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A bill to be entitled An act relating to medical use of marijuana; amending s. 212.08, F.S.; providing an exemption from the state tax on sales, use, and other transactions for marijuana and marijuana delivery devices used for medical purposes; amending s. 381.986, F.S.; providing, revising, and deleting definitions; providing qualifying medical conditions for a patient to be eligible to receive marijuana or a marijuana delivery device; providing requirements for designating a qualified physician or medical director; providing criteria for certification of a patient for medical marijuana treatment by a qualified physician; providing for certain patients registered with the medical marijuana use registry to be deemed qualified; requiring the Department of Health to monitor physician registration and certifications in the medical marijuana use registry; requiring the Board of Medicine and the Board of Osteopathic Medicine to create a physician certification pattern review panel; providing rulemaking authority to the department and the boards; requiring the department to establish a medical marijuana use registry; specifying entities and persons who have access to the registry; providing requirements for registration of, and maintenance of

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registered status by, qualified patients and caregivers; providing criteria for nonresidents to prove residency for registration as a qualified patient; defining the term "seasonal resident"; authorizing the department to revoke the registration of a patient or caregiver under certain circumstances; providing requirements for the issuance of medical marijuana use registry identification cards; requiring the department to issue licenses to a certain number of medical marijuana treatment centers; providing for license renewal and revocation; providing for continuance of certain entities authorized to dispense low-THC cannabis, medical cannabis, and cannabis delivery devices; requiring a medical marijuana treatment center to comply with certain standards in the production and distribution of edibles; requiring background screening of owners, officers, board members, and managers of medical marijuana treatment centers; requiring the department to establish, maintain, and control a computer seed-to-sale marijuana tracking system; requiring the department to establish protocols and procedures for operation, conduct periodic inspections, and restrict location of medical marijuana treatment centers; providing a limit on county and municipal permit fees; authorizing

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counties and municipalities to determine the location of medical marijuana treatment centers by ordinance under certain conditions; providing penalties; authorizing the department to impose sanctions on persons or entities engaging in unlicensed activities; providing that a person is not exempt from prosecution for certain offenses and is not relieved from certain requirements of law under certain circumstances; providing for certain school personnel to possess marijuana pursuant to certain established policies and procedures; providing that certain research institutions may possess, test, transport, and dispose of marijuana subject to certain conditions; providing applicability with respect to employer-instituted drug-free workplace programs; amending ss. 458.331 and 459.015, F.S.; providing additional acts by a physician or an osteopathic physician which constitute grounds for denial of a license or disciplinary action to which penalties apply; creating s. 381.988, F.S.; providing for the establishment of medical marijuana testing laboratories; requiring the Department of Health, in collaboration with the Department of Agriculture and Consumer Services and the Department of Environmental Protection, to develop certification standards and rules; creating s. 381.989, F.S.;

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directing the department and the Department of Highway Safety and Motor Vehicles to institute public education campaigns relating to cannabis and marijuana and impaired driving; requiring evaluations of public education campaigns; authorizing the department and the Department of Highway Safety and Motor Vehicles to contract with vendors to implement and evaluate the campaigns; amending ss. 385.211, 499.0295, and 893.02, F.S.; conforming provisions to changes made by the act; creating s. 1004.4351, F.S.; providing a short title; providing legislative findings; defining terms; establishing the Coalition for Medical Marijuana Research and Education within the H. Lee Moffitt Cancer Center and Research Institute, Inc.; providing a purpose for the coalition; establishing the Medical Marijuana Research and Education Board to direct the operations of the coalition; providing for the appointment of board members; providing for terms of office, reimbursement for certain expenses, and meetings of the board; authorizing the board to appoint a coalition director; prescribing the duties of the coalition director; requiring the board to advise specified entities and officials regarding medical marijuana research and education in this state; requiring the board to annually adopt a Medical

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101	Marijuana Research and Education Plan; providing
102	requirements for the plan; requiring the board to
103	issue an annual report to the Governor and the
104	Legislature by a specified date; requiring the
105	Department of Health to submit reports to the board
106	containing specified data; specifying responsibilities
107	of the H. Lee Moffitt Cancer Center and Research
108	Institute, Inc.; amending s. 1004.441, F.S.; revising
109	a definition; amending s. 1006.062, F.S.; requiring
110	district school boards to adopt policies and
111	procedures for access to medical marijuana by
112	qualified patients who are students; providing
113	emergency rulemaking authority; providing for venue
114	for a cause of action against the department;
115	providing for defense against certain causes of
116	action; directing the Department of Law Enforcement to
117	develop training for law enforcement officers and
118	agencies; amending s. 385.212, F.S.; renaming the
119	department's Office of Compassionate Use; providing
120	appropriations; providing an effective date.
121	
122	Be It Enacted by the Legislature of the State of Florida:
123	
124	Section 1. Paragraph (1) of subsection (2) of section
125	212.08, Florida Statutes, is redesignated as paragraph (m), and
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126	a new paragraph (1) is added to that subsection, to read:
127	212.08 Sales, rental, use, consumption, distribution, and
128	storage tax; specified exemptions.—The sale at retail, the
129	rental, the use, the consumption, the distribution, and the
130	storage to be used or consumed in this state of the following
131	are hereby specifically exempt from the tax imposed by this
132	chapter.
133	(2) EXEMPTIONS; MEDICAL.—
134	(1) Marijuana and marijuana delivery devices, as defined
135	in s. 381.986, are exempt from the taxes imposed under this
136	<pre>chapter.</pre>
137	Section 2. Section 381.986, Florida Statutes, is amended
138	to read:
139	(Substantial rewording of section. See
140	s. 381.986, F.S., for present text.)
141	381.986 Medical use of marijuana.—
142	(1) DEFINITIONS.—As used in this section, the term:
143	(a) "Caregiver" means a resident of this state who has
144	agreed to assist with a qualified patient's medical use of
145	marijuana, has a caregiver identification card, and meets the
146	requirements of subsection (6).
147	(b) "Chronic nonmalignant pain" means pain that is caused
148	by a debilitating medical condition or that originates from a
149	debilitating medical condition and persists beyond the usual
150	course of that debilitating medical condition

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- (c) "Close relative" means a spouse, parent, sibling, grandparent, child, or grandchild, whether related by whole or half blood, by marriage, or by adoption.
- (d) "Edibles" means commercially produced food items made with marijuana oil, but no other form of marijuana, that are produced and dispensed by a medical marijuana treatment center.
- (e) "Low-THC cannabis" means a plant of the genus
  Cannabis, the dried flowers of which contain 0.8 percent or less
  of tetrahydrocannabinol and more than 10 percent of cannabidiol
  weight for weight; the seeds thereof; the resin extracted from
  any part of such plant; or any compound, manufacture, salt,
  derivative, mixture, or preparation of such plant or its seeds
  or resin that is dispensed from a medical marijuana treatment
  center.
- (f) "Marijuana" means all parts of any plant of the genus Cannabis, whether growing or not; the seeds thereof; the resin extracted from any part of the plant; and every compound, manufacture, salt, derivative, mixture, or preparation of the plant or its seeds or resin, including low-THC cannabis, which are dispensed from a medical marijuana treatment center for medical use by a qualified patient.
- (g) "Marijuana delivery device" means an object used, intended for use, or designed for use in preparing, storing, ingesting, inhaling, or otherwise introducing marijuana into the human body, and which is dispensed from a medical marijuana

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- treatment center for medical use by a qualified patient.
  - (h) "Marijuana testing laboratory" means a facility that collects and analyzes marijuana samples from a medical marijuana treatment center and has been certified by the department pursuant to s. 381.988.
  - (i) "Medical director" means a person who holds an active, unrestricted license as an allopathic physician under chapter

    458 or osteopathic physician under chapter 459 and is in compliance with the requirements of paragraph (3)(c).
  - (j) "Medical use" means the acquisition, possession, use, delivery, transfer, or administration of marijuana authorized by a physician certification. The term does not include:
  - 1. Possession, use, or administration of marijuana that was not purchased or acquired from a medical marijuana treatment center.
  - 2. Possession, use, or administration of marijuana in a form for smoking, in the form of commercially produced food items other than edibles, or of marijuana seeds or flower, except for flower in a sealed receptacle for vaping.
  - 3. Use or administration of any form or amount of marijuana in a manner that is inconsistent with the qualified physician's directions or physician certification.
  - 4. Transfer of marijuana to a person other than the qualified patient for whom it was authorized or the qualified patient's caregiver on behalf of the qualified patient.

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201	5. Use or administration of marijuana in the following
202	locations:
203	a. On any form of public transportation.
204	b. In any public place.
205	c. In a qualified patient's place of employment, except
206	when permitted by his or her employer.
207	d. In a state correctional institution, as defined in s.
208	944.02, or a correctional institution, as defined in s. 944.241.
209	e. On the grounds of a preschool, primary school, or
210	secondary school, except as provided in s. 1006.062.
211	f. In a school bus, a vehicle, an aircraft, or a
212	motorboat.
213	(k) "Physician certification" means a qualified
214	physician's authorization for a qualified patient to receive
215	marijuana and a marijuana delivery device from a medical
216	marijuana treatment center.
217	(1) "Qualified patient" means a resident of this state who
218	has been added to the medical marijuana use registry by a
219	qualified physician to receive marijuana or a marijuana delivery
220	device for a medical use and who has a qualified patient
221	identification card.
222	(m) "Qualified physician" means a person who holds an
223	active, unrestricted license as an allopathic physician under
224	chapter 458 or as an osteopathic physician under chapter 459 and
225	is in compliance with the physician education requirements of

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226	subsection (3).
227	(n) "Smoking" means burning or igniting a substance and
228	inhaling the smoke.
229	(o) "Terminal condition" means a progressive disease or
230	medical or surgical condition that causes significant functional
231	impairment, is not considered by a treating physician to be
232	reversible without the administration of life-sustaining
233	procedures, and will result in death within 1 year after
234	diagnosis if the condition runs its normal course.
235	(2) QUALIFYING MEDICAL CONDITIONS.—A patient must be
236	diagnosed with at least one of the following conditions to
237	qualify to receive marijuana or a marijuana delivery device:
238	(a) Cancer.
239	(b) Epilepsy.
240	(c) Glaucoma.
241	(d) Positive status for human immunodeficiency virus.
242	(e) Acquired immune deficiency syndrome.
243	(f) Post-traumatic stress disorder.
244	(g) Amyotrophic lateral sclerosis.
245	(h) Crohn's disease.
246	(i) Parkinson's disease.
247	(j) Multiple sclerosis.
248	(k) Medical conditions of the same kind or class as or
249	comparable to those enumerated in paragraphs (a)-(j).
250	(1) A terminal condition diagnosed by a physician other

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251	than the qualified physician issuing the physician
252	certification.
253	(m) Chronic nonmalignant pain.
254	(3) QUALIFIED PHYSICIANS AND MEDICAL DIRECTORS.—
255	(a) To be approved as a qualified physician, as defined in
256	paragraph (1)(m), a physician must successfully complete a 2-
257	hour course and subsequent examination offered by the Florida
258	Medical Association or the Florida Osteopathic Medical
259	Association which encompass the requirements of this section and
260	any rules adopted hereunder. The course and examination shall be
261	administered at least annually and may be offered in a distance
262	learning format, including an electronic, online format that is
263	available upon request. The price of the course may not exceed
264	\$100. A physician who has met the physician education
265	requirements of former s. 381.986(4), Florida Statutes 2016,
266	before the effective date of this section, shall be deemed to be
267	in compliance with this paragraph from the effective date of
268	this act until 90 days after the course and examination required
269	by this paragraph become available.
270	(b) A qualified physician may not be employed by, or have
271	any direct or indirect economic interest in, a medical marijuana
272	treatment center or marijuana testing laboratory.
273	(c) A medical director as defined in paragraph (1)(i) must
274	successfully complete a 2-hour course and subsequent examination
275	offered by the Florida Medical Association or the Florida

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Osteopathic Medical Association which encompass the requirements
of this section and any rules adopted hereunder. The course and
examination shall be administered at least annually and may be
offered in a distance learning format, including an electronic,
online format that is available upon request. The price of the
course may not exceed \$100.

