AMERICANS FOR SAFE ACCESS

2022 STATE OF THE STATES REPORT

AN ANALYSIS OF MEDICAL CANNABIS ACCESS IN THE UNITED STATES

Americans for Safe Access
Advancing Legal Medical Cannabis Therapeutics

AmericansForSafeAccess.org

We would like to thank the following businesses
for their support of ASA in creating this report.

Dear Reader,

After 25 years of the states experimenting with cannabis policy at the state level, there is no denying that the national acceptance of cannabis has changed. In a recent study published in JAMA, researchers found that 1/3 of Americans are utilizing medical cannabis to manage chronic pain, all but 2 states in the U.S. and most of the U.S. territories have passed laws creating some kind of access to cannabis products, and support for medical cannabis remains at an all-time high.

State policymakers and regulators should be commended for taking on the task of serving their citizens in the midst of federal resistance and at times, under the pressure of federal threats and brutal enforcement undermining their efforts. In 2014, state programs were granted some relief when Congress passed the Medical Cannabis amendment to the Commerce-Justice-Science (CJS) budget restricting the Department of Justice (DOJ) from targeting state employees, patients and cannabis providers from arrest and prosecution (which has been included in the budget bill every year since). However, there has been no other progress at the federal level on regulating medical cannabis except for the 2018 Farm Bill provisions for hemp, which has created another issue left to states to sort out and has become a public health nightmare.

Today, state policymakers and regulators are not only tasked with creating the infrastructure for a supply chain that remains illegal at the federal level, but they also have to balance the requests of patients, cannabis businesses, and their constituents. In 2022 alone, 99 pieces of legislation were introduced to address a new health concern of the seemingly federally legal, unregulated cannabinoid market.

Our job at Americans for Safe Access (ASA) is to represent patients and their needs. Over the last 20 years, this has meant working with policymakers and regulators at the local, state, and federal levels, cannabis businesses, medical professionals, and of course, patients and their caregivers. When we first crafted state access programs, they were meant to serve as a form of triage to get patients off the battlefield of the war on drugs while we worked to remove barriers communicated to us by the U.S. Department of Health & Human Services (HHS), the Drug Enforcement Administration (DEA), and federal representatives. Similarly, the Medical Cannabis CJS amendment was meant to be a triage measure to stop the DOJ threats of state employees, raids and prosecutions while Congress dealt with federal medical cannabis.

While preparing this report, it was hard to overlook the immense amount of work that states have gone through over the years to create these medical cannabis programs, and the challenges still facing them. In states that have added recreational/adult-use markets, patients' needs are being forgotten, with a few exceptions. It is also hard to overlook how much burden would be taken off the states if the federal government passed comprehensive medical cannabis federal legislation.

At the end of this report, we have drafted a resolution for states to join us in calling for comprehensive federal legislation titled ***Equity for Medical Cannabis Patients Resolution***. ASA will continue to work to find solutions at the federal level, but until then, we will continue to work with state policymakers and regulators to improve state laws.

The following report is meant to be a tool for policymakers and regulators to see gaps in their programs, offer solutions to these gaps, and give advocates a resource to articulate those gaps in order to work with their policymakers to find solutions.

For states with recreational/adult-use programs or those considering adopting such programs, this year's report also includes ***The Medical Cannabis Equity Checklist***, a list of policy considerations states can adopt to better serve the needs of patients. We hope you take the information in this report and use it to bring greater access to patients, not just in your state, but across the country.

With gratitude,

Steph Sherer
President and Founder
Americans for Safe Access

Science before Politics:
Cannabis is Medicine
www.AmericansforSafeAccess.org

SAFE
ACCESS-
IT'S THE LAW

END PAIN
NOT LIVES
MAKE CANNABIS AN OPTION

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MEDICAL CANNABIS BY THE NUMBERS

0
Deaths Caused by Cannabis

48
States with Medical Cannabis Laws

$ 500 MIL.+
Federal Tax Dollars Spent on Federal Interference in Medical Cannabis States Before Blumenauer-Joyce CJS Amendment

6 MIL.+
Medical Cannabis Patients in the U.S.

9,000+
Clinical Trial Data Using Cannabis for Pain in Patient Years

100+
Qualifying Medical Conditions in Medical Cannabis Programs

93%
Americans Supporting Medical Cannabis

↓25%

Average Drop in Opioid-Related Deaths in States with Medical Cannabis Laws

~8404

Number of Licensed Medical Cannabis Retailers in the U.S.

30,000+

Studies Published on the Endocannabinoid System

16

Number of states with more than 100,000 patients

$165 MIL.

Federal Prescription Drug Cost Savings in Medical Cannabis States in 2013

100+

Known Cannabinoids

126 MIL.

Number of Americans suffering from chronic pain

67,367

Deaths Caused by Prescription Drugs in 2018

INTRODUCTION

Americans for Safe Access (ASA) is the largest national organization of patients, medical cannabis providers, medical professionals, scientists, and concerned citizens promoting safe and legal access to cannabis for therapeutic use and research in all 50 states.

Since 2002, ASA has engaged state and federal governments, courts, and regulators to improve the development and implementation of state medical cannabis laws and regulations. Over the past 20 years, we have learned that passing a medical cannabis law is only the first step in providing safe access to patients, and not all programs are designed to reflect patients' best interests. The most important markers of a well-designed state program are that all patients who would benefit from medical cannabis have safe and legal access to their medicine without fear of losing any of the civil rights and protections afforded to them as residents of that state.

In 2014, we released our first report reviewing state laws with the goal of highlighting the issues that were still affecting patient access in each state and territory, as well as making recommendations for improvements, so that legislators and regulators could make necessary adjustments to their programs. Each year since then, the report has evolved slightly through improved methodology and the addition of categories from stakeholder input. In the nine years since our first report, we have taken great pride in seeing our recommendations adopted in states throughout the country that have improved programs with greater outcomes for patients.

Although the main goal of this report is to create improvements in state medical cannabis programs, it also highlights the need for federal involvement and coordination. For example, some barriers to patient access cannot be remedied by state legislation or regulations. The passage of comprehensive medical cannabis legislation would mean that states would no longer have to play doctor and scientist. They would no longer have to juggle patient and recreational consumer needs and instead could focus on the health and safety of their citizens while still enjoying the downstream financial impacts of their citizens having access to medical cannabis and the job creation that medical cannabis businesses bring to their state. In fact, after the passage and implementation of such federal legislation, this report would look very different. For example states would only need to address issues such as DUI protections, home cultivation provisions, state insurance coverage of medical cannabis, expungement of cannabis convictions, and the licensing of cultivation and manufacturing centers.

A SNAPSHOT OF MEDICAL CANNABIS TODAY

The current overview of state laws is a complicated web offering different levels of legality and access, including medical only, medical and adult-use, CBD or low levels of THC, decriminalization with no retail access, or no access or legality at all. Only thirty-eight states, the District of Columbia, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, and Puerto Rico have adopted laws that allow some legal access to medical cannabis for authorized patients. An additional 10 states allow for the limited use of cannabidiol (CBD) products that contain no, or very little, tetrahydrocannabinol (THC).

