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LEGISLATIVE ACTION

Senate

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House

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Floor: 3/RE/2R

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05/04/2017 09:24 PM

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Senator Bradley moved the following:

1 **Senate Substitute for Amendment (467840) (with title**
2 **amendment)**

3
4 Delete everything after the enacting clause
5 and insert:

6 Section 1. Section 381.986, Florida Statutes, is amended to
7 read:

8 (Substantial rewording of section. See
9 s. 381.986, F.S., for present text.)

10 381.986 Medical use of marijuana.—

11 (1) DEFINITIONS.—As used in this section, the term:



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12 (a) "Caregiver" means a resident of this state who has
13 agreed to assist with a qualified patient's medical use of
14 marijuana, has a caregiver identification card, and meets the
15 requirements of subsection (6).

16 (b) "Chronic nonmalignant pain" means pain that is caused
17 by a qualifying medical condition or that originates from a
18 qualifying medical condition and persists beyond the usual
19 course of that qualifying medical condition.

20 (c) "Close relative" means a spouse, parent, sibling,
21 grandparent, child, or grandchild, whether related by whole or
22 half blood, by marriage, or by adoption.

23 (d) "Edibles" means commercially produced food items made
24 with marijuana oil, but no other form of marijuana, which are
25 produced and dispensed by a medical marijuana treatment center.

26 (e) "Low-THC cannabis" means a plant of the genus *Cannabis*,
27 the dried flowers of which contain 0.8 percent or less of
28 tetrahydrocannabinol and more than 10 percent of cannabidiol
29 weight for weight; the seeds thereof; the resin extracted from
30 any part of such plant; or any compound, manufacture, salt,
31 derivative, mixture, or preparation of the plant or its seeds or
32 resin which is dispensed from a medical marijuana treatment
33 center.

34 (f) "Marijuana" means all parts of any plant of the genus
35 *Cannabis*, whether growing or not; the seeds thereof; the resin
36 extracted from any part of the plant; or any compound,
37 manufacture, salt, derivative, mixture, or preparation of the
38 plant or its seeds or resin, including low-THC cannabis, which
39 is dispensed from a medical marijuana treatment center for
40 medical use by a qualified patient.



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41 (g) "Marijuana delivery device" means an object that is
42 used, intended for use, or designed for use in preparing,
43 storing, ingesting, inhaling, or otherwise introducing marijuana
44 into the human body and that is dispensed from a medical
45 marijuana treatment center for medical use by a qualified
46 patient.

47 (h) "Marijuana testing laboratory" means a facility that
48 collects and analyzes marijuana samples from a medical marijuana
49 treatment center and has been certified by the department
50 pursuant to s. 381.988.

51 (i) "Medical director" means a person who holds an active,
52 unrestricted license as an allopathic physician under chapter
53 458 or osteopathic physician under chapter 459 and is in
54 compliance with the requirements of paragraph (3)(c).

55 (j) "Medical use" means the acquisition, possession, use,
56 delivery, transfer, or administration of marijuana authorized by
57 a physician certification. The term does not include:

58 1. Possession, use, or administration of marijuana that was
59 not purchased or acquired from a medical marijuana treatment
60 center.

61 2. Possession, use, or administration of marijuana in a
62 form for smoking, in the form of commercially produced food
63 items other than edibles, or of marijuana seeds or flower,
64 except for flower in a sealed receptacle for vaping.

65 3. Use or administration of any form or amount of marijuana
66 in a manner that is inconsistent with the qualified physician's
67 directions or physician certification.

68 4. Transfer of marijuana to a person other than the
69 qualified patient for whom it was authorized or the qualified



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70 patient's caregiver on behalf of the qualified patient.
71 5. Use or administration of marijuana in the following
72 locations:
73 a. On any form of public transportation, except for low-THC
74 cannabis.
75 b. In any public place, except for low-THC cannabis.
76 c. In a qualified patient's place of employment, except
77 when permitted by his or her employer.
78 d. In a state correctional institution, as defined in s.
79 944.02, or a correctional institution, as defined in s. 944.241.
80 e. On the grounds of a preschool, primary school, or
81 secondary school, except as provided in s. 1006.062.
82 f. In a school bus, a vehicle, an aircraft, or a motorboat,
83 except for low-THC cannabis.
84 (k) "Physician certification" means a qualified physician's
85 authorization for a qualified patient to receive marijuana and a
86 marijuana delivery device from a medical marijuana treatment
87 center.
88 (l) "Qualified patient" means a resident of this state who
89 has been added to the medical marijuana use registry by a
90 qualified physician to receive marijuana or a marijuana delivery
91 device for medical use and who has a qualified patient
92 identification card.
93 (m) "Qualified physician" means a person who holds an
94 active, unrestricted license as an allopathic physician under
95 chapter 458 or as an osteopathic physician under chapter 459 and
96 is in compliance with the physician education requirements of
97 subsection (3).
98 (n) "Smoking" means burning or igniting a substance and



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99 inhaling the smoke.

100 (o) "Terminal condition" means a progressive disease or
101 medical or surgical condition that causes significant functional
102 impairment, is not considered by a treating physician to be
103 reversible without the administration of life-sustaining
104 procedures, and will result in death within 1 year after
105 diagnosis if the condition runs its normal course.

106 (2) QUALIFYING MEDICAL CONDITIONS.—A patient must be
107 diagnosed with at least one of the following conditions to
108 qualify to receive marijuana or a marijuana delivery device:

109 (a) Cancer.

110 (b) Epilepsy.

111 (c) Glaucoma.

112 (d) Positive status for human immunodeficiency virus.

113 (e) Acquired immune deficiency syndrome.

114 (f) Post-traumatic stress disorder.

115 (g) Amyotrophic lateral sclerosis.

116 (h) Crohn's disease.

117 (i) Parkinson's disease.

118 (j) Multiple sclerosis.

119 (k) A medical condition of the same kind or class as or
120 comparable to any of those enumerated in paragraphs (a)-(j).

121 (l) A terminal condition diagnosed by a physician other
122 than the qualified physician issuing the physician
123 certification.

124 (m) Chronic nonmalignant pain.

125 (3) QUALIFIED PHYSICIANS AND MEDICAL DIRECTORS.—

126 (a) To be approved as a qualified physician, a physician
127 must successfully complete a 2-hour course and subsequent



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128 examination offered by the Florida Medical Association or the
129 Florida Osteopathic Medical Association which encompass the
130 requirements of this section and any rules adopted under this
131 section. The course and examination shall be administered at
132 least annually and may be offered in a distance learning format,
133 including an electronic, online format that is available upon
134 request. The price of the course may not exceed \$500. A
135 physician who has met the physician education requirements of
136 former s. 381.986(4), Florida Statutes 2016, before the
137 effective date of this section shall be deemed to be in
138 compliance with this paragraph from the effective date of this
139 act until 90 days after the course and examination required by
140 this paragraph become available.

141 (b) A qualified physician may not be employed by, or have
142 any direct or indirect economic interest in, a medical marijuana
143 treatment center or marijuana testing laboratory.

144 (c) A medical director must successfully complete a 2-hour
145 course and subsequent examination offered by the Florida Medical
146 Association or the Florida Osteopathic Medical Association which
147 encompass the requirements of this section and any rules adopted
148 under this section. The course and examination shall be
149 administered at least annually and may be offered in a distance
150 learning format, including an electronic, online format that is
151 available upon request. The price of the course may not exceed
152 \$500.

153 (4) PHYSICIAN CERTIFICATION.—

154 (a) A qualified physician may issue a physician
155 certification only if the qualified physician:

156 1. Conducted a physical examination while physically



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157 present in the same room as the patient and a full assessment of
158 the medical history of the patient.

159 2. Diagnosed the patient with at least one qualifying
160 medical condition.

161 3. Determined that the medical use of marijuana would
162 likely outweigh the potential health risks for the patient, and
163 such determination must be documented in the patient's medical
164 record. If a patient is younger than 18 years of age, a second
165 physician must concur with this determination, and such
166 concurrence must be documented in the patient's medical record.

167 4. Determined whether the patient is pregnant and
168 documented such determination in the patient's medical record. A
169 physician may not issue a physician certification, except for
170 low-THC cannabis, to a patient who is pregnant.

171 5. Reviewed the patient's controlled drug prescription
172 history in the prescription drug monitoring program database
173 established pursuant to s. 893.055.

174 6. Reviewed the medical marijuana use registry and
175 confirmed that the patient does not have an active physician
176 certification from another qualified physician.

177 7. Registers as the issuer of the physician certification
178 for the named qualified patient on the medical marijuana use
179 registry in an electronic manner determined by the department,
180 and:

181 a. Enters into the registry the contents of the physician
182 certification, including the patient's qualifying condition and
183 the dosage not to exceed the daily dose amount determined by the
184 department, the amount and forms of marijuana authorized for the
185 patient, and any types of marijuana delivery devices needed by



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186 the patient for the medical use of marijuana;
187 b. Updates the registry within 7 days after any change is
188 made to the original physician certification to reflect such
189 change; and
190 c. Deactivates the registration of the qualified patient
191 and the patient's caregiver when the physician no longer
192 recommends the medical use of marijuana for the patient.
193 8. Obtains the voluntary and informed written consent of
194 the patient for medical use of marijuana each time the qualified
195 physician issues a physician certification for the patient,
196 which shall be maintained in the patient's medical record. The
197 patient, or the patient's parent or legal guardian if the
198 patient is a minor, must sign the informed consent acknowledging
199 that the qualified physician has sufficiently explained its
200 content. The qualified physician must use a standardized
201 informed consent form adopted in rule by the Board of Medicine
202 and the Board of Osteopathic Medicine, which must include, at a
203 minimum, information related to:
204 a. The Federal Government's classification of marijuana as
205 a Schedule I controlled substance.
206 b. The approval and oversight status of marijuana by the
207 Food and Drug Administration.
208 c. The current state of research on the efficacy of
209 marijuana to treat the qualifying conditions set forth in this
210 section.
211 d. The potential for addiction.
212 e. The potential effect that marijuana may have on a
213 patient's coordination, motor skills, and cognition, including a
214 warning against operating heavy machinery, operating a motor



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215 vehicle, or engaging in activities that require a person to be
216 alert or respond quickly.

217 f. The potential side effects of marijuana use.

218 g. The risks, benefits, and drug interactions of marijuana.

219 h. That the patient's de-identified health information
220 contained in the physician certification and medical marijuana
221 use registry may be used for research purposes.

222 (b) If a qualified physician issues a physician
223 certification for a qualified patient diagnosed with a
224 qualifying medical condition as described in paragraph (2)(k),
225 the physician must submit the following to the applicable board
226 within 14 days after issuing the physician certification:

227 1. Documentation supporting the qualified physician's
228 opinion that the medical condition is of the same kind or class
229 as the conditions in paragraphs (2)(a)-(j).

230 2. Documentation that establishes the efficacy of marijuana
231 as treatment for the condition.

232 3. Documentation supporting the qualified physician's
233 opinion that the benefits of medical use of marijuana would
234 likely outweigh the potential health risks for the patient.

235 4. Any other documentation as required by board rule.

236

237 The department must submit such documentation to the Coalition
238 for Medical Marijuana Research and Education established
239 pursuant to s. 1004.4351.

240 (c) A qualified physician may not issue a physician
241 certification for more than three 70-day supply limits of
242 marijuana. The department shall quantify by rule a daily dose
243 amount with equivalent dose amounts for each allowable form of



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244 marijuana dispensed by a medical marijuana treatment center. The
245 department shall use the daily dose amount to calculate a 70-day
246 supply.

247 1. A qualified physician may request an exception to the
248 daily dose amount limit. The request shall be made
249 electronically on a form adopted by the department in rule and
250 must include, at a minimum:

251 a. The qualified patient's qualifying medical condition.

252 b. The dosage and route of administration which were
253 insufficient to provide relief to the qualified patient.

254 c. A description of how the patient will benefit from an
255 increased amount.

256 d. The minimum daily dose amount of marijuana that would be
257 sufficient for the treatment of the qualified patient's
258 qualifying medical condition.

259 2. A qualified physician must provide the qualified
260 patient's records upon the request of the department.

