified on the
31 identification card presented to the compassion center staffer

32 (q) If a patient wishes the staff of the compassion center to
33 communicate with their medical provider, then release of information
34 forms will need to be signed for both parties.

35 Sec. 7. Compassion center staffing. The purpose of this rule is to set
36 forth general standards and requirements for the certification, and
37 regulation of compassion center staffing. The cannabis compliance agency
38 intends this rule to provide safe and regulated access to medical cannabis,
39 protect the health of patients, by implementing and enforcing congruent
40 standard operating procedures for all licensed compassion center staff
41 members. The following provisions govern the registration of compassion
42 center staffing:

43 (a) Compassion center staff identification cards shall contain the

1 following:

2 (1) The legal name of the registered compassion center with which
3 the compassion center staffer is affiliated;

4 (2) a random 20-digit alphanumeric identification number that is
5 unique to the cardholder;

6 (3) the date of issuance and expiration date of the identification card;

7 (4) a photograph; and

8 (5) a barcode for scanning.

9 (b) A statement shall be signed by staff pledging not to divert
10 cannabis to anyone who is not allowed to possess cannabis pursuant to the
11 Kansas safe access act.

12 (c) The cannabis compliance agency shall issue temporary
13 identification cards to qualifying compassion center staffers at the time of
14 approval and upon payment of a \$25.00 fee, and permanent cards within
15 30 business days of approving an application or renewal.

16 (1) Compassion center staffers cannot be excluded from employment
17 due to any offense consisting of conduct for which the Kansas safe access
18 act would likely have prevented a conviction, but the conduct which either
19 occurred prior to the enactment of the Kansas safe access act or was
20 prosecuted by an authority other than the state of Kansas, whether as a
21 patient or caregiver. Compassion center staffers who can provide medical
22 records that show their past convictions would have been negated by the
23 Kansas safe access act cannot be excluded from consideration.

24 (2) The cannabis compliance agency shall notify the registered
25 compassion center in writing or email of the reason for denying an
26 identification card to any staffer.

27 (d) The cannabis compliance agency shall not issue an identification
28 card to any principal officer, board member, agent, volunteer or employee
29 of a registered compassion center who is younger than 21 years of age.

30 (1) The cannabis compliance agency may refuse to issue an
31 identification card to a compassion center staffer who has had a card
32 revoked for violating the Kansas safe access act.

33 (2) A compassion center registration certificate and the identification
34 card for each compassion center staffer shall expire one year after the date
35 of issuance.

36 (3) The cannabis compliance agency shall issue a renewal
37 identification card within 30 business days to any compassion center
38 staffer who submits a \$25.00 renewal fee.

39 (4) An identification card of a compassion center staffer shall expire
40 and the person's login information to the seed to sale tracking system shall
41 be deactivated by the agency upon notification by a registered compassion
42 center that such person ceased to work at the registered compassion center.

43 (A) A registered compassion center shall notify the cannabis

1 compliance agency within 3 business days of a compassion center staffer
2 termination or when a compassion center staffer voluntarily ceases to work
3 at the registered compassion center.

4 (B) A registered compassion center shall notify the cannabis
5 compliance agency in writing of the name, address and date of birth of any
6 new compassion center staffer and shall submit a fee in an amount of
7 \$25.00 before a new compassion center staffer begins working at the
8 registered compassion center.

9 (C) The cannabis compliance agency shall issue temporary
10 identification cards to qualifying compassion center staffers at the time of
11 approval, and permanent cards within 30 business days of approving an
12 application or renewal.

13 (e) No compassion center staffers shall be subject to arrest,
14 prosecution, search, seizure or penalty in any manner or denied any right
15 or privilege including, but not limited to, civil penalty or disciplinary
16 action by a court or occupational or professional licensing board or entity,
17 solely for working for a registered compassion center in accordance with
18 the Kansas safe access act and cannabis compliance agency rules and
19 regulations to acquire, possess, cultivate, manufacture, deliver, transfer,
20 transport, supply or dispense cannabis, cannabis based products, related
21 supplies, and educational materials to registered qualifying patients or
22 registered designated primary caregivers on behalf of registered qualifying
23 patients or to other registered compassion centers.

24 (f) All employees of a compassion center shall be residents of Kansas
25 upon the date of their identification card application.

26 Sec. 8. Supply and allowances. The purpose of this rule is to establish
27 guidelines regarding the supply and allowances of cannabis for rural
28 registered qualifying patients who meet the guidelines of the cannabis
29 compliance agency to grow their own medical cannabis. It sets forth
30 general standards and requirements for supply, storing, donations,
31 damages, overages, and emergency supply. The cannabis compliance
32 agency intends this rule to help maintain an interrupted supply of medical
33 cannabis supply for rural registered qualifying patients and prevent any
34 diversion to the black market.

35 (a) An identification card-carrying patient shall not directly through a
36 designated primary caregiver, or through a compassion center obtain more
37 than their medical provider recommended dosage of cannabis from
38 registered compassion centers in any 30 calendar day period. Exceptions to
39 30 day supply being:

40 (1) Medical patients who can prove that hardship, either financial or
41 physical, would be imposed by monthly travel; or

42 (2) allowance for patient growers to store overages for out of season
43 use or donate to compassion center for an indigent members free medicine

1 program.

2 (A) Overages will be stored in rented lock boxes within compassion
3 centers.

4 (B) Compassion centers will enter submissions into seed to sale
5 tracking system and generate receipts for patients.

6 (C) Patients will be able to withdraw from lock boxes per their 30 day
7 supply.

8 (D) Patients do not have to withdraw full 30 day supply at any one
9 visit.

10 (b) Cannabis overage stock should examine under the 30x
11 microscope upon receipt at the compassion center. Any stock contaminated
12 by mold, mites, or pests must be disposed of per guidelines to be
13 established by the cannabis compliance agency.

14 Sec. 9. Medical cannabis cultivation facilities. The purpose of this
15 rule is to establish guidelines regarding the cultivation of cannabis for
16 general supply by a cooperative medical cannabis cultivation facility. It
17 sets forth general standards and requirements for cultivation, best
18 practices, security, workforce education, health and safety standards. The
19 cannabis compliance agency intends this rule to help maintain an
20 uninterrupted supply of pharmaceutical grade medical cannabis, establish
21 standard operating procedure and safety standards, promote sustainable
22 agricultural practices, and prevent any diversion to the black market.

23 (a) To qualify to label any product as "grown by ecologically
24 sustainable standards" medical cannabis cultivation facility must follow
25 guidelines in (b) and (c).

26 (b) The United States department of agriculture (USDA) does not
27 inspect medical cannabis grows. Instead, cultivating caregivers with more
28 than 10 patients, and any medical cannabis cultivation facility, must work
29 with third-party certification agencies that offer certification for medical
30 cannabis that meets organic standards.

31 (1) All medical cannabis crops to be sold in compassion centers, or
32 used in manufacturing of cannabis based products must be inspected by a
33 third-party certification inspector.

34 (2) All agricultural products used must be materials that have been
35 approved for use in organic farming and meet all guidelines in the Kansas
36 safe access act.

37 (c) Medical cannabis cultivation facilities must develop best practices
38 to reduce the carbon footprint of their facility, as well as reduce facility
39 water and energy use. An inspection and rating program will be developed
40 through the cannabis compliance agency.

41 (1) Outdoor medical cannabis cultivation and medical cannabis
42 cultivation in greenhouses utilizing current best industry practices to
43 guarantee energy efficiency are allowed.

- 1 (2) LED lighting and high intensity discharge bulbs (HID bulbs) are
2 allowed in medical cannabis cultivation facility use
- 3 (A) All high intensity discharge bulbs (HID bulbs) must be recycled,
4 with recycling expense paid by the cultivation facility.
- 5 (3) Only renewable energy sources such as wind, solar and water are
6 allowed as main power supply, unless local grid is totally supplied by
7 sustainable energy source. No on-site fossil fuel generators may be used,
8 except as backup emergency power, never as a main supply.
- 9 (4) Only 5, 4 and 2 hydro-safe resins should be used in aquaponics
10 and hydroponic systems.
- 11 (6) Polystyrene beads shall not be used in hydroponic systems.
- 12 (7) Water use and restrictions - Methods that are not allowed and may
13 be subject to fines;
- 14 (A) Unpermitted grading, road construction and culvert crossings;
15 (B) illegal stream diversions and streams drying up;
16 (C) discharge of sediments, pollutants, and human waste or trash;
17 (D) erosion or soil deposition; and
18 (E) water contamination from pesticides, rodenticides, herbicides,
19 fungicides, fertilizers, and fuels.
- 20 (F) Capturing rain runoff from buildings, storing and filtering for
21 watering use is mandated.
- 22 (G) Greywater recycling, and filtering is mandated and must be
23 implemented pursuant to all standards outlined in rules and regulations
24 adopted by the cannabis compliance agency.
- 25 (H) Cisterns are recommended.
- 26 (d) All collective medical cannabis cultivation facilities should be
27 clearly marked with signs on all sides, denoting the site as a medical
28 cannabis grow in compliance with the Kansas safe access act.
- 29 (1) All cultivation facilities will utilize agency selected seed to sale
30 tracking system.
- 31 (2) All medical cannabis crops will be lot controlled. If specific
32 medical cannabis cultivars are for a specific patient, or group of patients:
- 33 (A) Their member numbers will also be listed in the tracking system;
34 and
- 35 (B) harvest batch lot associated.
- 36 (e) clean grow room, trimming room, bagging room standards and
37 cannabis handling procedures to be defined by the cannabis compliance
38 agency will apply to all medical cannabis cultivation facilities.
- 39 (f) The site must be secured:
- 40 (1) Monitored 24 hours a day, utilizing;
41 (2) cameras;
42 (3) security staff; and
43 (4) and alarms.