- (4) PHYSICIAN CERTIFICATION.-
- (a) A qualified physician may issue a physician certification only if the qualified physician:
- 1. Conducted a physical examination while physically present in the same room as the patient and a full assessment of the medical history of the patient.
- 2. Diagnosed the patient with at least one qualifying medical condition, and, if the diagnosis is pursuant to paragraph (2)(k), submits to the applicable board:
- a. Documentation supporting the qualified physician's opinion that the medical condition is of the same kind or class as the conditions in paragraphs (2)(a)-(j).
- b. Documentation that establishes the efficacy of marijuana as treatment for the condition.
- c. Documentation supporting the qualified physician's opinion that medical use of marijuana would likely outweigh the potential health risks for the patient.
  - d. Any other documentation requested by the board.
  - 3. Determined that the medical use of marijuana would

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- likely outweigh the potential health risks for the patient. If a patient is younger than 18 years of age, a second physician must concur with this determination, and such determination must be documented in the patient's medical record.
- 4. Determined that the patient is not pregnant and documented such determination in the patient's medical record. A physician may not issue a physician certification to a patient who is pregnant.
- 5. Reviewed the patient's controlled drug prescription history in the prescription drug monitoring program database established pursuant to s. 893.055.
- 6. Reviewed the medical marijuana use registry and confirmed that the patient does not have an active physician certification from another qualified physician.
- 7. Registers as the issuer of the physician certification for the named qualified patient on the medical marijuana use registry in an electronic manner determined by the department, and:
- a. Enters into the registry the contents of the physician certification, including the patient's qualifying condition and the dosage not to exceed the daily dose amount determined by the department, the amount and forms of marijuana authorized for the patient, and any types of marijuana delivery devices needed by the patient for the medical use of marijuana.
  - b. Updates the registry within 7 days after any change is

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- made to the original physician certification to reflect such change.
  - c. Deactivates the registration of the qualified patient and the patient's caregiver when the physician no longer recommends the medical use of marijuana for the patient.
  - 8. Maintains an individualized patient treatment plan that includes the qualified patient's qualifying condition and the dose, route of administration, planned duration, treatment objectives, plan for assessing and monitoring the qualified patient's risk of aberrant drug-related behavior, and plan for monitoring the qualified patient's symptoms and other indicators of tolerance or reaction to the marijuana.
  - 9. Submits the patient treatment plan quarterly to the Coalition for Medical Marijuana Research and Education established pursuant to s. 1004.4351 for research on the safety and efficacy of marijuana.
  - 10. Obtains the voluntary and informed written consent of the patient for medical use of marijuana each time the qualified physician issues a physician certification for the patient, which shall be maintained in the patient's medical record. The patient, or the patient's parent or legal guardian if the patient is a minor, must sign the informed consent acknowledging that the qualified physician has sufficiently explained its content. The qualified physician must use a standardized informed consent form adopted in rule by the Board of Medicine

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351	and the Board of Osteopathic Medicine, which must include, at a
352	minimum, information related to:
353	a. The Federal Government's classification of marijuana as
354	a Schedule I controlled substance.
355	b. The approval and oversight status of marijuana by the
356	Food and Drug Administration.
357	c. The current state of research on the efficacy of
358	marijuana to treat the qualifying conditions set forth in this
359	section.
360	d. The potential for addiction.
361	e. The potential effect that marijuana may have on a
362	patient's coordination, motor skills, and cognition, including a
363	warning against operating heavy machinery, operating a motor
364	vehicle, or engaging in activities that require a person to be
365	alert or respond quickly.
366	f. The potential side effects of marijuana use.
367	g. The risks, benefits, and drug interactions of
368	marijuana.
369	h. That the patient's de-identified health information
370	contained in the physician certification, treatment plan, and
371	medical marijuana use registry may be used for research
372	purposes.
373	(b) A qualified physician may not issue a physician
374	certification for more than three 70-day supply limits of

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marijuana. The department shall quantify by rule a daily dose

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amount with	h equi	valent	dose	e amou	ınts	for e	ach	allowabl	le fo	orm	<u>of</u>
marijuana d	dispens	sed by	a me	dical	L mar	rijuan	a tr	eatment	cent	er.	The
department	shall	use t	the da	ily c	dose	amoun	t to	calcula	ate a	a 70	-day
supply.											

- 1. A qualified physician may request an exception to the daily dose amount limit. The request shall be made electronically on a form adopted by the department in rule and must include, at a minimum:
  - a. The qualified patient's qualifying medical condition.
- b. The dosage and route of administration that was insufficient to provide relief to the qualified patient.
- $\underline{\text{c. A description of how the patient will benefit from an} } \\ \\ \text{increased amount.}$
- d. The minimum daily dose amount of marijuana that would be sufficient for the treatment of the qualified patient's qualifying medical condition.
- 2. A qualified physician must provide the qualified patient's records upon the request of the department.
- 3. The department shall approve or disapprove the request within 14 days after receipt of the complete documentation required by this paragraph. The request shall be deemed approved if the department fails to act within this time period.
- (c) A qualified physician must evaluate an existing patient at least once every 30 weeks to determine if the patient still meets the requirements of paragraph (a).

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(g)

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- (d) An active order for low-THC cannabis or medical cannabis issued pursuant to former s. 381.986, Florida Statutes 2016, and registered with the compassionate use registry before the effective date of this section, is deemed a physician certification, and all patients possessing such orders are deemed qualified patients until the department begins issuing medical marijuana use registry identification cards.
- (e) The department shall monitor physician registration in the medical marijuana use registry and the issuance of physician certifications for practices that could facilitate unlawful diversion or misuse of marijuana or a marijuana delivery device and shall take disciplinary action as appropriate.
- (f) The Board of Medicine and the Board of Osteopathic

  Medicine shall jointly create a physician certification pattern
  review panel that shall review all physician certifications
  submitted to the medical marijuana use registry. The panel shall
  track and report the number of physician certifications and the
  qualifying medical conditions, dosage, supply amount, and form
  of marijuana certified. The panel shall report the data both by
  individual qualified physician and in the aggregate, by county,
  and statewide. The physician certification pattern review panel
  shall, beginning January 1, 2018, submit an annual report of its
  findings and recommendations to the Governor, the President of
  the Senate, and the Speaker of the House of Representatives.
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The department, the Board of Medicine, and the Board



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- of Osteopathic Medicine may adopt rules pursuant to ss.

  120.536(1) and 120.54 to implement this subsection.
  - (5) MEDICAL MARIJUANA USE REGISTRY.-
  - (a) The department shall create and maintain a secure, electronic, and online medical marijuana use registry for physicians, patients, and caregivers as provided under this section. The medical marijuana use registry must be accessible to law enforcement agencies, qualified physicians, and medical marijuana treatment centers to verify the authorization of a qualified patient or a caregiver to possess marijuana or a marijuana delivery device and record the marijuana or marijuana delivery device dispensed. The medical marijuana use registry must also be accessible to practitioners licensed to prescribe prescription drugs to ensure proper care for patients before medications that may interact with the medical use of marijuana are prescribed. The medical marijuana use registry must prevent an active registration of a qualified patient by multiple physicians.
  - (b) The department shall determine whether an individual is a resident of this state for the purpose of registration of qualified patients and caregivers in the medical marijuana use registry. To prove residency:
  - 1. An adult resident must provide the department with a copy of his or her valid Florida driver license issued under s. 322.18 or a copy of a valid Florida identification card issued

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451	<u>under s. 322.051.</u>
452	2. An adult seasonal resident who cannot meet the
453	requirements of subparagraph 1. may provide the department with
454	a copy of two of the following that show proof of residential
455	address:
456	a. A deed, mortgage, monthly mortgage statement, mortgage
457	payment booklet or residential rental or lease agreement.
458	b. One proof of residential address from the seasonal
459	resident's parent, step-parent, legal guardian or other person
460	with whom the seasonal resident resides and a statement from the
461	person with whom the seasonal resident resides stating that the
462	seasonal resident does reside with him or her.
463	c. A utility hook up or work order dated within 60 days
464	prior to registration in the medical use registry.
465	d. A utility bill, not more than 2 months old.
466	e. Mail from a financial institution, including checking,
467	savings, or investment account statements, not more than 2
468	months old.
469	f. Mail from a federal, state, county, or municipal
470	government agency, not more than 2 months old.
471	g. Any other documentation that provides proof of
472	residential address as determined by department rule.
473	3. "Seasonal resident" means any person who:
474	a. Temporarily resides in this state for a period of at
475	least 31 consecutive days in each calendar year;

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476	b. Maintains a temporary residence in this state;
477	c. Returns to the state or jurisdiction of his or her
478	residence at least one time during each calendar year; and
479	d. Is registered to vote or pays income tax in another
480	state or jurisdiction.
481	4. A minor must provide the department with a certified
482	copy of a birth certificate or a current record of registration
483	from a Florida K-12 school and must have a parent or legal
484	guardian who meets the requirements of subparagraph 1.
485	5. A minor must provide the department with a certified
486	copy of a birth certificate or a current record of registration
487	from a Florida K-12 school and must have a parent or legal
488	guardian who meets the requirements of subparagraph (6)(b)1.
489	(c) The department may suspend or revoke the registration
490	of a qualified patient or caregiver if the qualified patient or
491	caregiver:
492	1. Provides misleading, incorrect, false, or fraudulent
493	information to the department;
494	2. Obtains a supply of marijuana in an amount greater than
495	the amount authorized by the physician certification;
496	3. Falsifies, alters, or otherwise modifies an
497	identification card;
498	4. Fails to timely notify the department of any changes to
499	his or her qualified patient status; or
500	5. Violates the requirements of this section or any rule

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adopted under this section.