261 3. The department shall approve or disapprove the request
262 within 14 days after receipt of the complete documentation
263 required by this paragraph. The request shall be deemed approved
264 if the department fails to act within this time period.

265 (d) A qualified physician must evaluate and recertify an
266 existing qualified patient at least once every 30 weeks prior to
267 issuing a new physician certification. A physician must:

268 1. Determine if the patient still meets the requirements of
269 a qualified patient under paragraph (a).

270 2. Identify and document in the qualified patient's medical
271 records whether the qualified patient experienced either of the
272 following related to the medical use of marijuana:



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273 a. An adverse drug interaction with any prescription or
274 nonprescription medication; or
275 b. A reduction in the use of opioid analgesics.
276 3. Submit a report with the findings required pursuant to
277 subparagraph 2. to the department. The department shall submit
278 such reports to the Coalition for Medical Marijuana Research and
279 Education established pursuant to s. 1004.4351.
280 (e) An active order for low-THC cannabis or medical
281 cannabis issued pursuant to former s. 381.986, Florida Statutes
282 2016, and registered with the compassionate use registry before
283 the effective date of this section, is deemed a physician
284 certification, and all patients possessing such orders are
285 deemed qualified patients until the department begins issuing
286 medical marijuana use registry identification cards.
287 (f) The department shall monitor physician registration in
288 the medical marijuana use registry and the issuance of physician
289 certifications for practices that could facilitate unlawful
290 diversion or misuse of marijuana or a marijuana delivery device
291 and shall take disciplinary action as appropriate.
292 (g) The Board of Medicine and the Board of Osteopathic
293 Medicine shall jointly create a physician certification pattern
294 review panel that shall review all physician certifications
295 submitted to the medical marijuana use registry. The panel shall
296 track and report the number of physician certifications and the
297 qualifying medical conditions, dosage, supply amount, and forms
298 of marijuana certified. The panel shall report the data both by
299 individual qualified physician and in the aggregate, by county,
300 and statewide. The physician certification pattern review panel
301 shall, beginning January 1, 2018, submit an annual report of its



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302 findings and recommendations to the Governor, the President of
303 the Senate, and the Speaker of the House of Representatives.

304 (h) The department, the Board of Medicine, and the Board of
305 Osteopathic Medicine may adopt rules pursuant to ss. 120.536(1)
306 and 120.54 to implement this subsection.

307 (5) MEDICAL MARIJUANA USE REGISTRY.—

308 (a) The department shall create and maintain a secure,
309 electronic, and online medical marijuana use registry for
310 physicians, patients, and caregivers as provided under this
311 section. The medical marijuana use registry must be accessible
312 to law enforcement agencies, qualified physicians, and medical
313 marijuana treatment centers to verify the authorization of a
314 qualified patient or a caregiver to possess marijuana or a
315 marijuana delivery device and record the marijuana or marijuana
316 delivery device dispensed. The medical marijuana use registry
317 must also be accessible to practitioners licensed to prescribe
318 prescription drugs to ensure proper care for patients before
319 medications that may interact with the medical use of marijuana
320 are prescribed. The medical marijuana use registry must prevent
321 an active registration of a qualified patient by multiple
322 physicians.

323 (b) The department shall determine whether an individual is
324 a resident of this state for the purpose of registration of
325 qualified patients and caregivers in the medical marijuana use
326 registry. To prove residency:

327 1. An adult resident must provide the department with a
328 copy of his or her valid Florida driver license issued under s.
329 322.18 or a copy of a valid Florida identification card issued
330 under s. 322.051.



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331 2. An adult seasonal resident who cannot meet the
332 requirements of subparagraph 1. may provide the department with
333 a copy of two of the following that show proof of residential
334 address:

335 a. A deed, mortgage, monthly mortgage statement, mortgage
336 payment booklet, or residential rental or lease agreement.

337 b. One proof of residential address from the seasonal
338 resident's parent, stepparent, legal guardian, or other person
339 with whom the seasonal resident resides and a statement from the
340 person with whom the seasonal resident resides stating that the
341 seasonal resident does reside with him or her.

342 c. A utility hook up or work order dated within 60 days
343 prior to registration in the medical use registry.

344 d. A utility bill, not more than 2 months old.

345 e. Mail from a financial institution, including checking,
346 savings, or investment account statements, not more than 2
347 months old.

348 f. Mail from a federal, state, county, or municipal
349 government agency, not more than 2 months old.

350 g. Any other documentation that provides proof of
351 residential address as determined by department rule.

352
353 As used in this subparagraph, the term "seasonal resident" means
354 any person who temporarily resides in this state for a period of
355 at least 31 consecutive days in each calendar year, maintains a
356 temporary residence in this state, returns to the state or
357 jurisdiction of his or her residence at least one time during
358 each calendar year, and is registered to vote or pays income tax
359 in another state or jurisdiction.



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360 3. A minor must provide the department with a certified
361 copy of a birth certificate or a current record of registration
362 from a Florida K-12 school and must have a parent or legal
363 guardian who meets the requirements of subparagraph 1.

364 (c) The department may suspend or revoke the registration
365 of a qualified patient or caregiver if the qualified patient or
366 caregiver:

367 1. Provides misleading, incorrect, false, or fraudulent
368 information to the department;

369 2. Obtains a supply of marijuana in an amount greater than
370 the amount authorized by the physician certification;

371 3. Falsifies, alters, or otherwise modifies an
372 identification card;

373 4. Fails to timely notify the department of any changes to
374 his or her qualified patient status; or

375 5. Violates the requirements of this section or any rule
376 adopted under this section.

377 (d) The department shall immediately suspend the
378 registration of a qualified patient charged with a violation of
379 chapter 893 until final disposition of any alleged offense.

380 Thereafter, the department may extend the suspension, revoke the
381 registration, or reinstate the registration.

382 (e) The department shall immediately suspend the
383 registration of any caregiver charged with a violation of
384 chapter 893 until final disposition of any alleged offense. The

385 department shall revoke a caregiver registration if the
386 caregiver does not meet the requirements of subparagraph

387 (6) (b) 6.

388 (f) The department may revoke the registration of a



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389 qualified patient or caregiver who cultivates marijuana or who
390 acquires, possesses, or delivers marijuana from any person or
391 entity other than a medical marijuana treatment center.

392 (g) The department shall revoke the registration of a
393 qualified patient, and the patient's associated caregiver, upon
394 notification that the patient no longer meets the criteria of a
395 qualified patient.

396 (h) The department may adopt rules pursuant to ss.
397 120.536(1) and 120.54 to implement this subsection.

398 (6) CAREGIVERS.—

399 (a) The department must register an individual as a
400 caregiver on the medical marijuana use registry and issue a
401 caregiver identification card if an individual designated by a
402 qualified patient meets all of the requirements of this
403 subsection and department rule.

404 (b) A caregiver must:

405 1. Not be a qualified physician and not be employed by or
406 have an economic interest in a medical marijuana treatment
407 center or a marijuana testing laboratory.

408 2. Be 21 years of age or older and a resident of this
409 state.

410 3. Agree in writing to assist with the qualified patient's
411 medical use of marijuana.

412 4. Be registered in the medical marijuana use registry as a
413 caregiver for no more than one qualified patient, except as
414 provided in this paragraph.

415 5. Successfully complete a caregiver certification course
416 developed and administered by the department or its designee,
417 which must be renewed biennially. The price of the course may



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418 not exceed \$100.

419 6. Pass a background screening pursuant to subsection (9),
420 unless the patient is a close relative of the caregiver.

421 (c) A qualified patient may designate no more than one
422 caregiver to assist with the qualified patient's medical use of
423 marijuana, unless:

424 1. The qualified patient is a minor and the designated
425 caregivers are parents or legal guardians of the qualified
426 patient;

427 2. The qualified patient is an adult who has an
428 intellectual or developmental disability that prevents the
429 patient from being able to protect or care for himself or
430 herself without assistance or supervision and the designated
431 caregivers are the parents or legal guardians of the qualified
432 patient; or

433 3. The qualified patient is admitted to a hospice program.

434 (d) A caregiver may be registered in the medical marijuana
435 use registry as a designated caregiver for no more than one
436 qualified patient, unless:

437 1. The caregiver is a parent or legal guardian of more than
438 one minor who is a qualified patient;

439 2. The caregiver is a parent or legal guardian of more than
440 one adult who is a qualified patient and who has an intellectual
441 or developmental disability that prevents the patient from being
442 able to protect or care for himself or herself without
443 assistance or supervision; or

444 3. All qualified patients the caregiver has agreed to
445 assist are admitted to a hospice program and have requested the
446 assistance of that caregiver with the medical use of marijuana;



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447 the caregiver is an employee of the hospice; and the caregiver
448 provides personal care or other services directly to clients of
449 the hospice in the scope of that employment.

450 (e) A caregiver may not receive compensation, other than
451 actual expenses incurred, for any services provided to the
452 qualified patient.

453 (f) If a qualified patient is younger than 18 years of age,
454 only a caregiver may purchase or administer marijuana for
455 medical use by the qualified patient. The qualified patient may
456 not purchase marijuana.

457 (g) A caregiver must be in immediate possession of his or
458 her medical marijuana use registry identification card at all
459 times when in possession of marijuana or a marijuana delivery
460 device and must present his or her medical marijuana use
461 registry identification card upon the request of a law
462 enforcement officer.

463 (h) The department may adopt rules pursuant to ss.
464 120.536(1) and 120.54 to implement this subsection.

465 (7) IDENTIFICATION CARDS.—

466 (a) The department shall issue medical marijuana use
467 registry identification cards for qualified patients and
468 caregivers who are residents of this state which must be renewed
469 annually. The identification cards must be resistant to
470 counterfeiting and tampering and must include, at a minimum, the
471 following:

472 1. The name, address, and date of birth of the qualified
473 patient or caregiver.

474 2. A full-face, passport-type, color photograph of the
475 qualified patient or caregiver taken within the 90 days



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476 immediately preceding registration or the Florida driver license
477 or Florida identification card photograph of the qualified
478 patient or caregiver obtained directly from the Department of
479 Highway Safety and Motor Vehicles.

480 3. Identification as a qualified patient or a caregiver.

481 4. The unique numeric identifier used for the qualified
482 patient in the medical marijuana use registry.

483 5. For a caregiver, the name and unique numeric identifier
484 of the caregiver and the qualified patient or patients that the
485 caregiver is assisting.

486 6. The expiration date of the identification card.

487 (b) The department must receive written consent from a
488 qualified patient's parent or legal guardian before it may issue
489 an identification card to a qualified patient who is a minor.

490 (c) The department shall, by July 3, 2017, adopt rules
491 pursuant to ss. 120.536(1) and 120.54 establishing procedures
492 for the issuance, renewal, suspension, replacement, surrender,
493 and revocation of medical marijuana use registry identification
494 cards and shall begin issuing qualified patient identification
495 cards by October 3, 2017.

496 (d) Applications for identification cards must be submitted
497 on a form prescribed by the department. The department may
498 charge a reasonable fee associated with the issuance,
499 replacement, and renewal of identification cards. The department
500 may contract with a third-party vendor to issue identification
501 cards. The vendor selected by the department must have
502 experience performing similar functions for other state
503 agencies.

504 (e) A qualified patient or caregiver must return his or her



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505 identification card to the department within 5 business days
506 after revocation.

507 (8) MEDICAL MARIJUANA TREATMENT CENTERS.—

508 (a) The department shall license medical marijuana
509 treatment centers to ensure reasonable statewide accessibility
510 and availability as necessary for qualified patients registered
511 in the medical marijuana use registry and who are issued a
512 physician certification under this section.

513 1. The department shall license as a medical marijuana
514 treatment center any entity that holds an active, unrestricted
515 license to cultivate, process, transport, and dispense low-THC
516 cannabis, medical cannabis, and cannabis delivery devices, under
517 former s. 381.986, Florida Statutes 2016, before July 1, 2017,
518 and which meets the requirements of this section. In addition to
519 the authority granted under this section, these entities are
520 authorized to dispense low-THC cannabis, medical cannabis, and
521 cannabis delivery devices ordered pursuant to former s. 381.986,
522 Florida Statutes 2016, which were entered into the compassionate
523 use registry before July 1, 2017. The department may grant
524 variances from the representations made in such an entity's
525 original application for approval under former s. 381.986,
526 Florida Statutes 2014, pursuant to paragraph (e).

