

2025 SENATE HUMAN SERVICES

SB 2294

2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Fort Lincoln Room, State Capitol

SB 2294
1/29/2025

Relating to medical marijuana recordkeeping, cannabinoid edible products, patient qualifications, and disclosure of information.

9:29 a.m. Chairman Lee opened the hearing.

Members Present: Chairman Lee, Vice-Chairman Weston, Senator Van Oosting, Senator Clemens, Senator Hogan, Senator Roers.

Discussion Topics:

- Controlled setting
- Geometric Molds
- Interstate competition
- Emergency clause
- Telehealth visits
- Testing
- Caregiver background checks
- Utilization patterns

9:29 a.m. Senator Roers introduced the bill.

9:31 a.m. Casey Neumann, CEO of Pure Dakota Health, testified in favor and submitted testimony #32251 and #32572

9:46 a.m. Gail Pederson, Special Practice RN, testified in favor and submitted testimony #32452.

9:54 a.m. Casey Neumann, CEO of Pure Dakota Health, answered committee questions.

9:58 a.m. Jason Wahl, Director of the Medical Marijuana Program, Department of Health and Human Services, testified in neutral.

Additional written testimony:

Courtney Koebele, Executive Director, North Dakota Medical Association, submitted testimony in opposition #32290

10:15 a.m. Chairman Lee closed the hearing.

Andrew Ficek, Committee Clerk

Testimony in Support of Legislative Adjustments to the North Dakota Medical Marijuana Program

Dear Chairperson Lee and Members of the Committee,

Thank you for allowing me the opportunity to testify. My name is Casey Neumann and I am the CEO of Pure Dakota Health, with medical dispensaries in Bismarck, Fargo, and Williston. I also operate Pure Dakota, North Dakota's medical marijuana manufacturing facility. I am not only a business owner—I am a North Dakotan who sees first-hand the patients who depend on this program for relief.

Every day, I see patients who share how medical marijuana has changed their lives. I hear from parents whose children's seizures have gone from hundreds a day to only a few rare occurrences. I see people who have suffered in silence with debilitating anxiety finally able to leave their homes, go to work, and engage with their communities. These are real people—our neighbors, friends, and family members—whose lives have been transformed.

But for every success story, there are heartbreaking accounts of those who are struggling. Patients who can't afford the frequent certification renewals or can't find a provider willing to certify their condition. Rural residents are forced to travel hours for an in-person appointment—not to receive a diagnosis, but simply to have a provider confirm a condition they've already been living with for years, just to satisfy state requirements for medical marijuana eligibility. Seniors and veterans, many of whom are already navigating complex medical systems are being asked to jump through unnecessary hoops.

We can do better.

Challenges That Must Be Addressed

1. Access to Certification

The requirement for an in-person visit to certify a qualifying condition creates an unnecessary barrier. Patients aren't asking providers to diagnose them—they are simply seeking certification to confirm what they already know: that they meet the program's requirements. For someone with chronic pain or mobility challenges, traveling long distances is more than inconvenient; it can be impossible.

What needs to change

Allow Telehealth for Initial Certifications: Patients should not have to endure the burden of in-person visits when telehealth can provide the same level of care. This change would make certification more accessible for rural residents and those with mobility challenges.

2. The Financial Burden of Certification

Many patients are already financially struggling due to medical expenses, and the short certification periods only add to their burden. When someone is paying \$175 to \$300 for a single visit, sometimes multiple times per year, it forces them to make impossible choices between medicine and other basic needs.

What needs to change

Extend Certification Durations: Lengthening certification periods to one year for new patients and two years for renewals would reduce financial strain and prevent unnecessary hurdles.

3. A Lack of Product Options

The absence of edibles in the program has pushed patients to unsafe and illegal practices. I've spoken with individuals who attempt to make their own edibles at home without proper equipment or understanding of dosage. This not only creates products that are ineffective but also puts them at serious risk of harm.

What needs to change

Permit Limited Edible Products: We are proposing the addition of a single edible product to the medical program. This product would be a 1-inch geometric square, clearly marked with the state-approved THC symbol to ensure proper identification and compliance. This solution has been developed in collaboration with the Department of Health & Human Services and prior DHHS Legislative Committees to provide patients with a safe and regulated option.

Allowing safely produced, pre-dosed edibles ensures that patients have access to the medicine they need without resorting to unsafe or illegal alternatives. With clear packaging guidelines—such as limiting doses to 5 mg per serving and 50 mg per package—Pure Dakota is fully equipped to comply with safety regulations, protect patients, and expand their options.

4. The Impact of Neighboring States

When Montana legalized recreational marijuana, we witnessed a direct and measurable impact on Western North Dakota's medical program. Patients began crossing the border for easier access, creating strain on the system for those who remained. This isn't speculation—I've seen the evidence in our revenue. Since recreational marijuana sales began in Montana on January 1, 2022, revenue at our Williston dispensary has declined by 51%. This wasn't due to a recession or lack of interest—our other dispensaries saw revenue increases or remained stable. The only clear factor driving this decline is that patients who once purchased from us in Williston are now crossing the border to purchase marijuana illegally.

The only reason we survived is that the population density in the west is relatively low. But with Minnesota's legalization, Eastern North Dakota's medical program could face crippling challenges. Some patients will leave the state in search of recreational options, which not only drives up costs for those who rely on the program and cannot afford to leave, but also puts them at risk of breaking the law.

What needs to change

Simplify Certification for Vulnerable Populations: Veterans and seniors often face the greatest barriers to access. Allowing them to use attestations and government IDs instead of formal provider certifications would ensure they are not left behind.

Why This Matters

North Dakota's medical marijuana program has already demonstrated its profound value. In the fiscal year of 2023, it served over 9,500 patients, generated \$21.6 million in sales, and contributed \$1.5 million in tax revenue. But we are at a critical juncture. Without these adjustments, the program risks failing the very people it was designed to help.

This isn't just about numbers; it's about the lives of our friends, families, and neighbors. It's about ensuring that those in our communities who depend on this program can continue to live fuller, healthier lives. As North Dakotans, we have a responsibility to support one another—not force our neighbors to leave the state to access the care they desperately need.

A Call to Action

We have the opportunity to make meaningful changes that will strengthen North Dakota's medical marijuana program and protect the patients who depend on it. I urge you to:

1. Approve telehealth for initial certifications.
2. Extend certification durations.
3. Allow the inclusion of edible products under strict guidelines.
4. Simplify certification processes for veterans, seniors, and out-of-state patients.

Thank you for your time and consideration. I am more than willing to answer any questions or provide additional details about these recommendations. Together, we can ensure this program continues to serve the people who need it most.

Sincerely,

Casey Neumann

CEO, Pure Dakota Health

701-226-5200 | casey@puredakotand.com



Senate Human Services Committee
SB 2294
January 29, 2025

Good morning, Chair Lee and Committee Members. I am Courtney Koebele and I serve as executive director of the North Dakota Medical Association. The North Dakota Medical Association is the professional membership organization for North Dakota physicians, residents, and medical students.

NDMA is opposed to SB 2294. This bill allows persons over 50 to bypass medical certification. This category of patients is uniquely susceptible because of the number of chronic conditions and medications in that age category.

At this point we don't know if the certification process is a barrier, but there are good public health reasons to keep the certification process in the law.

Marijuana is an addictive drug that can have significant adverse public health impacts, particularly if used in combination with medications a patient may already be prescribed. Or is the goal to have access to medical marijuana for non-medicinal purposes? This bill has that effect in allowing people over age 50 to directly apply for a medical marijuana card without any health care professional oversight.

Thank you for your time today. I would be happy to answer any questions you may have.

Thank you chairman Lee, vice chair Weston for allowing me to speak in support of SB 2294

I am Gail Pederson, Special Practice RN in Holistic Nursing, Board Certified Holistic Nurse and a member of the American Cannabis Nurses Assn. I currently sit on their Government Policy and Advocacy Committee. Did you know that cannabis Nursing is now an recognized Specialty within the American Nurses Association?

I applaud the changes that are made with this bill, but it continues to place barriers on our patients. These include cost of our products which are among the most expensive in the country.

SECTION 1. AMENDMENT. Subsection 4 of section 19-24.1-01 of the North Dakota

Line 23 a. The relationship is not for the sole purpose of providing written certification for the medical use of marijuana.

It is really time for this to be removed. This is what has been created with patients whose own usual provider are unable to certify for whatever reason, among them lack of knowledge. Patients, many times know more than their providers do about basic cannabis therapeutics. This has created the rise of independent clinics. Thank God for our Nurse Practitioners who have stepped up to provide care.

SECTION 7. A new section to chapter 19-24.1 of the North Dakota Century Code is created and enacted as follows:

Qualifying patients - Seniors

My long time friend who is caring for her mother with dementia wanted to acquire a cannabis card for her mom. She is very leary about the black box medications that are usually prescribed with increased behaviors. She is not allowed a card right now.....her mom hasn't had an official ID for at least five years. Their provider says Yes, but our department says no! This is a severe misjustice in our law and it has caused her to follow the illicit market with out of state products.