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502	(d) The department shall immediately suspend the
503	registration of a qualified patient charged with a violation of
504	chapter 893 until final disposition of any alleged offense.
505	Thereafter, the department may extend the suspension, revoke the
506	registration, or reinstate the registration.
507	(e) The department shall immediately suspend the
508	registration of any caregiver charged with a violation of
509	chapter 893 until final disposition of any alleged offense. The
510	department shall revoke a caregiver registration if the

caregiver does not meet the requirements of subparagraph

- (f) The department may revoke the registration of a qualified patient or caregiver who cultivates marijuana or who acquires, possesses, or delivers marijuana from any person or entity other than a medical marijuana treatment center.
- (g) The department shall revoke the registration of a qualified patient, and the patient's associated caregiver, upon notification that the patient no longer meets the criteria of a qualified patient.
- (h) The department may adopt rules pursuant to ss. 120.536(1) and 120.54 to implement this subsection.
  - (6) CAREGIVERS.—
- (a) The department must register an individual as a caregiver on the medical marijuana use registry and issue a

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patient;

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526	caregiver identification card if an individual designated by a
527	qualified patient meets all of the requirements of this
528	subsection and department rule.
529	(b) A caregiver must:
530	1. Not be a qualified physician and not be employed by or
531	have an economic interest in a medical marijuana treatment
532	center or a marijuana testing laboratory.
533	2. Be 21 years of age or older and a resident of this
534	state.
535	3. Agree in writing to assist with the qualified patient's
536	medical use of marijuana.
537	4. Be registered in the medical marijuana use registry as
538	a caregiver for no more than one qualified patient, except as
539	provided in this paragraph.
540	5. Successfully complete a caregiver certification course
541	and subsequent examination developed and administered by the
542	department or its designee, which must be renewed biennially.
543	6. Pass a background screening pursuant to subsection (9),
544	unless the patient is a close relative of the caregiver.
545	(c) A qualified patient may designate no more than one
546	caregiver to assist with the qualified patient's medical use of
547	marijuana, unless:
548	1. The qualified patient is a minor and the designated

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caregivers are parents or legal guardians of the qualified



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- 2. The qualified patient is an adult who has an intellectual or developmental disability that prevents the patient from being able to protect or care for himself or herself without assistance or supervision and the designated caregivers are the parents or legal guardians of the qualified patient; or
  - 3. The qualified patient is admitted to a hospice program.
- (d) A caregiver may be registered in the medical marijuana use registry as a designated caregiver for no more than one qualified patient, unless:
- 1. The caregiver is a parent or legal guardian of more than one minor who is a qualified patient;
- 2. The caregiver is a parent or legal guardian of more than one adult who is a qualified patient and who has an intellectual or developmental disability that prevents the patient from being able to protect or care for himself or herself without assistance or supervision; or
- 3. All qualified patients the caregiver has agreed to assist are admitted to a hospice program and have requested the assistance of that caregiver with the medical use of marijuana; the caregiver is an employee of the hospice; and the caregiver provides personal care or other services directly to clients of the hospice in the scope of that employment.
- (e) A caregiver may not receive compensation, other than actual expenses incurred, for any services provided to the

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576	qualified	patient.
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- (f) If a qualified patient is younger than 18 years of age, only a caregiver may purchase or administer marijuana for medical use by the qualified patient. The qualified patient may not purchase marijuana.
- (g) A caregiver must be in immediate possession of his or her medical marijuana use registry identification card at all times when in possession of marijuana or a marijuana delivery device and must present his or her medical marijuana use registry identification card upon the request of a law enforcement officer.
- (h) The department may adopt rules pursuant to ss. 120.536(1) and 120.54 to implement this subsection.
  - (7) IDENTIFICATION CARDS.-
- (a) The department shall issue medical marijuana use registry identification cards for qualified patients and caregivers who are residents of this state, which must be renewed annually. The identification cards must be resistant to counterfeiting and tampering and must include, at a minimum, the following:
- 1. The name, address, and date of birth of the qualified patient or caregiver.
- 2. A full-face, passport-type, color photograph of the qualified patient or caregiver taken within the 90 days immediately preceding registration.

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- 3. Identification as a qualified patient or a caregiver.
- 4. The unique numeric identifier used for the qualified patient in the medical marijuana use registry.
- 5. For a caregiver, the name and unique numeric identifier of the caregiver and the qualified patient or patients that the caregiver is assisting.
  - 6. The expiration date of the identification card.
- (b) The department must receive written consent from a qualified patient's parent or legal guardian before it may issue an identification card to a qualified patient who is a minor.
- (c) The department shall, by July 3, 2017, adopt rules pursuant to ss. 120.536(1) and 120.54 establishing procedures for the issuance, renewal, suspension, replacement, surrender, and revocation of medical marijuana use registry identification cards and shall begin issuing qualified patient identification cards by October 3, 2017.
- (d) Applications for identification cards must be submitted on a form prescribed by the department. The department may charge a reasonable fee associated with the issuance, replacement, and renewal of identification cards. The department may contract with a third-party vendor to issue identification cards. The vendor selected by the department must have experience performing similar functions for other state agencies.
  - (e) A qualified patient or caregiver must return his or

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- her identification card to the department within 5 business days
  after revocation.
  - (8) MEDICAL MARIJUANA TREATMENT CENTERS.-
  - (a) The department shall license medical marijuana treatment centers to ensure reasonable statewide accessibility and availability as necessary for qualified patients registered in the medical marijuana use registry and who are issued a physician certification under this section.
  - 1. The department shall license as a medical marijuana treatment center any entity that holds an active, unrestricted license to cultivate, process, transport, and dispense low-THC cannabis, medical cannabis, and cannabis delivery devices, under former s. 381.986, Florida Statutes 2016, before July 1, 2017, and which meets the requirements of this section. In addition to the authority granted under this section, these entities are authorized to dispense low-THC cannabis, medical cannabis, and cannabis delivery devices ordered pursuant to former s. 381.986, Florida Statutes 2016, which were entered into the compassionate use registry before July 1, 2017. The department may grant variances from the representations made in such an entity's original application for approval under former s. 381.986, Florida Statutes 2014, pursuant to paragraph (e).
  - 2. The department shall also license as a medical marijuana treatment center one applicant that is a recognized class member of Pigford v. Glickman, 185 F.R.D. 82 (D.D.C.

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- 1999), or In Re Black Farmers Litig., 856 F. Supp. 2d 1 (D.D.C. 2011); is a member of the Black Farmers and Agriculturalists

  Association-Florida Chapter; and meets the requirements of this section.
  - 3. The department shall also license as a medical marijuana treatment center any applicant that was denied a dispensing organization license by the department under former s. 381.986, Florida Statutes 2014, if the applicant is awarded a license pursuant to an administrative or legal challenge filed prior to January 1, 2017, and meets the requirements of this section.
  - 4. Upon the registration of 150,000 active qualified patients in the medical marijuana use registry, the department shall also license as a medical marijuana treatment center one applicant per region which was a qualified dispensing organization applicant under former s. 381.986, Florida Statutes 2014; was the next-highest scoring applicant after the applicant or applicants that were awarded a license for that region; was not a litigant in an administrative challenge on or after January 1, 2017; is not licensed in another region; and meets the requirements of this section.
  - 5. Upon the registration of 200,000 active qualified patients in the medical marijuana use registry, the department shall license five additional medical marijuana treatment centers that meet the requirements of this section. Thereafter,

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the department shall license three medical marijuana treatment centers upon the registration of each additional 100,000 active qualified patients in the medical marijuana use registry who meet the requirements of this section.

(b) An applicant for licensure as a medical marijuana

- treatment center shall apply to the department on a form prescribed by the department and adopted in rule. The department shall adopt rules pursuant to ss. 120.536(1) and 120.54 establishing a procedure for the issuance and biennial renewal of licenses, including initial application and biennial renewal fees sufficient to cover the costs of administering this licensure program. The department shall issue a license to an applicant if the applicant meets the requirements of this section and pays the initial application fee. The department shall renew the licensure of a medical marijuana treatment center biennially if the licensee meets the requirements of this section and pays the biennial renewal fee. An individual may not be an applicant, owner, officer, board member, or manager on more than one application for licensure as a medical marijuana treatment center. An individual or entity may not be awarded more than one license as a medical marijuana treatment center. An applicant for licensure as a medical marijuana treatment center must demonstrate:
- 1. The technical and technological ability to cultivate and produce marijuana, including, but not limited to, low-THC

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## 701 cannabis.

- 2. Possession of a valid certificate of registration issued by the Department of Agriculture and Consumer Services pursuant to s. 581.131 which is issued for the cultivation of more than 400,000 plants; operation by a nurseryman as defined in s. 581.011; operation as a registered nursery in this state for at least 5 continuous years; or operation as a commercial citrus grove as defined by the Department of Agriculture and Consumer Services or as a citrus processing plant registered under s. 601.40 and possession of a valid certificate of registration issued by the Department of Agriculture and Consumer Services pursuant to s. 581.131.
- 3. The ability to secure the premises, resources, and personnel necessary to operate as a medical marijuana treatment center.
- 4. The ability to maintain accountability of all raw materials, finished products, and any byproducts to prevent diversion or unlawful access to or possession of these substances.
- 5. An infrastructure reasonably located to dispense marijuana to registered qualified patients statewide or regionally as determined by the department.
- 6. The financial ability to maintain operations for the duration of the 2-year approval cycle, including the provision of certified financial statements to the department. Upon

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- approval, the applicant must post a \$5 million performance bond.

  However, a medical marijuana treatment center serving at least

  1,000 qualified patients is only required to maintain a \$2

  million performance bond.
  - 7. That all owners, officers, board members, and managers have passed a background screening pursuant to subsection (9).
  - 8. The employment of a medical director to supervise the activities of the medical marijuana treatment center.
  - (c) A medical marijuana treatment center may not make a wholesale purchase of marijuana from, or a distribution of marijuana to, another medical marijuana treatment center, unless the medical marijuana treatment center seeking to make a wholesale purchase of marijuana submits proof of harvest failure to the department.
  - (d) The department shall establish, maintain, and control a computer software tracking system that traces marijuana from seed to sale and allows real-time, 24-hour access by the department to data from all medical marijuana treatment centers and marijuana testing laboratories. The tracking system must allow for integration of other seed-to-sale systems and, at a minimum, include notification of when marijuana seeds are planted, when marijuana plants are harvested and destroyed, and when marijuana is transported, sold, stolen, diverted, or lost. Each medical marijuana treatment center shall use the seed-to-sale tracking system established by the department or integrate

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its own seed-to-sale tracking system with the seed-to-sale tracking system established by the department. Each medical marijuana treatment center may use its own seed-to-sale system until the department establishes a seed-to-sale tracking system. The department may contract with a vendor to establish the seed-to-sale tracking system. The vendor selected by the department may not have a contractual relationship with the department to perform any services pursuant to this section other than the seed-to-sale tracking system. The vendor may not have a direct or indirect financial interest in a medical marijuana treatment center or a marijuana testing laboratory.