527 2. As soon as practicable, but no later than October 1,
528 2017, the department shall license as medical marijuana
529 treatment centers 10 applicants that meet the requirements of
530 this section, except as provided in sub-subparagraph c.,
531 including:

532 a. Any medical marijuana treatment center applicant that
533 was denied a dispensing organization license by the department



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534 under former s. 381.986, Florida Statutes 2014, if the applicant
535 is awarded a license pursuant to an administrative or legal
536 challenge filed before January 1, 2017.

537 b. One applicant that was a qualified dispensing
538 organization applicant under former s. 381.986, Florida Statutes
539 2014; was the highest scoring applicant that was not awarded a
540 license; was not a litigant in an administrative challenge on or
541 after March 31, 2017; and provides documentation to the
542 department that it has the existing infrastructure and technical
543 and technological ability to begin cultivating, processing, and
544 dispensing marijuana within 30 days after registration as a
545 medical marijuana treatment center.

546 c. One applicant that is a recognized class member of
547 *Pigford v. Glickman*, 185 F.R.D. 82 (D.D.C. 1999), or *In Re Black*
548 *Farmers Litig.*, 856 F. Supp. 2d 1 (D.D.C. 2011); is a member of
549 the Black Farmers and Agriculturalists Association-Florida
550 Chapter; and meets the requirements of subparagraphs (b)3.-9.

551 3. Within 6 months after the medical marijuana use registry
552 reaches a total of 75,000 active registered qualified patients
553 and upon each further instance of the total active registered
554 qualified patients increasing by 75,000, the department shall
555 license five additional medical marijuana treatment centers if a
556 sufficient number of medical marijuana treatment center
557 applicants meet the registration requirements of this section
558 and department rule.

559 (b) An applicant for licensure as a medical marijuana
560 treatment center shall apply to the department on a form
561 prescribed by the department and adopted in rule. The department
562 shall adopt rules pursuant to ss. 120.536(1) and 120.54



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563 establishing a procedure for the issuance and biennial renewal
564 of licenses, including initial application and biennial renewal
565 fees sufficient to cover the costs of administering this
566 licensure program. Subject to the requirements in subparagraphs
567 (a)2.-4., the department shall issue a license to an applicant
568 if the applicant meets the requirements of this section and pays
569 the initial application fee. The department shall renew the
570 licensure of a medical marijuana treatment center biennially if
571 the licensee meets the requirements of this section and pays the
572 biennial renewal fee. An individual may not be an applicant,
573 owner, officer, board member, or manager on more than one
574 application for licensure as a medical marijuana treatment
575 center. An individual or entity may not be awarded more than one
576 license as a medical marijuana treatment center. An applicant
577 for licensure as a medical marijuana treatment center must
578 demonstrate:

579 1. That, for the 5 consecutive years before submitting the
580 application, the applicant has been registered to do business in
581 in the state.

582 2. Possession of a valid certificate of registration issued
583 by the Department of Agriculture and Consumer Services pursuant
584 to s. 581.131.

585 3. The technical and technological ability to cultivate and
586 produce marijuana, including, but not limited to, low-THC
587 cannabis.

588 4. The ability to secure the premises, resources, and
589 personnel necessary to operate as a medical marijuana treatment
590 center.

591 5. The ability to maintain accountability of all raw



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592 materials, finished products, and any byproducts to prevent
593 diversion or unlawful access to or possession of these
594 substances.

595 6. An infrastructure reasonably located to dispense
596 marijuana to registered qualified patients statewide or
597 regionally as determined by the department.

598 7. The financial ability to maintain operations for the
599 duration of the 2-year approval cycle, including the provision
600 of certified financial statements to the department. Upon
601 approval, the applicant must post a \$5 million performance bond.
602 However, a medical marijuana treatment center serving at least
603 1,000 qualified patients is only required to maintain a \$2
604 million performance bond.

605 8. That all owners, officers, board members, and managers
606 have passed a background screening pursuant to subsection (9).

607 9. The employment of a medical director to supervise the
608 activities of the medical marijuana treatment center.

609 (c) A medical marijuana treatment center may not make a
610 wholesale purchase of marijuana from, or a distribution of
611 marijuana to, another medical marijuana treatment center unless
612 the medical marijuana treatment center seeking to make a
613 wholesale purchase of marijuana submits proof of harvest failure
614 to the department.

615 (d) The department shall establish, maintain, and control a
616 computer software tracking system that traces marijuana from
617 seed to sale and allows real-time, 24-hour access by the
618 department to data from all medical marijuana treatment centers
619 and marijuana testing laboratories. The tracking system must
620 allow for integration of other seed-to-sale systems and, at a



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621 minimum, include notification of when marijuana seeds are
622 planted, when marijuana plants are harvested and destroyed, and
623 when marijuana is transported, sold, stolen, diverted, or lost.
624 Each medical marijuana treatment center shall use the seed-to-
625 sale tracking system established by the department or integrate
626 its own seed-to-sale tracking system with the seed-to-sale
627 tracking system established by the department. Each medical
628 marijuana treatment center may use its own seed-to-sale system
629 until the department establishes a seed-to-sale tracking system.
630 The department may contract with a vendor to establish the seed-
631 to-sale tracking system. The vendor selected by the department
632 may not have a contractual relationship with the department to
633 perform any services pursuant to this section other than the
634 seed-to-sale tracking system. The vendor may not have a direct
635 or indirect financial interest in a medical marijuana treatment
636 center or a marijuana testing laboratory.

637 (e) A licensed medical marijuana treatment center shall
638 cultivate, process, transport, and dispense marijuana for
639 medical use. A licensed medical marijuana treatment center may
640 not contract for services directly related to the cultivation,
641 processing, and dispensing of marijuana or marijuana delivery
642 devices. A licensed medical marijuana treatment center must, at
643 all times, maintain compliance with the criteria demonstrated
644 and representations made in the initial application and the
645 criteria established in this subsection. Upon request, the
646 department may grant a medical marijuana treatment center a
647 variance from the representations made in the initial
648 application. Consideration of such a request shall be based upon
649 the individual facts and circumstances surrounding the request.



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650 A variance may not be granted unless the requesting medical
651 marijuana treatment center can demonstrate to the department
652 that it has a proposed alternative to the specific
653 representation made in its application which fulfills the same
654 or a similar purpose as the specific representation in a way
655 that the department can reasonably determine will not be a lower
656 standard than the specific representation in the application. A
657 variance may not be granted from the requirements in
658 subparagraph 2. and subparagraphs (b)1. and 2.

659 1. A licensed medical marijuana treatment center may
660 transfer ownership to an individual or entity who meets the
661 requirements of this section. To accommodate a change in
662 ownership:

663 a. The licensed medical marijuana treatment center shall
664 notify the department in writing at least 60 days before the
665 anticipated date of the change of ownership.

666 b. The individual or entity applying for initial licensure
667 due to a change of ownership must submit an application that
668 must be received by the department at least 60 days prior to the
669 date of change of ownership.

670 c. Upon receipt of an application for a license, the
671 department shall examine the application and, within 30 days
672 after receipt, notify the applicant in writing of any apparent
673 errors or omissions and request any additional information
674 required.

675 d. Requested information omitted from an application for
676 licensure must be filed with the department within 21 days after
677 the department's request for omitted information or the
678 application shall be deemed incomplete and shall be withdrawn



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679 from further consideration and the fees shall be forfeited.

680

681 Within 30 days after the receipt of a complete application, the
682 department shall approve or deny the application.

683 2. A medical marijuana treatment center, and any individual
684 or entity who directly or indirectly owns, controls, or holds
685 with power to vote 5 percent or more of the voting shares of a
686 medical marijuana treatment center, may not acquire direct or
687 indirect ownership or control of any voting shares or other form
688 of ownership of any other medical marijuana treatment center.

689 3. All employees of a medical marijuana treatment center
690 must be 21 years of age or older and have passed a background
691 screening pursuant to subsection (9).

692 4. Each medical marijuana treatment center must adopt and
693 enforce policies and procedures to ensure employees and
694 volunteers receive training on the legal requirements to
695 dispense marijuana to qualified patients.

696 5. When growing marijuana, a medical marijuana treatment
697 center:

698 a. May use pesticides determined by the department, after
699 consultation with the Department of Agriculture and Consumer
700 Services, to be safely applied to plants intended for human
701 consumption, but may not use pesticides designated as
702 restricted-use pesticides pursuant to s. 487.042.

703 b. Must grow marijuana within an enclosed structure and in
704 a room separate from any other plant.

705 c. Must inspect seeds and growing plants for plant pests
706 that endanger or threaten the horticultural and agricultural
707 interests of the state in accordance with chapter 581 and any



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708 rules adopted thereunder.

709 d. Must perform fumigation or treatment of plants, or
710 remove and destroy infested or infected plants, in accordance
711 with chapter 581 and any rules adopted thereunder.

712 6. Each medical marijuana treatment center must produce and
713 make available for purchase at least one low-THC cannabis
714 product.

715 7. A medical marijuana treatment center that produces
716 edibles must hold a permit to operate as a food establishment
717 pursuant to chapter 500, the Florida Food Safety Act, and must
718 comply with all the requirements for food establishments
719 pursuant to chapter 500 and any rules adopted thereunder.

720 Edibles may not contain more than 200 milligrams of
721 tetrahydrocannabinol and a single serving portion of an edible
722 may not exceed 10 milligrams of tetrahydrocannabinol. Edibles
723 may have a potency variance of no greater than 15 percent.
724 Edibles may not be attractive to children; be manufactured in
725 the shape of humans, cartoons, or animals; be manufactured in a
726 form that bears any reasonable resemblance to products available
727 for consumption as commercially available candy; or contain any
728 color additives. To discourage consumption of edibles by
729 children, the department shall determine by rule any shapes,
730 forms, and ingredients allowed and prohibited for edibles.

731 Medical marijuana treatment centers may not begin processing or
732 dispensing edibles until after the effective date of the rule.
733 The department shall also adopt sanitation rules providing the
734 standards and requirements for the storage, display, or
735 dispensing of edibles.

736 8. When processing marijuana, a medical marijuana treatment



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737 center must:

738 a. Process the marijuana within an enclosed structure and
739 in a room separate from other plants or products.

740 b. Not use a hydrocarbon based solvent, such as butane,
741 hexane, or propane, to extract or separate resin from marijuana.

742 c. Test the processed marijuana using a medical marijuana
743 testing laboratory before it is dispensed. Results must be
744 verified and signed by two medical marijuana treatment center
745 employees. Before dispensing, the medical marijuana treatment
746 center must determine that the test results indicate that low-
747 THC cannabis meets the definition of low-THC cannabis, the
748 concentration of tetrahydrocannabinol meets the potency
749 requirements of this section, the labeling of the concentration
750 of tetrahydrocannabinol and cannabidiol is accurate, and all
751 marijuana is safe for human consumption and free from
752 contaminants that are unsafe for human consumption. The
753 department shall determine by rule which contaminants must be
754 tested for and the maximum levels of each contaminant which are
755 safe for human consumption. The Department of Agriculture and
756 Consumer Services shall assist the department in developing the
757 testing requirements for contaminants that are unsafe for human
758 consumption in edibles. The department shall also determine by
759 rule the procedures for the treatment of marijuana that fails to
760 meet the testing requirements of this section, s. 381.988, or
761 department rule. The department may select a random sample from
762 edibles available for purchase in a dispensing facility that
763 shall be tested by the department to determine that the edible
764 meets the potency requirements of this section, is safe for
765 human consumption, and the labeling of the tetrahydrocannabinol



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766 and cannabidiol concentration is accurate. A medical marijuana
767 treatment center may not require payment from the department for
768 the sample. A medical marijuana treatment center must recall
769 edibles, including all edibles made from the same batch of
770 marijuana, which fail to meet the potency requirements of this
771 section, which are unsafe for human consumption, or for which
772 the labeling of the tetrahydrocannabinol and cannabidiol
773 concentration is inaccurate. The medical marijuana treatment
774 center must retain records of all testing and samples of each
775 homogenous batch of marijuana for at least 9 months. The medical
776 marijuana treatment center must contract with a marijuana
777 testing laboratory to perform audits on the medical marijuana
778 treatment center's standard operating procedures, testing
779 records, and samples and provide the results to the department
780 to confirm that the marijuana or low-THC cannabis meets the
781 requirements of this section and that the marijuana or low-THC
782 cannabis is safe for human consumption. A medical marijuana
783 treatment center shall reserve two processed samples from each
784 batch and retain such samples for at least 9 months for the
785 purpose such audits. A medical marijuana treatment center may
786 use a laboratory that has not been certified by the department
787 under s. 381.988 until such time as at least one laboratory
788 holds the required certification, but in no event later than
789 July 1, 2018.