I would like to see changes in facility restrictions, this in anticipation that cannabis will be rescheduled to a less restrictive category in the future. I bring this up for my friend, John. John was probably the first person I knew that was a "dealer". I hadn't talked to him for years, but he called me up and I helped him apply for a card for his awful pain. John died of cancer a few short months later.... he had no caregivers around him and he died in the nursing home, unable to use the plant he had used all his life to help him get through life. The law needs to change.

19-24.1-35. Facility restrictions.

1. A basic care facility, nursing facility, assisted living facility, adult day care facility, or adult foster care home licensed in the state may adopt reasonable restrictions/allowances on the medical use of marijuana by residents or individuals receiving inpatient services, including:

a. The facility ~~will not~~ may, according to their policies store or maintain the registered qualifying patient's supply of usable marijuana.

b. The facility, ~~caregivers~~, or hospice agencies serving the facility's residents are not

responsible for providing the usable marijuana for registered qualifying patients or

assisting with the medical use of marijuana, unless they are a registered caregiver and following the facilities policies.

c. Usable marijuana can be consumed by a method other than vaporizing or combustion.

d. Consumption of usable marijuana is limited to a place specified by the facility in their written policy.

This would be a new section and I feel a big one! Our patients have no recourse for poor quality products. Our products are not good for being among the highest priced in the US. It should also be included in the annual report to the legislators.

33-44-01-36. Reporting product complaints by consumers/caregivers.

A registered qualifying patient can report product complaints to the ND Department of Health for tracking and quality assurance, with the Department establishing a reporting track on the webpage. This will include patient ID information, Lot #, purchase date, complaint with photo verification when possible. This will be included in 19-24.1-39.

19-24.1-39. Report to legislative management.

9. Overview of patient quality complaints including

-Number of Complaints

-Type of complaint

I could not give our tincture products in ANY facility because of the current labeling. While I did talk to Mr Neuman from PDH several years ago and they did make changes, it is still not labeled appropriately to dispense. Curaleaf has no labeling on the bottle. This would not fly at any Pharmacy.

33-44-01-26. Manufacturing facility labeling.

1. A manufacturing facility shall label all usable marijuana in accordance with the following before their sale or transfer to a dispensary:

c. A container holding a medical cannabinoid product must include the following information:

A tincture product will have a waterproof/oilproof label directly on the dispensing bottle outlining the name of product and an estimated dosage per drop.

The ability to grow several plants was in our original bill...and the food grade edible is only reasonable. People want to know what dose they are taking.

The major complaint I have gotten from seniors is the tincture packaging and childproof droppers. I haven't had a grandchild in my house for 1 1/2 years....the need for that cap is not necessary and should be an extra option at the dispensary like it is in the pharmacy.

Thank you for looking at these changes, and I stand for questions.

**Gail Pederson, SPRN, HN-BC
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Valley City, ND 58072
701-490-2132**

PURE DAKOTA STANDARD OPERATING PROCEDURE EDIBLE FORMULATION

SOP #X -Edible Formulation

Purpose-

At Pure Dakota we use different kinds of food grade edible molds that have specific filling instructions. Each specific filling instruction must be followed to guarantee the apparatus works correctly. Lab personnel will use tools within the lab to fill the edible molds successfully.

Responsibilities:

Lab personnel will begin portioning edibles once Hash has been tested and resulted. Lab personnel will fill the edible molds according to the specified instructions and set aside for packaging. Lab personnel are responsible for cleaning and sanitizing all tools and glassware immediately after the process has been completed. Lab personnel will review the instructions that adhere to the RoboCAP RL-301 VF Semi-Automatic Liquid Cartridge Filler.

Policies/Procedures:

- a. Choose the proper lot# and coinciding PDO that has a new passing result.
- b. Move the jar from the Vault to the Robot Room in Biotrack.
- c. Warm up PDO using a hot water bath or oven set to 140 degrees Fahrenheit.
- d. PDO should start to warm up and become less viscous (liquid) than it was at room temp.
- e. Formulate PDO into edible mixture and place into the mixing container. (?)
- f. Once the PDO/ (edible mixture?) has been warmed enough to pour out of the mixing container, follow **SOP# 70.1- Set-Up and Operation of the RoboCAP RL-301VF Semi-Automatic Liquid Cartridge Filler.**
- g. As (X amount of mL) edibles are being portioned by the RoboCAP RL-301VF, food grade silicone molds of 150 edibles will be briefly shown to the camera for compliance then placed into a chiller to settle/rest.
- h. After edibles have been in the chiller for (X amount of time) they will be removed from food grade mold and placed onto a clean surface lined with parchment paper.
- i. Edibles will then be coated in sugar to protect from coagulation and to help with handling during the packaging.
- j. Repeat steps G-H until the entire pressure vessel full of edible mixture has been dispensed into food grade silicone molds of size (--mL).
- k. After all of the edibles have been portioned and no residual (edible mixture) remains in the pressure vessel, follow **SOP# 70.2 - Cleaning of the RoboCAP RL-301VF Semi-Automatic Liquid Cartridge Filler.**
- l. Weekly maintenance of the RobCAP machine will need to be performed following **SOP#70.3 - Preventative Maintenance of the RoboCAP RL-301VF Semi-Automatic Liquid Cartridge Filler.**

MELT-TO-MAKE™ GUMMY DRYING GUIDE

Drying your gummies properly is a critical step in the gummy production process. It is of great importance to dry your finished gummies to the target water activity level to ensure their optimal food safety, stability and texture. A temperature/humidity gauge is required to monitor your drying conditions. We highly recommend using a dehumidifier (or humidifier for more arid conditions) to achieve a controlled relative humidity of 35% in your drying room, with a temperature that does not exceed 80°F. A water activity meter is also recommended if one wishes to precisely control the final water activity of the finished product for the most consistent end result.

DRYING TIMES WILL VARY DEPENDING ON THE SIZE OR WEIGHT OF YOUR GUMMIES, AS WELL AS THE RELATIVE HUMIDITY IN YOUR DRYING ROOM

GELATIN GUMMIES

(SUGAR COATED AND DRIED
ON SHEET PANS IN A SINGLE LAYER)

Final water activity range: 0.65-0.67

GUMMY SIZE: Less than 3 g

Estimated drying time: 12-24 hours
RH in drying room: 35%

PECTIN GUMMIES

(SUGAR COATED AND DRIED
ON SHEET PANS IN A SINGLE LAYER)

Final water activity range: 0.60-0.63

GUMMY SIZE: Less than 3 g

Estimated drying time: 48-96 hours*
RH in drying room: 35%

*Continue drying past 48 hours until
the desired consistency and water
activity level is reached.

SUGAR-FREE PECTIN GUMMIES

(WAX COATED AND DRIED
ON SHEET PANS IN A SINGLE LAYER)

Final water activity range: 0.60-0.63

GUMMY SIZE: Less than 3 g

Estimated drying time: 72-120 hours
*RH in drying room: 35%

*Continue drying past 72 hours until
the desired consistency and water
activity level is reached.

GELATIN/PECTIN BLEND GUMMIES

(SUGAR COATED AND DRIED
ON SHEET PANS IN A SINGLE LAYER)

Final water activity range: 0.60-0.63 for
a higher melting point

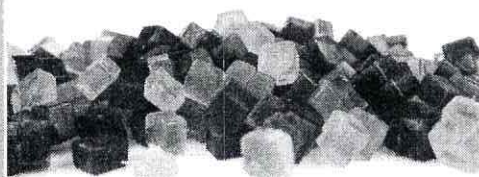
Final water activity range: 0.65-0.67 for
a softer chew

GUMMY SIZE: Less than 3

Estimated drying time: 24-72 hours
RH in drying room: 35% - depending on
your texture preference

WAX COATING

If you are drying your gummies in the provided
wax coating, please expect that your gummies
will typically take an extra day to dry.



WATER ACTIVITY METER

[Click here](#) or scan the QR code to view
our Pectin equipment list including our
preferred water activity meter.



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2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Fort Lincoln Room, State Capitol

SB 2294
1/29/2025

Relating to medical marijuana recordkeeping, cannabinoid edible products, patient qualifications, and disclosure of information.

2:47 p.m. Chairman Lee opened the hearing.

Members Present: Chairman Lee, Vice-Chairman Weston, Senator Van Oosting, Senator Clemens, Senator Hogan, Senator Roers.

Discussion Topics:

- ID access barriers due to medical conditions
- Telehealth
- Predatory providers

2:49 p.m. Courtney Koebele, Executive Director of ND Medical Association, answered committee questions.

3:01 p.m. Senator Roers moved amendment LC#25.1233.01001.

3:01 p.m. Senator Weston seconded the motion

Senators	Vote
Senator Judy Lee	Y
Senator Kent Weston	Y
Senator David A. Clemens	Y
Senator Kathy Hogan	Y
Senator Kristin Roers	Y
Senator Desiree Van Oosting	Y

Motion passed 6-0-0.

3:03 p.m. Senator Roers moved Do Pass as amended.

3:03 p.m. Senator Weston seconded the motion.

Senators	Vote
Senator Judy Lee	Y
Senator Kent Weston	Y
Senator David A. Clemens	N
Senator Kathy Hogan	Y
Senator Kristin Roers	Y
Senator Desiree Van Oosting	Y

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Motion passed 5-1-0.