(e) A licensed medical marijuana treatment center shall cultivate, process, transport, and dispense marijuana for medical use. A licensed medical marijuana treatment center must, at all times, maintain compliance with the criteria demonstrated and representations made in the initial application and the criteria established in this subsection. Upon request, the department may grant a medical marijuana treatment center a variance from the representations made in the initial application. Consideration of such a request shall be based upon the individual facts and circumstances surrounding the request. A variance may not be granted unless the requesting medical marijuana treatment center can demonstrate to the department that it has a proposed alternative to the specific representation made in its application which fulfills the same

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- or a similar purpose as the specific representation in a way
  that the department can reasonably determine will not be a lower
  standard than the specific representation in the application. A
  variance may not be granted from the requirements in
  subparagraph 1. and subparagraph (b)1.
- 1. A medical marijuana treatment center, and any individual or entity who directly or indirectly owns, controls, or holds with power to vote 25 percent or more of the voting shares of a medical marijuana treatment center, may not acquire direct or indirect ownership or control of any voting shares or other form of ownership of any other medical marijuana treatment center.
- 2. All employees of a medical marijuana treatment center must be 21 years of age or older and have passed a background screening pursuant to subsection (9).
- 3. Each medical marijuana treatment center must adopt and enforce policies and procedures to ensure employees and volunteers receive training on the legal requirements to dispense marijuana to qualified patients.
- 4. When growing marijuana, a medical marijuana treatment center:
- a. May use pesticides determined by the department, after consultation with the Department of Agriculture and Consumer Services, to be safely applied to plants intended for human consumption, but may not use pesticides designated as

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- restricted-use pesticides pursuant to s. 487.042.
  - b. Must grow marijuana within an enclosed structure and in a room separate from any other plant.
  - c. Must inspect seeds and growing plants for plant pests that endanger or threaten the horticultural and agricultural interests of the state in accordance with chapter 581 and any rules adopted thereunder.
  - <u>d. Must perform fumigation or treatment of plants, or remove and destroy infested or infected plants, in accordance</u> with chapter 581 and any rules adopted thereunder.
  - 5. Each medical marijuana treatment center must produce and make available for purchase at least one low-THC cannabis product.
  - edibles must hold a permit to operate as a food establishment pursuant to chapter 500, the Florida Food Safety Act, and must comply with all the requirements for food establishments pursuant to chapter 500 and any rules adopted thereunder.

    Edibles may not contain more than 200 milligrams of tetrahydrocannabinol and a single serving portion of an edible may not exceed 10 milligrams of tetrahydrocannabinol. Edibles may have a potency variance of no greater than 15 percent.

    Edibles may not be attractive to children; be manufactured in the shape of humans, cartoons, or animals; be manufactured in a form that bears any reasonable resemblance to products available

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for consumption as commercially available candy; or contain any color additives. To discourage consumption of edibles by children, the department shall determine by rule any shapes, forms, and ingredients allowed and prohibited for edibles.

Medical marijuana treatment centers may not begin processing or dispensing edibles until after the effective date of the rule.

The department shall also adopt sanitation rules providing the standards and requirements for the storage, display, or dispensing of edibles.

- 7. When processing marijuana, a medical marijuana treatment center must:
- <u>a. Process the marijuana within an enclosed structure and</u> <u>in a room separate from other plants or products.</u>
- b. Not use a hydrocarbon based solvent, such as butane, hexane, or propane, to extract or separate resin from marijuana.
- c. Test the processed marijuana using a medical marijuana testing laboratory before it is dispensed. Results must be verified and signed by two medical marijuana treatment center employees. Before dispensing, the medical marijuana treatment center must determine that the test results indicate that low-THC cannabis meets the definition of low-THC cannabis, the concentration of tetrahydrocannabinol meets the potency requirements of this section, the labeling of the concentration of tetrahydrocannabinol and cannabidiol is accurate, and all marijuana is safe for human consumption and free from

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contaminants that are unsafe for human consumption. The		
Department of Health shall determine by rule which contaminants		
must be tested for and the maximum levels of each contaminant		
which are safe for human consumption. The Department of		
Agriculture and Consumer Services shall assist the department in		
developing the testing requirements for contaminants that are		
unsafe for human consumption in edibles. The department shall		
also determine by rule the procedures for the treatment of		
marijuana that fails to meet the testing requirements of this		
section, s. 381.988, or department rule. The department may		
select a random sample from edibles available for purchase in a		
dispensing facility that shall be tested by the department to		
determine that the edible meets the potency requirements of this		
section, is safe for human consumption, and the labeling of the		
tetrahydrocannabinol and cannabidiol concentration is accurate.		
A medical marijuana treatment center may not require payment		
from the department for the sample. A medical marijuana		
treatment center must recall edibles, including all edibles made		
from the same batch of marijuana, which fail to meet the potency		
requirements of this section, which are unsafe for human		
consumption, or for which the labeling of the		
tetrahydrocannabinol and cannabidiol concentration is		
inaccurate. The Department of Health shall determine by rule		
which contaminants must be tested for and the maximum levels of		
each contaminant which are safe for human consumption. The		

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Department of Agriculture and Consumer Services shall assist the		
department in developing the testing requirements for		
contaminants that are unsafe for human consumption in edibles.		
The department shall also determine by rule the procedures for		
the treatment of marijuana that fails to meet the testing		
requirements of this section, s. 381.988, or department rule.		
The department may select a random sample from edibles available		
for purchase in a dispensing facility that shall be tested by		
the department to determine that the edible meets the potency		
requirements of this section, is safe for human consumption, and		
the labeling of the tetrahydrocannabinol and cannabidiol		
concentration is accurate. A medical marijuana treatment center		
may not require payment from the department for the sample. $\mathtt{A}$		
medical marijuana treatment center must recall all edibles,		
including all edibles made from the same batch of marijuana,		
which fail to meet the potency requirements of this section,		
which are unsafe for human consumption, or for which the		
labeling of the tetrahydrocannabinol and cannabidiol		
concentration is inaccurate. The medical marijuana treatment		
center must retain records of all testing and samples of each		
homogenous batch of marijuana for at least 9 months. The medical		
marijuana treatment center must contract with a marijuana		
testing laboratory to perform audits on the medical marijuana		
treatment center's standard operating procedures, testing		
records, and samples and provide the results to the department		

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to confirm that the marijuana or low-THC cannabis-meets the			
requirements of this section and that the marijuana or low-THC			
cannabis is safe for human consumption. A medical marijuana			
treatment center shall reserve two processed samples from each			
batch and retain such samples for at least 9 months for the			
purpose such audits. A medical marijuana treatment center may			
use a laboratory that has not been certified by the department			
under s. 381.988 until such time as at least one laboratory			
holds the required certification, but in no event later than			
July 1, 2018.			
d. Package the marijuana in compliance with the United			
States Poison Prevention Packaging Act of 1970, 15 U.S.C. ss.			
<u>1471 et seq.</u>			
e. Package the marijuana in a receptacle that has a firmly			
affixed and legible label stating the following information:			
(I) The marijuana or low-THC cannabis meets the			
requirements of sub-subparagraph c.			
(II) The name of the medical marijuana treatment center			
from which the marijuana originates.			
(III) The batch number and harvest number from which the			
marijuana originates and the date dispensed.			
marijuana originates and the date dispensed.  (IV) The name of the physician who issued the physician			

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The product name, if applicable, and dosage form,



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926 including concentration of tetrahydrocannabinol and cannabidiol. 927 The product name may not contain wording commonly associated 928 with products marketed by or to children. 929 (VII) The recommended dose. 930 (VIII) A warning that it is illegal to transfer medical 931 marijuana to another person. 932 (IX) A marijuana universal symbol developed by the 933 department. 934 The medical marijuana treatment center shall include in 935 each package a patient package insert with information on the 936 specific product dispensed related to: 937 a. Clinical pharmacology. 938 b. Indications and use. 939 c. Dosage and administration. 940 d. Dosage forms and strengths. 941 e. Contraindications. 942 f. Warnings and precautions. 943 g. Adverse reactions. 944 Each edible shall be individually sealed in plain, 945 opaque wrapping marked only with the marijuana universal symbol. 946 Where practical, each edible shall be marked with the marijuana 947 universal symbol. In addition to the packaging and labeling requirements in subparagraphs 7. and 8., edible receptacles must 948 949 be plain, opaque, and white without depictions of the product or 950 images other than the medical marijuana treatment center's

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- department-approved logo and the marijuana universal symbol. The receptacle must also include a list all of the edible's ingredients, storage instructions, an expiration date, a legible and prominent warning to keep away from children and pets, and a warning that the edible has not been produced or inspected pursuant to federal food safety laws.
- 10. When dispensing marijuana or a marijuana delivery device, a medical marijuana treatment center:
- a. May dispense any active, valid order for low-THC cannabis, medical cannabis and cannabis delivery devices issued pursuant to former s. 381.986, Florida Statutes 2016, which was been entered into the medical marijuana use registry before July 1, 2017.
- b. May not dispense more than a 70-day supply of marijuana to a qualified patient or caregiver.
- c. Must have the medical marijuana treatment center's employee who dispenses the marijuana or a marijuana delivery device enter into the medical marijuana use registry his or her name or unique employee identifier.
- d. Must verify that the qualified patient and the caregiver, if applicable, each has an active registration in the medical marijuana use registry and an active and valid medical marijuana use registry identification card, the amount and type of marijuana dispensed matches the physician's certification in the medical marijuana use registry for that qualified patient,

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- and the physician certification has not already been filled.
- e. May not dispense marijuana to a qualified patient who is younger than 18 years of age. If the qualified patient is younger than 18 years of age, marijuana may only be dispensed to the qualified patient's caregiver.
- f. May not dispense or sell any other type of cannabis, alcohol, or illicit drug-related product, including pipes, bongs, or wrapping papers, other than a marijuana delivery device required for the medical use of marijuana and which is specified in a physician certification.
- g. Must, upon dispensing the marijuana or marijuana delivery device, record in the registry the date, time, quantity, and form of marijuana dispensed; the type of marijuana delivery device dispensed; and the name and medical marijuana use registry identification number of the qualified patient or caregiver to whom the marijuana delivery device was dispensed.
- (f) To ensure the safety and security of premises where the cultivation, processing, storing, or dispensing of marijuana occurs, and to maintain adequate controls against the diversion, theft, and loss of marijuana or marijuana delivery devices, a medical marijuana treatment center shall:
- 1.a. Maintain a fully operational security alarm system
  that secures all entry points and perimeter windows and is
  equipped with motion detectors; pressure switches; and duress,
  panic, and hold-up alarms; and

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1001	b. Maintain a video surveillance system that records					
1002	continuously 24 hours a day and meets the following criteria:					
1003	(I) Cameras are fixed in a place that allows for the clear					
1004	identification of persons and activities in controlled areas of					
1005	the premises. Controlled areas include grow rooms, processing					
1006	rooms, storage rooms, disposal rooms or areas, and point-of-sale					
1007	rooms.					
1008	(II) Cameras are fixed in entrances and exits to the					
1009	premises, which shall record from both indoor and outdoor, or					
1010	ingress and egress, vantage points.					
1011	(III) Recorded images must clearly and accurately display					
1012	the time and date.					
1013	(IV) Retain video surveillance recordings for at least 45					
1014	days or longer upon the request of a law enforcement agency.					
1015	2. Ensure that the medical marijuana treatment center's					
1016	outdoor premises have sufficient lighting from dusk until dawn.					
1017	3. Not dispense from its premises marijuana or a marijuana					
1018	delivery device between the hours of 9 p.m. and 7 a.m., but may					
1019	perform all other operations and deliver marijuana to qualified					
1020	patients 24 hours a day.					
1021	4. Store marijuana in a secured, locked room or a vault.					
1022	5. Require at least two of its employees, or two employees					
1023	of a security agency with whom it contracts, to be on the					
1024	premises at all times.					
1025	6. Require each employee or contractor to wear a photo					

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1026	identification badge at all times while on the premises.
1027	7. Require each visitor to wear a visitor pass at all
1028	times while on the premises.
1029	8. Implement an alcohol and drug-free workplace policy.
1030	9. Report to local law enforcement within 24 hours after
1031	the treatment center is notified or becomes aware of the theft,
1032	diversion, or loss of marijuana.
1033	(g) If a medical marijuana treatment center uses a banking
1034	institution, the treatment center must maintain all accounts
1035	that are directly or indirectly associated with the business of
1036	the medical marijuana treatment center at a single bank.
1037	(h) To ensure the safe transport of marijuana and
1038	marijuana delivery devices to medical marijuana treatment
1039	centers, marijuana testing laboratories, or qualified patients,
1040	a medical marijuana treatment center must:
1041	1. Maintain a marijuana transportation manifest in any
1042	vehicle transporting marijuana. The marijuana transportation
1043	manifest must be generated from a medical marijuana treatment
1044	center's seed-to-sale tracking system and include the:
1045	a. Departure date and approximate time of departure.
1046	b. Name, location address, and license number of the
1047	originating medical marijuana treatment center.
1048	c. Name and address of the recipient of the delivery.
1049	d. Quantity and form of any marijuana or marijuana

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delivery device being transported.