While we can acknowledge that we have come a long way since the first medical cannabis law passed in 1996, we must also recognize that none of the state laws adopted thus far can be considered ideal from a patient's standpoint. Even in states with full medical cannabis programs, each state differs greatly in how patients can access their medicine, where they can access it, or even what types of products they can access. And because medical cannabis is still federally illegal, most state programs leave out millions of potential patients due to issues with affordability, patient rights, and civil protections, or product safety standardization.

As of publication, there are no states that include the entire range of protections and rights that should be afforded to patients under the law, with some lagging far behind others. Because of the differences and deficiencies in legislation and regulations in the states, patients argue that the laws do not function equitably and are often poorly designed, poorly implemented, or both. Even well-organized programs can fail to deliver safe or legal access in states with laws that allow local governments to ban medical cannabis businesses from operating, leaving thousands of patients without the access state laws were intended to create.

ASA strongly believes that state and federal laws must be changed to expand medical cannabis access to the greatest extent possible and ensure that patients are prioritized in terms of medical product access, quality, safety, and affordability.

MEDICAL CANNABIS 2022: THE GOOD, THE BAD, AND THE DISAPPOINTING

The Good

States with Robust Medical Cannabis Programs are Increasing

With thirty-eight states, the District of Columbia, and four of five U.S. territories having comprehensive medical cannabis programs across the country, more states are realizing the benefits of having a robust medical cannabis program that includes more than just CBD and small amounts of THC. Not only are states increasing, but the marketplace within the states also continues to grow. We estimate there are over 8,000 legal, medical cannabis retailers across the entire United States, an increase of about 1,000 since 2021.

Patient Count Continues to Increase

Each year since we developed this report, we have seen the patient count increase exponentially. There are now over 6 million legal, medical cannabis patients across the country and territories, and at least 15 states have over 100,000 registered patients. Even though some states have seen a decrease in patient count due to new adult-use/recreational laws, individuals are still choosing to register as medical cannabis patients for improved access to safe cannabis and legal protections. The national patient count also continues to climb as the stigma slowly decreases, education on medical cannabis increases, and states continue to make improvements in their medical cannabis programs that create better access and protections for patients.

Expungements

At the time of this report's publication, 23 states have enacted legislation explicitly permitting or facilitating the process of having select cannabis convictions expunged, vacated, set aside, or sealed from public view. For some states, the review and expungement process is performed automatically, while in other states, those with past convictions have to actively petition their officials for an expungement.

We expect this number to increase in 2023, partly due to President Biden's announcement in October 2022 in which he pardoned all prior federal offenses of simple marijuana possession and encouraged governors to take similar steps to pardon state simple marijuana possession charges.

The Bad

Medical Cannabis Program Improvements Slowing Down

Unfortunately, one trend we have noticed in states that have introduced adult-use/recreational laws is a slow down, or in some cases a complete lack, of continued improvements in the medical cannabis programs. We believe these lack of improvements in some state medical cannabis programs are due to a false belief that adult-use laws can fulfill the needs of all consumers in the state, placing recreational consumers and patients in the same category. While ASA does not oppose adult-use/recreational efforts, it is critical that policymakers understand that adult-use/recreational programs and medical cannabis programs are distinct, and should remain distinct in order to cover the needs of both consumer populations. In light of the adult-use/recreational policy debate, states should look to passing provisions included in ASA's Medical Cannabis Equity Checklist found in this report.

Regression in Medical Programs

Worse than a lack of improvements in medical cannabis programs, we are also seeing a regression in some programs that are creating tighter and often unnecessary restrictions for cannabis patients and businesses. Rollbacks included giving operators the ability to re-designate medical products in their inventory for adult-use/recreational sale, inflating program-related fees for patients, forcing patients through additional rounds of physician certification which had not been required before, and forcing physicians to prescribe, rather than recommend, cannabis for patients, which could put physician licenses in jeopardy.

Oftentimes patients are forced to leave the medical cannabis program, not because the adult-use/recreational market is a suitable replacement, but because of financial obligations and hurdles that have been added to the medical program. Physicians are also pulling out of programs due to concerns over professional licenses, which makes it hard for patients to find a physician willing to provide a recommendation.

Lack of Supply for Patients

As mentioned above, some states with adult-use/recreational laws are giving operators the ability to re-designate medical products in their inventory for adult-use/recreational sale. Medical cannabis patients rely on specific products they know already work for their particular condition and are safe for use with other medications they may be on. Medical cannabis patients should be treated as patients by the state - not as recreational consumers who can choose alternative products without concern about how it will affect their condition. This is particularly important for medical cannabis products for minor patients.

The Disappointing

Medical Companies Moving to Rec

With more states now allowing adult-use/recreational markets, many companies that were originally focused on medical cannabis, and helping patients, are now switching their focus to adult-use. Why this is happening is, of course, due to profits. Most companies believe there will be more profits in the adult-use market. However, this is not a belief we share. The passage of the Medical Marijuana and Cannabidiol Research Act in November of 2022 will open up more opportunities for much-needed cannabis research, and with that will come a stampede of new patients excited to purchase products specific to their needs.

Trend Toward Medical Cannabis Oversight to Alcohol

Another harmful trend we have noticed is states moving their medical cannabis program oversight to Liquor and Alcohol Departments. ASA strongly encourages state lawmakers to rethink the idea of modeling cannabis regulations after the regulations in place for alcohol or combining regulatory oversight without first examining the risks and benefits of such a model. Joining oversight of cannabis and alcohol regulations may give lawmakers a convenient path forward that makes sense for an adult-use/recreational model. However, medical cannabis patients have much different needs than those in the adult-use program. Large conglomerates from the alcohol industry should not have any influence over the needs of medical cannabis patients.

Tax Breaks for Patients - Not Paying Off

While many states try to help patients by offering incentives such as tax breaks on purchases, in actuality, when you combine the costs that patients have to incur to enroll in a medical cannabis program, the incentives are not quite what they seem. Patients must pay for doctor appointments as well as for the registration for a medical cannabis card, and when you compare those costs with the amount saved from taxes, it often takes months for patients to receive the benefits of any tax incentive.