Senator Roers will carry the bill.

3:05 p.m. Chairman Lee closed the hearing.

Andrew Ficek, Committee Clerk

January 29, 2025

Sixty-ninth
Legislative Assembly
of North Dakota

PROPOSED AMENDMENTS TO

SENATE BILL NO. 2294

Introduced by

Senators Roers, Cleary, Meyer

Representatives Dockter, M. Ruby, Vetter

1-29-25
JAB 1087

1 A BILL for an Act to create and enact ~~two~~a new ~~sections~~section to chapter 19-24.1 of the North
2 Dakota Century Code, relating to qualifying ~~senior and~~ nonresident medical marijuana patients;
3 to amend and reenact subsection 4 of section 19-24.1-01, subsection 8 of section 19-24.1-01,
4 subsection 26 of section 19-24.1-01, subsection 47 of section 19-24.1-01, and sections
5 19-24.1-03, 19-24.1-03.1, 19-24.1-11, and 19-24.1-37 of the North Dakota Century Code,
6 relating to medical marijuana recordkeeping, cannabinoid edible products, patient qualifications,
7 and disclosure of information.

8 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

9 **SECTION 1. AMENDMENT.** Subsection 4 of section 19-24.1-01 of the North Dakota
10 Century Code is amended and reenacted as follows:

- 11 4. "Bona fide provider-patient relationship" means a treatment or counseling relationship
12 between a health care provider and patient in which all the following are present:
- 13 a. The health care provider has reviewed the patient's relevant medical records and
14 completed a full assessment of the patient's medical history and current medical
15 condition, including a relevant, ~~in-person,~~ medical evaluation of the patient.
 - 16 b. The health care provider has created and maintained records of the patient's
17 condition in accordance with medically accepted standards.
 - 18 c. The patient is under the health care provider's continued care for the debilitating
19 medical condition that qualifies the patient for the medical use of marijuana.

AB 2087

d.~~e.~~ The health care provider has a reasonable expectation that provider will continue to provide followup care to the patient to monitor the medical use of marijuana as a treatment of the patient's debilitating medical condition.

e.~~d.~~ The relationship is not for the sole purpose of providing written certification for the medical use of marijuana.

SECTION 2. AMENDMENT. Subsection 8 of section 19-24.1-01 of the North Dakota Century Code is amended and reenacted as follows:

8. "Cannabinoid edible product" means a ~~food or potable liquid~~ soft or hard lozenge in a geometric square shape into which a cannabinoid concentrate or the dried leaves or flowers of the plant of the genus cannabis is incorporated. The maximum concentration or amount of tetrahydrocannabinol permitted in a serving of a cannabinoid edible product is five milligrams and in a package is fifty milligrams.

SECTION 3. AMENDMENT. Subsection 26 of section 19-24.1-01 of the North Dakota Century Code is amended and reenacted as follows:

26. "Medical cannabinoid product" means a product intended for human consumption or use which contains cannabinoids.

a. Medical cannabinoid products are limited to the following forms:

- (1) Cannabinoid solution;
- (2) Cannabinoid capsule;
- (3) Cannabinoid transdermal patch; ~~and~~
- (4) Cannabinoid topical; and
- (5) Cannabinoid edible product.

b. "Medical cannabinoid product" does not include:

- (1) ~~A cannabinoid edible product;~~
- (2) A cannabinoid concentrate by itself; or
- (3)(2) The dried leaves or flowers of the plant of the genus cannabis by itself.

SECTION 4. AMENDMENT. Subsection 47 of section 19-24.1-01 of the North Dakota Century Code is amended and reenacted as follows:

47. "Usable marijuana" means a medical marijuana product or the dried leaves or flowers of the plant of the genus cannabis in a combustible delivery form. ~~However, the term~~

1 ~~does not include a cannabinoid edible product.~~ In the case of a registered qualifying
2 patient who is a minor, "usable marijuana" is limited to pediatric medical marijuana.

3 **SECTION 5. AMENDMENT.** Section 19-24.1-03 of the North Dakota Century Code is
4 amended and reenacted as follows:

5 **19-24.1-03. Qualifying patients - Registration.**

- 6 1. A qualifying patient is not eligible to purchase, use, or possess usable marijuana under
7 the medical marijuana program unless the qualifying patient has a valid registry
8 identification card.
- 9 2. A qualifying patient application for a registry identification card is complete and eligible
10 for review if an applicant submits to the department:
- 11 a. A nonrefundable application fee in an amount not to exceed ~~twenty-five~~;
12 (1) Twenty-five dollars for a registry identification card valid for one year; or
13 (2) Forty dollars for a registry identification card valid for two years.
- 14 b. An original written certification, which must include:
- 15 (1) The name, address, and telephone number of the practice location of the
16 applicant's health care provider;
- 17 (2) The health care provider's North Dakota license number;
- 18 (3) The health care provider's medical or nursing specialty;
- 19 (4) The applicant's name and date of birth;
- 20 (5) The applicant's debilitating medical condition and the medical justification
21 for the health care provider's certification of the patient's debilitating medical
22 condition;
- 23 (6) Attestation the written certification is made in the course of a bona fide
24 provider-patient relationship;
- 25 (7) Whether the health care provider authorizes the patient to use an enhanced
26 amount of the dried leaves or flowers of the plant of the genus cannabis in a
27 combustible delivery form to treat or alleviate the patient's debilitating
28 medical condition of cancer; and
- 29 (8) The health care provider's signature and the date.
- 30 c. An original qualifying patient application for a registry identification card form
31 established by the department which must include all of the following:

JB 4007

- 1 (1) The applicant's name, address, and date of birth.
- 2 (2) The name, address, and date of birth of the applicant's proposed
- 3 designated caregiver, if any.
- 4 (3) A photographic copy of the applicant's North Dakota identification. The
- 5 North Dakota identification must be available for inspection and verification
- 6 upon request of the department. If the applicant is a minor, a certified copy
- 7 of a birth record or a photographic copy of the minor's North Dakota
- 8 identification is required.
- 9 (4) The applicant's or guardian's signature and the date, or in the case of a
- 10 minor, the signature of the minor's parent or legal guardian with
- 11 responsibility for health care decisions and the date.
- 12 (5) A disclosure that possession of a firearm by a person who possesses
- 13 marijuana may be a violation of federal law.
- 14 d. A signed consent for release of medical information related to the applicant's
- 15 debilitating medical condition, on a form provided by the department.
- 16 e. A recent two-by-two inch [5.08-by-5.08 centimeter] photograph of the applicant.
- 17 f. Any other information or material required by rule adopted under this chapter.
- 18 3. If the applicant is unable to submit the required application information due to age or
- 19 medical condition, the individual responsible for making medical decisions for the
- 20 applicant may submit the application on behalf of the applicant. The individual
- 21 responsible for making medical decisions:
- 22 a. Must be identified on the qualifying patient application for a registry identification
- 23 card; and
- 24 b. Shall provide a photographic copy of the individual's department-approved
- 25 identification. The identification must be available for inspection and verification
- 26 upon the request of the department.
- 27 4. If the applicant is a minor, the department may waive the application or renewal fee if:
- 28 a. The parent or legal guardian of the applicant is the applicant's registered
- 29 designated caregiver; and
- 30 b. The applicant resides with the applicant's registered designated caregiver.

Jan 507

SECTION 6. AMENDMENT. Section 19-24.1-03.1 of the North Dakota Century Code is amended and reenacted as follows:

19-24.1-03.1. Qualifying patients - Veterans.

In lieu of the written certification required under section 19-24.1-03, a veteran receiving treatment from a federal veterans' affairs entity may submit to the department a copy of the veterans' affairs medical records identifying a diagnosis of a debilitating medical condition and a copy of military discharge documents and an attestation the veteran is diagnosed with a debilitating medical condition. The department may use the medical records and discharge documents and attestation in place of a written certification to approve or deny the application under section 19-24.1-05. The department shall issue a registry identification card within thirty calendar days of approving an application under this section.

~~**SECTION 7.** A new section to chapter 19-24.1 of the North Dakota Century Code is created and enacted as follows:~~

~~**Qualifying patients - Seniors.**~~

~~In lieu of the written certification required under section 19-24.1-03, a resident of the state over the age of fifty may submit to the department a copy of the patient's driver's license or department-approved identification and an attestation the individual has been diagnosed with a debilitating medical condition. The department may use the driver's license or department-approved identification and attestation in place of a written certification to approve or deny the application under section 19-24.1-05. The department shall issue a registry identification card within thirty calendar days of approving an application under this section.~~

SECTION 7. A new section to chapter 19-24.1 of the North Dakota Century Code is created and enacted as follows:

Qualifying patients - Nonresidents.

In lieu of the written certification required under section 19-24.1-03, a nonresident who holds a valid out-of-state medical marijuana card issued by the state in which the nonresident resides, may submit to the department a copy of the nonresident's out-of-state department-approved identification and a copy of an out-of-state medical marijuana card. The department-approved identification and out-of-state medical marijuana card must be issued by the same state. The department may use the out-of-state department-approved identification and out-of-state medical marijuana card in place of a written certification to approve or deny the

JB 6/27

application under section 19-24.1-05. The department shall issue a registry identification card within thirty calendar days of approving an application under this section. The issued registry identification card expiration date must be the same as the out-of-state medical marijuana card.