1 (g) key card entry doors and gates.

2 (g) All cooperative medical cannabis cultivation facilities will be
3 placed in rural areas and may supply compassion centers, cannabis product
4 manufacturers, research programs and cultivating caregivers located in
5 other areas.

6 (h) Medical cannabis cultivation facilities may sell the stalks and
7 vegetation (leaves) to farmers for use as livestock feed (silage), following
8 all process requirements established by the cannabis compliance agency.

9 (i) Medical cannabis cultivation facilities must comply with all laws
10 on environmental audits under Kansas law.

11 (j) Medical cannabis cultivation facilities must obtain and carry
12 medical cannabis crop insurance if available.

13 (k) The medical cannabis cultivation facility's water supply shall be
14 tested annually for contaminants by a qualified lab approved by the
15 cannabis compliance agency. If a water treatment system is needed, the
16 agency may require more frequent testing.

17 (l) Soil used to cultivate medical cannabis shall be tested annually
18 and must meet guidelines established by the cannabis compliance agency.

19 (m) For each batch of water or soil fails to meet the standards of the
20 cannabis compliance agency the cultivation facility shall perform and
21 document both a root cause analysis and any corrective action taken.

22 (n) The cultivation facility shall maintain the results of all testing for
23 no less than 2 years.

24 (o) The cannabis compliance agency reserves the right to require any
25 and all types of testing to prevent contaminated medical cannabis. The
26 agency may also issue recalls of contaminated medical cannabis and order
27 the destruction of contaminated medical cannabis.

28 (p) All greenhouse infrastructure, hardware and all other applicable
29 structures, or systems, must be UL listed.

30 (q) Medical cannabis cultivation facilities will utilize the seed to sale
31 tracking system to be implemented by the cannabis compliance agency

32 Sec. 10. Cultivating caregivers and patient growers. The purpose of
33 this rule is to establish guidelines regarding the cultivation of cannabis by
34 cultivating caregivers and patient growers. It sets forth general standards
35 and requirements for cultivation best practices, security, workforce
36 education, health and safety standards. The cannabis compliance agency
37 intends this rule to help maintain an uninterrupted supply of
38 pharmaceutical grade medical cannabis, establish standard operating
39 procedure and safety standards, promote sustainable agricultural practices
40 and prevent any diversion to the black market.

41 (a) All patient and caregiver cultivation sites shall be clearly marked
42 with signs on all sides denoting the site as a medical cannabis crop in
43 compliance with the Kansas safe access act.

1 (b) Patient growers shall be allowed to cultivate only as much as
2 required for the patient's own medical use:

3 (1) Within the confines of the recommendation of their medical
4 provider; and

5 (2) taking into consideration the patient's chosen delivery method.

6 (c) Depending on patients dosing regimens, they may grow several as
7 many cultivars in various levels of growth to keep a continuous supply.

8 (d) Caregiver cultivation sites must meet environmental standards to
9 be set by the cannabis compliancy agency.

10 (e) Cultivating caregivers that exceed 10 registered qualifying
11 patients will apply for licensure as a cultivating facility and if approved,
12 will be bound by all the regulations set forth in section 9, and amendments
13 thereto.

14 (1) If not approved, cultivating caregivers can appeal to the cannabis
15 compliance agency.

16 (2) The cannabis compliance agency will consider needs of patients
17 served by cultivating caregiver:

18 (A) If geographic hardship of patients dictates need of this cultivating
19 caregiver;

20 (B) cultivar exclusivity dictates need of this cultivating caregiver;

21 (C) if the cultivating caregiver is excluded for qualifying as
22 cultivation facility because they cannot meet all requirements of section 9,
23 and amendments thereto, and to do so would induce an undue financial
24 hardship; or

25 (D) Any other considerations deemed pertinent by the cannabis
26 compliance agency

27 (3) If the appeal is denied, cultivating caregivers must conform to
28 patient count limit of less than 10.

29 (f) Cannabis handling standards established by the cannabis
30 compliance agency will also apply to cultivating caregiver grows.

31 (g) Cultivating caregivers need to obtain and carry appropriate
32 insurance, and cannabis crop specific insurance, if available.

33 (h) Cultivating caregivers, cannot be excluded for any offense
34 consisting of conduct for which the Kansas safe access act would likely
35 have prevented a conviction, but the conduct which either occurred prior
36 to the enactment of the Kansas safe access act or was prosecuted by an
37 authority other than the state of Kansas, whether as a patient or caregiver.
38 Candidates who can prove their past convictions would have been negated
39 by the Kansas safe access act by providing to the cannabis compliance
40 agency medical records from the time of the conviction for the patient, or
41 records that the patient was receiving care from a caregiver cannot be
42 excluded from consideration.

43 (i) To guarantee a constant and uninterrupted supply, plants are

1 allowed in all five stages of growth: Germinating, seedling, vegetative,
2 flowering and curing.

3 (j) Crop failure or damage will be reported to cannabis compliance
4 agency within 5 business days via email or electronic form on agency
5 website, meeting any documentation requirements established by the
6 cannabis compliance agency.

7 (1) Affected patients of primary caregiver or cultivating caregiver
8 will be directed to closest compassion center for any emergency medical
9 cannabis replacement needs.

10 (k) If the medical provider feels it is necessary for the patient to have
11 an amount over their normal allotment, the exception will be granted:

12 (1) The medical provider will provide updated recommendation
13 documentation to the patient; and

14 (2) the patient will provide documentation to the cannabis compliance
15 agency by email or upload to agency website

16 (l) Cultivating caregivers will utilize the seed to sale tracking system
17 to be implemented by the cannabis compliance agency

18 Sec. 11. Employee training. Employee training is mandatory for all
19 cannabis industry positions. Required training information will be
20 available via the cannabis compliance agency, and the agency website.

21 (a) Positions that require training, or an equivalent resume, are:

22 (1) Medical cannabis cultivation facility workers;

23 (2) processors;

24 (3) cultivating caregivers

25 (4) manufacturers; and

26 (5) compassion center staff

27 (6) medical care medical provider training is considered separate
28 from cannabis industry positions and is covered under section 4, and
29 amendments thereto.

30 Sec. 12. Public policy and public safety. The purpose of this rule is to
31 establish guidelines regarding the standards and regulations pertaining to
32 public use of medical cannabis, prevention of impaired driving, establish
33 employer, registered qualifying patient employees and business owner
34 rights and the rights of students who are registered qualifying patients.

35 (a) The Kansas safe access act shall not permit any person to do any
36 of the following, nor shall it prevent the imposition of any civil, criminal
37 or other penalties for undertaking any task while impaired.

38 (b) Nothing in the Kansas safe access act shall be construed to
39 require: Any person or establishment in lawful possession of a commercial
40 business property to allow a guest, client, customer or other visitor to
41 smoke cannabis on or in that property. The Kansas safe access act shall not
42 limit a person or entity in lawful possession of a commercial business
43 property, or an agent of such person or entity, from expelling a person who

1 smokes cannabis without permission from such property owner.

2 (c) The Kansas safe access act does not prevent any employer from
3 setting their own policies regarding the accommodation of an employee's
4 medical need to use cannabis in any workplace space or disciplining any
5 employee working while impaired, except that, a qualifying patient shall
6 not be considered to be impaired solely because of the presence of
7 metabolites or components of cannabis.

8 (d) Unless an employer establishes by a preponderance of the
9 evidence that the lawful use of medical cannabis has impaired the
10 employee's ability to perform the employee's job responsibilities, it shall
11 be unlawful to take any adverse employment action against an employee
12 who is an identification card-carrying patient using medical cannabis
13 consistent with the provisions of the Kansas safe access act based on
14 either:

15 (1) The employee's status as a registry identification cardholder; or

16 (2) the employee's positive drug test for cannabis components or
17 metabolites.