True Impact of Tax Breaks for Patients			
State	Cost to Enroll*	Tax	Months to Recoup**
Colorado	$149.90	15.00%	4.80
Vermont	$150.00	14.00%	5.14
New Mexico	$130.00	12.00%	5.20
Michigan	$165.00	10.00%	7.92
New York	$150.00	9.00%	8.00
Illinois	$175.00	10.00%	8.40
Massachusetts	$275.00	10.75%	12.28
Oregon	$500.00	17.00%	14.12
California	$450.00	15.00%	14.40
Nevada	$300.00	10.00%	14.40
Arizona	$600.00	16.00%	18.00
New Jersey	$250.00	6.25%	19.20
Maine	$415.00	10.00%	19.92
Connecticut	$325.00	6.35%	24.57

*registration fees/medical examination ($100 annual)
**$2,500 monthly purchase
Source: Whitney Economics

ABOUT THE GRADING SCALE

As mentioned above, our grading rubric is based on a model state infrastructure that allows medical cannabis patients the same rights and protections allowed under a traditional health care system. Because we know that there is no state that allows rights and protections based on the current traditional healthcare system, mostly due to the state-federal conflict, we knew that no state would be able to attain a perfect grade. Therefore we graded on a curve, allowing states that offer a full range of access and protections to the best of their ability a passable grade. With the new grading curve, letter grades roughly correlate to the following:

A 100% - 90%
B 89% - 70%
C 69% - 50%
D 49% - 30%
F 29% or lower

A: The state program is comprehensive and provides substantial patient rights and protections. The state may require a few adjustments, but for the most part, patients are exceptionally protected, and access is not a problem.

B: The state has a good medical cannabis program, but it requires a few major adjustments to ensure that patients are protected.

C: The state has a fair medical cannabis program that provides at least some access and protections for cannabis patients, but it requires substantial improvement in one or more areas.

D: The state typically has a medical cannabis law on paper, but there are critical and substantial deficiencies in access and/or patient rights that must be addressed immediately.

F: The state either has a non-existent or critically flawed medical cannabis program. Policymakers in these states should prioritize legalizing medical cannabis and ensure no patient is left behind.

A NOTE ABOUT ADULT-USE LAWS

The State of the States report is intended to evaluate medical cannabis laws and patient protections and, therefore, does not analyze recreational adult-use laws in the grading. However, regulatory preference to adult-use is included in our Penalties section if states stop making improvements in their medical cannabis programs once adult-use is legalized in their state. It is important to remember that medical cannabis patients have different needs than recreational consumers, and because of this, adult-use laws should remain separate from medical cannabis laws. Both systems can co-exist in a state, but medical cannabis laws should be specifically designed with patient needs and protections in mind. **Please see Appendix I: Medical Cannabis Equity Checklist for ways states can better address disparities in these programs for patients.**

MEDICAL CANNABIS TIMELINE

TOTAL STATES: 8

Alaska, California, Colorado, Hawaii, Maine, Nevada, Oregon, and Washington

TOTAL STATES: 13

Michigan, Montana, New Mexico, Rhode Island, and Vermont

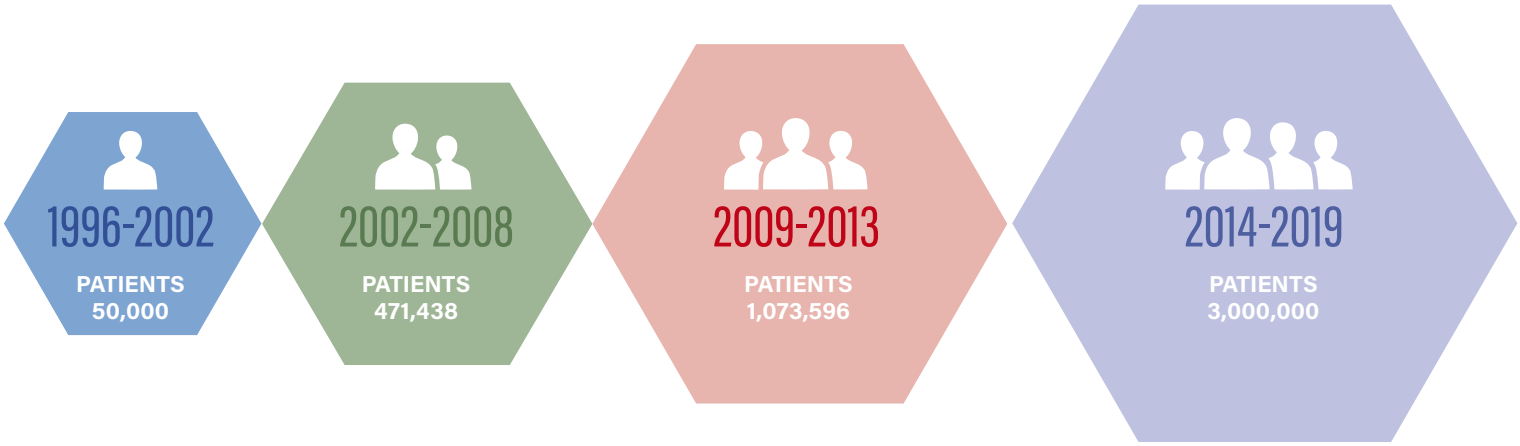
TOTAL STATES: 20 PLUS DC

Arizona, Delaware, District of Columbia, New Jersey, Connecticut, Massachusetts, New Hampshire, and Illinois

TOTAL STATES: 47 PLUS DC, CNMI, GUAM, PUERTO RICO, AND USVI

Arkansas, CNMI, Florida, Guam, Louisiana, Maryland, Minnesota, New York, North Dakota, Ohio, Pennsylvania, Puerto Rico, USVI, and West Virginia

CBD-only laws: Alabama, Georgia, Indiana, Iowa, Kansas, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee, Texas, Virginia, Wisconsin, and Wyoming



FEDERAL RAIDS: 14

1996 – DOJ threatens licenses of any doctor recommending cannabis following passage of first medical cannabis law.

1996–2002 – DOJ and DEA carry out paramilitary raids.

1998 – The Institute of Medicine (IOM) issues "Marijuana & Medicine: Accessing the Science Base" calling on the federal government to do formal studies on cannabis.

1998 – Congress blocks DC law.

FEDERAL RAIDS: 241

2002 – Federal court rules in *Conant v. Walters* that government cannot revoke physicians' licenses for recommending medical cannabis.

2007 – DEA administrative law judge recommends allowing new source of cannabis for research.

FEDERAL RAIDS: 262

2009 – US Attorney General announces that DOJ will not prioritize prosecution of legal medical cannabis patients.

2011 – DOJ threatens elected officials in 11 states implementing cultivation and distribution programs.

2012 – AHP issues Cannabis Monograph and AHPA issues recommendations for regulators.

2013 – DOJ issues a guidance memo to prosecutors concerning marijuana enforcement under the Controlled Substance Act (CSA).

FEDERAL RAIDS: 2

2014 & 2015 – Rohrabacher-Farr CJS amendment passes and prohibits the Department of Justice from spending money to prevent states from implementing medical cannabis programs.

2015 – The CARERS Act, the first medical cannabis bill in US Senate history, is introduced.

2015 – Court upholds the Rohrabacher-Farr amendment in *U.S. vs Marin Alliance for Medical Marijuana.*

2016 – Court extends Rohrabacher-Farr protections to individuals in *U.S. vs McIntosh.*

2016 – DEA announces it will not move cannabis out of its Schedule I status.

2018 – Cole memo rescinded.

2018 – Farm bill changes hemp law, creates windfall of limited CBD-only programs.