SECTION 8. AMENDMENT. Section 19-24.1-11 of the North Dakota Century Code is amended and reenacted as follows:

19-24.1-11. Registry identification cards.

1. The contents of a registry identification card must include:

- a. The name of the cardholder;
- b. A designation as to whether the cardholder is a qualifying patient, designated caregiver, or compassion center agent;
- c. A designation as to whether a qualifying patient is a minor;
- d. A designation as to whether a qualifying patient or a designated caregiver's qualifying patient is authorized to use an enhanced amount of dried leaves or flowers of the plant of the genus cannabis to treat or alleviate the patient's debilitating medical condition of cancer;
- e. The date of issuance and expiration date;
- f. A random ten-digit alphanumeric identification number containing at least four numbers and at least four letters which is unique to the cardholder;
- g. If the cardholder is a designated caregiver, the random identification number of the qualifying patient the designated caregiver is authorized to assist;
- h. A photograph of the cardholder; and
- i. The phone number or website address at which the card can be verified.

2. Except as otherwise provided in this section or rule adopted under this chapter, a registry identification card ~~expiration date must be~~ valid for one year after from the date of issuance for first time qualifying patients.

3. ~~If a health care provider limits the written certification until a specified date, less than one year, the registry identification card expires on that date~~ A registry identification card renewal is valid for two years from the date of issuance for a qualifying patient who previously was issued a registry identification card.

SECTION 9. AMENDMENT. Section 19-24.1-37 of the North Dakota Century Code is amended and reenacted as follows:

July 7

19-24.1-37. Confidentiality.

1. Except as provided under subsection 2, information kept or maintained by the department is confidential, including information in a registration application or renewal and supporting information submitted by a qualifying patient, designated caregiver, compassion center, proposed compassion center, or compassion center agent, including information on designated caregivers and health care providers.
2. Information kept or maintained by the department may be disclosed as necessary for:
 - a. The verification of registration certificates and registry identification cards under this chapter;
 - b. Submission of the annual report required by this chapter;
 - c. Submission to the North Dakota prescription drug monitoring program;
 - d. Notification of state or local law enforcement of apparent criminal violation;
 - e. Notification of state and local law enforcement about falsified or fraudulent information submitted for purposes of obtaining or renewing a registry identification card;
 - f. Notification of the North Dakota board of medicine or North Dakota board of nursing if there is a reason to believe a health care provider provided a written certification and the department has reason to believe the health care provider otherwise violated this chapter; or
 - g. Data for statistical purposes in a manner such that an individual or compassion center is not identified.
3. Upon a cardholder's written request, the department may confirm the cardholder's status as a registered qualifying patient or a registered designated caregiver to a third party, such as a landlord, school, medical professional, or court.
4. Information submitted to a local government to demonstrate compliance with any security requirements required by local zoning ordinances or regulations is confidential.
5. Upon written request of a compassion center or a compassion center's designee, the department shall comply with a request for information to a third party when necessary for the business operation of a compassion center.

**REPORT OF STANDING COMMITTEE
SB 2294**

Human Services Committee (Sen. Lee, Chairman) recommends **AMENDMENTS** ([25.1233.01001](#)) and when so amended, recommends **DO PASS** (5 YEAS, 1 NAY, 0 ABSENT AND NOT VOTING). SB 2294 was placed on the Sixth order on the calendar. This bill does not affect workforce development.

2025 HOUSE HUMAN SERVICES

SB 2294

2025 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

SB 2294
3/11/2025

Relating to qualifying nonresident medical marijuana patients, Relating to medical marijuana recordkeeping, cannabinoid edible products, patient qualifications, and disclosure of information.

3:01 p.m. Chairman M. Ruby opened the hearing.

Members Present: Chairman M. Ruby, Vice-Chairman Frelich, Representatives K. Anderson, Beltz, Dobervich, Fegley, Hendrix, Holle, Kiefert, Rios, Rohr
Members Absent: Representatives Bolinske, Davis

Discussion Topics:

- Certification
- Product options

3:02 p.m. Senator Roers, District 27, introduced the bill.

3:07 p.m. Casey Neumann, CEO of Pure Dakota Health LLC, testified in favor and submitted testimony, #40572.

3:17 p.m. Jason Wahl, Medical Marijuana Director of the ND Department of Health and Human Services, testified and answered questions.

3:19 p.m. Chairman M. Ruby adjourned the meeting.

Jackson Toman, Committee Clerk

Testimony in Support of Legislative Adjustments to the North Dakota Medical Marijuana Program

Dear Chairperson Ruby and Members of the Committee,

Thank you for allowing me the opportunity to testify. My name is Casey Neumann and I am the CEO of Pure Dakota Health, with medical dispensaries in Bismarck, Fargo, and Williston. I also operate Pure Dakota, North Dakota's medical marijuana manufacturing facility. I am not only a business owner—I am a North Dakotan who sees first-hand the patients who depend on this program for relief.

Every day, I see patients who share how medical marijuana has changed their lives. I hear from parents whose children's seizures have gone from hundreds a day to only a few rare occurrences. I see people who have suffered in silence with debilitating anxiety finally able to leave their homes, go to work, and engage with their communities. These are real people—our neighbors, friends, and family members—whose lives have been transformed.

But for every success story, there are heartbreaking accounts of those who are struggling. Patients who can't afford the frequent certification renewals or can't find a provider willing to certify their condition. Rural residents are forced to travel hours for an in-person appointment—not to receive a diagnosis, but simply to have a provider confirm a condition they've already been living with for years, just to satisfy state requirements for medical marijuana eligibility. Veterans, many of whom are already navigating complex medical systems, are being asked to jump through unnecessary hoops.

We can do better.

Challenges That Must Be Addressed

1. Access to Certification

The requirement for an in-person visit to certify a qualifying condition creates an unnecessary barrier. Patients aren't asking providers to diagnose them—they are simply seeking certification to confirm what they already know: that they meet the program's requirements. For someone with chronic pain or mobility challenges, traveling long distances is more than inconvenient; it can be impossible.

What needs to change

Allow Telehealth for Initial Certifications: Patients should not have to endure the burden of in-person visits when telehealth can provide the same level of care. This change would make certification more accessible for rural residents and those with mobility challenges.

2. The Financial Burden of Certification

Many patients are already financially struggling due to medical expenses, and the short certification periods only add to their burden. When someone is paying \$175 to \$300 for a single visit, sometimes multiple times per year, it forces them to make impossible choices between medicine and other basic needs.

What needs to change

Extend Certification Durations: Lengthening certification periods to one year for new patients and two years for renewals would reduce financial strain and prevent unnecessary hurdles.

3. A Lack of Product Options

The absence of edibles in the program has pushed patients to unsafe and illegal practices. I've spoken with individuals who attempt to make their own edibles at home without proper equipment or understanding of dosage. This not only creates products that are ineffective but also puts them at serious risk of harm.

What needs to change

Permit Limited Edible Products: We are proposing the addition of a single edible product to the medical program. This product would be a 1-inch geometric square, clearly marked with the state-approved THC symbol to ensure proper identification and compliance. This solution has been developed in collaboration with the Department of Health & Human Services and prior DHHS Legislative Committees to provide patients with a safe and regulated option.

Allowing safely produced, pre-dosed edibles ensures that patients have access to the medicine they need without resorting to unsafe or illegal alternatives. With clear packaging guidelines—such as limiting doses to 5 mg per serving and 50 mg per package—Pure Dakota is fully equipped to comply with safety regulations, protect patients, and expand their options.

4. The Impact of Neighboring States

When Montana legalized recreational marijuana, we witnessed a direct and measurable impact on Western North Dakota's medical program. Patients began crossing the border for easier access, creating strain on the system for those who remained. This isn't speculation—I've seen the evidence in our revenue. Since recreational marijuana sales began in Montana on January 1, 2022, revenue at our Williston dispensary has declined by 51%. This wasn't due to a recession or lack of interest—our other dispensaries saw revenue increases or remained stable. The only clear factor driving this decline is that patients who once purchased from us in Williston are now crossing the border to purchase marijuana illegally.

The only reason we survived is that the population density in the west is relatively low. But with Minnesota's legalization, Eastern North Dakota's medical program could face crippling challenges. Some patients will leave the state in search of recreational options, which not only drives up costs for those who rely on the program and cannot afford to leave, but also puts them at risk of breaking the law.

What needs to change

Simplify Certification for Vulnerable Populations: Veterans often face the greatest barriers to access. Allowing them to use attestations and government IDs instead of formal provider certifications would ensure they are not left behind.

Why This Matters

North Dakota's medical marijuana program has already demonstrated its profound value. In the fiscal year of 2023, it served over 9,500 patients, generated \$21.6 million in sales, and contributed \$1.5 million in tax revenue. But we are at a critical juncture. Without these adjustments, the program risks failing the very people it was designed to help.

This isn't just about numbers; it's about the lives of our friends, families, and neighbors. It's about ensuring that those in our communities who depend on this program can continue to live fuller, healthier lives. As North Dakotans, we have a responsibility to support one another—not force our neighbors to leave the state to access the care they desperately need.