790 d. Package the marijuana in compliance with the United
791 States Poison Prevention Packaging Act of 1970, 15 U.S.C. ss.
792 1471 et seq.

793 e. Package the marijuana in a receptacle that has a firmly
794 affixed and legible label stating the following information:



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- 795 (I) The marijuana or low-THC cannabis meets the
796 requirements of sub-subparagraph c.
- 797 (II) The name of the medical marijuana treatment center
798 from which the marijuana originates.
- 799 (III) The batch number and harvest number from which the
800 marijuana originates and the date dispensed.
- 801 (IV) The name of the physician who issued the physician
802 certification.
- 803 (V) The name of the patient.
- 804 (VI) The product name, if applicable, and dosage form,
805 including concentration of tetrahydrocannabinol and cannabidiol.
806 The product name may not contain wording commonly associated
807 with products marketed by or to children.
- 808 (VII) The recommended dose.
- 809 (VIII) A warning that it is illegal to transfer medical
810 marijuana to another person.
- 811 (IX) A marijuana universal symbol developed by the
812 department.
- 813 9. The medical marijuana treatment center shall include in
814 each package a patient package insert with information on the
815 specific product dispensed related to:
- 816 a. Clinical pharmacology.
- 817 b. Indications and use.
- 818 c. Dosage and administration.
- 819 d. Dosage forms and strengths.
- 820 e. Contraindications.
- 821 f. Warnings and precautions.
- 822 g. Adverse reactions.
- 823 10. Each edible shall be individually sealed in plain,



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824 opaque wrapping marked only with the marijuana universal symbol.
825 Where practical, each edible shall be marked with the marijuana
826 universal symbol. In addition to the packaging and labeling
827 requirements in subparagraphs 8. and 9., edible receptacles must
828 be plain, opaque, and white without depictions of the product or
829 images other than the medical marijuana treatment center's
830 department-approved logo and the marijuana universal symbol. The
831 receptacle must also include a list all of the edible's
832 ingredients, storage instructions, an expiration date, a legible
833 and prominent warning to keep away from children and pets, and a
834 warning that the edible has not been produced or inspected
835 pursuant to federal food safety laws.

836 11. A medical marijuana treatment center may not establish
837 or operate more than five dispensing facilities, unless the
838 medical marijuana use registry reaches a total of 75,000 active
839 registered qualified patients, and then, upon each further
840 instance of the total active registered qualified patients
841 increasing by 75,000, each medical marijuana treatment center
842 licensed by the department at that time may establish and
843 operate one additional dispensing facility. When dispensing
844 marijuana or a marijuana delivery device, a medical marijuana
845 treatment center:

846 a. May dispense any active, valid order for low-THC
847 cannabis, medical cannabis and cannabis delivery devices issued
848 pursuant to former s. 381.986, Florida Statutes 2016, which was
849 entered into the medical marijuana use registry before July 1,
850 2017.

851 b. May not dispense more than a 70-day supply of marijuana
852 to a qualified patient or caregiver.



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853 c. Must have the medical marijuana treatment center's
854 employee who dispenses the marijuana or a marijuana delivery
855 device enter into the medical marijuana use registry his or her
856 name or unique employee identifier.

857 d. Must verify that the qualified patient and the
858 caregiver, if applicable, each has an active registration in the
859 medical marijuana use registry and an active and valid medical
860 marijuana use registry identification card, the amount and type
861 of marijuana dispensed matches the physician's certification in
862 the medical marijuana use registry for that qualified patient,
863 and the physician certification has not already been filled.

864 e. May not dispense marijuana to a qualified patient who is
865 younger than 18 years of age. If the qualified patient is
866 younger than 18 years of age, marijuana may only be dispensed to
867 the qualified patient's caregiver.

868 f. May not dispense or sell any other type of cannabis,
869 alcohol, or illicit drug-related product, including pipes,
870 bongs, or wrapping papers, other than a marijuana delivery
871 device required for the medical use of marijuana and which is
872 specified in a physician certification.

873 g. Must, upon dispensing the marijuana or marijuana
874 delivery device, record in the registry the date, time,
875 quantity, and form of marijuana dispensed; the type of marijuana
876 delivery device dispensed; and the name and medical marijuana
877 use registry identification number of the qualified patient or
878 caregiver to whom the marijuana delivery device was dispensed.

879 h. Must ensure that patient records are not visible to
880 anyone other than the qualified patient, his or her caregiver,
881 and authorized medical marijuana treatment center employees.



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882 (f) To ensure the safety and security of premises where the
883 cultivation, processing, storing, or dispensing of marijuana
884 occurs, and to maintain adequate controls against the diversion,
885 theft, and loss of marijuana or marijuana delivery devices, a
886 medical marijuana treatment center shall:

887 1.a. Maintain a fully operational security alarm system
888 that secures all entry points and perimeter windows and is
889 equipped with motion detectors; pressure switches; and duress,
890 panic, and hold-up alarms; and

891 b. Maintain a video surveillance system that records
892 continuously 24 hours a day and meets the following criteria:

893 (I) Cameras are fixed in a place that allows for the clear
894 identification of persons and activities in controlled areas of
895 the premises. Controlled areas include grow rooms, processing
896 rooms, storage rooms, disposal rooms or areas, and point-of-sale
897 rooms.

898 (II) Cameras are fixed in entrances and exits to the
899 premises, which shall record from both indoor and outdoor, or
900 ingress and egress, vantage points.

901 (III) Recorded images must clearly and accurately display
902 the time and date.

903 (IV) Retain video surveillance recordings for at least 45
904 days or longer upon the request of a law enforcement agency.

905 2. Ensure that the medical marijuana treatment center's
906 outdoor premises have sufficient lighting from dusk until dawn.

907 3. Ensure that the indoor premises where dispensing occurs
908 includes a waiting area with sufficient space and seating to
909 accommodate qualified patients and caregivers and at least one
910 private consultation area that is isolated from the waiting area



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911 and area where dispensing occurs. A medical marijuana treatment
912 center may not display products or dispense marijuana or
913 marijuana delivery devices in the waiting area.

914 4. Not dispense from its premises marijuana or a marijuana
915 delivery device between the hours of 9 p.m. and 7 a.m., but may
916 perform all other operations and deliver marijuana to qualified
917 patients 24 hours a day.

918 5. Store marijuana in a secured, locked room or a vault.

919 6. Require at least two of its employees, or two employees
920 of a security agency with whom it contracts, to be on the
921 premises at all times where cultivation, processing, or storing
922 of marijuana occurs.

923 7. Require each employee or contractor to wear a photo
924 identification badge at all times while on the premises.

925 8. Require each visitor to wear a visitor pass at all times
926 while on the premises.

927 9. Implement an alcohol and drug-free workplace policy.

928 10. Report to local law enforcement within 24 hours after
929 the medical marijuana treatment center is notified or becomes
930 aware of the theft, diversion, or loss of marijuana.

931 (g) To ensure the safe transport of marijuana and marijuana
932 delivery devices to medical marijuana treatment centers,
933 marijuana testing laboratories, or qualified patients, a medical
934 marijuana treatment center must:

935 1. Maintain a marijuana transportation manifest in any
936 vehicle transporting marijuana. The marijuana transportation
937 manifest must be generated from a medical marijuana treatment
938 center's seed-to-sale tracking system and include the:

939 a. Departure date and approximate time of departure.



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940 b. Name, location address, and license number of the
941 originating medical marijuana treatment center.

942 c. Name and address of the recipient of the delivery.

943 d. Quantity and form of any marijuana or marijuana delivery
944 device being transported.

945 e. Arrival date and estimated time of arrival.

946 f. Delivery vehicle make and model and license plate
947 number.

948 g. Name and signature of the medical marijuana treatment
949 center employees delivering the product.

950 (I) A copy of the marijuana transportation manifest must be
951 provided to each individual, medical marijuana treatment center,
952 or marijuana testing laboratory that receives a delivery. The
953 individual, or a representative of the center or laboratory,
954 must sign a copy of the marijuana transportation manifest
955 acknowledging receipt.

956 (II) An individual transporting marijuana or a marijuana
957 delivery device must present a copy of the relevant marijuana
958 transportation manifest and his or her employee identification
959 card to a law enforcement officer upon request.

960 (III) Medical marijuana treatment centers and marijuana
961 testing laboratories must retain copies of all marijuana
962 transportation manifests for at least 3 years.

963 2. Ensure only vehicles in good working order are used to
964 transport marijuana.

965 3. Lock marijuana and marijuana delivery devices in a
966 separate compartment or container within the vehicle.

967 4. Require employees to have possession of their employee
968 identification cards at all times when transporting marijuana or



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969 marijuana delivery devices.

970 5. Require at least two persons to be in a vehicle
971 transporting marijuana or marijuana delivery devices, and
972 require at least one person to remain in the vehicle while the
973 marijuana or marijuana delivery device is being delivered.

974 6. Provide specific safety and security training to
975 employees transporting or delivering marijuana and marijuana
976 delivery devices.

977 (h) A medical marijuana treatment center may not engage in
978 advertising that is visible to members of the public from any
979 street, sidewalk, park, or other public place, except:

980 1. The dispensing location of a medical marijuana treatment
981 center may have a sign that is affixed to the outside or hanging
982 in the window of the premises which identifies the dispensary by
983 the licensee's business name, a department-approved trade name,
984 or a department-approved logo. A medical marijuana treatment
985 center's trade name and logo may not contain wording or images
986 commonly associated with marketing targeted toward children or
987 which promote recreational use of marijuana.

988 2. A medical marijuana treatment center may engage in
989 Internet advertising and marketing under the following
990 conditions:

991 a. All advertisements must be approved by the department.

992 b. An advertisement may not have any content that
993 specifically targets individuals under the age of 18, including
994 cartoon characters or similar images.

995 c. An advertisement may not be an unsolicited pop-up
996 advertisement.

997 d. Opt-in marketing must include an easy and permanent opt-



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998 out feature.

999 (i) Each medical marijuana treatment center that dispenses
1000 marijuana and marijuana delivery devices shall make available to
1001 the public on its website:

1002 1. Each marijuana and low-THC product available for
1003 purchase, including the form, strain of marijuana from which it
1004 was extracted, cannabidiol content, tetrahydrocannabinol
1005 content, dose unit, total number of doses available, and the
1006 ratio of cannabidiol to tetrahydrocannabinol for each product.

1007 2. The price for a 30-day, 50-day, and 70-day supply at a
1008 standard dose for each marijuana and low-THC product available
1009 for purchase.

1010 3. The price for each marijuana delivery device available
1011 for purchase.

1012 4. If applicable, any discount policies and eligibility
1013 criteria for such discounts.

1014 (j) Medical marijuana treatment centers are the sole source
1015 from which a qualified patient may legally obtain marijuana.

1016 (k) The department may adopt rules pursuant to ss.
1017 120.536(1) and 120.54 to implement this subsection.

1018 (9) BACKGROUND SCREENING.—An individual required to undergo
1019 a background screening pursuant to this section must pass a
1020 level 2 background screening as provided under chapter 435,
1021 which, in addition to the disqualifying offenses provided in s.
1022 435.04, shall exclude an individual who has an arrest awaiting
1023 final disposition for, has been found guilty of, regardless of
1024 adjudication, or has entered a plea of nolo contendere or guilty
1025 to, an offense under chapter 837, chapter 895, or chapter 896 or
1026 similar law of another jurisdiction.