TOTAL STATES: 48
PLUS DC, CNMI, GUAM, PUERTO RICO, AND USVI

South Dakota

FEDERAL RAIDS: 0

2020 – States classify medical cannabis businesses as an essential service during COVID-19 pandemic

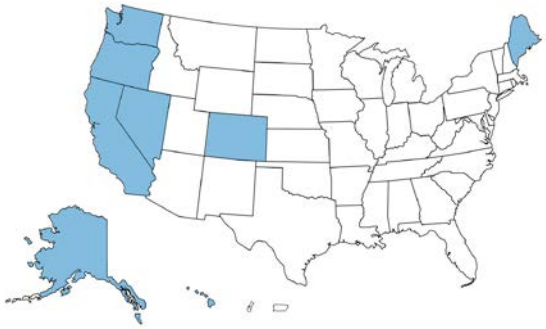
2020 – Congress passes provision to allow cannabis researchers access to market products

2020 – The UN removes cannabis from its strictest international schedule and deems cannabis as medicine

2022 – President Biden issues a Presidential Proclamation, which announced a pardon of all prior Federal offenses of simple possession of marijuana

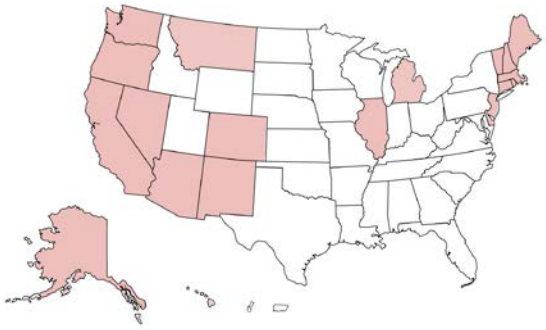
2022 – President Biden signs into law the Medical Marijuana & Cannabidiol Research Expansion Act, H.R.8454 (The Cannabis Research Bill)

2022 – Congress passed the Medical Cannabis amendment to the Commerce-Justice-Science (CJS) Appropriations bill

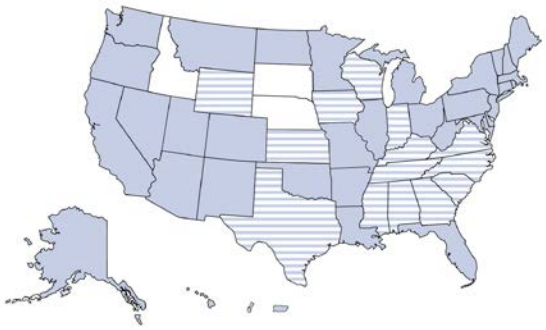


1996-2002

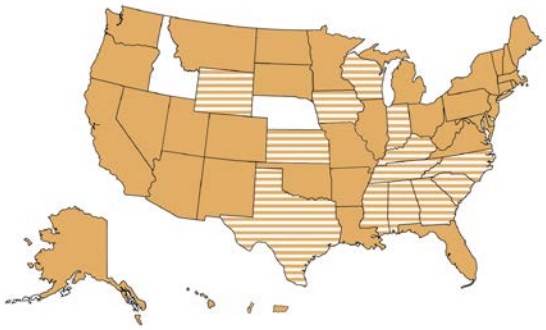
2002-2008



2009-2013



2014-2019

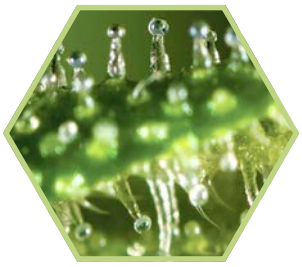


2020-2022

MAP KEY

Bold:	Full medical cannabis program
Stripes:	CBD only/low THC
White:	No legal access

THE MEDICAL USE OF CANNABIS



TRICHOMES

Resin-filled glands that contain the majority of the cannabinoids and terpenoids in a cannabis plant.

Inflorescence
Cannabis
(flower)

DELIVERY METHODS

PATIENTS USE MANY METHODS TO TAKE CANNABIS. THE METHOD USED CAN DEPEND ON PERSONAL CHOICE, THE MEDICAL CONDITION BEING TREATED, THE AGE OF THE PATIENT, THE PATIENT'S TOLERANCE FOR THE METHODS, ETC.

INHALATION

Types of products: whole plant, oils, waxes, and concentrates
Expected onset: 0-10 minutes
Duration: 1-4 hours

INGESTION

Product types: edible products, beverages, teas, capsules
Expected onset: 30 to 90 minutes
Duration: Up to 8 hours

TOPICAL

Product types: lotions, salves, oils
Expected onset: a few minutes
Duration: 1-4 hours

BUCCAL

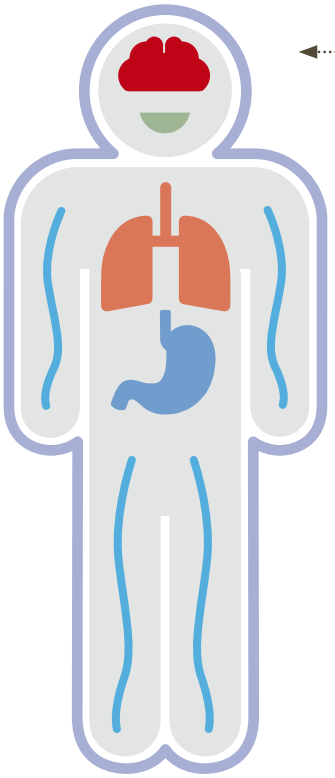
Product types: alcohol-based tinctures, lozenges
Expected onset: 0-60 minutes
Duration: 1-8 hours

BENEFIT
Anti-inflammatory, immunomodulatory, neuroprotective and anti-cancer

THCA

BENEFIT
Effective against MRSA, sedative, topical analgesic for burns, and may stimulate bone growth

CBN



ECS: EAT, SLEEP, RELAX, FORGET, AND PROTECT

The endocannabinoid system is the body's mechanism for preserving homeostasis (keeping all body functions running smoothly). This system is composed of a sophisticated group of neuromodulators, their receptors, and signaling pathways involved in regulating a variety of physiological processes, including movement, mood, memory, appetite, and pain.

The endocannabinoid system is probably the most ubiquitous system in the human body, with the cannabinoid receptors **CB_1** and **CB_2** located throughout the brain and the periphery of the body.