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1051 Arrival date and estimated time of arrival. 1052 Delivery vehicle make and model and license plate 1053 number. 1054 Name and signature of the medical marijuana treatment 1055 center employees delivering the product. 1056 (I) A copy of the marijuana transportation manifest must be provided to each individual, medical marijuana treatment 1057 1058 center, or marijuana testing laboratory that receives a 1059 delivery. The individual, or a representative of the center or 1060 laboratory, must sign a copy of the marijuana transportation manifest acknowledging receipt. 1061 1062 (II) An individual transporting marijuana or a marijuana 1063 delivery device must present a copy of the relevant marijuana 1064 transportation manifest and his or her employee identification 1065 card to a law enforcement officer upon request. 1066 (III) Medical marijuana treatment centers and marijuana 1067 testing laboratories must retain copies of all marijuana 1068 transportation manifests for at least 3 years. 1069 2. Ensure only vehicles in good working order are used to 1070 transport marijuana. 1071 3. Lock marijuana and marijuana delivery devices in a 1072 separate compartment or container within the vehicle. 1073 4. Require employees to have possession of their employee 1074 identification card at all times when transporting marijuana or

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marijuana delivery devices.

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- 5. Require at least two persons to be in a vehicle transporting marijuana or marijuana delivery devices, and require at least one person to remain in the vehicle while the marijuana or marijuana delivery device is being delivered.
- 6. Provide specific safety and security training to employees transporting or delivering marijuana and marijuana delivery devices.
- (i) A medical marijuana treatment center may not engage in advertising that is visible to members of the public from any street, sidewalk, park, or other public place, except:
- 1. The dispensing location of a medical marijuana treatment center may have a sign that is affixed to the outside or hanging in the window of the premises which identifies the dispensary by the licensee's business name, a department-approved trade name, or a department-approved logo. A medical marijuana treatment center's trade name and logo may not contain wording or images commonly associated with marketing targeted toward children or which promote recreational use of marijuana.
- 2. A medical marijuana treatment center may engage in Internet advertising and marketing under the following conditions:
  - a. All advertisements must be approved by the department.
- b. An advertisement may not have any content that specifically targets individuals under the age of 18, including cartoon characters or similar images.

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1101 An advertisement may not be an unsolicited pop-up 1102 advertisement. 1103 d. Opt-in marketing must include an easy and permanent 1104 opt-out feature. 1105 (j) Each medical marijuana treatment center that dispenses 1106 marijuana and marijuana delivery devices shall make available to 1107 the public on its website: 1108 1. Each marijuana and low-THC product available for purchase, including the form, strain of marijuana from which it 1109 1110 was extracted, cannabidiol content, tetrahydrocannabinol 1111 content, dose unit, total number of doses available, and the 1112 ratio of cannabidiol to tetrahydrocannabinol for each product. The price for a 30-day supply at a standard dose for 1113 1114 each marijuana and low-THC product available for purchase. 1115 The price for each marijuana delivery device available 1116 for purchase. 1117 4. If applicable, any discount policies and eligibility 1118 criteria for such discounts. 1119 (k) Medical marijuana treatment centers are the sole 1120 source from which a qualified patient may legally obtain 1121 marijuana. 1122 The department may adopt rules pursuant to ss. (1)1123 120.536(1) and 120.54 to implement this subsection. 1124 (9) BACKGROUND SCREENING. - An individual required to

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undergo a background screening by this section must pass a level

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- 2 background screening as provided under chapter 435, which, in addition to the disqualifying offenses provided in s. 435.04, shall exclude an individual who has an arrest awaiting final disposition for, has been found guilty of, regardless of adjudication, or has entered a plea of nolo contendere or guilty to an offense under chapter 837, chapter 895, or chapter 896 or similar law of another jurisdiction.

  (a) Such individual must submit a full set of fingerprints to the department or to a vendor, entity, or agency authorized
  - to the department or to a vendor, entity, or agency authorized by s. 943.053(13). The department, vendor, entity, or agency shall forward the fingerprints to the Department of Law Enforcement for state processing, and the Department of Law Enforcement shall forward the fingerprints to the Federal Bureau of Investigation for national processing.
  - (b) Fees for state and federal fingerprint processing and retention shall be borne by the individual. The state cost for fingerprint processing shall be as provided in s. 943.053(3)(e) for records provided to persons or entities other than those specified as exceptions therein.
  - (c) Fingerprints submitted to the Department of Law
    Enforcement pursuant to this subsection shall be retained by the
    Department of Law Enforcement as provided in s. 943.05(2)(g) and
    (h) and, when the Department of Law Enforcement begins
    participation in the program, enrolled in the Federal Bureau of
    Investigation's national retained print arrest notification

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- program. Any arrest record identified shall be reported to the department.
  - (10) MEDICAL MARIJUANA TREATMENT CENTER INSPECTIONS; ADMINISTRATIVE ACTIONS.—
  - (a) The department shall conduct announced or unannounced inspections of medical marijuana treatment centers to determine compliance with this section or rules adopted pursuant to this section.
  - (b) The department shall inspect a medical marijuana treatment center upon receiving a complaint or notice that the medical marijuana treatment center has dispensed marijuana containing mold, bacteria, or other contaminant that may cause or has caused an adverse effect to human health or the environment.
  - (c) The department shall conduct at least a biennial inspection of each medical marijuana treatment center to evaluate the medical marijuana treatment center's records, personnel, equipment, processes, security measures, sanitation practices, and quality assurance practices.
  - (d) The Department of Agriculture and Consumer Services and the department shall enter into an interagency agreement to ensure cooperation and coordination in the performance of their obligations under this section and their respective regulatory and authorizing laws. The department, the Department of Highway Safety and Motor Vehicles, and the Department of Law Enforcement

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1176	may enter into interagency agreements for the purposes specified
1177	in this subsection.
1178	(e) The department shall publish a list of all approved
1179	medical marijuana treatment centers, medical directors, and
1180	qualified physicians on its website.

- (f) The department may impose reasonable fines not to exceed \$10,000 on a medical marijuana treatment center for any of the following violations:
  - 1. Violating this section or department rule.
  - 2. Failing to maintain qualifications for approval.
- 3. Endangering the health, safety, or security of a qualified patient.
- 4. Improperly disclosing personal and confidential information of the qualified patient.
- 5. Attempting to procure medical marijuana treatment center approval by bribery, fraudulent misrepresentation, or extortion.
- 6. Being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which directly relates to the business of a medical marijuana treatment center.
- 7. Making or filing a report or record that the medical marijuana treatment center knows to be false.
- 1199 <u>8. Willfully failing to maintain a record required by this</u>
  1200 <u>section or department rule.</u>

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- 9. Willfully impeding or obstructing an employee or agent
  of the department in the furtherance of his or her official
  duties.
  - 10. Engaging in fraud or deceit, negligence, incompetence, or misconduct in the business practices of a medical marijuana treatment center.
  - 11. Making misleading, deceptive, or fraudulent representations in or related to the business practices of a medical marijuana treatment center.
  - 12. Having a license or the authority to engage in any regulated profession, occupation, or business that is related to the business practices of a medical marijuana treatment center suspended, revoked, or otherwise acted against by the licensing authority of any jurisdiction, including its agencies or subdivisions, for a violation that would constitute a violation under Florida law.
  - 13. Violating a lawful order of the department or an agency of the state, or failing to comply with a lawfully issued subpoena of the department or an agency of the state.
  - (g) The department may suspend, revoke, or refuse to renew a medical marijuana treatment center license if the treatment center commits any of the violations in paragraph (f).
  - (h) The department may adopt rules pursuant to ss. 120.536(1) and 120.54 to implement this subsection.
    - (11) PREEMPTION.—Regulation of cultivation, processing,

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1226 and delivery of marijuana by medical marijuana treatment centers 1227 is preempted to the state except as provided in this subsection. 1228 A medical marijuana treatment center cultivating or 1229 processing facility may not be located within 500 feet of the 1230 real property that comprises a public or private elementary school, middle school, or secondary school. 1231 (b) A municipality may determine by ordinance the criteria 1232 1233 for the number and location of, and other permitting 1234 requirements that do not conflict with state law or department 1235 rule for, medical marijuana treatment center dispensing 1236 facilities located within the boundaries of the municipality. A 1237 county may determine by ordinance the criteria for the number and location of, and other permitting requirements that do not 1238 1239 conflict with state law or department rule for, all such 1240 dispensing facilities located within the unincorporated areas of 1241 that county. However, a medical marijuana treatment center 1242 dispensing facility may not be located within 500 feet of the 1243 real property that comprises a public or private elementary 1244 school, middle school, or secondary school unless the county or 1245 municipality approves the location through a formal proceeding 1246 open to the public at which the county or municipality 1247 determines that the location promotes the public health, safety, and general welfare of the community. A municipality or county 1248 1249 may not enact ordinances determining the location of dispensing 1250 facilities which are less restrictive thanin which the county or

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municipality determines that the location promotes the public health, safety, and general welfare of the community. A municipality or county may not enact ordinances determining the location of dispensing facilities which are less restrictive than its ordinances determining the location of entities licensed to sell alcoholic beverages that predominantly or wholly serve alcoholic beverages for on-site consumption, in which the serving of food, if any, is merely incidental to the consumption of alcoholic beverages. A dispensing facility location approved by a municipality or county pursuant to former s. 381.986(8)(b), Florida Statutes 2016, is not subject to the location requirements of this paragraph.

- (c) A municipality or county may not charge a medical marijuana treatment center a license or permit fee in an amount greater than the fee charged by such municipality or county to pharmacies.
- (d) This subsection does not prohibit any local jurisdiction from ensuring medical marijuana treatment center facilities comply with the Florida Building Code, the Florida Fire Prevention Code, or any local amendments to the Florida Building Code or the Florida Fire Prevention Code.
- (e) A municipality may determine by ordinance the location of medical marijuana treatment center cultivation and processing located within the boundaries of the municipality. A county may determine by ordinance the location of medical marijuana

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treatment center cultivation and processing located within the unincorporated areas of that county. A municipality or county may not prohibit the cultivation and processing of marijuana from occurring at the same location. A municipality or county may not enact an ordinance that has the effect of banning medical marijuana treatment center cultivation and processing from occurring within the municipality or county.

- (12) PENALTIES.-
- (a) A qualified physician commits a misdemeanor of the first degree, punishable as provided in s. 775.082 or s.