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1027 (a) Such individual must submit a full set of fingerprints
1028 to the department or to a vendor, entity, or agency authorized
1029 by s. 943.053(13). The department, vendor, entity, or agency
1030 shall forward the fingerprints to the Department of Law
1031 Enforcement for state processing, and the Department of Law
1032 Enforcement shall forward the fingerprints to the Federal Bureau
1033 of Investigation for national processing.

1034 (b) Fees for state and federal fingerprint processing and
1035 retention shall be borne by the individual. The state cost for
1036 fingerprint processing shall be as provided in s. 943.053(3) (e)
1037 for records provided to persons or entities other than those
1038 specified as exceptions therein.

1039 (c) Fingerprints submitted to the Department of Law
1040 Enforcement pursuant to this subsection shall be retained by the
1041 Department of Law Enforcement as provided in s. 943.05(2) (g) and
1042 (h) and, when the Department of Law Enforcement begins
1043 participation in the program, enrolled in the Federal Bureau of
1044 Investigation's national retained print arrest notification
1045 program. Any arrest record identified shall be reported to the
1046 department.

1047 (10) MEDICAL MARIJUANA TREATMENT CENTER INSPECTIONS;
1048 ADMINISTRATIVE ACTIONS.—

1049 (a) The department shall conduct announced or unannounced
1050 inspections of medical marijuana treatment centers to determine
1051 compliance with this section or rules adopted pursuant to this
1052 section.

1053 (b) The department shall inspect a medical marijuana
1054 treatment center upon receiving a complaint or notice that the
1055 medical marijuana treatment center has dispensed marijuana



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1056 containing mold, bacteria, or other contaminant that may cause
1057 or has caused an adverse effect to human health or the
1058 environment.

1059 (c) The department shall conduct at least a biennial
1060 inspection of each medical marijuana treatment center to
1061 evaluate the medical marijuana treatment center's records,
1062 personnel, equipment, processes, security measures, sanitation
1063 practices, and quality assurance practices.

1064 (d) The Department of Agriculture and Consumer Services and
1065 the department shall enter into an interagency agreement to
1066 ensure cooperation and coordination in the performance of their
1067 obligations under this section and their respective regulatory
1068 and authorizing laws. The department, the Department of Highway
1069 Safety and Motor Vehicles, and the Department of Law Enforcement
1070 may enter into interagency agreements for the purposes specified
1071 in this subsection or subsection (7).

1072 (e) The department shall publish a list of all approved
1073 medical marijuana treatment centers, medical directors, and
1074 qualified physicians on its website.

1075 (f) The department may impose reasonable fines not to
1076 exceed \$10,000 on a medical marijuana treatment center for any
1077 of the following violations:

1078 1. Violating this section or department rule.

1079 2. Failing to maintain qualifications for approval.

1080 3. Endangering the health, safety, or security of a
1081 qualified patient.

1082 4. Improperly disclosing personal and confidential
1083 information of a qualified patient.

1084 5. Attempting to procure medical marijuana treatment center



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1085 approval by bribery, fraudulent misrepresentation, or extortion.

1086 6. Being convicted or found guilty of, or entering a plea
1087 of guilty or nolo contendere to, regardless of adjudication, a
1088 crime in any jurisdiction which directly relates to the business
1089 of a medical marijuana treatment center.

1090 7. Making or filing a report or record that the medical
1091 marijuana treatment center knows to be false.

1092 8. Willfully failing to maintain a record required by this
1093 section or department rule.

1094 9. Willfully impeding or obstructing an employee or agent
1095 of the department in the furtherance of his or her official
1096 duties.

1097 10. Engaging in fraud or deceit, negligence, incompetence,
1098 or misconduct in the business practices of a medical marijuana
1099 treatment center.

1100 11. Making misleading, deceptive, or fraudulent
1101 representations in or related to the business practices of a
1102 medical marijuana treatment center.

1103 12. Having a license or the authority to engage in any
1104 regulated profession, occupation, or business that is related to
1105 the business practices of a medical marijuana treatment center
1106 suspended, revoked, or otherwise acted against by the licensing
1107 authority of any jurisdiction, including its agencies or
1108 subdivisions, for a violation of Florida law.

1109 13. Violating a lawful order of the department or an agency
1110 of the state, or failing to comply with a lawfully issued
1111 subpoena of the department or an agency of the state.

1112 (g) The department may suspend, revoke, or refuse to renew
1113 a medical marijuana treatment center license if the medical



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1114 marijuana treatment center commits any of the violations in
1115 paragraph (f).

1116 (h) The department may adopt rules pursuant to ss.
1117 120.536(1) and 120.54 to implement this subsection.

1118 (11) PREEMPTION.—Regulation of cultivation, processing, and
1119 delivery of marijuana by medical marijuana treatment centers is
1120 preempted to the state except as provided in this subsection.

1121 (a) A medical marijuana treatment center cultivating or
1122 processing facility may not be located within 500 feet of the
1123 real property that comprises a public or private elementary
1124 school, middle school, or secondary school.

1125 (b) A municipality may determine by ordinance the criteria
1126 for the number and location of, and other permitting
1127 requirements that do not conflict with state law or department
1128 rule for, medical marijuana treatment center dispensing
1129 facilities located within the boundaries of the municipality. A
1130 county may determine by ordinance the criteria for the number
1131 and location of, and other permitting requirements that do not
1132 conflict with state law or department rule for, all such
1133 dispensing facilities located within the unincorporated areas of
1134 that county. Except as provided in paragraph (c), a county or
1135 municipality may not enact ordinances for permitting or for
1136 determining the location of dispensing facilities which are more
1137 restrictive than that its ordinances permitting or determining
1138 the locations for pharmacies licensed under chapter 465. A
1139 municipality or county may not charge a medical marijuana
1140 treatment center a license or permit fee in an amount greater
1141 than the fee charged by such municipality or county to
1142 pharmacies. A dispensing facility location approved by a



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1143 municipality or county pursuant to former s. 381.986(8)(b),
1144 Florida Statutes 2016, is not subject to the location
1145 requirements of this subsection.

1146 (c) A medical marijuana treatment center dispensing
1147 facility may not be located within 500 feet of the real property
1148 that comprises a public or private elementary school, middle
1149 school, or secondary school unless the county or municipality
1150 approves the location through a formal proceeding open to the
1151 public at which the county or municipality determines that the
1152 location promotes the public health, safety, and general welfare
1153 of the community.

1154 (d) This subsection does not prohibit any local
1155 jurisdiction from ensuring medical marijuana treatment center
1156 facilities comply with the Florida Building Code, the Florida
1157 Fire Prevention Code, or any local amendments to the Florida
1158 Building Code or the Florida Fire Prevention Code.

1159 (12) PENALTIES.—

1160 (a) A qualified physician commits a misdemeanor of the
1161 first degree, punishable as provided in s. 775.082 or s.
1162 775.083, if the qualified physician issues a physician
1163 certification for the medical use of marijuana to a patient
1164 without a reasonable belief that the patient is suffering from a
1165 qualifying medical condition.

1166 (b) A person who fraudulently represents that he or she has
1167 a qualifying medical condition to a qualified physician for the
1168 purpose of being issued a physician certification commits a
1169 misdemeanor of the first degree, punishable as provided in s.
1170 775.082 or s. 775.083.

1171 (c) A qualified patient who uses marijuana, not including



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1172 low-THC cannabis, or a caregiver who administers marijuana, not
1173 including low-THC cannabis, in plain view of or in a place open
1174 to the general public; in a school bus, a vehicle, an aircraft,
1175 or a boat; or on the grounds of a school except as provided in
1176 s. 1006.062, commits a misdemeanor of the first degree,
1177 punishable as provided in s. 775.082 or s. 775.083.

1178 (d) A qualified patient or caregiver who cultivates
1179 marijuana or who purchases or acquires marijuana from any person
1180 or entity other than a medical marijuana treatment center
1181 violates s. 893.13 and is subject to the penalties provided
1182 therein.

1183 (e)1. A qualified patient or caregiver in possession of
1184 marijuana or a marijuana delivery device who fails or refuses to
1185 present his or her marijuana use registry identification card
1186 upon the request of a law enforcement officer commits a
1187 misdemeanor of the second degree, punishable as provided in s.
1188 775.082 or s. 775.083, unless it can be determined through the
1189 medical marijuana use registry that the person is authorized to
1190 be in possession of that marijuana or marijuana delivery device.

1191 2. A person charged with a violation of this paragraph may
1192 not be convicted if, before or at the time of his or her court
1193 or hearing appearance, the person produces in court or to the
1194 clerk of the court in which the charge is pending a medical
1195 marijuana use registry identification card issued to him or her
1196 which is valid at the time of his or her arrest. The clerk of
1197 the court is authorized to dismiss such case at any time before
1198 the defendant's appearance in court. The clerk of the court may
1199 assess a fee of \$5 for dismissing the case under this paragraph.

1200 (f) A caregiver who violates any of the applicable



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1201 provisions of this section or applicable department rules, for
1202 the first offense, commits a misdemeanor of the second degree,
1203 punishable as provided in s. 775.082 or s. 775.083 and, for a
1204 second or subsequent offense, commits a misdemeanor of the first
1205 degree, punishable as provided in s. 775.082 or s. 775.083.

1206 (g) A qualified physician who issues a physician
1207 certification for marijuana or a marijuana delivery device and
1208 receives compensation from a medical marijuana treatment center
1209 related to the issuance of a physician certification for
1210 marijuana or a marijuana delivery device is subject to
1211 disciplinary action under the applicable practice act and s.
1212 456.072 (1) (n).

1213 (h) A person transporting marijuana or marijuana delivery
1214 devices on behalf of a medical marijuana treatment center or
1215 marijuana testing laboratory who fails or refuses to present a
1216 transportation manifest upon the request of a law enforcement
1217 officer commits a misdemeanor of the second degree, punishable
1218 as provided in s. 775.082 or s. 775.083.

1219 (i) Persons and entities conducting activities authorized
1220 and governed by this section and s. 381.988 are subject to ss.
1221 456.053, 456.054, and 817.505, as applicable.

1222 (j) A person or entity that cultivates, processes,
1223 distributes, sells, or dispenses marijuana, as defined in s.
1224 29(b)(4), Art. X of the State Constitution, and is not licensed
1225 as a medical marijuana treatment center violates s. 893.13 and
1226 is subject to the penalties provided therein.

1227 (13) UNLICENSED ACTIVITY.—

1228 (a) If the department has probable cause to believe that a
1229 person or entity that is not registered or licensed with the



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1230 department has violated this section, s. 381.988, or any rule
1231 adopted pursuant to this section, the department may issue and
1232 deliver to such person or entity a notice to cease and desist
1233 from such violation. The department also may issue and deliver a
1234 notice to cease and desist to any person or entity who aids and
1235 abets such unlicensed activity. The issuance of a notice to
1236 cease and desist does not constitute agency action for which a
1237 hearing under s. 120.569 or s. 120.57 may be sought. For the
1238 purpose of enforcing a cease and desist order, the department
1239 may file a proceeding in the name of the state seeking issuance
1240 of an injunction or a writ of mandamus against any person or
1241 entity who violates any such order.

1242 (b) In addition to the remedies under paragraph (a), the
1243 department may impose by citation an administrative penalty not
1244 to exceed \$5,000 per incident. The citation shall be issued to
1245 the subject and shall contain the subject's name and any other
1246 information the department determines to be necessary to
1247 identify the subject, a brief factual statement, the sections of
1248 the law allegedly violated, and the penalty imposed. If the
1249 subject does not dispute the matter in the citation with the
1250 department within 30 days after the citation is served, the
1251 citation shall become a final order of the department. The
1252 department may adopt rules pursuant to ss. 120.536(1) and 120.54
1253 to implement this section. Each day that the unlicensed activity
1254 continues after issuance of a notice to cease and desist
1255 constitutes a separate violation. The department shall be
1256 entitled to recover the costs of investigation and prosecution
1257 in addition to the fine levied pursuant to the citation. Service
1258 of a citation may be made by personal service or by mail to the



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1259 subject at the subject's last known address or place of
1260 practice. If the department is required to seek enforcement of
1261 the cease and desist or agency order, it shall be entitled to
1262 collect attorney fees and costs.