CANNABINOIDS & TERPENOIDS

CBD

BENEFIT
Non-psychotropic, anti-depressant, anti-inflammatory, anti-convulsant, anti-nausea, anti-anxiety, analgesic, sedative, sleep aid, and muscle relaxant

THC

BENEFIT
Psychotropic, analgesic, anti-inflammatory, anti-microbial, and muscle relaxant

CBC

BENEFIT
Anti-inflammatory, analgesic, anti-anxiety, and antidepressant

CBG

BENEFIT
Muscle relaxant, anti-eurythmic, analgesic, digestive aid

LEMON

LIMONENE
Potent immunostimulant via inhalation, anxiolytic, apoptosis of breast cancer cells and acne bacteria
SYNERGISTIC CANNABINOIDS: **CBD, CBG, THC**

PINE

α-PINENE
Anti-inflammatory, bronchodilatory, acetylcholinesterase inhibitor (aiding memory)
SYNERGISTIC CANNABINOIDS: **CBD, THC**

HOPS

β-MYRCENE
Blocks inflammation, analgesic, sedative, muscle relaxant, hypnotic, blocks hepatic carcinogenesis by aflatoxin
SYNERGISTIC CANNABINOIDS: **CBD, CBG, THC**

LAVENDER

LINALOOL
Anti-anxiety, local anesthetic, analgesic, anticonvulsant/anti-glutamate
SYNERGISTIC CANNABINOIDS: **CBD, THC, THCV, CBDV**

PEPPER

β-CARYOPHYLLENE
Gastric cytoprotective, anti-malarial, selective CB_2 agonist, anti-inflammatory
SYNERGISTIC CANNABINOIDS: **THC**

ORANGE

NEROLIDOL
Sedative
SYNERGISTIC CANNABINOIDS: **THC, CBN**

GREEN TEA

PHYTOL
GABA via SSADH inhibition
SYNERGISTIC CANNABINOIDS: **CBG**

YEARLY DEATHS 2019

OPIOIDS
49,860
Over half from prescribed opioids

PRESCRIPTION DRUGS
70,630

(Source: CDC 2021)

CANNABIS
0

POTENTIAL SIDE EFFECTS
Sedation, dizziness, nausea, vomiting, constipation, physical dependence, tolerance, respiratory depression, and death

POTENTIAL SIDE EFFECTS
Liver failure, loss of language, cognitive decline, respiratory depression, rage, suicide, paranoia, and death

POTENTIAL SIDE EFFECTS
Dry mouth, dizziness, increased appetite, dry eyes, sedation, euphoria, disorientation, and short-term memory impairment

STATE MEDICAL CANNABIS PROGRAM REGULATIONS AND OVERSIGHT

REGULATIONS

MORE THAN 310 MILLION AMERICANS LIVE IN STATES WITH MEDICAL CANNABIS LAWS. THESE PROGRAMS ARE INFLUENCED BY LOCAL, STATE, AND FEDERAL REGULATIONS. AFTER A LAW IS ENACTED, STATE AGENCIES CREATE A SERIES OF REGULATIONS THAT GOVERN EVERYONE PARTICIPATING IN THE PROGRAM AND ALL PRODUCTS PRODUCED.

MEDICAL CANNABIS REGULATORY AGENCY

State agencies or groups of several agencies (such as the Departments of Health, Agriculture, Consumer Affairs, etc.) are tasked with creating and monitoring regulations through all phases of the production line, issuing licenses for businesses, and coordinating patient enrollment. These agencies also conduct inspections or work with third-party accreditors to ensure compliance, monitor adverse event reporting, and implement product recalls if necessary.

SUPPLY CHAIN

REGULATIONS BEGIN AT THE APPLICATION STAGE, WHERE CRITERIA ARE SET FOR WHO CAN OWN, OPERATE, AND WORK IN MEDICAL CANNABIS BUSINESSES, AND END WITH PURCHASING CRITERIA AT THE RETAIL POINT. FROM SEED TO CONSUMPTION, REGULATIONS INCLUDE TRACK AND TRACE FUNCTIONS, SECURITY REQUIREMENTS, PRODUCT SAFETY PROTOCOLS, STAFF TRAINING, AND ADVERSE EVENT REPORTING AND RECALL PROCEDURES. MEDICAL CANNABIS BUSINESSES ARE SUBJECT TO INSPECTIONS. REGULATORS NOW HAVE RESOURCES, SUCH AS THE AMERICAN HERBAL PHARMACOPOEIA CANNABIS MONOGRAPH AND THE AMERICAN HERBAL PRODUCTS ASSOCIATION RECOMMENDATIONS FOR REGULATORS, TO INFORM THE CREATION OF ROBUST PRODUCT SAFETY PROTOCOLS. ALL COMPANIES MUST DEMONSTRATE ABILITY TO TRACK ADVERSE EVENTS AND INITIATE A RECALL.

TESTING LAB FACILITY

All staff have proper training. Companies must adhere to Good Laboratory Practices and be accredited by an International Laboratory Accreditation Cooperation (ILAC) signatory for ISO 17025 accreditation and related certifications. Testing laboratories must offer potency testing for a variety of cannabinoids and screen for pesticides and contaminants. Specifications for these tests are set by the American Herbal Pharmacopoeia Cannabis Monograph. Strong regulatory regimes require laboratories to retain samples in order to assist in product recalls and public health inquiries.

CULTIVATION FACILITY

All staff have required legal compliance and product safety protocol adherence training. Companies must adhere to Good Agricultural Practices. Facilities may only use certain approved pesticides.

MANUFACTURING FACILITY

All staff have required legal compliance and product safety protocol adherence training. Companies must adhere to Good Manufacturing Practices. Products are packaged to prevent accidental ingestion by children.