A Call to Action

We have the opportunity to make meaningful changes that will strengthen North Dakota's medical marijuana program and protect the patients who depend on it. I urge you to:

1. Approve telehealth for initial certifications.
2. Extend certification durations.
3. Allow the inclusion of edible products under strict guidelines.
4. Simplify certification processes for veterans and out-of-state patients.

Thank you for your time and consideration. I am more than willing to answer any questions or provide additional details about these recommendations. Together, we can ensure this program continues to serve the people who need it most.

Sincerely,

Casey Neumann

CEO, Pure Dakota Health

701-226-5200 | casey@puredakotand.com

2025 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

SB 2294
3/19/2025

Relating to medical marijuana recordkeeping, cannabinoid edible products, patient qualifications, and disclosure of information.
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10:48 a.m. Chairman M. Ruby opened the meeting.

Members Present: Chairman M. Ruby, Vice-Chairman Frelich, Representatives K. Anderson, Beltz, Bolinske, Dobervich, Fegley, Holle, Kiefert, Rios, Rohr

Members Absent: Representatives Davis, Hendrix

Discussion Topics:

- Possession limits
- Attestation of veterans
- Card expiration dates
- Card validity
- Committee action

11:00 a.m. Representative Beltz moved to amend the bill relating to possession limits of 250mg.

11:00 a.m. Representative Holle seconded the motion.

11:02 a.m. Voice vote passed.

11:09 a.m. Representative Beltz moved to amend the bill relating to creation of a form for veteran attestation.

11:10 a.m. Representative Frelich seconded the motion.

11:10 a.m. Voice vote passed.

11:12 a.m. Jason Wahl, Medical Marijuana Program, testified and answered questions.

11:27 a.m. Representative Frelich moved to amend the bill relating to card expiration dates.

11:28 a.m. Representative Beltz seconded the motion.

11:28 a.m. Voice vote passed.

11:29 a.m. Representative Frelich moved to amend the bill relating to a \$40 two year card for veteran attestation.

11:29 a.m. Representative Beltz seconded the motion.

11:29 a.m. Voice vote passed.

11:30 a.m. Representative Dobervich moved to amend the bill relating to expiration dates.

11:30 a.m. Representative K. Anderson seconded the motion.

11:30 a.m. Voice vote passed.

11:31 a.m. Jason Wahl, Medical Marijuana Program, testified and answered questions.

11:37 a.m. Representative K. Anderson moved to amend the bill relating to validity of cards.

11:37 a.m. Representative Bolinske seconded the motion.

11:37 a.m. Voice vote passed.

11:38 a.m. Representative Dobervich moved a Do Pass as amended.

11:38 a.m. Representative Frelich seconded the motion.

Representatives	Vote
Representative Matthew Ruby	Y
Representative Kathy Frelich	Y
Representative Karen Anderson	Y
Representative Mike Beltz	Y
Representative Macy Bolinske	Y
Representative Jayme Davis	AB
Representative Gretchen Dobervich	Y
Representative Cleyton Fegley	N
Representative Jared Hendrix	AB
Representative Dawson Holle	N
Representative Dwight Kiefert	N
Representative Nico Rios	N
Representative Karen Rohr	N

11:39 a.m. Motion passed 6-5-2.

Representative Bolinske will carry the bill.

11:41 a.m. Chairman M. Ruby adjourned the meeting.

Jackson Toman, Committee Clerk

March 19, 2025

Sixty-ninth
Legislative Assembly
of North Dakota

**PROPOSED AMENDMENTS TO
FIRST ENGROSSMENT**

ENGROSSED SENATE BILL NO. 2294

Introduced by

Senators Roers, Cleary, Meyer

Representatives Dockter, M. Ruby, Vetter

1 A BILL for an Act to create and enact a new section to chapter 19-24.1 of the North Dakota
2 Century Code, relating to qualifying nonresident medical marijuana patients; to amend and
3 reenact subsection 3 of section 19-24.1-01, subsection 4 of section 19-24.1-01, subsection 8 of
4 section 19-24.1-01, subsection 26 of section 19-24.1-01, subsection 47 of section 19-24.1-01,
5 and sections 19-24.1-03, ~~19-24.1-03.1~~, 19-24.1-11, and 19-24.1-37 of the North Dakota Century
6 Code, relating to medical marijuana recordkeeping, cannabinoid edible products, patient
7 qualifications, and disclosure of information.

8 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

9 **SECTION 1. AMENDMENT.** Subsection 3 of section 19-24.1-01 of the North Dakota
10 Century Code is amended and reenacted as follows:

11 3. "Allowable amount of usable marijuana" means the amount of usable marijuana a
12 registered qualifying patient or registered designated caregiver may purchase in a
13 thirty-day period under this chapter.

14 a. Except as provided under subdivision b:

15 (1) During a thirty-day period, a registered qualifying patient may not purchase
16 or have purchased by a registered designated caregiver more than two and
17 one-half ounces [70.87 grams] of dried leaves or flowers of the plant of the
18 genus cannabis in a combustible delivery form.

19 (2) At any time a registered qualifying patient, or a registered designated
20 caregiver on behalf of a registered qualifying patient, may not possess more

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than three ounces [85.05 grams] of dried leaves or flowers of the plant of the genus cannabis in a combustible delivery form.

(3) At any time, a registered qualifying patient, or a registered designated caregiver on behalf of a registered qualifying patient, may not possess more than two hundred fifty milligrams of a cannabinoid edible product.

b. Notwithstanding subdivision a, if a registered qualifying patient has a registry identification card authorizing an enhanced allowable amount:

(1) During a thirty-day period a registered qualifying patient may not purchase or have purchased by a registered designated caregiver more than six ounces [170.01 grams] of dried leaves or flowers of the plant of genus cannabis in a combustible delivery form.

(2) At any time a registered qualifying patient, or a registered designated caregiver on behalf of a registered qualifying patient, may not possess more than seven and one-half ounces [212.62 grams] of dried leaves or flowers of the plant of the genus cannabis in a combustible delivery form.

(3) At any time, a registered qualifying patient, or a registered designated caregiver on behalf of a registered qualifying patient, may not possess more than two hundred fifty milligrams of a cannabinoid edible product.

c. A registered qualifying patient may not purchase or have purchased by a registered designated caregiver more than the maximum concentration or amount of tetrahydrocannabinol permitted in a thirty-day period. The maximum concentration or amount of tetrahydrocannabinol permitted in a thirty-day period for a cannabinoid concentrate or medical cannabinoid product, or the cumulative total of both, is six thousand milligrams. At any time, a registered qualifying patient, or a registered designated caregiver on behalf of a registered qualifying patient, may not purchase or possess more than one hundred fifty-five milligrams of tetrahydrocannabinol in the form of a cannabinoid edible product.

SECTION 2. AMENDMENT. Subsection 4 of section 19-24.1-01 of the North Dakota Century Code is amended and reenacted as follows:

4. "Bona fide provider-patient relationship" means a treatment or counseling relationship between a health care provider and patient in which all the following are present:

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- 1 a. The health care provider has reviewed the patient's relevant medical records and
- 2 completed a full assessment of the patient's medical history and current medical
- 3 condition, including a relevant, ~~in-person,~~ medical evaluation of the patient.
- 4 b. The health care provider has created and maintained records of the patient's
- 5 condition in accordance with medically accepted standards.
- 6 c. The patient is under the health care provider's continued care for the debilitating
- 7 medical condition that qualifies the patient for the medical use of marijuana.
- 8 d. The health care provider has a reasonable expectation that provider will continue
- 9 to provide followup care to the patient to monitor the medical use of marijuana as
- 10 a treatment of the patient's debilitating medical condition.
- 11 e. The relationship is not for the sole purpose of providing written certification for the
- 12 medical use of marijuana.

13 **SECTION 3. AMENDMENT.** Subsection 8 of section 19-24.1-01 of the North Dakota
14 Century Code is amended and reenacted as follows:

- 15 8. "Cannabinoid edible product" means a ~~food or potable liquid~~ soft or hard lozenge in a
- 16 geometric square shape into which a cannabinoid concentrate or the dried leaves or
- 17 flowers of the plant of the genus cannabis is incorporated. The maximum
- 18 concentration or amount of tetrahydrocannabinol permitted in a serving of a
- 19 cannabinoid edible product is five milligrams and in a package is fifty milligrams.

20 **SECTION 4. AMENDMENT.** Subsection 26 of section 19-24.1-01 of the North Dakota
21 Century Code is amended and reenacted as follows:

- 22 26. "Medical cannabinoid product" means a product intended for human consumption or
- 23 use which contains cannabinoids.
- 24 a. Medical cannabinoid products are limited to the following forms:
- 25 (1) Cannabinoid solution;
- 26 (2) Cannabinoid capsule;
- 27 (3) Cannabinoid transdermal patch; ~~and~~
- 28 (4) Cannabinoid topical; and
- 29 (5) Cannabinoid edible product.
- 30 b. "Medical cannabinoid product" does not include:
- 31 (1) ~~A cannabinoid edible product;~~

1 (2) A cannabinoid concentrate by itself; or

2 (3)(2) The dried leaves or flowers of the plant of the genus cannabis by itself.