1263 (c) In addition to or in lieu of any other administrative
1264 remedy, the department may seek the imposition of a civil
1265 penalty through the circuit court for any violation for which
1266 the department may issue a notice to cease and desist. The civil
1267 penalty shall be no less than \$5,000 and no more than \$10,000
1268 for each offense. The court may also award to the prevailing
1269 party court costs and reasonable attorney fees and, in the event
1270 the department prevails, may also award reasonable costs of
1271 investigation and prosecution.

1272 (d) In addition to the other remedies provided in this
1273 section, the department or any state attorney may bring an
1274 action for an injunction to restrain any unlicensed activity or
1275 to enjoin the future operation or maintenance of the unlicensed
1276 activity or the performance of any service in violation of this
1277 section.

1278 (e) The department must notify local law enforcement of
1279 such unlicensed activity for a determination of any criminal
1280 violation of chapter 893.

1281 (14) EXCEPTIONS TO OTHER LAWS.—

1282 (a) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
1283 any other provision of law, but subject to the requirements of
1284 this section, a qualified patient and the qualified patient's
1285 caregiver may purchase from a medical marijuana treatment center
1286 for the patient's medical use a marijuana delivery device and up
1287 to the amount of marijuana authorized in the physician



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1288 certification, but may not possess more than a 70-day supply of
1289 marijuana at any given time and all marijuana purchased must
1290 remain in its original packaging.

1291 (b) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
1292 any other provision of law, but subject to the requirements of
1293 this section, an approved medical marijuana treatment center and
1294 its owners, managers, and employees may manufacture, possess,
1295 sell, deliver, distribute, dispense, and lawfully dispose of
1296 marijuana or a marijuana delivery device as provided in this
1297 section, s. 381.988, and by department rule. For purposes of
1298 this subsection, the terms "manufacture," "possession,"
1299 "deliver," "distribute," and "dispense" have the same meanings
1300 as provided in s. 893.02.

1301 (c) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
1302 any other provision of law, but subject to the requirements of
1303 this section, a certified marijuana testing laboratory,
1304 including an employee of a certified marijuana testing
1305 laboratory acting within the scope of his or her employment, may
1306 acquire, possess, test, transport, and lawfully dispose of
1307 marijuana as provided in this section, in s. 381.988, and by
1308 department rule.

1309 (d) A licensed medical marijuana treatment center and its
1310 owners, managers, and employees are not subject to licensure or
1311 regulation under chapter 465 or chapter 499 for manufacturing,
1312 possessing, selling, delivering, distributing, dispensing, or
1313 lawfully disposing of marijuana or a marijuana delivery device,
1314 as provided in this section, s. 381.988, and by department rule.

1315 (e) This subsection does not exempt a person from
1316 prosecution for a criminal offense related to impairment or



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1317 intoxication resulting from the medical use of marijuana or
1318 relieve a person from any requirement under law to submit to a
1319 breath, blood, urine, or other test to detect the presence of a
1320 controlled substance.

1321 (f) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
1322 any other provision of law, but subject to the requirements of
1323 this section and pursuant to policies and procedures established
1324 pursuant to s. 1006.62(8), school personnel may possess
1325 marijuana that is obtained for medical use pursuant to this
1326 section by a student who is a qualified patient.

1327 (g) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
1328 any other provision of law, but subject to the requirements of
1329 this section, a research institute established by a public
1330 postsecondary educational institution, such as the H. Lee
1331 Moffitt Cancer Center and Research Institute established under
1332 s. 1004.43 or a state university that has achieved the
1333 preeminent state research university designation under s.
1334 1001.7065, may possess, test, transport, and lawfully dispose of
1335 marijuana for research purposes as provided by this section.

1336 (15) APPLICABILITY.—This section does not limit the ability
1337 of an employer to establish, continue, or enforce a drug-free
1338 workplace program or policy. This section does not require an
1339 employer to accommodate the medical use of marijuana in any
1340 workplace or any employee working while under the influence of
1341 marijuana. This section does not create a cause of action
1342 against an employer for wrongful discharge or discrimination.

1343 Section 2. Paragraph (uu) is added to subsection (1) of
1344 section 458.331, Florida Statutes, to read:

1345 458.331 Grounds for disciplinary action; action by the



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1346 board and department.-

1347 (1) The following acts constitute grounds for denial of a
1348 license or disciplinary action, as specified in s. 456.072(2):

1349 (uu) Issuing a physician certification, as defined in s.
1350 381.986, in a manner out of compliance with the requirements of
1351 that section and rules adopted thereunder.

1352 Section 3. Paragraph (ww) is added to subsection (1) of
1353 section 459.015, Florida Statutes, to read:

1354 459.015 Grounds for disciplinary action; action by the
1355 board and department.-

1356 (1) The following acts constitute grounds for denial of a
1357 license or disciplinary action, as specified in s. 456.072(2):

1358 (ww) Issuing a physician certification, as defined in s.
1359 381.986, in a manner not in compliance with the requirements of
1360 that section and rules adopted thereunder.

1361 Section 4. Section 381.988, Florida Statutes, is created to
1362 read:

1363 381.988 Medical marijuana testing laboratories; marijuana
1364 tests conducted by a certified laboratory.-

1365 (1) A person or entity seeking to be a certified marijuana
1366 testing laboratory must:

1367 (a) Not be owned or controlled by a medical marijuana
1368 treatment center.

1369 (b) Submit a completed application accompanied by an
1370 application fee, as established by department rule.

1371 (c) Submit proof of an accreditation or a certification
1372 approved by the department issued by an accreditation or a
1373 certification organization approved by the department. The
1374 department shall adopt by rule a list of approved laboratory



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1375 accreditations or certifications and accreditation or
1376 certification organizations.

1377 (d) Require all owners and managers to submit to and pass a
1378 level 2 background screening pursuant to s. 435.04 and shall
1379 deny certification if the person or entity has been found guilty
1380 of, or has entered a plea of guilty or nolo contendere to,
1381 regardless of adjudication, any offense listed in chapter 837,
1382 chapter 895, or chapter 896 or similar law of another
1383 jurisdiction.

1384 1. Such owners and managers must submit a full set of
1385 fingerprints to the department or to a vendor, entity, or agency
1386 authorized by s. 943.053(13). The department, vendor, entity, or
1387 agency shall forward the fingerprints to the Department of Law
1388 Enforcement for state processing, and the Department of Law
1389 Enforcement shall forward the fingerprints to the Federal Bureau
1390 of Investigation for national processing.

1391 2. Fees for state and federal fingerprint processing and
1392 retention shall be borne by such owners or managers. The state
1393 cost for fingerprint processing shall be as provided in s.
1394 943.053(3)(e) for records provided to persons or entities other
1395 than those specified as exceptions therein.

1396 3. Fingerprints submitted to the Department of Law
1397 Enforcement pursuant to this paragraph shall be retained by the
1398 Department of Law Enforcement as provided in s. 943.05(2)(g) and
1399 (h) and, when the Department of Law Enforcement begins
1400 participation in the program, enrolled in the Federal Bureau of
1401 Investigation's national retained print arrest notification
1402 program. Any arrest record identified shall be reported to the
1403 department.



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1404 (e) Demonstrate to the department the capability of meeting
1405 the standards for certification required by this subsection, and
1406 the testing requirements of s. 381.986 and this section and
1407 rules adopted thereunder.

1408 (2) The department shall adopt rules pursuant to ss.
1409 120.536(1) and 120.54 establishing a procedure for initial
1410 certification and biennial renewal, including initial
1411 application and biennial renewal fees sufficient to cover the
1412 costs of administering this certification program. The
1413 department shall renew the certification biennially if the
1414 laboratory meets the requirements of this section and pays the
1415 biennial renewal fee.

1416 (3) The department shall adopt rules pursuant to ss.
1417 120.536(1) and 120.54 establishing the standards for
1418 certification of marijuana testing laboratories under this
1419 section. The Department of Agriculture and Consumer Services and
1420 the Department of Environmental Protection shall assist the
1421 department in developing the rule, which must include, but is
1422 not limited to:

1423 (a) Security standards.

1424 (b) Minimum standards for personnel.

1425 (c) Sample collection method and process standards.

1426 (d) Proficiency testing for tetrahydrocannabinol potency,
1427 concentration of cannabidiol, and contaminants unsafe for human
1428 consumption, as determined by department rule.

1429 (e) Reporting content, format, and frequency.

1430 (f) Audits and onsite inspections.

1431 (g) Quality assurance.

1432 (h) Equipment and methodology.



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- 1433 (i) Chain of custody.
- 1434 (j) Any other standard the department deems necessary to
1435 ensure the health and safety of the public.
- 1436 (4) A marijuana testing laboratory may acquire marijuana
1437 only from a medical marijuana treatment center. A marijuana
1438 testing laboratory is prohibited from selling, distributing, or
1439 transferring marijuana received from a marijuana treatment
1440 center, except that a marijuana testing laboratory may transfer
1441 a sample to another marijuana testing laboratory in this state.
- 1442 (5) A marijuana testing laboratory must properly dispose of
1443 all samples it receives, unless transferred to another marijuana
1444 testing laboratory, after all necessary tests have been
1445 conducted and any required period of storage has elapsed, as
1446 established by department rule.
- 1447 (6) A marijuana testing laboratory shall use the computer
1448 software tracking system selected by the department under s.
1449 381.986.
- 1450 (7) The following acts constitute grounds for which
1451 disciplinary action specified in subsection (8) may be taken
1452 against a certified marijuana testing laboratory:
- 1453 (a) Permitting unauthorized persons to perform technical
1454 procedures or issue reports.
- 1455 (b) Demonstrating incompetence or making consistent errors
1456 in the performance of testing or erroneous reporting.
- 1457 (c) Performing a test and rendering a report thereon to a
1458 person or entity not authorized by law to receive such services.
- 1459 (d) Failing to file any report required under this section
1460 or s. 381.986 or the rules adopted thereunder.
- 1461 (e) Reporting a test result if the test was not performed.



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1462 (f) Failing to correct deficiencies within the time
1463 required by the department.

1464 (g) Violating or aiding and abetting in the violation of
1465 any provision of s. 381.986 or this section or any rules adopted
1466 thereunder.

1467 (8) The department may refuse to issue or renew, or may
1468 suspend or revoke, the certification of a marijuana testing
1469 laboratory that is found to be in violation of this section or
1470 any rules adopted hereunder. The department may impose fines for
1471 violations of this section or rules adopted thereunder, based on
1472 a schedule adopted in rule. In determining the administrative
1473 action to be imposed for a violation, the department must
1474 consider the following factors:

1475 (a) The severity of the violation, including the
1476 probability of death or serious harm to the health or safety of
1477 any person that may result or has resulted; the severity or
1478 potential harm; and the extent to which the provisions of s.
1479 381.986 or this section were violated.

1480 (b) The actions taken by the marijuana testing laboratory
1481 to correct the violation or to remedy the complaint.

1482 (c) Any previous violation by the marijuana testing
1483 laboratory.

1484 (d) The financial benefit to the marijuana testing
1485 laboratory of committing or continuing the violation.

1486 (9) The department may adopt rules pursuant to ss.
1487 120.536(1) and 120.54 to implement this section.

1488 Section 5. Section 381.989, Florida Statutes, is created to
1489 read:

1490 381.989 Public education campaigns.—



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1491 (1) DEFINITIONS.—As used in this section, the term:
1492 (a) "Cannabis" has the same meaning as in s. 893.02.
1493 (b) "Department" means the Department of Health.
1494 (c) "Marijuana" has the same meaning as in s. 381.986.
1495 (2) STATEWIDE CANNABIS AND MARIJUANA EDUCATION AND ILLICIT
1496 USE PREVENTION CAMPAIGN.—
1497 (a) The department shall implement a statewide cannabis and
1498 marijuana education and illicit use prevention campaign to
1499 publicize accurate information regarding:
1500 1. The legal requirements for licit use and possession of
1501 marijuana in this state.
1502 2. Safe use of marijuana, including preventing access by
1503 persons other than qualified patients as defined in s. 381.986,
1504 particularly children.
1505 3. The short-term and long-term health effects of cannabis
1506 and marijuana use, particularly on minors and young adults.
1507 4. Other cannabis-related and marijuana-related education
1508 determined by the department to be necessary to the public
1509 health and safety.
1510 (b) The department shall provide educational materials
1511 regarding the eligibility for medical use of marijuana by
1512 individuals diagnosed with a terminal condition to individuals
1513 that provide palliative care or hospice services.
1514 (c) The department may use television messaging, radio
1515 broadcasts, print media, digital strategies, social media, and
1516 any other form of messaging deemed necessary and appropriate by
1517 the department to implement the campaign. The department may
1518 work with school districts, community organizations, and
1519 businesses and business organizations and other entities to



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1520 provide training and programming.