AmericansForSafeAccess.org

PRODUCT SAFETY

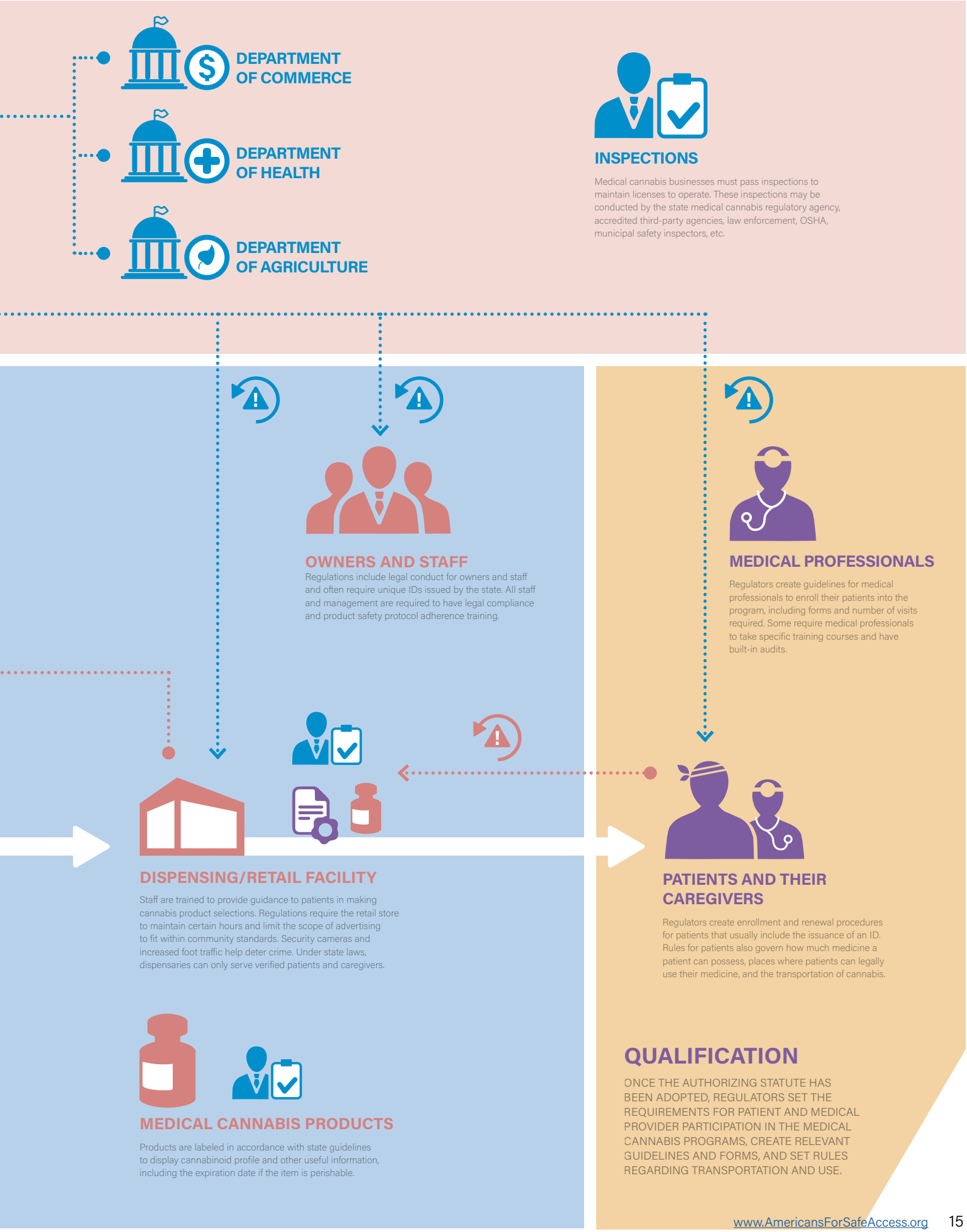
Each batch of raw plant material and cannabis-derived product must be quality assurance tested in order to ensure the integrity, purity, and proper labeling of medical cannabis products.

TRANSPORTATION

Regulations extend to transportation of cannabis products throughout the supply chain. Regulations require drivers to be registered with the state and require paperwork at pickup and drop-off locations, including weighing the product. Regulations also include special instructions for dealing with waste.

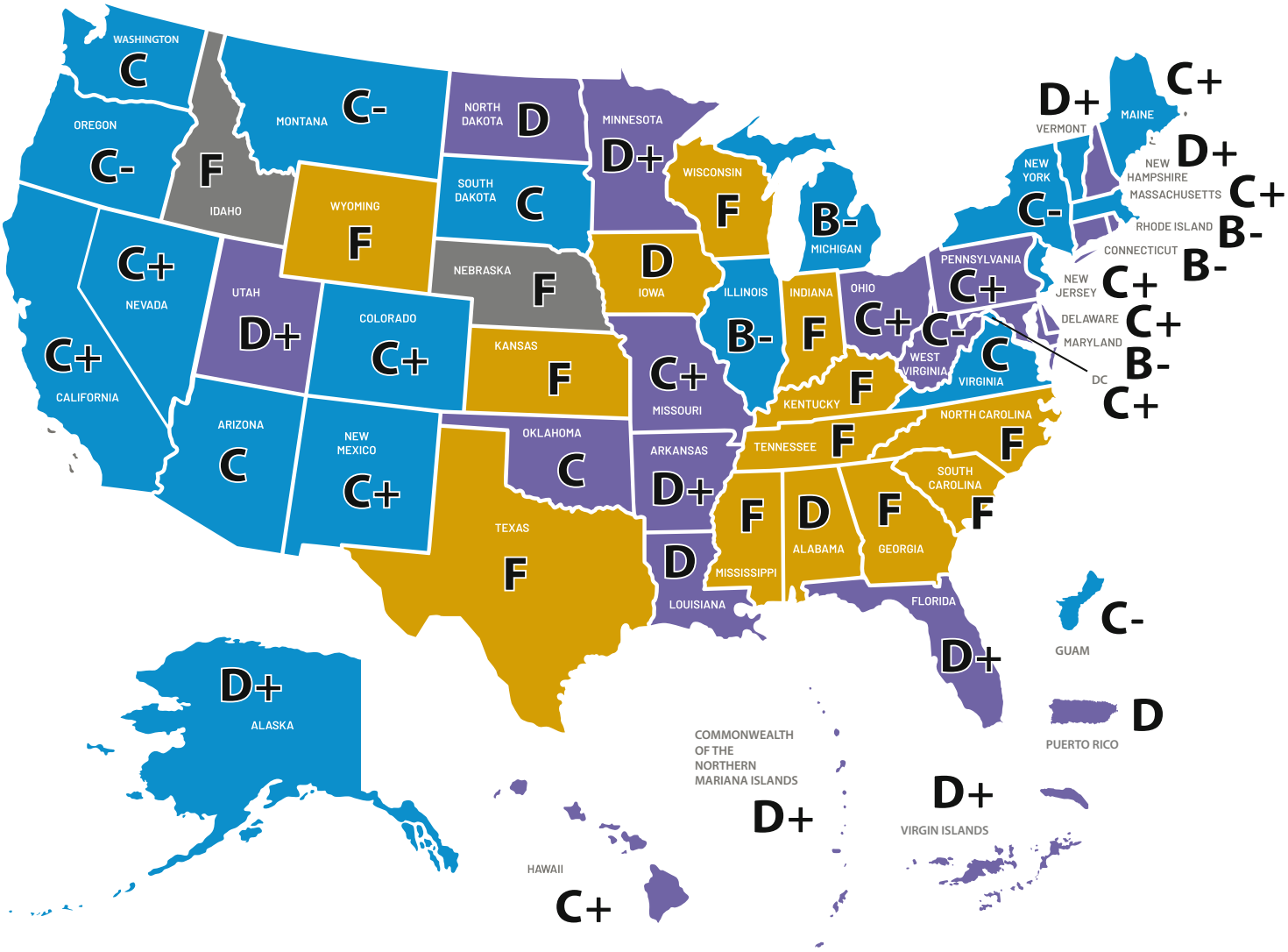
RECALL

When a product containing contaminants, molds, or mildew – or an improperly labeled product – enters the supply chain, regulatory agencies trigger a product recall to prevent patient consumption. This includes alerting the manufacturers, retail outlets, and the public. Recalled products are destroyed.