  775.083, if the qualified physician issues a physician certification for the medical use of marijuana for a patient without a reasonable belief that the patient is suffering from a qualifying medical condition.
- (b) A person who fraudulently represents that he or she has a qualifying medical condition to a qualified physician for the purpose of being issued a physician certification commits a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.
- (c) A qualified patient who uses marijuana, not including low-THC cannabis, or a caregiver who administers marijuana, not including low-THC cannabis, in plain view of or in a place open to the general public; in a school bus, a vehicle, an aircraft, or a boat; or on the grounds of a school except as provided in s. 1006.062, commits a misdemeanor of the first degree,

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this paragraph.

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1301 punishable as provided in s. 775.082 or s. 775.083. 1302 A qualified patient or caregiver who cultivates 1303 marijuana or who purchases or acquires marijuana from any person or entity other than a medical marijuana treatment center 1304 1305 violates s. 893.13 and is subject to the penalties provided 1306 therein. 1307 (e) 1. A qualified patient or caregiver in possession of 1308 marijuana or a marijuana delivery device who fails or refuses to 1309 present his or her marijuana use registry identification card 1310 upon the request of a law enforcement officer commits a 1311 misdemeanor of the second degree, punishable as provided in s. 1312 775.082 or s. 775.083, unless it can be determined through the 1313 medical marijuana use registry that the person is authorized to be in possession of that marijuana or marijuana delivery device. 1314 2. A person charged with a violation of this paragraph may 1315 1316 not be convicted if, prior to, before, or at the time of his or 1317 her court or hearing appearance, the person produces in court or 1318 to the clerk of the court in which the charge is pending a 1319 medical marijuana use registry identification card issued to him

(f) A caregiver who violates any of the applicable

or her which is valid at the time of his or her arrest. The

clerk of the court is authorized to dismiss such case at any

time before the defendant's appearance in court. The clerk of

the court may assess a fee of \$5 for dismissing the case under

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- provisions of this section or applicable department rules, for the first offense, commits a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083 and, for a second or subsequent offense, commits a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.
- (g) A qualified physician who issues a physician certification for marijuana or a marijuana delivery device and receives compensation from a medical marijuana treatment center related to the issuance of a physician certification for marijuana or a marijuana delivery device is subject to disciplinary action under the applicable practice act and s. 456.072(1)(n).
- (h) A person transporting marijuana or marijuana delivery devices on behalf of a medical marijuana treatment center or marijuana testing laboratory who fails or refuses to present a transportation manifest upon the request of a law enforcement officer commits a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083.
- (i) Persons and entities conducting activities authorized and governed by this section and s. 381.988 are subject to the provisions of ss. 456.053, 456.054, and 817.505, as applicable.
- (j) A person or entity that cultivates, processes, distributes, sells, or dispenses marijuana, as defined in s. 29(b)(4), Art. X of the State Constitution, and is not licensed as a medical marijuana treatment center violates s. 893.13 and

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is subject to the penalties provided therein.

## (13) UNLICENSED ACTIVITY.-

- (a) If the department has probable cause to believe that a person or entity that is not registered or licensed with the department has violated this section, s. 381.988, or any rule adopted pursuant to this section, the department may issue and deliver to such person or entity a notice to cease and desist from such violation. The department also may issue and deliver a notice to cease and desist to any person or entity who aids and abets such unlicensed activity. The issuance of a notice to cease and desist does not constitute agency action for which a hearing under s. 120.569 or s. 120.57 may be sought. For the purpose of enforcing a cease and desist order, the department may file a proceeding in the name of the state seeking issuance of an injunction or a writ of mandamus against any person or entity who violates any provisions of such order.
- (b) In addition to the remedies under paragraph (a), the department may impose by citation an administrative penalty not to exceed \$5,000 per incident. The citation shall be issued to the subject and shall contain the subject's name and any other information the department determines to be necessary to identify the subject, a brief factual statement, the sections of the law allegedly violated, and the penalty imposed. If the subject does not dispute the matter in the citation with the department within 30 days after the citation is served, the

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citation shall become a final order of the department. The department may adopt rules pursuant to ss. 120.536(1) and 120.54 to implement this section. Each day that the unlicensed activity continues after issuance of a notice to cease and desist constitutes a separate violation. The department shall be entitled to recover the costs of investigation and prosecution in addition to the fine levied pursuant to the citation. Service of a citation may be made by personal service or by mail to the subject at the subject's last known address or place of practice. If the department is required to seek enforcement of the cease and desist or agency order, it shall be entitled to collect attorney fees and costs.

(c) In addition to or in lieu of any other administrative

- remedy, the department may seek the imposition of a civil penalty through the circuit court for any violation for which the department may issue a notice to cease and desist. The civil penalty shall be no less than \$5,000 and no more than \$10,000 for each offense. The court may also award to the prevailing party court costs and reasonable attorney fees and, in the event the department prevails, may also award reasonable costs of investigation and prosecution.
- (d) In addition to the other remedies provided in this section, the department or any state attorney may bring an action for an injunction to restrain any unlicensed activity or to enjoin the future operation or maintenance of the unlicensed

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- activity or the performance of any service in violation of this section until compliance with this section and department rules has been demonstrated to the satisfaction of the department.
  - (e) The department must notify local law enforcement of such unlicensed activity for a determination of any criminal violation of chapter 893.
    - (14) EXCEPTIONS TO OTHER LAWS.-
- (a) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or any other provision of law, but subject to the requirements of this section, a qualified patient and the qualified patient's caregiver may purchase from a medical marijuana treatment center for the patient's medical use a marijuana delivery device and up to the amount of marijuana authorized in the physician certification, but may not possess more than a 70-day supply of marijuana at any given time and all marijuana purchased must remain in its original packaging.
- (b) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or any other provision of law, but subject to the requirements of this section, an approved medical marijuana treatment center and its owners, managers, and employees may manufacture, possess, sell, deliver, distribute, dispense, and lawfully dispose of marijuana or a marijuana delivery device as provided in this section, s. 381.988, and by department rule. For purposes of this subsection, the terms "manufacture," "possession," "deliver," "distribute," and "dispense" have the same meanings

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L426	as provided in s. 893.02.
L427	(c) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
L428	any other provision of law, but subject to the requirements of
L429	this section, a certified marijuana testing laboratory,
L430	including an employee of a certified marijuana testing
L431	laboratory acting within the scope of his or her employment, may
L432	acquire, possess, test, transport, and lawfully dispose of
L433	marijuana as provided in this section, in s. 381.988, and by
L434	department rule.
L435	(d) A licensed medical marijuana treatment center and its
L436	owners, managers, and employees are not subject to licensure or
L437	regulation under chapter 465 or chapter 499 for manufacturing,
L438	possessing, selling, delivering, distributing, dispensing, or
L439	lawfully disposing of marijuana or a marijuana delivery device,
L440	as provided in this section, s. 381.988, and by department rule.
L441	(e) This subsection does not exempt a person from
L442	prosecution for a criminal offense related to impairment or
L443	intoxication resulting from the medical use of marijuana or
L444	relieve a person from any requirement under law to submit to a
L445	breath, blood, urine, or other test to detect the presence of a
L446	controlled substance.
L447	(f) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
L448	any other provision of law, but subject to the requirements of
L449	this section and pursuant to policies and procedures established
L450	pursuant to s. 1006.62(8), school personnel may possess

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L451	marijuana that is obtained for medical use pursuant to this
L452	section by a student who is a qualified patient.
L453	(g) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
L454	any other provision of law, but subject to the requirements of
L455	this section, a research institute established by a public
L456	postsecondary educational institution, such as the H. Lee
L457	Moffitt Cancer Center and Research Institute established under
L458	s. 1004.43, or a state university that has achieved the
L459	preeminent state research university designation under s.
L460	1001.7065 may possess, test, transport, and lawfully dispose of
L461	marijuana for research purposes as provided by this section.
L462	(15) APPLICABILITY.—This section does not limit the
L463	ability of an employer to establish, continue, or enforce a
L464	drug-free workplace program or policy. This section does not
L465	require an employer to accommodate the medical use of marijuana
L466	in any workplace or any employee working while under the
L467	influence of marijuana. This section does not create a cause of
L468	action against an employer for wrongful discharge or
L469	discrimination.
L470	Section 3. Paragraph (uu) is added to subsection (1) of
L471	section 458.331, Florida Statutes, to read:
L472	458.331 Grounds for disciplinary action; action by the
L473	board and department
L474	(1) The following acts constitute grounds for denial of a
L475	license or disciplinary action, as specified in s. 456.072(2):

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1476	(uu) Issuing a physician certification, as defined in s.					
1477	381.986, in a manner out of compliance with the requirements of					
1478	that section and rules adopted thereunder.					
1479	Section 4. Paragraph (ww) is added to subsection (1) of					
1480	section 459.015, Florida Statutes, to read:					
1481	459.015 Grounds for disciplinary action; action by the					
1482	board and department					
1483	(1) The following acts constitute grounds for denial of a					
1484	license or disciplinary action, as specified in s. 456.072(2):					
1485	(ww) Issuing a physician certification, as defined in s.					
1486	381.986, in a manner not in compliance with the requirements of					
1487	that section and rules adopted thereunder.					
1488	Section 5. Section 381.988, Florida Statutes, is created					
1489	to read:					
1490	381.988 Medical marijuana testing laboratories; marijuana					
1491	tests conducted by a certified laboratory					
1492	(1) A person or entity seeking to be a certified marijuana					
1493	testing laboratory must:					
1494	(a) Not be owned or controlled by a medical marijuana					
1495	treatment center.					
1496	(b) Submit a completed application accompanied by an					
1497	application fee, as established by department rule.					
1498	(c) Submit proof of an accreditation or a certification					
1499	approved by the department issued by an accreditation or a					

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certification organization approved by the department. The

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- department shall adopt by rule a list of approved laboratory
  accreditations or certifications and accreditation or
  certification organizations.
  - (d) Require all owners and managers to submit to and pass a level 2 background screening pursuant to s. 435.04 and shall deny certification if the person or entity has been found guilty of, or has entered a plea of guilty or nolo contendere to, regardless of adjudication, any offense listed in chapter 837, chapter 895, or chapter 896 or similar law of another jurisdiction.
  - 1. Such owners and managers must submit a full set of fingerprints to the department or to a vendor, entity, or agency authorized by s. 943.053(13). The department, vendor, entity, or agency shall forward the fingerprints to the Department of Law Enforcement for state processing, and the Department of Law Enforcement shall forward the fingerprints to the Federal Bureau of Investigation for national processing.
  - 2. Fees for state and federal fingerprint processing and retention shall be borne by such owners or managers. The state cost for fingerprint processing shall be as provided in s.

    943.053(3)(e) for records provided to persons or entities other than those specified as exceptions therein.
  - 3. Fingerprints submitted to the Department of Law
    Enforcement pursuant to this paragraph shall be retained by the
    Department of Law Enforcement as provided in s. 943.05(2)(g) and

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1526	(h) and, when the Department of Law Enforcement begins
1527	participation in the program, enrolled in the Federal Bureau of
1528	Investigation's national retained print arrest notification
1529	program. Any arrest record identified shall be reported to the
1530	department.
1531	(e) Demonstrate to the department the capability of
1532	meeting the standards for certification required by this
1533	subsection, and the testing requirements of s. 381.986 and this
1534	section and rules adopted thereunder.
1535	(2) The department shall adopt rules pursuant to ss.
1536	120.536(1) and 120.54 establishing a procedure for initial
1537	certification and biennial renewal, including initial
1538	application and biennial renewal fees sufficient to cover the
1539	costs of administering this certification program. The
1540	department shall renew the certification biennially if the
1541	laboratory meets the requirements of this section and pays the
1542	biennial renewal fee.
1543	(3) The department shall adopt rules pursuant to ss.
1544	120.536(1) and 120.54 establishing the standards for
1545	certification of marijuana testing laboratories under this
1546	section. The Department of Agriculture and Consumer Services and
1547	the Department of Environmental Protection shall assist the
1548	department in developing the rule, which must include, but is
1549	<pre>not limited to:</pre>
1550	(a) Security standards.