3 **SECTION 5. AMENDMENT.** Subsection 47 of section 19-24.1-01 of the North Dakota
4 Century Code is amended and reenacted as follows:

5 47. "Usable marijuana" means a medical marijuana product or the dried leaves or flowers
6 of the plant of the genus cannabis in a combustible delivery form. ~~However, the term~~
7 ~~does not include a cannabinoid edible product.~~ In the case of a registered qualifying
8 patient who is a minor, "usable marijuana" is limited to pediatric medical marijuana.

9 **SECTION 6. AMENDMENT.** Section 19-24.1-03 of the North Dakota Century Code is
10 amended and reenacted as follows:

11 **19-24.1-03. Qualifying patients - Registration.**

12 1. A qualifying patient is not eligible to purchase, use, or possess usable marijuana under
13 the medical marijuana program unless the qualifying patient has a valid registry
14 identification card.

15 2. A qualifying patient application for a registry identification card is complete and eligible
16 for review if an applicant submits to the department:

17 a. A nonrefundable application fee in an amount not to exceed ~~twenty-five;~~

18 ~~(1) Twenty-five dollars for a registry identification card valid for one year, or~~

19 ~~(2) Forty dollars for a registry identification card valid for two years.~~

20 b. An original written certification, which must include:

21 (1) The name, address, and telephone number of the practice location of the
22 applicant's health care provider;

23 (2) The health care provider's North Dakota license number;

24 (3) The health care provider's medical or nursing specialty;

25 (4) The applicant's name and date of birth;

26 (5) The applicant's debilitating medical condition and the medical justification
27 for the health care provider's certification of the patient's debilitating medical
28 condition;

29 (6) Attestation the written certification is made in the course of a bona fide
30 provider-patient relationship;

- 1 (7) Whether the health care provider authorizes the patient to use an enhanced
2 amount of the dried leaves or flowers of the plant of the genus cannabis in a
3 combustible delivery form to treat or alleviate the patient's debilitating
4 medical condition of cancer; and
- 5 (8) The health care provider's signature and the date.
- 6 c. An original qualifying patient application for a registry identification card form
7 established by the department which must include all of the following:
 - 8 (1) The applicant's name, address, and date of birth.
 - 9 (2) The name, address, and date of birth of the applicant's proposed
10 designated caregiver, if any.
 - 11 (3) A photographic copy of the applicant's North Dakota identification. The
12 North Dakota identification must be available for inspection and verification
13 upon request of the department. If the applicant is a minor, a certified copy
14 of a birth record or a photographic copy of the minor's North Dakota
15 identification is required.
 - 16 (4) The applicant's or guardian's signature and the date, or in the case of a
17 minor, the signature of the minor's parent or legal guardian with
18 responsibility for health care decisions and the date.
 - 19 (5) A disclosure that possession of a firearm by a person who possesses
20 marijuana may be a violation of federal law.
- 21 d. A signed consent for release of medical information related to the applicant's
22 debilitating medical condition, on a form provided by the department.
- 23 e. A recent two-by-two inch [5.08-by-5.08 centimeter] photograph of the applicant.
- 24 f. Any other information or material required by rule adopted under this chapter.
- 25 3. If the applicant is unable to submit the required application information due to age or
26 medical condition, the individual responsible for making medical decisions for the
27 applicant may submit the application on behalf of the applicant. The individual
28 responsible for making medical decisions:
 - 29 a. Must be identified on the qualifying patient application for a registry identification
30 card; and

- 1 b. Shall provide a photographic copy of the individual's department-approved
- 2 identification. The identification must be available for inspection and verification
- 3 upon the request of the department.
- 4 4. If the applicant is a minor, the department may waive the application or renewal fee if:
- 5 a. The parent or legal guardian of the applicant is the applicant's registered
- 6 designated caregiver; and
- 7 b. The applicant resides with the applicant's registered designated caregiver.

8 ~~SECTION 7. AMENDMENT. Section 19-24.1-03.1 of the North Dakota Century Code is~~
9 ~~amended and reenacted as follows:~~

10 ~~19-24.1-03.1. Qualifying patients - Veterans.~~

11 ~~In lieu of the written certification required under section 19-24.1-03, a veteran receiving~~
12 ~~treatment from a federal veterans' affairs entity may submit to the department a copy of the~~
13 ~~veterans' affairs medical records identifying a diagnosis of a debilitating medical condition and a~~
14 ~~copy of military discharge documents and an attestation the veteran is diagnosed with a~~
15 ~~debilitating medical condition. The department may use the medical records and discharge~~
16 ~~documents and attestation in place of a written certification to approve or deny the application~~
17 ~~under section 19-24.1-05. The department shall issue a registry identification card within thirty~~
18 ~~calendar days of approving an application under this section.~~

19 **SECTION 7.** A new section to chapter 19-24.1 of the North Dakota Century Code is created
20 and enacted as follows:

21 **Qualifying patients - Nonresidents.**

22 In lieu of the written certification required under section 19-24.1-03, a nonresident who
23 holds a valid out-of-state medical marijuana card issued by the state in which the nonresident
24 resides, may submit to the department a copy of the nonresident's out-of-state department-
25 approved identification and a copy of an out-of-state medical marijuana card. The department-
26 approved identification and out-of-state medical marijuana card must be issued by the same
27 state. The department may use the out-of-state department-approved identification and
28 out-of-state medical marijuana card in place of a written certification to approve or deny the
29 application under section 19-24.1-05. The department shall issue a registry identification card
30 within thirty calendar days of approving an application under this section. The issued registry

identification card ~~expiration date must be the same as the out of state medical marijuana~~
~~card~~ is valid for sixty days.

SECTION 8. AMENDMENT. Section 19-24.1-11 of the North Dakota Century Code is amended and reenacted as follows:

19-24.1-11. Registry identification cards.

1. The contents of a registry identification card must include:
 - a. The name of the cardholder;
 - b. A designation as to whether the cardholder is a qualifying patient, designated caregiver, or compassion center agent;
 - c. A designation as to whether a qualifying patient is a minor;
 - d. A designation as to whether a qualifying patient or a designated caregiver's qualifying patient is authorized to use an enhanced amount of dried leaves or flowers of the plant of the genus cannabis to treat or alleviate the patient's debilitating medical condition of cancer;
 - e. The date of issuance and expiration date;
 - f. A random ten-digit alphanumeric identification number containing at least four numbers and at least four letters which is unique to the cardholder;
 - g. If the cardholder is a designated caregiver, the random identification number of the qualifying patient the designated caregiver is authorized to assist;
 - h. A photograph of the cardholder; and
 - i. The phone number or website address at which the card can be verified.

2. Except as otherwise provided in this section or rule adopted under this chapter, a registry identification card ~~expiration date must be~~ is valid for ~~one year after~~ two years from the date of issuance ~~for first time qualifying patients.~~

- ~~3. If a health care provider limits the written certification until a specified date, less than one year, the registry identification card expires on that date. A registry identification card renewal is valid for two years from the date of issuance for a qualifying patient who previously was issued a registry identification card.~~

SECTION 9. AMENDMENT. Section 19-24.1-37 of the North Dakota Century Code is amended and reenacted as follows:

19-24.1-37. Confidentiality.

1. Except as provided under subsection 2, information kept or maintained by the department is confidential, including information in a registration application or renewal and supporting information submitted by a qualifying patient, designated caregiver, compassion center, proposed compassion center, or compassion center agent, including information on designated caregivers and health care providers.
2. Information kept or maintained by the department may be disclosed as necessary for:
 - a. The verification of registration certificates and registry identification cards under this chapter;
 - b. Submission of the annual report required by this chapter;
 - c. Submission to the North Dakota prescription drug monitoring program;
 - d. Notification of state or local law enforcement of apparent criminal violation;
 - e. Notification of state and local law enforcement about falsified or fraudulent information submitted for purposes of obtaining or renewing a registry identification card;
 - f. Notification of the North Dakota board of medicine or North Dakota board of nursing if there is a reason to believe a health care provider provided a written certification and the department has reason to believe the health care provider otherwise violated this chapter; or
 - g. Data for statistical purposes in a manner such that an individual or compassion center is not identified.
3. Upon a cardholder's written request, the department may confirm the cardholder's status as a registered qualifying patient or a registered designated caregiver to a third party, such as a landlord, school, medical professional, or court.
4. Information submitted to a local government to demonstrate compliance with any security requirements required by local zoning ordinances or regulations is confidential.
5. Upon written request of a compassion center or a compassion center's designee, the department shall comply with a request for information to a third party when necessary for the business operation of a compassion center.

**REPORT OF STANDING COMMITTEE
ENGROSSED SB 2294**

Human Services Committee (Rep. M. Ruby, Chairman) recommends **AMENDMENTS** ([25.1233.02001](#)) and when so amended, recommends **DO PASS** (6 YEAS, 5 NAYS, 2 ABSENT OR EXCUSED AND NOT VOTING). SB 2294 was placed on the Sixth order on the calendar.

2025 SENATE HUMAN SERVICES

SB 2294

2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Fort Lincoln Room, State Capitol

SB 2294
3/31/2025

Relating to medical marijuana recordkeeping, cannabinoid edible products, patient qualifications, and disclosure of information.
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9:07 a.m. Chairman Lee opened the hearing.