18 (e) For the purposes of this section, an employer may consider an
19 employee's ability to perform the employee's job responsibilities to be
20 impaired when the employee manifests specific articulable symptoms of
21 impairment while working that decrease or lessen the employee's
22 performance of the duties or tasks of the employee's job position. If an
23 employer has a drug testing policy and an employee or job applicant tests
24 positive for cannabis, the employer shall offer the employee or job
25 applicant an opportunity to present a legitimate medical explanation for
26 the positive test result and shall provide to the employee or job applicant a
27 written notice of the right to explain. Within 3 working days after
28 receiving notice, the employee or job applicant may submit information to
29 the employer to explain the positive test result. As part of an employee's or
30 job applicant's explanation for the positive test result, the employee or job
31 applicant may present a doctor's recommendation for medical cannabis or
32 their patient identification card, or both.

33 (f) Nothing in this section shall restrict an employer's ability to
34 prohibit or take adverse employment action for being impaired during
35 work hours, or require an employer to commit any act that would cause the
36 employer to be in violation of federal law or that would result in the loss of
37 a federal contract or federal funding.

38 (g) Impaired drivers are not protected by the Kansas safe access act
39 while operating, navigating or being in actual physical control of any
40 motor vehicle, school bus, public transport, aircraft or motorboat. The
41 following caveats apply:

42 (1) The presence of metabolites does not automatically denote
43 impairment. Registered qualifying patients who medicate daily may have a

1 high metabolite level, and yet also have a higher tolerance to psychoactive
2 effects.

3 (2) Current technologies, even those that can measure metabolite
4 levels, cannot accurately gauge impairment.

5 (3) Roadside testing for impairment remains the best method to
6 evaluate drivers.

7 (4) A registered qualifying patient's various disabilities may also
8 impact roadside test results, and an effort should be made by law
9 enforcement to set guidelines that include this consideration.

10 (h) Educational outreach to prevent driving while impaired will be
11 posted on the cannabis compliance agency website via printable
12 information and instructional videos, and educational materials will be
13 available made available by the agency to compassion centers.

14 (i) No registered qualifying patient may smoke medical cannabis on
15 the grounds of any preschool, primary, secondary or post-secondary
16 school.

17 (1) Juvenile registered qualifying patients receiving medication via
18 the school nurse, parent or caregiver can receive medication on school
19 grounds.

20 (2) Post-secondary registered qualifying patients shall not be impeded
21 from medicating per their medical providers recommendation whether
22 individually or by the facilitation of their primary caregiver, if they have
23 one, on school grounds, if the delivery method is allowed.

24 (3) Juvenile and post-secondary registered qualifying patients shall
25 not be impeded from participation in any extracurricular activities, or
26 regular school activities, simply because they are a registered qualifying
27 patient.

28 (j) No patient may smoke cannabis in or on any form of public
29 transportation.

30 Sec. 13. (a) Cannabis resource commission. This act shall establish
31 the cannabis resource commission. The cannabis resource commission will
32 be responsible for: Guiding policy on behalf of patients, medical providers
33 and the public, with focus on continuous process improvement to better
34 serve the needs of all; and facilitating research, work with researchers,
35 liaison with other Kansas agencies and organizations, liaison with law
36 enforcement, the Kansas legislature and the cannabis compliance agency.

37 (b) There is established a cannabis resource commission.

38 (1) The commission shall consist of 5 volunteer members appointed
39 by the governor. The governor, insofar as possible, shall appoint persons
40 from different geographical areas and persons who represent various
41 economic regions, preferably with experience in the healthcare field, social
42 work field, not-for-profit patient care sector, the field of cannabis research,
43 industry, advocacy, or cannabis medicine.

1 (2) If a vacancy occurs on the commission, the governor shall appoint
2 a person to fill the vacant position for the unexpired term, if any, within a
3 period of no more than 60 business days.

4 (3) Members of the commission shall be appointed for renewable
5 three-year terms.

6 (4) The volunteer members will meet quarterly, whether in person or
7 by teleconference, to:

8 (A) Review reports pertaining to the administration of the Kansas
9 safe access act from the cannabis compliance agency, including appeals
10 and complaints;

11 (B) review reports pertaining to the administration of the Kansas safe
12 access act from the department of health and environment;

13 (C) review reports pertaining to the administration of the Kansas safe
14 access act from Kansas law enforcement; and

15 (D) review any other reports pertaining to the administration of the
16 Kansas safe access act from any other agency, public or private.

17 (5) The commission shall advise the governor, the cannabis
18 compliance agency, the Kansas legislature and the secretary of the
19 department of health and environment about the administration of the
20 Kansas safe access act.

21 (6) The commission will act as a liaison between patients, agencies
22 and research entities.

23 (7) Members of the commission cannot be excluded for any offense
24 consisting of conduct for which the Kansas safe access act would likely
25 have prevented a conviction, but the conduct either occurred prior to the
26 enactment of the Kansas safe access act or was prosecuted by an authority
27 other than the state of Kansas, whether as a patient or caregiver.
28 Candidates who can prove their past convictions would have been negated
29 by the Kansas safe access act by providing to the cannabis compliance
30 agency medical records from the time of the conviction for the patient, or
31 records that the patient was receiving care from a caregiver, cannot be
32 excluded from consideration.

33 Sec. 14. Cannabis tax fund and revenue policies. This act shall
34 establish a cannabis tax fund.

35 (a) The cannabis tax fund is hereby established.

36 (b) Medical cannabis patients will be taxed at a flat 6% rate at
37 compassion center points of purchase for medical cannabis and medical
38 cannabis products only.

39 (c) Funds will be deposited into the cannabis tax fund and after
40 meeting costs of the Kansas safe access act. Infrastructure expenses will be
41 spent for medical cannabis research, public health, mental health,
42 substance abuse, K-12 school health, K-12 school substance abuse
43 prevention and K-12 school mental health programs exclusively.

1 (d) As the cannabis industry is often forced to a cash only business
2 model:

3 (1) Compassion centers and cooperatives must be allowed to pay
4 taxes by cash, cashier's checks and money orders at their local revenue
5 office;

6 (2) compassion centers and cooperatives will need to be able to pay
7 these taxes on a daily or weekly basis, so they are not accumulating large
8 amounts of cash and being placed at a higher risk for crime; and

9 (3) patients, compassion centers and cooperatives will not be assessed
10 any further excise tax or any further sales tax for any medical cannabis or
11 medical cannabis product beyond the established flat tax within this act.

12 (e) Any county, city, township, or jurisdiction which opts out of
13 participation in the Kansas safe access act will then be excluded from any
14 tax benefit, other than what is derived from state benefit from the Kansas
15 safe access act.

16 (f) Sales tax can be levied on any product, item or device in a
17 compassion center that is not medical cannabis or a medical cannabis
18 product.

19 (g) Medical cannabis edible products qualify as medicine and shall
20 not be taxed under the Kansas food sales tax.

21 (h) Kansas safe access act fee schedule:

22 (1) Qualifying patient identification card \$10.00

23 (2) Cultivating caregiver identification card \$10.00

24 (3) Primary caregiver identification card \$10.00

25 (4) Compassion center employee identification card \$25.00

26 (5) Medical cannabis cultivation facility employee
27 identification card \$25.00

28 (6) Medical cannabis product manufacturing employee
29 identification card \$25.00

30 (7) Medical cannabis testing facility employee
31 identification card \$25.00

32 (8) Compassion center license, may not exceed \$1,000.00

33 (9) Compassion center license renewal, may not exceed \$1,000.00

34 (10) Compassion center application fee \$500.00

35 (11) Compassion center license renewal fee \$50.00

36 (i) (1) An applicant or licensee may pay the license fee and renewal
37 fee in full or the first half of the license fee plus the entire renewal fee plus
38 the second half of the license fee + 10% due in 1 year.

39 (2) License renewal shall be required every two years.