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1551	(b) Minimum standards for personnel.						
1552	(c) Sample collection method and process standards.						
1553	(d) Proficiency testing for tetrahydrocannabinol potency,						
1554	concentration of cannabidiol, and contaminants unsafe for human						
1555	consumption, as determined by department rule.						
1556	(e) Reporting content, format, and frequency.						
1557	(f) Audits and onsite inspections.						
1558	(g) Quality assurance.						
1559	(h) Equipment and methodology.						
1560	(i) Chain of custody.						
1561	(j) Any other standard the department deems necessary to						
1562	ensure the health and safety of the public.						
1563	(4) A marijuana testing laboratory may acquire marijuana						
1564	only from a medical marijuana treatment center. A marijuana						
1565	testing laboratory is prohibited from selling, distributing, or						
1566	transferring marijuana received from a marijuana treatment						
1567	center, except that a marijuana testing laboratory may transfer						
1568	a sample to another marijuana testing laboratory in this state.						
1569	(5) A marijuana testing laboratory must properly dispose						
1570	of all samples it receives, unless transferred to another						
1571	marijuana testing laboratory, after all necessary tests have						
1572	been conducted and any required period of storage has elapsed,						
1573	as established by department rule.						
1574	(6) A marijuana testing laboratory shall use the computer						
1575	software tracking system selected by the department under s.						

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15/6	<u>381.986.</u>
1577	(7) The following acts constitute grounds for which
1578	disciplinary action specified in subsection (8) may be taken
1579	against a certified marijuana testing laboratory:
1580	(a) Permitting unauthorized persons to perform technical
1581	procedures or issue reports.
1582	(b) Demonstrating incompetence or making consistent errors
1583	in the performance of testing or erroneous reporting.
1584	(c) Performing a test and rendering a report thereon to a
1585	person or entity not authorized by law to receive such services.
1586	(d) Failing to file any report required under this section
1587	or s. 381.986 or the rules adopted thereunder.
1588	(e) Reporting a test result if the test was not performed.
1589	(f) Failing to correct deficiencies within the time
1590	required by the department.
1591	(g) Violating or aiding and abetting in the violation of
1592	any provision of s. 381.986 or this section or any rules adopted
1593	thereunder.
1594	(8) The department may refuse to issue or renew, or may
1595	suspend or revoke, the certification of a marijuana testing
1596	laboratory that is found to be in violation of this section or
1597	any rules adopted hereunder. The department may impose fines for
1598	violations of this section or rules adopted thereunder, based on
1599	a schedule adopted in rule. In determining the administrative
1600	action to be imposed for a violation, the department must

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1601	consider the following factors:					
1602	(a) The severity of the violation, including the					
1603	probability of death or serious harm to the health or safety of					
1604	any person that may result or has resulted; the severity or					
1605	potential harm; and the extent to which the provisions of s.					
1606	381.986 or this section were violated.					
1607	(b) The actions taken by the marijuana testing laboratory					
1608	to correct the violation or to remedy the complaint.					
1609	(c) Any previous violation by the marijuana testing					
1610	laboratory.					
1611	(d) The financial benefit to the marijuana testing					
1612	laboratory of committing or continuing the violation.					
1613	(9) The department may adopt rules pursuant to ss.					
1614	120.536(1) and 120.54 to implement this section.					
1615	Section 6. Section 381.989, Florida Statutes, is created					
1616	to read:					
1617	381.989 Public education campaigns					
1618	(1) DEFINITIONS.—As used in this section, the term:					
1619	(a) "Cannabis" has the same meaning as in s. 893.02.					
1620	(b) "Department" means the Department of Health.					
1621	(c) "Marijuana" has the same meaning as in s. 381.986.					
1622	(2) STATEWIDE CANNABIS AND MARIJUANA EDUCATION AND ILLICIT					
1623	USE PREVENTION CAMPAIGN					
1624	(a) The department shall implement a statewide cannabis					
1625	and marijuana education and illicit use prevention campaign to					

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1626	publicize	accurate	information	regarding:

- 1. The short-term and long-term health effects of cannabis and marijuana use, particularly on minors and young adults.
- 2. The legal requirements for licit use and possession of marijuana in this state.
- 3. Safe use of marijuana, including preventing access by persons other than qualified patients as defined in s. 381.986, particularly children.
- 4. Other cannabis-related and marijuana-related education determined by the department to be necessary to the public health and safety.
- (b) The department may use television messaging, radio broadcasts, print media, digital strategies, social media, and any other form of messaging deemed necessary and appropriate by the department to implement the campaign. The department may work with school districts, community organizations, and businesses and business organizations and other entities to provide training and programming.
- (c) The department may contract with one or more vendors to implement the campaign.
- (d) The department shall contract with an independent entity to conduct annual evaluations of the campaign. The evaluations shall assess the reach and impact of the campaign, success in educating the citizens of the state regarding the legal parameters for marijuana use, success in preventing

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illicit access by adults and youth, and success in preventing negative health impacts from the legalization of marijuana. The first year of the program, the evaluator shall conduct surveys to establish baseline data on youth and adult cannabis use, the attitudes of youth and the general public toward cannabis and marijuana, and any other data deemed necessary for long-term analysis. By January 31 of each year, the department shall submit to the Governor, the President of the Senate, and the Speaker of the House of Representatives the annual evaluation of the campaign.

- (3) STATEWIDE IMPAIRED DRIVING EDUCATION CAMPAIGN.-
- (a) The Department of Highway Safety and Motor Vehicles shall implement a statewide impaired driving education campaign to raise awareness and prevent marijuana-related and cannabis-related impaired driving and may contract with one or more vendors to implement the campaign. The Department of Highway Safety and Motor Vehicles may use television messaging, radio broadcasts, print media, digital strategies, social media, and any other form of messaging deemed necessary and appropriate by the department to implement the campaign.
- (b) At a minimum, the Department of Highway Safety and Motor Vehicles or a contracted vendor shall establish baseline data on the number of marijuana-related citations for driving under the influence, marijuana-related traffic arrests, marijuana-related traffic accidents, and marijuana-related

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traffic fatalities, and shall track these measures annually thereafter. The Department of Highway Safety and Motor Vehicles or a contracted vendor shall annually evaluate and compile a report on the efficacy of the campaign based on those measures and other measures established by the Department of Highway Safety and Motor Vehicles. By January 31 of each year, the Department of Highway Safety and Motor Vehicles shall submit the report on the evaluation of the campaign to the Governor, the President of the Senate, and the Speaker of the House of Representatives.

Section 7. Subsection (1) of section 385.211, Florida Statutes, is amended to read:

385.211 Refractory and intractable epilepsy treatment and research at recognized medical centers.—

(1) As used in this section, the term "low-THC cannabis" means "low-THC cannabis" as defined in s. 381.986 that is dispensed only from a dispensing organization as defined in former s. 381.986, Florida Statutes 2016, or a medical marijuana treatment center as defined in s. 381.986.

Section 8. Paragraphs (b) through (e) of subsection (2) of section 499.0295, Florida Statutes, are redesignated as paragraphs (a) through (d), respectively, and present paragraphs (a) and (c) of that subsection, and subsection (3) of that section are amended to read:

499.0295 Experimental treatments for terminal conditions.-

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1701	(2) As used in this section, the term:
1702	(a) "Dispensing organization" means an organization
1703	approved by the Department of Health under s. 381.986(5) to
1704	cultivate, process, transport, and dispense low-THC cannabis,
1705	medical cannabis, and cannabis delivery devices.
1706	(b) (c) "Investigational drug, biological product, or
1707	device" means:
1708	$rac{1\cdot}{\cdot}$ a drug, biological product, or device that has
1709	successfully completed phase 1 of a clinical trial but has not
1710	been approved for general use by the United States Food and Drug
1711	Administration and remains under investigation in a clinical
1712	trial approved by the United States Food and Drug
1713	Administration <del>; or</del>
1714	2. Medical cannabis that is manufactured and sold by a
1715	dispensing organization.
1716	(3) Upon the request of an eligible patient, a
1717	manufacturer may, or upon a physician's order pursuant to s.
1718	381.986, a dispensing organization may:
1719	(a) Make its investigational drug, biological product, or
1720	device available under this section.
1721	(b) Provide an investigational drug, biological product,
1722	or device, or cannabis delivery device as defined in s. 381.986
1723	to an eligible patient without receiving compensation.
1724	(c) Require an eligible patient to pay the costs of, or
1725	the costs associated with, the manufacture of the

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1726 investigational drug, biological product, or device, or cannabis 1727 delivery device as defined in s. 381.986. 1728 Section 9. Subsection (3) of section 893.02, Florida Statutes, is amended to read: 1729 1730 893.02 Definitions.—The following words and phrases as 1731 used in this chapter shall have the following meanings, unless 1732 the context otherwise requires: 1733 "Cannabis" means all parts of any plant of the genus 1734 Cannabis, whether growing or not; the seeds thereof; the resin 1735 extracted from any part of the plant; and every compound, 1736 manufacture, salt, derivative, mixture, or preparation of the 1737 plant or its seeds or resin. The term does not include "marijuana," "low-THC cannabis," as defined in s. 381.986, if 1738 1739 manufactured, possessed, sold, purchased, delivered, 1740 distributed, or dispensed, in conformance with s. 381.986. 1741 Section 10. Section 1004.4351, Florida Statutes, is created 1742 to read: 1743 1004.4351 Medical marijuana research and education.-1744 (1) SHORT TITLE.—This section shall be known and may be 1745 cited as the "Medical Marijuana Research and Education Act." 1746 (2) LEGISLATIVE FINDINGS.—The Legislature finds that: 1747 The present state of knowledge concerning the use of (a) 1748 marijuana to alleviate pain and treat illnesses is limited 1749 because permission to perform clinical studies on marijuana is

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difficult to obtain, with access to research-grade marijuana so

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1751	restricted that little or no unbiased studies have been
1752	performed.
1753	(b) Under the State Constitution, marijuana is available
1754	for the treatment of certain debilitating medical conditions.
1755	(c) Additional clinical studies are needed to ensure that
1756	the residents of this state obtain the correct dosing,
1757	formulation, route, modality, frequency, quantity, and quality
1758	of marijuana for specific illnesses.
1759	(d) An effective medical marijuana research and education
1760	program would mobilize the scientific, educational, and medical
1761	resources that presently exist in this state to determine the
1762	appropriate and best use of marijuana to treat illness.
1763	(3) DEFINITIONS.—As used in this section, the term:
1764	(a) "Board" means the Medical Marijuana Research and
1765	Education Board.
1766	(b) "Coalition" means the Coalition for Medical Marijuana
1767	Research and Education.
1768	(c) "Marijuana" has the same meaning as provided in s. 29,
1769	Art. X of the State Constitution.
1770	(4) COALITION FOR MEDICAL MARIJUANA RESEARCH AND
1771	EDUCATION.—
1772	(a) There is established within the H. Lee Moffitt Cancer
1773	Center and Research Institute, Inc., the Coalition for Medical
1774	Marijuana Research and Education. The purpose of the coalition

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is to conduct rigorous scientific research, provide education,



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disseminate research, and guide policy for the adoption of a 1777 statewide policy on ordering and dosing practices for the 1778 medical use of marijuana. The coalition shall be physically 1779 located at the H. Lee Moffitt Cancer Center and Research 1780 Institute, Inc. 1781 The Medical Marijuana Research and Education Board is (b) 1782 established to direct the operations of the coalition. The board 1783 shall be composed of seven members appointed by the chief 1784 executive officer of the H. Lee Moffitt Cancer Center and Research Institute, Inc. Board members must have experience in a 1785 variety of scientific and medical fields, including, but not 1786 1787 limited to, oncology, neurology, psychology, pediatrics, 1788 nutrition, and addiction. Members shall be appointed to 4-year 1789 terms and may be reappointed to serve additional terms. The 1790 chair shall be elected by the board from among its members to 1791 serve a 2-year term. The board shall meet no less than 1792 semiannually at the call of the chair or, in his or her absence 1793 or incapacity, the vice chair. Four members constitute a quorum. 1794 A majority vote of the members present is required for all 1795 actions of the board. The board may prescribe, amend, and repeal 1796 a charter governing the manner in which it conducts its 1797 business. A board member shall serve without compensation but is 1798 entitled to be reimbursed for travel expenses by the coalition 1799 or the organization he or she represents in accordance with s. 1800 112.061.