DEPARTMENT OF COMMERCE
DEPARTMENT OF HEALTH
DEPARTMENT OF AGRICULTURE
INSPECTIONS
Medical cannabis businesses must pass inspections to maintain licenses to operate. These inspections may be conducted by the state medical cannabis regulatory agency, accredited third-party agencies, law enforcement, OSHA, municipal safety inspectors, etc.
OWNERS AND STAFF
Regulations include legal conduct for owners and staff and often require unique IDs issued by the state. All staff and management are required to have legal compliance and product safety protocol adherence training.
MEDICAL PROFESSIONALS
Regulators create guidelines for medical professionals to enroll their patients into the program, including forms and number of visits required. Some require medical professionals to take specific training courses and have built-in audits.
DISPENSING/RETAIL FACILITY
Staff are trained to provide guidance to patients in making cannabis product selections. Regulations require the retail store to maintain certain hours and limit the scope of advertising to fit within community standards. Security cameras and increased foot traffic help deter crime. Under state laws, dispensaries can only serve verified patients and caregivers.
PATIENTS AND THEIR CAREGIVERS
Regulators create enrollment and renewal procedures for patients that usually include the issuance of an ID. Rules for patients also govern how much medicine a patient can possess, places where patients can legally use their medicine, and the transportation of cannabis.
MEDICAL CANNABIS PRODUCTS
Products are labeled in accordance with state guidelines to display cannabinoid profile and other useful information, including the expiration date if the item is perishable.
QUALIFICATION
ONCE THE AUTHORIZING STATUTE HAS BEEN ADOPTED, REGULATORS SET THE REQUIREMENTS FOR PATIENT AND MEDICAL PROVIDER PARTICIPATION IN THE MEDICAL CANNABIS PROGRAMS, CREATE RELEVANT GUIDELINES AND FORMS, AND SET RULES REGARDING TRANSPORTATION AND USE.

State Report Cards

B+



MAP KEY

Blue	Medical and adult use program
Purple	Full medical cannabis program
Yellow	CBD-specific program [includes low-THC]
Gray	No medical or adult use program

KEY FOR STATE GRADES

A+	96-100
A	93-95
A-	90-92
B+	83-89
B	77-82
B-	70-76
C+	63-69
C	57-62
C-	50-56
D+	43-49
D	37-42
D-	30-36
F	Below 30%

Americans for Safe Access

ALABAMA

Improvements and Recommendations

In May of 2021, Governor Kay Ivy signed SB 46 into law, authorizing the creation of the state's medical cannabis program. Over the past year, the state has been working to set up rules and regulations for the medical cannabis program, but patients are still unable to access medical cannabis in the state. Unfortunately, the legislation did not specify deadlines for this program to be functional for patients, leaving Alabamians without access for the foreseeable future. When the program does become functional, patients will still only have access to a limited selection of medications due to restrictions in the bill. While the state's score did improve slightly due to the creation of a few new regulations and civil rights protections, including arrest protections, the state is still without a working program. This scorecard analyzes only the portion of state laws in effect by the end of 2022. Therefore, Alabama can expect next year's grade to greatly improve, given that the medical cannabis program will begin serving patients in 2023.

In 2023, ASA recommends that legislators pass an expedited timeline requirement for the medical cannabis program to serve patients, and further amend the bill to allow any kind of administration method or product type for patients. Legislators should also prioritize patient protections such as employment and housing anti-discrimination policies, and a roadside THC testing exemption for cannabis patients. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 310
PENALTIES: -16
POINT TOTAL: 294/700
SCORE PERCENTAGE: 42%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**59/100**
Arrest Protection	25/25
Affirmative Defense	13/20
Parental Rights Protections	16/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**11/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	1/30
Reciprocity	0/20
AFFORDABILITY	**19/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	14/20
Financial Hardship Waivers or Discounts	5/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**60/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	0/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	0/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**15/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	8/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	7/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**146/200**
Cultivation Operations	**39/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	6/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	1/2
Environmental Impact Regulations	0/2
Required Testing	8/8
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	4/7
Manufacturing Operations	**37/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	6/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	8/10
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	0/1
Packaging and Product Labeling	1/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/5
Dispensary Operations	**34/50**
Staff Training	20/20
Standard Operating Procedures	6/7
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	8/13

CATEGORY	POINTS
Laboratory Operations	**36/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	3/5
Staff Training	10/20
Standard Operating Procedures	5/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**16/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	10/10
Imposes Bans or Limits on THC	1/5
Imposes Bans or Limits on CBD	5/5

Patient Feedback

Patients surveyed in Alabama reported disappointment that cannabis is not as widely accessible as it is in other states.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

The PFC training program prepares individuals to understand state and local regulations and to learn required safety and operational protocols, while teaching them the basics of cannabis as medicine and common therapeutic uses of cannabis. PFC trainings are available online to anyone interested in learning more about medical cannabis. Trainings are available in Cultivation, Manufacturing, Distribution, and Laboratory. A full training course guide can be found at www.PatientFocusedCertification.org/training.

Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

ALASKA

Improvements and Recommendations

2022 marks yet another year that Alaska has neglected their medical cannabis program. Since passing adult use/recreational cannabis laws, the state has failed to update or improve their state's medical cannabis program. This has left patient needs unmet, and the medical cannabis program's current barries to entry outweigh the few benefits the legislature has allowed to remain. This, and not the simple passing of adult use/recreational, has contributed to the stark decline in Alaska's medical cannabis population. Those still left in the program are patients that are most vulnerable, including those who are unable to receive access to their medications through the adult use/recreational market.

In 2023, ASA recommends that legislators prioritize improving the medical cannabis program and weigh the costs of entering the program against the benefits. Patients are not provided with any additional protections in areas where patients commonly face discrimination such as housing, parental rights, or employment. The state must provide patients with these crucial protections, and not relegate them to the adult use/recreational market for administrative ease. In light of the adult use/recreational laws, Alaska should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 348.5
PENALTIES: -30
POINT TOTAL: 318.5/700
SCORE PERCENTAGE: 45.5%

404	0.05%	169	2 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**47/100**
Arrest Protection	25/25
Affirmative Defense	17/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	5/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**65/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	20/30
Reciprocity	0/20
AFFORDABILITY	**44/100**
Sales Tax Break for Patients and Caregivers	12/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	12/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**59/100**
Legal Protections Within Reasonable Time Frame	14/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	7/10
Telemedicine for Physician Certification	9/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	4/5
– Background Checks	1/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**34/100**
State Program Protections	5/25
Housing Protections	0/25
Access for Minors	9/10
Access in Underserved Areas	4/10
List of Qualifying Conditions is Exhaustive or All Inclusive	9/10
Allows Patients to Medicate Where They Choose	7/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**99.5/200**
Cultivation Operations	**15/50**
Quality Management Systems	**0/10**
Staff Training	**5/10**
Standard Operating Procedures	**5/8**
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	**0/2**
Environmental Impact Regulations	**0/2**
Required Testing	**3/8**
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	1/1
– Moisture Content	0/1
Packaging and Labeling	**2/3**
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/7**
Manufacturing Operations	**32/50**
Quality Management Systems	**10/10**
Staff Training	**10/10**
Standard Operating Procedures	**7/7**
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	**0/3**
Required Testing	**4/10**
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	1/1
– Homogeneity	1/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	**1/5**
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/5**
Dispensary Operations	**15/50**
Staff Training	**10/20**
Standard Operating Procedures	**0/7**
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	**5/10**
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	**0/13**