40 (j) Medical cultivation facilities license fees, renewal fees, and
41 application fees shall be in accordance with the following parameters:

42 (A) 1-25 pounds a month \$200.00 license fee

43 (i) License renewal fees may not exceed \$200.00

- 1 (ii) Application fee\$100.00
- 2 (B) 26-100 pounds a month \$500.00 license fee
- 3 (i) License renewal fees may not exceed \$500.00
- 4 (ii) Application fee \$250.00
- 5 (C) 101-500 pounds a month..... \$1,000.00 license fee
- 6 (i) License renewal fees may not exceed \$1,000.00
- 7 (ii) Application fee\$500.00
- 8 (D) 501-1,000 pounds a month \$2,000.00 license fee
- 9 (i) License renewal fees may not exceed \$2,000.00
- 10 (ii) Application fee \$1,000.00
- 11 (E) 1,001-5,000 pounds a month \$3,500.00 license fee
- 12 (i) License renewal fees may not exceed \$3,500.00
- 13 (ii) Application fee \$1,250.00
- 14 (F) 5,001-10,000 pounds a month \$7,000.00 license fee
- 15 (i) License renewal fees may not exceed \$7,000.00
- 16 (ii) Application fee \$3,500.00
- 17 (G) 10,001-15,000 pounds a month \$10,000.00 license fee
- 18 (i) License renewal fees may not exceed \$10,000.00
- 19 (ii) Application fee \$5,000.00
- 20 (k) (1) An applicant or licensee may pay the license fee and renewal
- 21 fee in full or the first half of the license fee plus the entire renewal fee plus
- 22 the second half of the license fee + 10% due in 1 year.
- 23 (2) License renewal shall be required every two years.
- 24 (l) (1) Medical cannabis manufacturing license fees, renewal fees,
- 25 and application fees shall be in accordance with the following parameters:
- 26 (A) Medical cannabis product manufacturing license fees may not
- 27 exceed \$2,200.00;
- 28 (B) medical cannabis product manufacturing license renewal fees
- 29 may not exceed \$2,200.00;
- 30 (C) medical cannabis product manufacturing application fee shall be
- 31 \$1,100.00; and
- 32 (D) medical cannabis product manufacturing license renewal fee shall
- 33 be \$50.00
- 34 (2) An applicant or licensee may pay the license fee and renewal fee
- 35 in full or the first half of the license fee plus the entire renewal fee plus the
- 36 second half of the license fee + 10% due in 1 year.
- 37 (2) License renewal shall be required every two years.
- 38 (m) (1) Medical cannabis infused product manufacturing license fees,
- 39 renewal fees, and application fees shall be in accordance with the
- 40 following parameters:
- 41 (A) Medical cannabis infused product manufacturing license fees
- 42 may not exceed \$2,200.00;
- 43 (B) medical cannabis infused product manufacturing license renewal

1 fees may not exceed \$2,200.00;

2 (C) medical cannabis infused product manufacturing application fees
3 shall be \$1,100.00; and

4 (D) medical cannabis infused product manufacturing license renewal
5 fees shall be \$50.00.

6 (2) An applicant or licensee may pay the license fee and renewal fee
7 in full or the first half of the license fee plus the entire renewal fee plus the
8 second half of the license fee + 10% due in 1 year.

9 (2) License renewal shall be required every two years.

10 (n) (1) Medical cannabis testing facility license fees, renewal fees,
11 and application fees shall be in accordance with the following parameters:

12 (A) Medical cannabis testing facility license fees may not exceed
13 \$2,200.00;

14 (B) Medical cannabis testing facility license renewal fees may not
15 exceed \$2,200.00;

16 (C) Medical cannabis testing facility application fee shall be
17 \$1,100.00; and

18 (D) Medical cannabis testing facility license renewal fee shall be
19 \$50.00.

20 (2) An applicant or licensee may pay the license fee and renewal fee
21 in full or the first half of the license fee plus the entire renewal fee plus the
22 second half of the license fee + 10% due in 1 year.

23 (o) Administrative service fees:

24 (1) Criminal history investigations\$150.00

25 (2) Modification of license premises \$120.00

26 (3) Duplicate business license \$40.00

27 (4) Duplicate occupational license \$10.00

28 (5) Duplicate vendor registration \$40.00

29 (6) Off premise storage permit \$500.00

30 (7) Subpoena fee \$200.00

31 (8) Change of location applicant fee - same local jurisdiction
32 only \$150.00

33 (9) Change of trade name \$50.00

34 (10) Change of corporation of structure per person \$25.00

35 Sec. 15. Packaging and labeling. This purpose of this rule is to
36 establish guidelines and standards for packaging and labeling for medical
37 cannabis and medical cannabis products to ensure all the necessary and
38 relevant information to be enforced by the cannabis compliance agency is
39 included. While there are slight differences in the labeling requirements for
40 each category of medical cannabis product, all include identical
41 parameters that mandate the type of packaging for medical cannabis
42 products. The Kansas safe access act requires that each package or
43 container of medical cannabis, medical cannabis product and medical

1 cannabis concentrate includes necessary and relevant information for
2 consumers, does not include health and physical benefits claims, is easily
3 accessible to consumers and is clear, easy to read and noticeable. The
4 cannabis compliance agency will develop a standardized label template
5 and will develop a standardized list of information be included on labels,
6 not limited to, but including, the following:

7 (a) Every medical cannabis product sold must leave the store in a
8 package or container that is child-resistant.

9 (b) If the medical cannabis product packaging is not child-resistant,
10 the compassion center must place that container within an exit package
11 that is child resistant.

12 (c) Each package or container shall be opaque so that the product
13 cannot be seen from outside the packaging, except for colored glass and
14 sublingual syringes.

15 (d) Identification and consumer warning labels must be affixed to
16 every individual container of medical cannabis, medical cannabis product
17 or medical cannabis edible.

18 (e) Every compassion center must ensure the following information is
19 affixed to every container holding a medical cannabis product:

20 (1) The license number of the medical cannabis cultivation facility
21 where the medical cannabis used to produce the product was grown;

22 (2) the license number of the medical cannabis product's
23 manufacturing facility;

24 (3) the license number of the compassion center that sold the medical
25 cannabis product to the registered qualified patient;

26 (4) the identity statement and standardized graphic symbol of the
27 compassion center that sold the product to the registered qualified patient;

28 (5) the production batch lots number assigned to the medical cannabis
29 concentrate used to produce the product;

30 (6) the production batch lots number assigned to the medical cannabis
31 product;

32 (7) the date of sale to the consumer;

33 (8) the following warning statements;

34 (A) Body mass, age, metabolism, gender and body chemistry at time
35 of consumption all vary in the effectiveness and effect of the medicine;

36 (B) the intoxicating effects of this product may be delayed by two or
37 more hours;

38 (C) do not operate a vehicle or machinery, especially when first
39 beginning the use of this medicine;

40 (D) the product may cause dizziness or drowsiness, and alcohol may
41 intensify this effect. Avoid mixing the product with alcohol;

42 (E) keep out of reach of children and animals, in bold print;

43 (F) please consult a medical provider when taken with other

1 medications;

2 (G) the product is for medical use only, to be consumed by registered
3 qualifying patient only;

4 (9) the universal symbol, indicating that the container holds medical
5 cannabis, which must be no smaller than $\frac{1}{4}$ of an inch by $\frac{1}{4}$ of an inch to
6 be set forth by the cannabis compliance agency;

7 (10) a clear set of instructions for proper usage;

8 (11) packaging design must not have cartoons, or in any way attract
9 interest from children;

10 (12) packaging must prominently display the following in clear and
11 legible font:

12 (A) Display or inspection seal;

13 (B) patient name and patient ID number;

14 (C) a potency profile expressed in milligrams and the number of
15 tetrahydrocannabinol servings within the container;

16 (D) a recommended use by or expiration date for medical cannabis
17 products; and

18 (17) packages containing only dried flower must record the weight of
19 medical cannabis.

20 Sec. 16. Medical cannabis edible product labeling. The purpose of
21 this rule is to establish guidelines and standards for packaging and labeling
22 for medical cannabis edible products to ensure all the necessary and
23 relevant information to be enforced by the cannabis compliance agency is
24 included. While there are slight differences in the labeling requirements for
25 each category of medical cannabis edible product, all include identical
26 parameters that mandate the type of packaging for medical cannabis edible
27 products. The Kansas safe access act requires that each package or
28 container of medical cannabis edible products includes necessary and
29 relevant information for consumers, does not include health and physical
30 benefits claims, is easily accessible to consumers and is clear, easy to read
31 and noticeable. The cannabis compliance agency will develop a
32 standardized label template and will develop a standardized list of
33 information be included on label, not limited to, but including the
34 information listed below. Edible medical cannabis products must include
35 the following information, in addition to the information required by the
36 guidelines of section 15, and amendments thereto;

37 (a) "The intoxicating effects of this product may be delayed three to
38 six hours."

39 (b) An ingredient list including all ingredients used to manufacture
40 the edible medical cannabis product.

41 (c) A statement regarding required refrigeration if the medical
42 cannabis product is perishable.

43 (d) The standardized serving size for this product includes no more

1 than ten milligrams of active tetrahydrocannabinol, and a list of the
2 package total of pharmacologically active ingredients.

3 (e) If the product uses nuts or another known allergen, a suitable
4 warning.

5 (f) Bundled single-serving edible medical cannabis products that are
6 individually packaged in child-resistant packaging and labeled can be
7 placed into a larger package, that also needs to be child-resistant and
8 include a list of the package total of pharmacologically active ingredients
9 contained within the bundled package, including tetrahydrocannabinol that
10 does not exceed 100 milligrams.