Members Present: Chairman Lee, Vice-Chairman Weston, Senator Van Oosting, Senator Clemens, Senator Hogan, Senator Roers.

Discussion Topics:

- Conference Committee

9:07a.m. Chairman Lee opened committee discussion on concurring with bill.

9:07 a.m. Chairman Lee closed the hearing.

Andrew Ficek, Committee Clerk

2025 CONFERENCE COMMITTEE

SB 2294

2025 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Fort Lincoln Room, State Capitol

SB 2294
4/8/2025
Conference Committee

Relating to medical marijuana recordkeeping, cannabinoid edible products, patient qualifications, and disclosure of information.

4:30 p.m. Chairman Roers opened the hearing.

Members Present: Chairman Roers, Senator Weston, Senator Clemens, Representative Bolinske, Representative Holle, Representative Dobervich.

Discussion Topics:

- Update to 500 MG
- Distance for Rural Patients

4:30 p.m. Chairman Roers opened discussion on Possession Limit.

4:36 p.m. Representative Holle moved amendment LC#25.1233.02002.

4:37 p.m. Representative Dobervich seconded the motion.

Motion passed 5-1-0.

4:37 p.m. Chairman Roers recessed the hearing.

4:42 p.m. Chairman Roers reconvened the hearing.

4:42 p.m. Representative Dobervich moved that in place of LC#25.1233.02001, conference committee adopts LC#25.1223.02002.

4:42 p.m. Senator Weston seconded the motion.

Motion passed 5-1-0.

Senator Roers will carry the bill.

Representative Bolinske will carry the bill.

4:43 p.m. Chairman Roers closed the meeting.

Andrew Ficek, Committee Clerk

April 8, 2025

Sixty-ninth
Legislative Assembly
of North Dakota

**PROPOSED AMENDMENTS TO
FIRST ENGROSSMENT**

VG 4/8/25
1 of 8

ENGROSSED SENATE BILL NO. 2294

Introduced by

Senators Roers, Cleary, Meyer

Representatives Dockter, M. Ruby, Vetter

In place of the amendments (25.1233.02001) adopted by the House, Engrossed Senate Bill No. 2294 is amended by amendment (25.1233.02002) as follows:

1 A BILL for an Act to create and enact a new section to chapter 19-24.1 of the North Dakota
2 Century Code, relating to qualifying nonresident medical marijuana patients; to amend and
3 reenact subsection 3 of section 19-24.1-01, subsection 4 of section 19-24.1-01, subsection 8 of
4 section 19-24.1-01, subsection 26 of section 19-24.1-01, subsection 47 of section 19-24.1-01,
5 and sections 19-24.1-03, ~~19-24.1-03.1~~, 19-24.1-11, and 19-24.1-37 of the North Dakota Century
6 Code, relating to allowable amounts of usable medical marijuana, medical marijuana
7 recordkeeping, cannabinoid edible products, patient qualifications, and disclosure of information.

8 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

9 **SECTION 1. AMENDMENT.** Subsection 3 of section 19-24.1-01 of the North Dakota
10 Century Code is amended and reenacted as follows:

11 3. "Allowable amount of usable marijuana" means the amount of usable marijuana a
12 registered qualifying patient or registered designated caregiver may purchase in a
13 thirty-day period under this chapter.

14 a. Except as provided under subdivision b:

15 (1) During a thirty-day period, a registered qualifying patient may not purchase
16 or have purchased by a registered designated caregiver more than two and
17 one-half ounces [70.87 grams] of dried leaves or flowers of the plant of the
18 genus cannabis in a combustible delivery form.

19 (2) At any time a registered qualifying patient, or a registered designated
20 caregiver on behalf of a registered qualifying patient, may not possess more

than three ounces [85.05 grams] of dried leaves or flowers of the plant of the genus cannabis in a combustible delivery form.

(3) At any time, a registered qualifying patient, or a registered designated caregiver on behalf of a registered qualifying patient, may not possess more than five hundred milligrams of a cannabinoid edible product.

b. Notwithstanding subdivision a, if a registered qualifying patient has a registry identification card authorizing an enhanced allowable amount:

(1) During a thirty-day period a registered qualifying patient may not purchase or have purchased by a registered designated caregiver more than six ounces [170.01 grams] of dried leaves or flowers of the plant of genus cannabis in a combustible delivery form.

(2) At any time a registered qualifying patient, or a registered designated caregiver on behalf of a registered qualifying patient, may not possess more than seven and one-half ounces [212.62 grams] of dried leaves or flowers of the plant of the genus cannabis in a combustible delivery form.

(3) At any time, a registered qualifying patient, or a registered designated caregiver on behalf of a registered qualifying patient, may not possess more than five hundred milligrams of a cannabinoid edible product.

c. A registered qualifying patient may not purchase or have purchased by a registered designated caregiver more than the maximum concentration or amount of tetrahydrocannabinol permitted in a thirty-day period. The maximum concentration or amount of tetrahydrocannabinol permitted in a thirty-day period for a cannabinoid concentrate or medical cannabinoid product, or the cumulative total of both, is six thousand milligrams. At any time, a registered qualifying patient, or a registered designated caregiver on behalf of a registered qualifying patient, may not purchase more than three hundred ten milligrams of tetrahydrocannabinol in the form of a cannabinoid edible product.

SECTION 2. AMENDMENT. Subsection 4 of section 19-24.1-01 of the North Dakota Century Code is amended and reenacted as follows:

4. "Bona fide provider-patient relationship" means a treatment or counseling relationship between a health care provider and patient in which all the following are present:

- 1 a. The health care provider has reviewed the patient's relevant medical records and
- 2 completed a full assessment of the patient's medical history and current medical
- 3 condition, including a relevant, ~~in-person,~~ medical evaluation of the patient.
- 4 b. The health care provider has created and maintained records of the patient's
- 5 condition in accordance with medically accepted standards.
- 6 c. The patient is under the health care provider's continued care for the debilitating
- 7 medical condition that qualifies the patient for the medical use of marijuana.
- 8 d. The health care provider has a reasonable expectation that provider will continue
- 9 to provide followup care to the patient to monitor the medical use of marijuana as
- 10 a treatment of the patient's debilitating medical condition.
- 11 e. The relationship is not for the sole purpose of providing written certification for the
- 12 medical use of marijuana.

13 **SECTION 3. AMENDMENT.** Subsection 8 of section 19-24.1-01 of the North Dakota
14 Century Code is amended and reenacted as follows:

- 15 8. "Cannabinoid edible product" means a ~~food or potable liquid~~ soft or hard lozenge in a
16 geometric square shape into which a cannabinoid concentrate or the dried leaves or
17 flowers of the plant of the genus cannabis is incorporated. The maximum
18 concentration or amount of tetrahydrocannabinol permitted in a serving of a
19 cannabinoid edible product is five milligrams and in a package is fifty milligrams.

20 **SECTION 4. AMENDMENT.** Subsection 26 of section 19-24.1-01 of the North Dakota
21 Century Code is amended and reenacted as follows:

- 22 26. "Medical cannabinoid product" means a product intended for human consumption or
23 use which contains cannabinoids.
- 24 a. Medical cannabinoid products are limited to the following forms:
 - 25 (1) Cannabinoid solution;
 - 26 (2) Cannabinoid capsule;
 - 27 (3) Cannabinoid transdermal patch; ~~and~~
 - 28 (4) Cannabinoid topical; and
 - 29 (5) Cannabinoid edible product.
 - 30 b. "Medical cannabinoid product" does not include:
 - 31 (1) ~~A cannabinoid edible product;~~

- 1 (2) A cannabinoid concentrate by itself; or
2 (3)(2) The dried leaves or flowers of the plant of the genus cannabis by itself.

3 **SECTION 5. AMENDMENT.** Subsection 47 of section 19-24.1-01 of the North Dakota
4 Century Code is amended and reenacted as follows:

- 5 47. "Usable marijuana" means a medical marijuana product or the dried leaves or flowers
6 of the plant of the genus cannabis in a combustible delivery form. ~~However, the term~~
7 ~~does not include a cannabinoid edible product.~~ In the case of a registered qualifying
8 patient who is a minor, "usable marijuana" is limited to pediatric medical marijuana.

