

Good morning Chairwoman Lee and members of the Senate Human Services Committee. My name is Jason Wahl, Director of the Division of Medical Marijuana within the Department of Health (NDDoH). I am here to provide information on House Bill 1213 related to proposed changes to language within the Medical Marijuana chapter of state law. A number of these changes are beneficial for registered qualifying patients and address certain areas we identified since the last legislative session.

Several changes in the bill provide clarifying language to state law as well as amending certain terminology. These proposed changes are beneficial for the program. Examples of changes would:

- Provide a maximum size of a cannabinoid solution. This change will help ensure the potential of a large beverage with marijuana infused in it does not become part of the program.
- Amend the requirement to print a new registry identification card when a change occurs with a cardholder's information. Currently, if a cardholder updates their address, state law requires a new card be issued. Since addresses are not included on a registry identification card, the requirement to print a new card may not be necessary.
- Amend the requirement for a manufacturing facility or dispensary to immediately notify law enforcement of an inventory discrepancy. The proposed change would allow an entity time to perform additional work to determine what, if any, discrepancy exists and the reasons for such a discrepancy prior to involving law enforcement. State law would still require a manufacturing facility and dispensary to immediately notify us of an inventory discrepancy allowing us the opportunity to work with the entity or conduct an immediate on-site review.

The current law for the Medical Marijuana Program requires designated caregiver applicants to complete a criminal history record check. We may wait two weeks or longer to receive a report once we have submitted the necessary information. We have had phone calls from family members of individuals who have a terminal illness. Upon hearing the process to obtain a designated

caregiver card, family members have identified it is too long given the medical condition. The individuals with a terminal illness may need a designated caregiver as their condition makes it difficult for them to travel to a dispensary to make a purchase. The proposed change would allow a waiver of the criminal history record check requirement if an individual's debilitating medical condition is a terminal illness.

A bona fide provider-patient relationship is a requirement established in state law. When this relationship no longer exists, state law requires us to immediately void a registry identification card. When a health care provider moves to a new location making it not feasible to continue the provider-patient relationship, registered qualifying patients risk having their card voided even though they have complied with requirements in state law. The proposed change would allow qualifying patients time to establish a new relationship with a provider in this situation.

Information related to the program that is maintained by the NDDoH is confidential. We may provide information only if state law specifically identifies an exception to the confidential requirement. The proposed changes related to the annual report would allow us an opportunity to provide additional data and information about the program while ensuring no individual is being identified.

This concludes my testimony. I am happy to answer any questions you may have.