11 (g) Single-serving size medical cannabis products must list the
12 package total of pharmacologically active ingredients including, but not
13 limited to, tetrahydrocannabinol and cannabidiol, not to exceed 10
14 milligrams of tetrahydrocannabinol per single serving.

15 (h) Statement of expiration date.

16 (i) A dietary restriction label and nutritional fact panel.

17 (j) Potency test results for all medical cannabis edible products.

18 (k) Only generic food names that describe edible medical cannabis
19 products.

20 (l) A recommended use by or expiration date for medical cannabis
21 products.

22 (m) Must denote if liquid edible contains more than one standardized
23 serving.

24 (n) Each product must be packaged in a child-resistant container that
25 maintains its child-resistant effectiveness for multiple openings.

26 (o) All containers for liquids shall clearly demark each standardized
27 serving of liquid edible in a way that enables a reasonable person to
28 intuitively determine how much of the product constitutes a single serving
29 of active tetrahydrocannabinol. The portion of the container that clearly
30 demarks each standardized serving of liquid edible medical cannabis need
31 not be opaque.

32 (p) Liquid edible containers that include a dropper or measuring
33 device shall assure the device allows a reasonable person to intuitively
34 measure and serve a single serving of active tetrahydrocannabinol.

35 Sec. 17. Packaging and labeling of medical cannabis by a medical
36 cannabis cultivation facility or a medical cannabis products manufacturing
37 facility. The purpose of this rule is to ensure that every medical cannabis
38 cultivation facility and medical cannabis products manufacturing facility
39 label each shipping container and container of medical cannabis with all
40 the necessary and relevant information for the receiving medical cannabis
41 establishment. In addition, this rule clarifies basic shipping container
42 requirements. The cannabis compliance agency wants to ensure the
43 regulated community employs proper labeling techniques for all medical

1 cannabis.

2 (a) Every medical cannabis cultivation facility and medical cannabis
3 products manufacturing facility must ensure that all medical cannabis is
4 placed within a sealed, tamper-evident shipping container that has no more
5 than one pound of medical cannabis within it prior to transport or transfer
6 of any medical cannabis to another medical cannabis establishment.

7 (b) Labeling of medical cannabis shipping containers by a medical
8 cannabis cultivation facility or a medical cannabis products manufacturing
9 facility. Every medical cannabis cultivation facility or medical cannabis
10 products manufacturing facility must ensure that a label is affixed to every
11 shipping container holding medical cannabis that includes all the
12 information required by this rule prior to transport or transfer to another
13 medical cannabis establishment.

14 (c) Every medical cannabis cultivation facility or medical cannabis
15 products manufacturing facility must ensure the following information is
16 affixed to every shipping container holding medical cannabis:

17 (1) The license number of the medical cannabis cultivation facility
18 where the medical cannabis was grown;

19 (2) the harvest batch lot number assigned to the medical cannabis;

20 (3) the net weight, using a standard of measure compatible with the
21 state standardized seed-to-sale tracking system, of the medical cannabis
22 prior to its placement in the shipping container; and

23 (4) a complete list of all ecologically sustainable pesticides,
24 fungicides, and herbicides used during the cultivation of the medical
25 cannabis; and

26 (5) a required statement for tests performed. Medical cannabis testing
27 facilities must conducted a test on a harvest batch lot, and every medical
28 cannabis cultivation facility and medical cannabis products manufacturing
29 facility must ensure that a label is affixed to a shipping container holding
30 any medical cannabis from that harvest batch lot with the results of that
31 test. The type of information that must be labeled shall be limited to the
32 following:

33 (A) A cannabinoid potency profile expressed as a range of
34 percentages that extends from the lowest percentage to highest percentage
35 of concentration for each cannabinoid listed in section 19, and
36 amendments thereto, and any others required by the cannabis compliance
37 agency.

38 (B) Every test conducted on that cultivar of medical cannabis
39 cultivated by the same medical cannabis cultivation facility within the last
40 three months.

41 (C) A statement that the product was tested for contaminants,
42 provided that tests for contaminants were conducted according to section
43 19, and amendments thereto, and any other requirements made by the

1 cannabis compliance agency.

2 (d) Labeling of medical cannabis containers by a medical cannabis
3 cultivation facility or a medical cannabis products manufacturing facility.
4 If a medical cannabis cultivation facility or a medical cannabis products
5 manufacturing facility packages medical cannabis within a container that
6 is then placed within a shipping container, each container must be affixed
7 with a label containing all the information required by section 19, and
8 amendments thereto, and any other requirements made by the cannabis
9 compliance agency.

10 Sec. 18. Packaging and labeling of medical cannabis concentrates by
11 a medical cannabis cultivation facility or a medical cannabis products
12 manufacturing facility. The purpose of this rule is to ensure that every
13 medical cannabis cultivation facility and medical cannabis products
14 manufacturing facility labels each shipping container and container of
15 medical cannabis concentrates with all the necessary and relevant
16 information for the receiving medical cannabis establishment. In addition,
17 this rule clarifies basic shipping container requirements. The cannabis
18 compliance agency wants to ensure the regulated community employs
19 proper labeling techniques for all medical cannabis concentrates.

20 (a) Every medical cannabis cultivation facility and medical cannabis
21 products manufacturing facility must ensure that all medical cannabis
22 concentrates are placed within a sealed, tamper-evident shipping container
23 that has no more than one pound of medical cannabis concentrate within it
24 prior to transport or transfer to another medical cannabis facility or
25 compassion center.

26 (b) Every medical cannabis cultivation facility or medical cannabis
27 products manufacturing facility must ensure that a label is affixed to every
28 shipping container holding a medical cannabis concentrate that includes all
29 the information required by section 19, and amendments thereto, and any
30 other requirements made by the cannabis compliance agency, prior to
31 transport.

32 (c) Every medical cannabis cultivation facility or medical cannabis
33 products manufacturing facility must ensure the following information is
34 affixed to every shipping container holding a medical cannabis
35 concentrate:

36 (A) The license number of the medical cannabis cultivation facility
37 where the medical cannabis used to produce the medical cannabis
38 concentrate was grown;

39 (B) the license number of the medical cannabis products
40 manufacturing facility that produced the medical cannabis concentrate;

41 (C) the production batch lot number assigned to the medical cannabis
42 concentrate contained within the shipping container;

43 (D) the net weight, using a standard of measure compatible with the

1 seed-to-sale tracking system, of the medical cannabis concentrate prior to
2 its placement in the shipping container;

3 (E) a complete list of all ecologically sustainable pesticides,
4 fungicides, and herbicides used during the cultivation of the medical
5 cannabis used to produce the medical cannabis concentrate contained; and

6 (F) a complete list of solvents and chemicals used to create the
7 medical cannabis concentrate.

8 (d) Required statement when contaminant tests are performed. Every
9 medical cannabis cultivation facility or medical cannabis products
10 manufacturing facility must ensure that a label is affixed to a shipping
11 container in which a medical cannabis concentrate is placed that contains a
12 statement asserting that the medical cannabis concentrate within was tested
13 per section 19, and amendments thereto, any other requirements made by
14 the cannabis compliance agency; and the following:

15 (A) A medical cannabis testing facility tested every harvest batch lot
16 used to produce the medical cannabis concentrate for:

17 (1) Molds, mildew and filth;

18 (2) microbials;

19 (3) herbicides, pesticides and fungicides, and any harmful chemicals;

20 and

21 (B) a medical cannabis testing facility tested the production batch lots
22 of the medical cannabis concentrate for residual solvents, poisons or
23 toxins.

24 (e) Required statement when potency testing is performed. If a
25 medical cannabis testing facility tested the production batch lots of the
26 medical cannabis concentrate within a shipping container for potency, then
27 every medical cannabis cultivation facility or medical cannabis products
28 manufacturing facility must ensure that a label is affixed to the shipping
29 container with a cannabinoid potency profile expressed as a percentage.

30 (f) Labeling of medical cannabis concentrate containers by a medical
31 cannabis cultivation facility or a medical cannabis products manufacturing
32 facility. If a medical cannabis cultivation facility or a medical cannabis
33 products manufacturing facility packages a medical cannabis concentrate
34 within a container that is then placed within a shipping container, each
35 container must be affixed with a label containing all the information
36 required by section 19, and amendments thereto, and any other
37 requirements made by the cannabis compliance agency.

38 Sec. 19. Testing and lab requirements. The purpose of this rule is to
39 establish guidelines of independent testing and certification testing facility
40 program for medical cannabis and medical cannabis products. The
41 cannabis compliance agency will require licensees to test medical cannabis
42 to ensure, at a minimum, that products sold for human consumption do not
43 contain contaminants, and to ensure correct labeling.