9 **SECTION 6. AMENDMENT.** Section 19-24.1-03 of the North Dakota Century Code is
10 amended and reenacted as follows:

11 **19-24.1-03. Qualifying patients - Registration.**

- 12 1. A qualifying patient is not eligible to purchase, use, or possess usable marijuana under
13 the medical marijuana program unless the qualifying patient has a valid registry
14 identification card.
- 15 2. A qualifying patient application for a registry identification card is complete and eligible
16 for review if an applicant submits to the department:
- 17 a. A nonrefundable application fee in an amount not to exceed ~~twenty-five;~~
18 ~~(1) Twenty five dollars for a registry identification card valid for one year; or~~
19 ~~(2) Forty dollars for a registry identification card valid for two years.~~
- 20 b. An original written certification, which must include:
- 21 (1) The name, address, and telephone number of the practice location of the
22 applicant's health care provider;
- 23 (2) The health care provider's North Dakota license number;
- 24 (3) The health care provider's medical or nursing specialty;
- 25 (4) The applicant's name and date of birth;
- 26 (5) The applicant's debilitating medical condition and the medical justification
27 for the health care provider's certification of the patient's debilitating medical
28 condition;
- 29 (6) Attestation the written certification is made in the course of a bona fide
30 provider-patient relationship;

- 1 (7) Whether the health care provider authorizes the patient to use an enhanced
2 amount of the dried leaves or flowers of the plant of the genus cannabis in a
3 combustible delivery form to treat or alleviate the patient's debilitating
4 medical condition of cancer; and
- 5 (8) The health care provider's signature and the date.
- 6 c. An original qualifying patient application for a registry identification card form
7 established by the department which must include all of the following:
 - 8 (1) The applicant's name, address, and date of birth.
 - 9 (2) The name, address, and date of birth of the applicant's proposed
10 designated caregiver, if any.
 - 11 (3) A photographic copy of the applicant's North Dakota identification. The
12 North Dakota identification must be available for inspection and verification
13 upon request of the department. If the applicant is a minor, a certified copy
14 of a birth record or a photographic copy of the minor's North Dakota
15 identification is required.
 - 16 (4) The applicant's or guardian's signature and the date, or in the case of a
17 minor, the signature of the minor's parent or legal guardian with
18 responsibility for health care decisions and the date.
 - 19 (5) A disclosure that possession of a firearm by a person who possesses
20 marijuana may be a violation of federal law.
- 21 d. A signed consent for release of medical information related to the applicant's
22 debilitating medical condition, on a form provided by the department.
- 23 e. A recent two-by-two inch [5.08-by-5.08 centimeter] photograph of the applicant.
- 24 f. Any other information or material required by rule adopted under this chapter.
- 25 3. If the applicant is unable to submit the required application information due to age or
26 medical condition, the individual responsible for making medical decisions for the
27 applicant may submit the application on behalf of the applicant. The individual
28 responsible for making medical decisions:
 - 29 a. Must be identified on the qualifying patient application for a registry identification
30 card; and

1 b. Shall provide a photographic copy of the individual's department-approved
2 identification. The identification must be available for inspection and verification
3 upon the request of the department.

4 4. If the applicant is a minor, the department may waive the application or renewal fee if:

5 a. The parent or legal guardian of the applicant is the applicant's registered
6 designated caregiver; and

7 b. The applicant resides with the applicant's registered designated caregiver.

8 ~~— **SECTION 7. AMENDMENT.** Section 19-24.1-03.1 of the North Dakota Century Code is~~
9 ~~amended and reenacted as follows:~~

10 ~~— **19-24.1-03.1. Qualifying patients – Veterans.**~~

11 ~~— In lieu of the written certification required under section 19-24.1-03, a veteran receiving~~
12 ~~treatment from a federal veterans' affairs entity may submit to the department a copy of the~~
13 ~~veterans' affairs medical records identifying a diagnosis of a debilitating medical condition and a~~
14 ~~copy of military discharge documents and an attestation the veteran is diagnosed with a~~
15 ~~debilitating medical condition. The department may use the medical records and discharge~~
16 ~~documents and attestation in place of a written certification to approve or deny the application~~
17 ~~under section 19-24.1-05. The department shall issue a registry identification card within thirty~~
18 ~~calendar days of approving an application under this section.~~

19 **SECTION 7.** A new section to chapter 19-24.1 of the North Dakota Century Code is created
20 and enacted as follows:

21 **Qualifying patients - Nonresidents.**

22 In lieu of the written certification required under section 19-24.1-03, a nonresident who
23 holds a valid out-of-state medical marijuana card issued by the state in which the nonresident
24 resides, may submit to the department a copy of the nonresident's out-of-state department-
25 approved identification and a copy of an out-of-state medical marijuana card. The department-
26 approved identification and out-of-state medical marijuana card must be issued by the same
27 state. The department may use the out-of-state department-approved identification and
28 out-of-state medical marijuana card in place of a written certification to approve or deny the
29 application under section 19-24.1-05. The department shall issue a registry identification card
30 within thirty calendar days of approving an application under this section. The issued registry

1 ~~identification card expiration date must be the same as the out-of-state medical marijuana~~
2 ~~card is valid for sixty days.~~

3 **SECTION 8. AMENDMENT.** Section 19-24.1-11 of the North Dakota Century Code is
4 amended and reenacted as follows:

5 **19-24.1-11. Registry identification cards.**

- 6 1. The contents of a registry identification card must include:
- 7 a. The name of the cardholder;
 - 8 b. A designation as to whether the cardholder is a qualifying patient, designated
9 caregiver, or compassion center agent;
 - 10 c. A designation as to whether a qualifying patient is a minor;
 - 11 d. A designation as to whether a qualifying patient or a designated caregiver's
12 qualifying patient is authorized to use an enhanced amount of dried leaves or
13 flowers of the plant of the genus cannabis to treat or alleviate the patient's
14 debilitating medical condition of cancer;
 - 15 e. The date of issuance and expiration date;
 - 16 f. A random ten-digit alphanumeric identification number containing at least four
17 numbers and at least four letters which is unique to the cardholder;
 - 18 g. If the cardholder is a designated caregiver, the random identification number of
19 the qualifying patient the designated caregiver is authorized to assist;
 - 20 h. A photograph of the cardholder; and
 - 21 i. The phone number or website address at which the card can be verified.
- 22 2. Except as otherwise provided in this section or rule adopted under this chapter, a
23 registry identification card ~~expiration date must be~~ is valid for one year after two years
24 from the date of issuance for first time qualifying patients.
- 25 ~~3. If a health care provider limits the written certification until a specified date, less than~~
26 ~~one year, the registry identification card expires on that date. A registry identification~~
27 ~~card renewal is valid for two years from the date of issuance for a qualifying patient~~
28 ~~who previously was issued a registry identification card.~~

29 **SECTION 9. AMENDMENT.** Section 19-24.1-37 of the North Dakota Century Code is
30 amended and reenacted as follows:

19-24.1-37. Confidentiality.

1. Except as provided under subsection 2, information kept or maintained by the department is confidential, including information in a registration application or renewal and supporting information submitted by a qualifying patient, designated caregiver, compassion center, proposed compassion center, or compassion center agent, including information on designated caregivers and health care providers.
2. Information kept or maintained by the department may be disclosed as necessary for:
 - a. The verification of registration certificates and registry identification cards under this chapter;
 - b. Submission of the annual report required by this chapter;
 - c. Submission to the North Dakota prescription drug monitoring program;
 - d. Notification of state or local law enforcement of apparent criminal violation;
 - e. Notification of state and local law enforcement about falsified or fraudulent information submitted for purposes of obtaining or renewing a registry identification card;
 - f. Notification of the North Dakota board of medicine or North Dakota board of nursing if there is a reason to believe a health care provider provided a written certification and the department has reason to believe the health care provider otherwise violated this chapter; or
 - g. Data for statistical purposes in a manner such that an individual or compassion center is not identified.
3. Upon a cardholder's written request, the department may confirm the cardholder's status as a registered qualifying patient or a registered designated caregiver to a third party, such as a landlord, school, medical professional, or court.
4. Information submitted to a local government to demonstrate compliance with any security requirements required by local zoning ordinances or regulations is confidential.
5. Upon written request of a compassion center or a compassion center's designee, the department shall comply with a request for information to a third party when necessary for the business operation of a compassion center.

SB 2294 040825 1637 PM Roll Call Vote

Amendment

SB 2294

Date Submitted: April 8, 2025, 4:37 p.m.

Action: Passed

Amendment LC #: Pending LC #

Description of Amendment: Page two Line 5, 18 and 26 for or possess and change to 310.

Motioned By: Holle, Dawson

Seconded By: Dobervich, Gretchen

Emergency Clause: None

Vote Results: 5 - 1 - 0

Sen. Roers, Kristin	Yea
Sen. Weston, Kent	Yea
Sen. Clemens, David A.	Nay
Rep. Bolinske, Macy	Yea
Rep. Holle, Dawson	Yea
Rep. Dobervich, Gretchen	Yea

SB 2294 040825 1642 PM Roll Call Vote

Final Recommendation

SB 2294

Date Submitted: April 8, 2025, 4:42 p.m.

Recommendation: In Place Of

Amendment LC #: 25.1233.02002

Engrossed LC #: N/A

Description:

Motioned By: Dobervich, Gretchen

Seconded By: Weston, Kent

House Carrier: Bolinske, Macy

Senate Carrier: Roers, Kristin

Emergency Clause: None

Vote Results: 5 - 1 - 0

Sen. Roers, Kristin	Yea
Sen. Weston, Kent	Yea
Sen. Clemens, David A.	Nay
Rep. Bolinske, Macy	Yea
Rep. Holle, Dawson	Yea
Rep. Dobervich, Gretchen	Yea

**REPORT OF CONFERENCE COMMITTEE
ENGROSSED SB 2294**

Your conference committee (Sens. Roers, Weston, Clemens and Reps. Bolinske, Holle, Dobervich) recommends that in place of amendment [25.1233.02001](#) adopted by the House, Engrossed SB 2294 is amended by amendment [25.1233.02002](#).

Engrossed SB 2294 was placed on the Seventh order of business on the calendar.