1521 (d) The department may contract with one or more vendors to
1522 implement the campaign.

1523 (e) The department shall contract with an independent
1524 entity to conduct annual evaluations of the campaign. The
1525 evaluations shall assess the reach and impact of the campaign,
1526 success in educating the citizens of the state regarding the
1527 legal parameters for marijuana use, success in preventing
1528 illicit access by adults and youth, and success in preventing
1529 negative health impacts from the legalization of marijuana. The
1530 first year of the program, the evaluator shall conduct surveys
1531 to establish baseline data on youth and adult cannabis use, the
1532 attitudes of youth and the general public toward cannabis and
1533 marijuana, and any other data deemed necessary for long-term
1534 analysis. By January 31 of each year, the department shall
1535 submit to the Governor, the President of the Senate, and the
1536 Speaker of the House of Representatives the annual evaluation of
1537 the campaign.

1538 (3) STATEWIDE IMPAIRED DRIVING EDUCATION CAMPAIGN.—

1539 (a) The Department of Highway Safety and Motor Vehicles
1540 shall implement a statewide impaired driving education campaign
1541 to raise awareness and prevent marijuana-related and cannabis-
1542 related impaired driving and may contract with one or more
1543 vendors to implement the campaign. The Department of Highway
1544 Safety and Motor Vehicles may use television messaging, radio
1545 broadcasts, print media, digital strategies, social media, and
1546 any other form of messaging deemed necessary and appropriate by
1547 the department to implement the campaign.

1548 (b) At a minimum, the Department of Highway Safety and



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1549 Motor Vehicles or a contracted vendor shall establish baseline
1550 data on the number of marijuana-related citations for driving
1551 under the influence, marijuana-related traffic arrests,
1552 marijuana-related traffic accidents, and marijuana-related
1553 traffic fatalities, and shall track these measures annually
1554 thereafter. The Department of Highway Safety and Motor Vehicles
1555 or a contracted vendor shall annually evaluate and compile a
1556 report on the efficacy of the campaign based on those measures
1557 and other measures established by the Department of Highway
1558 Safety and Motor Vehicles. By January 31 of each year, the
1559 Department of Highway Safety and Motor Vehicles shall submit the
1560 report on the evaluation of the campaign to the Governor, the
1561 President of the Senate, and the Speaker of the House of
1562 Representatives.

1563 Section 6. Subsection (1) of section 385.211, Florida
1564 Statutes, is amended to read:

1565 385.211 Refractory and intractable epilepsy treatment and
1566 research at recognized medical centers.—

1567 (1) As used in this section, the term "low-THC cannabis"
1568 means "low-THC cannabis" as defined in s. 381.986 that is
1569 dispensed only from a dispensing organization as defined in
1570 former s. 381.986, Florida Statutes 2016, or a medical marijuana
1571 treatment center as defined in s. 381.986.

1572 Section 7. Paragraphs (b) through (e) of subsection (2) of
1573 section 499.0295, Florida Statutes, are redesignated as
1574 paragraphs (a) through (d), respectively, and present paragraphs
1575 (a) and (c) of that subsection, and subsection (3) of that
1576 section are amended, to read:

1577 499.0295 Experimental treatments for terminal conditions.—



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1578 (2) As used in this section, the term:

1579 ~~(a) "Dispensing organization" means an organization~~
1580 ~~approved by the Department of Health under s. 381.986(5) to~~
1581 ~~cultivate, process, transport, and dispense low-THC cannabis,~~
1582 ~~medical cannabis, and cannabis delivery devices.~~

1583 ~~(b)(e) "Investigational drug, biological product, or~~
1584 ~~device" means:~~

1585 ~~1. a drug, biological product, or device that has~~
1586 ~~successfully completed phase 1 of a clinical trial but has not~~
1587 ~~been approved for general use by the United States Food and Drug~~
1588 ~~Administration and remains under investigation in a clinical~~
1589 ~~trial approved by the United States Food and Drug~~
1590 ~~Administration; or~~

1591 ~~2. Medical cannabis that is manufactured and sold by a~~
1592 ~~dispensing organization.~~

1593 (3) Upon the request of an eligible patient, a manufacturer
1594 ~~may, or upon a physician's order pursuant to s. 381.986, a~~
1595 ~~dispensing organization may:~~

1596 (a) Make its investigational drug, biological product, or
1597 device available under this section.

1598 (b) Provide an investigational drug, biological product, or
1599 ~~device, or cannabis delivery device as defined in s. 381.986 to~~
1600 an eligible patient without receiving compensation.

1601 (c) Require an eligible patient to pay the costs of, or the
1602 costs associated with, the manufacture of the investigational
1603 drug, biological product, or device, ~~or cannabis delivery device~~
1604 ~~as defined in s. 381.986.~~

1605 Section 8. Subsection (3) of section 893.02, Florida
1606 Statutes, is amended to read:



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1607 893.02 Definitions.—The following words and phrases as used
1608 in this chapter shall have the following meanings, unless the
1609 context otherwise requires:

1610 (3) "Cannabis" means all parts of any plant of the genus
1611 *Cannabis*, whether growing or not; the seeds thereof; the resin
1612 extracted from any part of the plant; and every compound,
1613 manufacture, salt, derivative, mixture, or preparation of the
1614 plant or its seeds or resin. The term does not include
1615 "marijuana," "low-THC cannabis," as defined in s. 381.986, if
1616 manufactured, possessed, sold, purchased, delivered,
1617 distributed, or dispensed, in conformance with s. 381.986.

1618 Section 9. Section 1004.4351, Florida Statutes, is created
1619 to read:

1620 1004.4351 Medical marijuana research and education.—

1621 (1) SHORT TITLE.—This section shall be known and may be
1622 cited as the "Medical Marijuana Research and Education Act."

1623 (2) LEGISLATIVE FINDINGS.—The Legislature finds that:

1624 (a) The present state of knowledge concerning the use of
1625 marijuana to alleviate pain and treat illnesses is limited
1626 because permission to perform clinical studies on marijuana is
1627 difficult to obtain, with access to research-grade marijuana so
1628 restricted that little or no unbiased studies have been
1629 performed.

1630 (b) Under the State Constitution, marijuana is available
1631 for the treatment of certain debilitating medical conditions.

1632 (c) Additional clinical studies are needed to ensure that
1633 the residents of this state obtain the correct dosing,
1634 formulation, route, modality, frequency, quantity, and quality
1635 of marijuana for specific illnesses.



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1636 (d) An effective medical marijuana research and education
1637 program would mobilize the scientific, educational, and medical
1638 resources that presently exist in this state to determine the
1639 appropriate and best use of marijuana to treat illness.

1640 (3) DEFINITIONS.—As used in this section, the term:

1641 (a) "Board" means the Medical Marijuana Research and
1642 Education Board.

1643 (b) "Coalition" means the Coalition for Medical Marijuana
1644 Research and Education.

1645 (c) "Marijuana" has the same meaning as provided in s. 29,
1646 Art. X of the State Constitution.

1647 (4) COALITION FOR MEDICAL MARIJUANA RESEARCH AND
1648 EDUCATION.—

1649 (a) There is established within the H. Lee Moffitt Cancer
1650 Center and Research Institute, Inc., the Coalition for Medical
1651 Marijuana Research and Education. The purpose of the coalition
1652 is to conduct rigorous scientific research, provide education,
1653 disseminate research, and guide policy for the adoption of a
1654 statewide policy on ordering and dosing practices for the
1655 medical use of marijuana. The coalition shall be physically
1656 located at the H. Lee Moffitt Cancer Center and Research
1657 Institute, Inc.

1658 (b) The Medical Marijuana Research and Education Board is
1659 established to direct the operations of the coalition. The board
1660 shall be composed of seven members appointed by the chief
1661 executive officer of the H. Lee Moffitt Cancer Center and
1662 Research Institute, Inc. Board members must have experience in a
1663 variety of scientific and medical fields, including, but not
1664 limited to, oncology, neurology, psychology, pediatrics,



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1665 nutrition, and addiction. Members shall be appointed to 4-year
1666 terms and may be reappointed to serve additional terms. The
1667 chair shall be elected by the board from among its members to
1668 serve a 2-year term. The board shall meet no less than
1669 semiannually at the call of the chair or, in his or her absence
1670 or incapacity, the vice chair. Four members constitute a quorum.
1671 A majority vote of the members present is required for all
1672 actions of the board. The board may prescribe, amend, and repeal
1673 a charter governing the manner in which it conducts its
1674 business. A board member shall serve without compensation but is
1675 entitled to be reimbursed for travel expenses by the coalition
1676 or the organization he or she represents in accordance with s.
1677 112.061.

1678 (c) The coalition shall be administered by a coalition
1679 director, who shall be appointed by and serve at the pleasure of
1680 the board. The coalition director shall, subject to the approval
1681 of the board:

1682 1. Propose a budget for the coalition.

1683 2. Foster the collaboration of scientists, researchers, and
1684 other appropriate personnel in accordance with the coalition's
1685 charter.

1686 3. Identify and prioritize the research to be conducted by
1687 the coalition.

1688 4. Prepare the Medical Marijuana Research and Education
1689 Plan for submission to the board.

1690 5. Apply for grants to obtain funding for research
1691 conducted by the coalition.

1692 6. Perform other duties as determined by the board.

1693 (d) The board shall advise the Board of Governors, the



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1694 State Surgeon General, the Governor, and the Legislature with
1695 respect to medical marijuana research and education in this
1696 state. The board shall explore methods of implementing and
1697 enforcing medical marijuana laws in relation to cancer control,
1698 research, treatment, and education.

1699 (e) The board shall annually adopt a plan for medical
1700 marijuana research, known as the "Medical Marijuana Research and
1701 Education Plan," which must be in accordance with state law and
1702 coordinate with existing programs in this state. The plan must
1703 include recommendations for the coordination and integration of
1704 medical, pharmacological, nursing, paramedical, community, and
1705 other resources connected with the treatment of debilitating
1706 medical conditions; research related to the treatment of such
1707 medical conditions; and education.

1708 (f) By February 15 of each year, the board shall issue a
1709 report to the Governor, the President of the Senate, and the
1710 Speaker of the House of Representatives on research projects,
1711 community outreach initiatives, and future plans for the
1712 coalition.

1713 (g) Beginning January 15, 2018, and quarterly thereafter,
1714 the Department of Health shall submit to the coalition a data
1715 set that includes, for each patient registered in the medical
1716 marijuana use registry, the patient's qualifying medical
1717 condition and the daily dose amount and forms of marijuana
1718 certified for the patient.

1719 (5) RESPONSIBILITIES OF THE H. LEE MOFFITT CANCER CENTER
1720 AND RESEARCH INSTITUTE, INC.—The H. Lee Moffitt Cancer Center
1721 and Research Institute, Inc., shall allocate staff and provide
1722 information and assistance, as the coalition's budget permits,



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1723 to assist the board in fulfilling its responsibilities.

1724 Section 10. Subsection (1) of section 1004.441, Florida
1725 Statutes, is amended to read:

1726 1004.441 Refractory and intractable epilepsy treatment and
1727 research.—

1728 (1) As used in this section, the term “low-THC cannabis”
1729 means “low-THC cannabis” as defined in s. 381.986 that is
1730 dispensed only from a dispensing organization as defined in
1731 former s. 381.986, Florida Statutes 2016, or a medical marijuana
1732 treatment center as defined in s. 381.986.