- 1 (a) No independent testing facility may handle, test or analyze
2 cannabis or cannabis products unless the independent testing facility:
- 3 (1) Has been registered by the cannabis compliance agency;
 - 4 (2) is independent from all other persons and entities involved in the
5 medical cannabis industry;
 - 6 (3) ensures that no board member, officer, manager, owner, partner,
7 principal stakeholder or member of a registered organization shall have an
8 interest or voting rights in the testing facility performing medical cannabis
9 testing;
 - 10 (4) Has established standard operating procedures that provide for
11 adequate chain of custody controls for samples transferred to the
12 independent testing facility for testing and that comply to all guidelines
13 established by the cannabis compliance agency;
 - 14 (5) is registered with a third party accrediting bodies and associations
15 approved by the cannabis compliance agency.
- 16 (b) The cannabis compliance agency will set guidelines for testing
17 and oversight of lab performance.
- 18 (1) All testing facilities must pass rigorous and regular proficiency
19 testing programs to be carried out by a third party chosen by the cannabis
20 compliance agency.
 - 21 (2) Testing facilities must be managed by a full-time on-site chemist
22 with at least four years of experience specific to analytical
23 chromatography.
 - 24 (3) The testing facility shall notify the cannabis compliance agency
25 within one business day after the testing facility obtains notice of any kind
26 that its accreditation has been denied, suspended or revoked.
- 27 (c) A medical cannabis cultivation facility shall:
- 28 (1) Collect a random, homogenous sample for testing by segregating
29 harvest batch lots of individual cultivars of flowers, then selecting a
30 random sample from various locations from within each harvest batch lot,
31 in an amount required by the cannabis compliance agency, and no less than
32 2.5 grams;
 - 33 (2) designate an individual responsible for collecting each sample
34 who shall:
 - 35 (A) Prepare a signed statement showing that each sample has been
36 randomly selected for testing;
 - 37 (B) provide the signed statement to the medical cannabis testing
38 facility; and
 - 39 (C) maintain a copy as a business record;
 - 40 (3) transport the sample to the medical cannabis testing facility's
41 licensed premises in compliance with section 19, and amendments thereto,
42 and any other requirements made by the cannabis compliance agency.
 - 43 (d) A medical cannabis cultivation facility shall segregate the entire

1 harvest batch lot from which the testing sample was selected until the
2 medical cannabis testing facility reports the results from its tests.

3 (1) During this period of segregation, the medical cannabis
4 cultivation facility that provided the sample shall maintain the harvest
5 batch lot in a secure, cool and dry location to prevent the medical cannabis
6 from becoming contaminated or losing its efficacy.

7 (2) The facility that provided the sample may not sell or transport any
8 medical cannabis from the segregated batch lot until the medical cannabis
9 testing facility has completed its testing and provided those results, in
10 writing, to the medical cannabis cultivation facility that provided the
11 sample and the cannabis compliance agency.

12 (3) The medical cannabis cultivation facility shall maintain the testing
13 results as part of its business books and records.

14 (e) A licensed testing facility shall issue a certificate of analysis for
15 each harvest batch lot, with supporting data, to report both of the
16 following:

17 (1) The chemical profile, including, but not limited to, all of the
18 following:

19 (A) Tetrahydrocannabinol (THC);

20 (B) tetrahydrocannabinolic Acid (THCA);

21 (C) cannabidiol (CBD);

22 (D) cannabidiolic acid (CBDA);

23 (E) terpenes;

24 (F) cannabigerol (CBG);

25 (G) cannabinol (CBN); and

26 (H) any other compounds required by the cannabis compliance
27 agency; and

28 (2) that the presence of contaminants does not exceed the levels set
29 by the cannabis compliance agency. For purposes of this paragraph,
30 contaminants include, but are not limited to, all of the following:

31 (A) Residual solvent or processing chemicals;

32 (B) foreign material, including, but not limited to, hair, insects or
33 similar or related adulterants;

34 (C) microbiological impurity, including total aerobic microbial count,
35 total yeast mold count, *P. aeruginosa*, *aspergillus* spp., *s. aureus*, aflatoxin
36 B1, B2, G1 or G2 or ochratoxin A;

37 (D) whether the batch is within specification for odor and appearance;

38 (E) residual levels of volatile organic compounds shall be below the
39 lesser of either the specifications set by the cannabis compliance agency;

40 (F) methods, including:

41 (i) High-performance liquid chromatography in tandem with triple-
42 quadrupole mass spectrometry (HPLC-MS/MS) to identify and quantify
43 trace pesticide, fungicide and PGR residues;

- 1 (ii) real-time polymerase chain-reaction (qPCR) technology;
- 2 (iii) gas chromatography with flame ionized detection (FID) to test
3 for terpenes; and
- 4 (iv) utilizing a combination of gas chromatograph with flame ionized
5 detection (FID), head-space analysis and mass spectrometry for residual
6 solvent testing.
- 7 (f) The cannabis compliance agency requires that a test batch be
8 submitted to a specific medical cannabis testing facility for testing to
9 verify compliance, perform investigations, compile data or address a
10 public health and safety concern via test batch samples.
- 11 (1) Standard minimum weight of medical cannabis and medical
12 cannabis concentrate that must be included in a test batch for every type of
13 test that it conducts must be 2.5 grams.
- 14 (2) The cannabis compliance agency must establish a standard
15 number of finished product it requires to be included in each test batch of
16 medical cannabis infused-product for every type of test required by this
17 act, or by further guidelines set by the cannabis compliance agency.
- 18 (3) A medical cannabis testing facility may not accept a test batch that
19 is smaller than the standard minimum amount.
- 20 (4) A medical cannabis testing facility may not accept a test batch or
21 sample that was not taken in accordance with these rules or any additional
22 cannabis compliance agency sampling procedures or was not collected by
23 qualified personnel.
- 24 (g) If medical cannabis, medical cannabis concentrate or medical
25 cannabis infused-product failed a contaminant test, then the medical
26 cannabis testing facility must immediately notify the medical cannabis
27 cultivation facility or medical cannabis product manufacturer that
28 submitted the sample for testing and report the failure in accordance with
29 all cannabis compliance agency procedures.
- 30 (h) If medical cannabis, medical cannabis concentrate or medical
31 cannabis infused-product is found to have a contaminant in levels
32 exceeding those established as permissible under this rule, then it shall be
33 considered to have failed contaminant testing. Notwithstanding the
34 permissible levels established in this rule, the cannabis compliance agency
35 reserves the right to determine that a test batch presents a risk to the public
36 health or safety and therefore shall be considered to have failed a
37 contaminant test.
- 38 (i) For purposes of the microbiological test, a CO₂ and solvent-based
39 extracts sample shall be deemed to have passed if it satisfies the
40 recommended microbial and fungal limits for cannabis products in colony
41 forming units per gram (CFU/g):
- 42 (1) Total viable aerobic bacteria; 10⁴
- 43 (2) Total yeast and mold; 10³

1 (3) Total coliforms bile-tolerant gram-negative bacteria; 102
2 (4) E. coli (pathogenic strains) and Salmonella spp. not detected in 1
3 g.

4 (j) Unprocessed materials include minimally processed crude
5 cannabis preparations such as inflorescences, accumulated resin glands
6 (kief) and compressed resin glands (hashish). Processed materials include
7 various solid or liquid-infused edible preparations, oils, topical
8 preparations and water-processed resin glands (bubble hash).

9 (k) Mycotoxin test: For purposes of the mycotoxin test, a cannabis
10 sample shall be deemed to have passed if it meets the following standards
11 for tests and specifications;

12 (1) Aflatoxin B1, <20 µg/kg of substance;

13 (2) Aflatoxin B2, <20 µg/kg of substance;

14 (3) Aflatoxin G2, <20 µg/kg of substance; and

15 (4) Ochratoxin A, <20 µg/kg of substance.

16 (5) Testing facilities should contact the cannabis compliance agency
17 when shiga toxin producing escherichia coli (STEC) and salmonella are
18 detected beyond the acceptable limits.

19 (l) These named solvents and pesticides are not permitted for use
20 under this act, but must be tested for as contaminants. Testing must be for
21 specific pesticides listed in (h) (5) (i)(8)(9)(10)(11)(12)(13), any and all
22 solvents, permitted and not permitted, under section 20, and amendments
23 thereto:.