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1801	(c) The coalition shall be administered by a coalition
1802	director, who shall be appointed by and serve at the pleasure of
1803	the board. The coalition director shall, subject to the approval
1804	of the board:
1805	1. Propose a budget for the coalition.
1806	2. Foster the collaboration of scientists, researchers,
1807	and other appropriate personnel in accordance with the
1808	coalition's charter.
1809	3. Identify and prioritize the research to be conducted by
1810	the coalition.
1811	4. Prepare the Medical Marijuana Research and Education
1812	Plan for submission to the board.
1813	5. Apply for grants to obtain funding for research
1814	conducted by the coalition.
1815	6. Perform other duties as determined by the board.
1816	(d) The board shall advise the Board of Governors, the
1817	State Surgeon General, the Governor, and the Legislature with
1818	respect to medical marijuana research and education in this
1819	state. The board shall explore methods of implementing and
1820	enforcing medical marijuana laws in relation to cancer control,
1 2 2 1	research treatment and education

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marijuana research, known as the "Medical Marijuana Research and

Education Plan," which must be in accordance with state law and

coordinate with existing programs in this state. The plan must

The board shall annually adopt a plan for medical

CODING: Words stricken are deletions; words underlined are additions.

(e)

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research.-

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1826 include recommendations for the coordination and integration of 1827 medical, nursing, paramedical, community, and other resources 1828 connected with the treatment of debilitating medical conditions; 1829 research related to the treatment of such medical conditions; 1830 and education. 1831 (f) By February 15 of each year, the board shall issue a 1832 report to the Governor, the President of the Senate, and the 1833 Speaker of the House of Representatives on research projects, 1834 community outreach initiatives, and future plans for the 1835 coalition. (g) Beginning January 15, 2018, and quarterly thereafter, 1836 1837 the Department of Health shall submit to the board a data set that includes, for each patient registered in the medical 1838 1839 marijuana use registry, the patient's qualifying medical condition and the daily dose amount and forms of marijuana 1840 1841 certified for the patient. 1842 (5) RESPONSIBILITIES OF THE H. LEE MOFFITT CANCER CENTER 1843 AND RESEARCH INSTITUTE, INC.—The H. Lee Moffitt Cancer Center 1844 and Research Institute, Inc., shall allocate staff and provide 1845 information and assistance, as the coalition's budget permits, 1846 to assist the board in fulfilling its responsibilities. 1847 Section 11. Subsection (1) of section 1004.441, Florida 1848 Statutes, is amended to read:

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1004.441 Refractory and intractable epilepsy treatment and



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- (1) As used in this section, the term "low-THC cannabis" means "low-THC cannabis" as defined in s. 381.986 that is dispensed only from a dispensing organization as defined in former s. 381.986, Florida Statutes 2016, or a medical marijuana treatment center as defined in s. 381.986.

  Section 12. Subsection (8) is added to section 1006.062,
- Florida Statutes, to read:
- 1006.062 Administration of medication and provision of medical services by district school board personnel.—
- (8) Each district school board shall adopt a policy and a procedure for allowing a student who is a qualified patient, as defined in s. 381.986, to use marijuana obtained pursuant to that section. Such policy and procedure shall ensure access by the qualified patient; identify how the marijuana will be received, accounted for, and stored; and establish processes to prevent access by other students and school personnel unnecessary to the implementation of the policy.
- Section 13. Department of Health; authority to adopt rules; cause of action.—
  - (1) EMERGENCY RULEMAKING.—
- (a) The Department of Health and the applicable boards shall adopt emergency rules pursuant to s. 120.54(4), Florida Statutes, and this section necessary to implement ss. 381.986 and 381.988, Florida Statutes. If an emergency rule adopted under this section is held to be unconstitutional or an invalid

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exercise of delegated legislative authority, and becomes void, the department or the applicable boards may adopt an emergency rule pursuant to this section to replace the rule that has become void. If the emergency rule adopted to replace the void emergency rule is also held to be unconstitutional or an invalid exercise of delegated legislative authority and becomes void, the department and the applicable boards must follow the nonemergency rulemaking procedures of the Administrative Procedures Act to replace the rule that has become void. For emergency rules adopted under this section, the department and the applicable boards need not make the findings required by s. 120.54(4)(a), Florida Statutes. Emergency rules adopted under this section are exempt from ss. 120.54(3)(b) and 120.541, Florida Statutes. The department and the applicable boards shall meet the procedural requirements in s. 120.54(a), Florida Statutes, if the department or the applicable boards have, prior to the effective date of this act, held any public workshops or hearings on the subject matter of the emergency rules adopted under this subsection. Challenges to emergency rules adopted under this subsection shall be subject to the time schedules provided in s. 120.56(5), Florida Statutes. Emergency rules adopted under this section are exempt from s. 120.54(4)(c), Florida Statutes, and shall remain in effect until replaced by rules adopted under the nonemergency

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rulemaking procedures of the Administrative Procedures Act. By



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- January 1, 2018, the department and the applicable boards shall initiate nonemergency rulemaking pursuant to the Administrative Procedures Act to replace all emergency rules adopted under this section by publishing a notice of rule development in the Florida Administrative Register. Except as provided in paragraph (a), after January 1, 2018, the department and applicable boards may not adopt rules pursuant to the emergency rulemaking procedures provided in this section.
  - (2) CAUSE OF ACTION.—
- (a) As used in s. 29(d)(3), Art. X of the State Constitution, the term:
- 1. "Issue regulations" means the filing by the department of a rule or emergency rule for adoption with the Department of State.
- 2. "Judicial relief" means an action for declaratory judgment pursuant to chapter 86, Florida Statutes.
- (b) The venue for actions brought against the department pursuant to s. 29(d)(3), Art. X of the State Constitution shall be in the circuit court in and for Leon County.
- (c) If the department is not issuing patient and caregiver identification cards or licensing medical marijuana treatment centers by October 3, 2017, the following shall be a defense to a cause of action brought under s. 29(d)(3), Art. X of the State Constitution:
  - 1. The department is unable to issue patient and caregiver

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L926	<u>identification cards or license medical marijuana treatment</u>
L927	centers due to litigation challenging a rule as an invalid
L928	exercise of delegated legislative authority or unconstitutional.
L929	2. The department is unable to issue patient or caregiver
L930	identification cards or license medical marijuana treatment
L931	centers due to a rule being held as an invalid exercise of
L932	delegated legislative authority or unconstitutional.
L933	Section 14. Department of Law Enforcement; training
L934	related to medical use of marijuanaThe Department of Law
L935	Enforcement shall develop a 4-hour online initial training
L936	course, and a 2-hour online continuing education course, which
L937	shall be made available for use by all law enforcement agencies
L938	in this state. Such training shall cover the legal parameters of
L939	marijuana-related activities governed by ss. 381.986 and
L940	381.988, Florida Statutes, relating to criminal laws governing
L941	marijuana.
L942	Section 15. Section 385.212, Florida Statutes, is amended
L943	to read:
L944	385.212 Powers and duties of the Department of Health;
L945	Office of Medical Marijuana Compassionate Use.—
L946	(1) The Department of Health shall establish an Office of
L947	Medical Marijuana Compassionate Use under the direction of the
L948	Deputy State Health Officer.
L949	(2) The Office of <u>Medical Marijuana</u> <del>Compassionate</del> Use may
L950	enhance access to investigational new drugs for Florida patients

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- through approved clinical treatment plans or studies. The Office of Medical Marijuana Compassionate Use may:
  - (a) Create a network of state universities and medical centers recognized pursuant to s. 381.925.
  - (b) Make any necessary application to the United States Food and Drug Administration or a pharmaceutical manufacturer to facilitate enhanced access to <a href="mailto:medical">medical</a> compassionate use <a href="mailto:of">of</a> marijuana for Florida patients.
  - (c) Enter into any agreements necessary to facilitate enhanced access to  $\underline{\text{medical}}$   $\underline{\text{compassionate}}$  use  $\underline{\text{of marijuana}}$  for Florida patients.
  - (3) The department may adopt rules necessary to implement this section.
  - (4) The Office of Medical Marijuana Use shall administer and enforce the provisions of s. 381.986.
  - Section 16. (1) For the 2017-2018 fiscal year, 55 fulltime equivalent positions, with associated salary rate of
    2,198,860, are authorized and the sums of \$3.5 million in
    nonrecurring funds from the General Revenue Fund and \$4,055,292
    in recurring funds and \$1,238,148 in nonrecurring funds from the
    Grants and Donations Trust Fund are appropriated to the
    Department of Health for the purpose of implementing the
    requirements of this act. Of the funds appropriated, \$3,158,572
    in recurring funds and \$1,238,148 in nonrecurring funds from the
    Grants and Donations Trust Fund and 27 full-time equivalent

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positions shall be placed in reserve. The Department of Health is authorized to submit budget amendments requesting the release of funds being held in reserve pursuant to chapter 216, Florida Statutes contingent upon need and demonstration of fee collections to support the budget authority.

- (2) For the 2017-2018 fiscal year, the sum of \$10 million in nonrecurring funds from the General Revenue Fund is appropriated to the Department of Health to implement the statewide cannabis and marijuana education and illicit use prevention campaign established under s. 381.989, Florida Statutes.
- (3) For the 2017-2018 fiscal year, the sum of \$5 million in nonrecurring funds from the Highway Safety Operating Trust Fund are appropriated to the Department of Highway Safety and Motor Vehicles to implement the statewide impaired driving education campaign established under s. 381.989, Florida Statutes.
- (4) For the 2017-2018 fiscal year, the sum of \$100,000 in recurring funds from the Highway Safety Operating Trust Fund is appropriated to the Department of Highway Safety and Motor Vehicles for the purpose of training additional law enforcement officers as drug recognition experts.
- Section 17. This act shall take effect upon becoming a law.

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