1733 Section 11. Subsection (8) is added to section 1006.062,
1734 Florida Statutes, to read:

1735 1006.062 Administration of medication and provision of
1736 medical services by district school board personnel.—

1737 (8) Each district school board shall adopt a policy and a
1738 procedure for allowing a student who is a qualified patient, as
1739 defined in s. 381.986, to use marijuana obtained pursuant to
1740 that section. Such policy and procedure shall ensure access by
1741 the qualified patient; identify how the marijuana will be
1742 received, accounted for, and stored; and establish processes to
1743 prevent access by other students and school personnel
1744 unnecessary to the implementation of the policy.

1745 Section 12. Department of Health; authority to adopt rules;
1746 cause of action.—

1747 (1) EMERGENCY RULEMAKING.—

1748 (a) The Department of Health and the applicable boards
1749 shall adopt emergency rules pursuant to s. 120.54(4), Florida
1750 Statutes, and this section necessary to implement ss. 381.986
1751 and 381.988, Florida Statutes. If an emergency rule adopted



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1752 under this section is held to be unconstitutional or an invalid
1753 exercise of delegated legislative authority, and becomes void,
1754 the department or the applicable boards may adopt an emergency
1755 rule pursuant to this section to replace the rule that has
1756 become void. If the emergency rule adopted to replace the void
1757 emergency rule is also held to be unconstitutional or an invalid
1758 exercise of delegated legislative authority and becomes void,
1759 the department and the applicable boards must follow the
1760 nonemergency rulemaking procedures of the Administrative
1761 Procedures Act to replace the rule that has become void.

1762 (b) For emergency rules adopted under this section, the
1763 department and the applicable boards need not make the findings
1764 required by s. 120.54(4)(a), Florida Statutes. Emergency rules
1765 adopted under this section are exempt from ss. 120.54(3)(b) and
1766 120.541, Florida Statutes. The department and the applicable
1767 boards shall meet the procedural requirements in s. 120.54(a),
1768 Florida Statutes, if the department or the applicable boards
1769 have, prior to the effective date of this act, held any public
1770 workshops or hearings on the subject matter of the emergency
1771 rules adopted under this subsection. Challenges to emergency
1772 rules adopted under this subsection shall be subject to the time
1773 schedules provided in s. 120.56(5), Florida Statutes.

1774 (c) Emergency rules adopted under this section are exempt
1775 from s. 120.54(4)(c), Florida Statutes, and shall remain in
1776 effect until replaced by rules adopted under the nonemergency
1777 rulemaking procedures of the Administrative Procedures Act. By
1778 January 1, 2018, the department and the applicable boards shall
1779 initiate nonemergency rulemaking pursuant to the Administrative
1780 Procedures Act to replace all emergency rules adopted under this



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1781 section by publishing a notice of rule development in the
1782 Florida Administrative Register. Except as provided in paragraph
1783 (a), after January 1, 2018, the department and applicable boards
1784 may not adopt rules pursuant to the emergency rulemaking
1785 procedures provided in this section.

1786 (2) CAUSE OF ACTION.—

1787 (a) As used in s. 29(d)(3), Art. X of the State
1788 Constitution, the term:

1789 1. "Issue regulations" means the filing by the department
1790 of a rule or emergency rule for adoption with the Department of
1791 State.

1792 2. "Judicial relief" means an action for declaratory
1793 judgment pursuant to chapter 86, Florida Statutes.

1794 (b) The venue for actions brought against the department
1795 pursuant to s. 29(d)(3), Art. X of the State Constitution shall
1796 be in the circuit court in and for Leon County.

1797 (c) If the department is not issuing patient and caregiver
1798 identification cards or licensing medical marijuana treatment
1799 centers by October 3, 2017, the following shall be a defense to
1800 a cause of action brought under s. 29(d)(3), Art. X of the State
1801 Constitution:

1802 1. The department is unable to issue patient and caregiver
1803 identification cards or license medical marijuana treatment
1804 centers due to litigation challenging a rule as an invalid
1805 exercise of delegated legislative authority or unconstitutional.

1806 2. The department is unable to issue patient or caregiver
1807 identification cards or license medical marijuana treatment
1808 centers due to a rule being held as an invalid exercise of
1809 delegated legislative authority or unconstitutional.



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1810 Section 13. Department of Law Enforcement; training related
1811 to medical use of marijuana.—The Department of Law Enforcement
1812 shall develop a 4-hour online initial training course, and a 2-
1813 hour online continuing education course, which shall be made
1814 available for use by all law enforcement agencies in this state.
1815 Such training shall cover the legal parameters of marijuana-
1816 related activities governed by ss. 381.986 and 381.988, Florida
1817 Statutes, relating to criminal laws governing marijuana.

1818 Section 14. Section 385.212, Florida Statutes, is amended
1819 to read:

1820 385.212 Powers and duties of the Department of Health;
1821 Office of Medical Marijuana ~~Compassionate~~ Use.—

1822 (1) The Department of Health shall establish an Office of
1823 Medical Marijuana ~~Compassionate~~ Use under the direction of the
1824 Deputy State Health Officer.

1825 (2) The Office of Medical Marijuana ~~Compassionate~~ Use may
1826 enhance access to investigational new drugs for Florida patients
1827 through approved clinical treatment plans or studies. The Office
1828 of Medical Marijuana ~~Compassionate~~ Use may:

1829 (a) Create a network of state universities and medical
1830 centers recognized pursuant to s. 381.925.

1831 (b) Make any necessary application to the United States
1832 Food and Drug Administration or a pharmaceutical manufacturer to
1833 facilitate enhanced access to medical ~~compassionate~~ use of
1834 marijuana for Florida patients.

1835 (c) Enter into any agreements necessary to facilitate
1836 enhanced access to medical ~~compassionate~~ use of marijuana for
1837 Florida patients.

1838 (3) The department may adopt rules necessary to implement



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1839 this section.

1840 (4) The Office of Medical Marijuana Use shall administer
1841 and enforce the provisions of s. 381.986.

1842 Section 15. If any provision of this act or its application
1843 to any person or circumstance is held invalid, the invalidity
1844 does not affect other provisions or applications of this act
1845 which can be given effect without the invalid provision or
1846 application, and to this end the provisions of this act are
1847 severable.

1848 Section 16. This act shall take effect upon becoming a law.

1849

1850 ===== T I T L E A M E N D M E N T =====

1851 And the title is amended as follows:

1852 Delete everything before the enacting clause
1853 and insert:

1854 A bill to be entitled
1855 An act relating to medical use of marijuana; amending
1856 s. 381.986, F.S.; providing, revising, and deleting
1857 definitions; providing qualifying medical conditions
1858 for a patient to be eligible to receive marijuana or a
1859 marijuana delivery device; providing requirements for
1860 designating a qualified physician or medical director;
1861 providing criteria for certification of a patient for
1862 medical marijuana treatment by a qualified physician;
1863 providing for certain patients registered with the
1864 medical marijuana use registry to be deemed qualified;
1865 requiring the Department of Health to monitor
1866 physician registration and certifications in the
1867 medical marijuana use registry; requiring the Board of



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1868 Medicine and the Board of Osteopathic Medicine to
1869 create a physician certification pattern review panel;
1870 providing rulemaking authority to the department and
1871 the boards; requiring the department to establish a
1872 medical marijuana use registry; specifying entities
1873 and persons who have access to the registry; providing
1874 requirements for registration of, and maintenance of
1875 registered status by, qualified patients and
1876 caregivers; providing criteria for nonresidents to
1877 prove residency for registration as a qualified
1878 patient; defining the term "seasonal resident";
1879 authorizing the department to suspend or revoke the
1880 registration of a patient or caregiver under certain
1881 circumstances; providing requirements for the issuance
1882 of medical marijuana use registry identification
1883 cards; requiring the department to issue licenses to a
1884 certain number of medical marijuana treatment centers;
1885 providing for license renewal and revocation;
1886 providing conditions for change of ownership;
1887 providing for continuance of certain entities
1888 authorized to dispense low-THC cannabis, medical
1889 cannabis, and cannabis delivery devices; requiring a
1890 medical marijuana treatment center to comply with
1891 certain standards in the production and distribution
1892 of edibles; requiring the department to establish,
1893 maintain, and control a computer software seed-to-sale
1894 marijuana tracking system; requiring background
1895 screening of owners, officers, board members, and
1896 managers of medical marijuana treatment centers;



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1897 requiring the department to establish protocols and
1898 procedures for operation, conduct periodic
1899 inspections, and restrict location of medical
1900 marijuana treatment centers; providing a limit on
1901 county and municipal permit fees; authorizing counties
1902 and municipalities to determine the location of
1903 medical marijuana treatment centers by ordinance under
1904 certain conditions; providing penalties; authorizing
1905 the department to impose sanctions on persons or
1906 entities engaging in unlicensed activities; providing
1907 that a person is not exempt from prosecution for
1908 certain offenses and is not relieved from certain
1909 requirements of law under certain circumstances;
1910 providing for certain school personnel to possess
1911 marijuana pursuant to certain established policies and
1912 procedures; providing that certain research
1913 institutions may possess, test, transport, and dispose
1914 of marijuana subject to certain conditions; providing
1915 applicability with respect to employer-instituted
1916 drug-free workplace programs; amending ss. 458.331 and
1917 459.015, F.S.; providing additional acts by a
1918 physician or an osteopathic physician which constitute
1919 grounds for denial of a license or disciplinary action
1920 to which penalties apply; creating s. 381.988, F.S.;
1921 providing for the establishment of medical marijuana
1922 testing laboratories; requiring the Department of
1923 Health, in collaboration with the Department of
1924 Agriculture and Consumer Services and the Department
1925 of Environmental Protection, to develop certification



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1926 standards and rules; providing limitations on the
1927 acquisition and distribution of marijuana by a testing
1928 laboratory; providing an exception for transfer of
1929 marijuana under certain conditions; requiring a
1930 testing laboratory to use a department-selected
1931 computer tracking system; providing grounds for
1932 disciplinary and administrative action; authorizing
1933 the department to refuse to issue or renew, or suspend
1934 or revoke, a testing laboratory license; creating s.
1935 381.989, F.S.; defining terms; directing the
1936 department and the Department of Highway Safety and
1937 Motor Vehicles to institute public education campaigns
1938 relating to cannabis and marijuana and impaired
1939 driving; requiring evaluations of public education
1940 campaigns; authorizing the department and the
1941 Department of Highway Safety and Motor Vehicles to
1942 contract with vendors to implement and evaluate the
1943 campaigns; amending ss. 385.211, 499.0295, and 893.02,
1944 F.S.; conforming provisions to changes made by the
1945 act; creating s. 1004.4351, F.S.; providing a short
1946 title; providing legislative findings; defining terms;
1947 establishing the Coalition for Medical Marijuana
1948 Research and Education within the H. Lee Moffitt
1949 Cancer Center and Research Institute, Inc.; providing
1950 a purpose for the coalition; establishing the Medical
1951 Marijuana Research and Education Board to direct the
1952 operations of the coalition; providing for the
1953 appointment of board members; providing for terms of
1954 office, reimbursement for certain expenses, and



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1955 meetings of the board; authorizing the board to
1956 appoint a coalition director; prescribing the duties
1957 of the coalition director; requiring the board to
1958 advise specified entities and officials regarding
1959 medical marijuana research and education in this
1960 state; requiring the board to annually adopt a Medical
1961 Marijuana Research and Education Plan; providing
1962 requirements for the plan; requiring the board to
1963 issue an annual report to the Governor and the
1964 Legislature by a specified date; requiring the
1965 Department of Health to submit reports to the board
1966 containing specified data; specifying responsibilities
1967 of the H. Lee Moffitt Cancer Center and Research
1968 Institute, Inc.; amending s. 1004.441, F.S.; revising
1969 a definition; amending s. 1006.062, F.S.; requiring
1970 district school boards to adopt policies and
1971 procedures for access to medical marijuana by
1972 qualified patients who are students; providing
1973 emergency rulemaking authority; providing for venue
1974 for a cause of action against the department;
1975 providing for defense against certain causes of
1976 action; directing the Department of Law Enforcement to
1977 develop training for law enforcement officers and
1978 agencies; amending s. 385.212, F.S.; renaming the
1979 department's Office of Compassionate Use; providing
1980 severability; providing an effective date.