24 (1) Butanes;

25 (2) heptanes;

26 (3) benzene**;

27 (4) toluene**;

28 (5) hexane**;

29 (6) total xylenes (m,p, o-xylenes)**;

30 (7) any solvent not listed above;

31 (8) azadirachtin;

32 (9) myclobutinil;

33 (10) imidacloprid;

34 (11) avermectin;

35 (12) bifentazate;

36 (13) etoxazole;

37 (14) chlorpyrifos (EPA registration number: 829-292);

38 (15) disulfoton (EPA registration number: 264-734);

39 (16) imidacloprid (EPA registration number: 264-755);

40 (17) azatrol hydro botanical insecticide (EPA registration number:
41 2217-836);

42 (18) Gordon's professional turf & ornamental products azatrol EC
43 insecticide (EPA registration number: 2217-836);

1 (19) azadirachtin. (EPA registration number: 2217-836) (some trade
2 names for products containing azadirachtin include align, azatin and
3 turplex);

4 (m) Metals substance maximum limits:

5 (1) arsenic, max limit: <10 PPM;

6 (2) cadmium, max limit: <4.1 PPM;

7 (3) lead, max limit: <10 PPM; and

8 (4) mercury, max limit: <2.0 PPM.

9 (n) A medical cannabis testing facility must notify the cannabis
10 compliance agency if a test batch lot is found to contain levels of a known
11 contaminant not listed within this section.

12 (o) Potency testing cannabinoids potency profiles. A medical
13 cannabis testing facility will test and report results for all cannabinoids
14 required by the cannabis compliance agency.

15 (1) For potency tests on medical cannabis and medical cannabis
16 concentrate, results must be reported by listing a single percentage
17 concentration for each cannabinoid that represents an average of all
18 samples within the test batch lot.

19 (2) For potency tests conducted on medical cannabis infused-product,
20 results must be reported by listing the total number of milligrams
21 contained within a single medical cannabis-infused product unit for sale
22 for each cannabinoid and affirming the tetrahydrocannabinol content is
23 homogeneous.

24 (3) All potency tests conducted on medical cannabis must occur on
25 dried and cured medical cannabis that is ready for sale.

26 (4) If the tetrahydrocannabinol content of a medical cannabis infused-
27 product is determined through testing not to be homogeneous, then it shall
28 be considered to have failed potency testing.

29 (5) A medical cannabis infused-product shall be considered not to be
30 homogeneous if 10% of the infused portion of the medical cannabis
31 infused-product contains more than 20% of the total tetrahydrocannabinol
32 contained within the entire medical cannabis infused-product.

33 (6) Potency levels of edibles must meet standards set forth in section
34 16, and amendments thereto.

35 (7) A potency variance for cannabis infused products and edibles of
36 no more than plus or minus 5% is allowed.

37 (8) The cannabis compliance agency shall determine procedures to
38 address purposeful misrepresentation of medical cannabis or medical
39 cannabis products potency profiles.

40 (p) If the sample failed testing, the entire batch lot from which the
41 sample was taken shall, if applicable, be recalled as provided for by
42 standards set forth by the cannabis compliance agency, and disposed of in
43 accordance with guidelines set forth by the agency.

1 (1) If the sample failed any test other than pesticides and metals, the
2 batch lot may be used to make a CO2 or solvent-based extract. After
3 processing, the CO2 or solvent-based extract must still pass all required
4 tests.

5 (2) The testing facility shall file with the cannabis compliance agency
6 an electronic copy of each testing facility test result for any test batch that
7 does not pass the microbiological, mycotoxin, metals or pesticide chemical
8 residue test, at the same time that it transmits those results to the
9 cultivation center.

10 (3) In addition, the testing facility shall maintain the test results for at
11 least five years and make them available at the cannabis compliance
12 agency's request.

13 (q) The cannabis compliance agency will develop and implement a
14 written quality assurance program that assesses the chemical and
15 microbiological composition of medical cannabis. Assessment includes a
16 profile of the active ingredients, including shelf life, and the presence of
17 inactive ingredients and contaminants. A medical cannabis manufacturer
18 must use these testing results to determine appropriate storage conditions
19 and expiration dates.

20 (1) The cannabis compliance agency will develop procedures that
21 require:

22 (A) Sample collection;

23 (B) sample collection documentation;

24 (C) all sampling and testing plans to be described in written
25 procedures that include the sampling method and the number of units per
26 batch to be tested;

27 (D) that random samples from each batch are:

28 (i) Taken in an amount necessary to conduct the applicable test;

29 (ii) labeled with the harvest batch lot number;

30 (iii) submitted for testing; and

31 (iv) retain the results from the random samples for at least five years;

32 (E) rejecting a medical cannabis batch that fails to meet established
33 standards, specifications and any other relevant quality-control criteria set
34 by the cannabis compliance agency;

35 (F) following the cannabis compliance agency guidelines for
36 responding to results indicating contamination, and determining the source
37 of contamination; and

38 (G) retaining documentation of test results, assessment and
39 destruction of medical cannabis for at least five years.

40 (2) The quality assurance program must include procedures for
41 performing stability testing of each product type produced to determine
42 product shelf life that addresses:

43 (A) Sample size and test intervals based on statistical criteria for each

1 attribute examined to ensure valid stability estimates;

2 (B) storage conditions for samples retained for testing; and

3 (C) reliable and specific test methods.

4 (3) Stability studies must include:

5 (A) Medical cannabis testing at appropriate intervals;

6 (B) medical cannabis testing in the same container-closure system in
7 which the product is marketed; and

8 (C) testing medical cannabis for reconstitution at the time of
9 dispensing, as directed in the labeling, and after the samples are
10 reconstituted.

11 (4) If shelf-life studies have not been completed before the
12 implementation of this act, a medical cannabis manufacturer may assign a
13 tentative expiration date, based on any available stability information. The
14 manufacturer must concurrently conduct stability studies to determine the
15 actual product expiration date.

16 (5) After the manufacturer verifies the tentative expiration date, or
17 determines the appropriate expiration date, the medical cannabis
18 manufacturer must include that expiration date on each batch of medical
19 cannabis products and provide supporting documentation to the cannabis
20 compliance agency.

21 (6) Stability testing must be repeated if the manufacturing process or
22 the product's chemical composition is changed.

23 (r) A medical cannabis manufacturer must retain a uniquely labeled
24 reserve sample that represents each batch of medical cannabis and store it
25 under conditions consistent with product labeling. The reserve sample
26 must be stored in the same immediate container-closure system in which
27 the medical cannabis is marketed. The reserve sample must consist of at
28 least twice the quantity necessary to perform all the required tests. A
29 medical cannabis manufacturer must retain the reserve for at least one year
30 following the batch's expiration date.

31 (s) If the cannabis compliance agency deems that public health may
32 be at risk, the cannabis compliance agency may require the manufacturer
33 to retest any sample of plant material or medical cannabis product.

34 (t) A cultivation facility shall not be required to sample and test
35 cannabis if the batch was previously sampled, the sample was tested by
36 another cultivation facility and determined to have passed the testing
37 requirements of the cannabis compliance agency, and the facility can
38 provide such documentation to the cannabis compliance agency.

39 (u) If a sample does not pass testing, the producer shall determine
40 whether the sample would meet guidelines for remediation established by
41 the cannabis compliance agency and test another sample from the batch at
42 issue, or identify processes that will render the dried medical cannabis or
43 medical cannabis product safe and retest in accordance with the

1 requirements of this section.

2 (v) If the batch cannot be remediated to where it meets the testing
3 requirements of this section, the cultivation facility shall notify the
4 cannabis compliance agency within 24 hours, and confirm the destruction
5 and disposal of the dried cannabis or concentrated cannabis-derived
6 product per the guidelines to be established by the agency.

7 (w) A medical cannabis testing facility must submit its quality control
8 manual to the cannabis compliance agency for review and approval.

9 (1) The manual may be mailed to the cannabis compliance agency or
10 may be sent electronically.

11 (2) The cannabis compliance agency will create a list of laboratories
12 that have submitted a quality control manual by the deadline assigned by
13 the cannabis compliance agency and post the list on cannabis compliance
14 agency's website.

15 (3) A compassion center may only accept test results from a testing
16 facility listed with the cannabis compliance agency.

17 (4) A manual must be signed by an directing official of the testing
18 facility with an attestation that the results are accurate and that testing was
19 done using valid testing methodologies and a quality system as required in
20 this section.

21 (5) If the cannabis compliance agency determines that a testing
22 facility is not using valid testing methodologies, does not have a quality
23 system or is not producing test result reports in accordance with this
24 section, the cannabis compliance agency may remove the name of the
25 testing facility from the list on the cannabis compliance agency's website.

26 (x) The cannabis compliance agency may do audit testing of a
27 medical cannabis cultivation facility or medical cannabis product
28 manufacturer to access whether they are operating within the guidelines of
29 this act.

30 (1) The medical cannabis testing facility shall establish and follow
31 cannabis compliance agency procedures for verifying the experience and
32 education of testing facility employees.

33 (2) The medical cannabis testing facility shall submit the required
34 information for employee identification cards within 15 working days after
35 the date the testing facility employee was hired.

36 (3) Upon termination of the employment of the medical cannabis
37 testing facility employee with the testing facility, the facility shall:

38 (A) Obtain any keys or other entry devices from the terminated
39 testing facility employee;

40 (B) ensure the terminated facility employee can no longer gain access
41 to the facility premises; and

42 (C) within one business day of the termination of facility employee,
43 notify the cannabis compliance agency of the termination.

1 (y) Testing and laboratory personnel cannot be excluded for any
2 offense consisting of conduct for which the Kansas safe access act would
3 likely have prevented a conviction, but the conduct either occurred prior to
4 the enactment of the Kansas safe access act or was prosecuted by an
5 authority other than the state of Kansas, whether as a patient or caregiver.
6 Candidates who can prove their past convictions would have been negated
7 by the Kansas safe access act by providing to the cannabis compliance
8 agency medical records from the time of the conviction for the patient, or
9 records that the patient was receiving care from a caregiver, cannot be
10 excluded from consideration.

11 Sec. 20. Methods of medical extract manufacturing. The purpose of
12 this rule is to establish guidelines regarding the manufacturing of medical
13 cannabis products, to ensure, at a minimum, that products sold for human
14 consumption do not contain contaminants that are injurious to health and
15 to ensure public safety using best practices.

16 (a) Methods of oil, tincture and extract production banned under the
17 Kansas safe access act are:

- 18 (1) Butane;
- 19 (2) alcohol cook methods over open flame; and
- 20 (3) propane.

21 (b) Solvents banned under the Kansas safe access act for all products
22 sold or purchased by compassion centers include all petroleum-based
23 products.

24 (c) Extract methods allowed under the Kansas safe access act are:

- 25 (1) Tabletop infusing machines;
- 26 (2) slow cooker methods;
- 27 (3) rosin heat press methods and machines;
- 28 (4) ice water methods;
- 29 (5) food grade glycerin methods;
- 30 (6) grain alcohol methods;
- 31 (7) supercritical closed loop carbon dioxide extraction machines,
32 including tabletop machines;
- 33 (8) dry ice method; and
- 34 (9) all other non-explosive, non-toxic solvents, and new technologies
35 or methods that may develop, that adhere to Kansas safe access act
36 guidelines and any further guidelines established by the cannabis
37 compliance agency.

38 Sec. 21. This act shall establish the cannabis compliance agency, a
39 division under the department of health and environment. The cannabis
40 compliance agency oversees all components of licensing, compliance and
41 regulation enforcement and is not a resource for the growing process and
42 does not have to give information pertaining to the growing process to
43 patients or caregivers as part of this act. The agency works in consultation

1 with the compassion board and is established as an agency under the
2 department of health and environment.

3 (a) The cannabis compliance agency will work in consultation with
4 the compassion board, and report directly to the department of health and
5 environment.

6 (b) The purpose of the cannabis compliance agency will be to enforce
7 compliance to all sections of the Kansas safe access act and to issue all
8 pertaining licenses.

9 (1) All license applicants shall be residents of Kansas for one year, or
10 a returning former Kansan who has re-established residency by the date of
11 their license application.

12 (c) The cannabis compliance agency shall submit to the legislature an
13 annual report that does not disclose any identifying information about
14 identification cardholders, compassion centers or medical providers, but
15 does contain, at a minimum, all of the following information:

16 (1) The number of applications and renewals filed for identification
17 cards;

18 (2) the number of qualifying patients and designated primary
19 caregivers approved in each county;

20 (3) the nature of the medical conditions of the qualifying patients;

21 (4) the number of identification cards revoked;

22 (5) the number of medical providers providing written certifications
23 for qualifying patients;

24 (6) the number of registered compassion centers; and

25 (7) the number of compassion center staffers.

26 (d) It shall be a class B misdemeanor for any person, including an
27 employee or official of the cannabis compliance agency or another state
28 agency or local government, to breach the confidentiality of information
29 obtained pursuant to section 7, and amendments thereto.

30 (e) Notwithstanding the provisions of this section, this section shall
31 not prevent the following notifications:

32 (1) The cannabis compliance agency employees may notify law
33 enforcement about falsified or fraudulent information submitted to the
34 cannabis compliance agency, so long as the employee who suspects that
35 falsified or fraudulent information has been submitted confers with such
36 employee's supervisor and both agree that circumstances exist that warrant
37 reporting;

38 (2) the cannabis compliance agency may notify state or local law
39 enforcement about apparent criminal violations of the Kansas safe access
40 act, if the employee who suspects the offense confers with such
41 employee's supervisor and both agree that circumstances exist that warrant
42 reporting;

43 (3) compassion center staffers may notify the cannabis compliance

1 agency of a suspected violation or attempted violation of the Kansas safe
2 access act or the rules and regulations adopted pursuant thereto, if the
3 employee who suspects the offense confers with such employee's
4 supervisor and both agree that circumstances exist that warrant reporting.

5 (f) (1) The cannabis compliance agency shall maintain a website:

6 (A) To house information for the public on the act; and

7 (B) to facilitate implementation of the act.

8 (2) Information to be included, either by text or link, may include, but
9 shall not be limited to:

10 (A) Medical provider search;

11 (B) cultivating caregiver search;

12 (C) compassion center or cooperative search;

13 (D) customer service phone number and email;

14 (E) information and contacts for the appeals process;

15 (F) electronic application forms;

16 (G) electronic crop damage report form;

17 (H) a portal to upload documents and pictures; and

18 (I) all electronic forms for medical cannabis cultivation facilities,
19 cannabis product manufacturers, compassion centers, cultivating
20 caregivers, medical cannabis testing facilities, cannabis transport and
21 security companies, and any other forms as required by the cannabis
22 compliance agency.

23 (g) The agency shall establish regulation of the storage of,
24 warehouses for and transportation of medical cannabis and medical
25 cannabis products.

26 (h) The agency shall develop a universal symbol indicating the
27 package contains medical cannabis.

28 (i) The agency shall establish rules for the safe and lawful transport
29 of medical cannabis and medical cannabis products between the licensed
30 business and testing labs.

31 (j) The cannabis compliance agency may refuse or deny a license
32 renewal, reinstatement or initial license issuance for good cause. For
33 purposes of this subsection, good cause means:

34 (1) The licensee or applicant has violated, does not meet or has failed
35 to comply with any of the terms, conditions or provisions of this act, any
36 rules promulgated pursuant to this act, or any supplemental local law, rules
37 or regulations.

38 (2) The licensee or applicant has failed to comply with any special
39 terms or conditions that were placed on its license pursuant to an order of
40 the cannabis compliance agency.

41 (3) The licensed premises have been operated in a manner that
42 adversely affects the public health or the safety of the immediate
43 neighborhood in which the establishment is located.

1 (4) The licensee or applicant has provided a false application or
2 committed a fraudulent act to a member of law enforcement, prosecutor,
3 officer or employee of the cannabis compliance agency, or member of
4 local or state government.

5 (k) If the cannabis compliance agency denies a state license pursuant
6 to this subsection, the applicant shall be entitled to a hearing and judicial
7 review. The cannabis compliance agency shall provide written notice of
8 the grounds for denial to the applicant and to the local jurisdiction at least
9 30 calendar days prior to the hearing.

10 (l) The cannabis compliance agency shall require a complete
11 disclosure of all persons having a direct or indirect financial interest, and
12 the extent of such interest, in each license issued under this act.

13 (m) For the purpose of regulating the cultivation, manufacture,
14 distribution, sale and testing of medical cannabis and medical cannabis
15 products, the cannabis compliance agency in its discretion, upon receipt of
16 an application in the prescribed form, may issue and grant to the applicant
17 a license from any of the following classes, subject to the provisions and
18 restrictions provided by this act:

19 (1) Compassion center license;

20 (2) medical cannabis cultivation facility license;

21 (3) medical cannabis products manufacturing license;

22 (4) medical cannabis testing facility license; and

23 (5) occupational licenses and registrations for owners, managers,
24 operators, employees, contractors and other support staff employed by,
25 working in or having access to restricted areas of the licensed premises, as
26 determined by the cannabis compliance agency.

27 (n) A licensee may operate a compassion center, a medical cannabis
28 cultivation facility and a medical cannabis products manufacturing facility
29 at the same location.

30 (o) The cannabis compliance agency will establish a seed-to-sale
31 tracking system to be utilized by compassion centers, medical cannabis
32 product manufacturers, medical cannabis testing facilities and cultivating
33 caregivers with over 10 patients.

34 Sec. 22. Any provision or section of this act being held invalid as to
35 any person or circumstances shall not affect the application of any other
36 provision or section of this act that can be given full effect without the
37 invalid provision or section or application, and to this end, the provisions
38 of this act are severable.

39 Sec. 23. This act shall take effect and be in force from and after its
40 publication in the statute book.