CATEGORY	POINTS
Laboratory Operations	**37.5/50**
Independent or Third-Party	**5/5**
Laboratory Sampling	**0/5**
Method Validation	**0/4**
Quality Management Systems	**3.5/5**
Staff Training	**20/20**
Standard Operating Procedures	**5/7**
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	0/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	**4/4**
SCORE PENALTIES	**30/100**
Gives Regulatory Preference to Adult Use	**20/20**
Classifies Cannabis as a Medicine of Last Resort	**0/15**
Administrative or Supply Problems	**10/15**
Requires Vertical Integration	**0/10**
Creates New Criminal Penalties for Patients	**0/10**
Limits Patients to a Single Retailer	**0/10**
No System for Adding Qualifying Conditions	**0/10**
Imposes Bans or Limits on THC	**0/5**
Imposes Bans or Limits on CBD	**0/5**

Patient Feedback

Patients surveyed in Alaska reported no significant changes in access to medical cannabis over the last 12 months and believe that both medical and adult use/recreational cannabis are valued equally by state officials.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

ARIZONA

Improvements and Recommendations

In 2022, Arizona policymakers enacted improved testing requirements for medical cannabis products. The Arizona Supreme Court also ruled in favor of medical cannabis patients in *Freeman Expositions, LLC v. Eighth Judicial District Court*, by ruling that an employee's off-the-clock use of cannabis cannot be used against them in employment determinations. Arizona can thank the Supreme Court, rather than the legislature, for the boost in grade this year.

In 2023, ASA recommends that Arizona legislators protect patients' stake in the existing market by creating a review board staffed by patients and physicians with independent regulatory control over medical cannabis operations in the state. Legislators should also allow telehealth practices for patient certifications and renewals, and move to allow minors to medicate on school grounds. In light of the adult use/recreational laws, Arizona should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 457
PENALTIES: -30
POINT TOTAL: 427/700
SCORE PERCENTAGE: 61%

129,836	1.78%	140	927 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**96/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	16/20
Employment Protections	20/20
DUI Protections	10/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**75/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	20/30
Reciprocity	10/20
AFFORDABILITY	**55/100**
Sales Tax Break for Patients and Caregivers	10/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	15/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**50/100**
Legal Protections Within Reasonable Time Frame	14/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	3/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**66/100**
State Program Protections	5/25
Housing Protections	25/25
Access for Minors	8/10
Access in Underserved Areas	7/10
List of Qualifying Conditions is Exhaustive or All Inclusive	9/10
Allows Patients to Medicate Where They Choose	5/10
Organ Transplants	5/5
Ownership or Employment Restrictions	2/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**115/200**
Cultivation Operations	**18/50**
Quality Management Systems	**0/10**
Staff Training	**5/10**
Standard Operating Procedures	**6/8**
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	**1/2**
Environmental Impact Regulations	**0/2**
Required Testing	**5/8**
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	**1/3**
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/7**
Manufacturing Operations	**19/50**
Quality Management Systems	**0/10**
Staff Training	**5/10**
Standard Operating Procedures	**6/7**
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	**0/3**
Required Testing	**6/10**
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	**2/5**
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/5**
Dispensary Operations	**36/50**
Staff Training	**20/20**
Standard Operating Procedures	**6/7**
– Facility Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	**10/10**
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	5/5
Complaints, Adverse Event Reporting and Recall Protocol	**0/13**

CATEGORY	POINTS
Laboratory Operations	**42/50**
Independent or Third-Party	**5/5**
Laboratory Sampling	**0/5**
Method Validation	**4/4**
Quality Management Systems	**4/5**
Staff Training	**20/20**
Standard Operating Procedures	**5/7**
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	0/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	**4/4**
SCORE PENALTIES	**30/100**
Gives Regulatory Preference to Adult Use	**20/20**
Classifies Cannabis as a Medicine of Last Resort	**0/15**
Administrative or Supply Problems	**10/15**
Requires Vertical Integration	**0/10**
Creates New Criminal Penalties for Patients	**0/10**
Limits Patients to a Single Retailer	**0/10**
No System for Adding Qualifying Conditions	**0/10**
Imposes Bans or Limits on THC	**0/5**
Imposes Bans or Limits on CBD	**0/5**

Patient Feedback

Patients surveyed in Arizona gave the program mixed reviews with a predominantly negative outlook on the increasingly limited access to medical products and the lack of attention given to the medical cannabis market. Most surveyed patients expressed frustration with the lack of conveniently located dispensaries, making it difficult to obtain certain products. Additionally, surveyed patients reported that there is not enough supply of cannabis to accommodate the demand, and the cost of dispensary products and medical certifications are quite high. While some patients did not believe adult use/recreational cannabis interfered with the medical market, others believed that this will further impact the limited supply of inventory available.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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Americans for Safe Access

ARKANSAS

Improvements and Recommendations

Arkansas legislators have made a few noticeable improvements over the past few years, including allowing telehealth visits for medical cannabis recommendations and allowing doctors to recommend cannabis for any condition they see fit, rather than requiring a narrow state-mandated condition list. However, the state is still falling behind in areas related to patient costs and affordability as well as ease of administration and product safety.

In 2023, ASA recommends that legislators enact policies that will protect the rights of minor patients on school grounds, expand retail access to sufficiently meet patient demand and cover underserved populations, including those living in rural areas.

BASE CATEGORIES POINTS: 351
PENALTIES: -10
POINT TOTAL: 341/700
SCORE PERCENTAGE: 48.71%

90,266	2.98%	33	2,735 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**84/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	15/20
DUI Protections	0/10
Explicit Privacy Standards	4/5
ACCESS TO MEDICINE	**43/100**
Authorizes Retail Access	8/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	15/30
Reciprocity	10/20
AFFORDABILITY	**43/100**
Sales Tax Break for Patients and Caregivers	10/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	13/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**66/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	8/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	4/5
– Background Checks	2/2
– Number of Caregivers	2/3
Reasonable Physician Standards	3/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**81/100**
State Program Protections	25/25
Housing Protections	25/25
Access for Minors	9/10
Access in Underserved Areas	1/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	5/10
Organ Transplants	5/5
Ownership or Employment Restrictions	1/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**99.5/200**
Cultivation Operations	**7/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	4/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**9/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	2/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	6/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	1/1
Packaging and Product Labeling	1/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**12/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	7/13

CATEGORY	POINTS
Laboratory Operations	**6/50**
Independent or Third-Party	0/5
Laboratory Sampling	5/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	1/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	1/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**10/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	10/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Surveyed patients in Arkansas did not notice a significant increase or decrease in access to medical cannabis over the last year. Many patients were disappointed in the available dispensary products, noting the unaffordable costs and low quality herbal formulations. All of the survey respondents from Arkansas emphasized the limited number of dispensaries in accessible locations and expressed frustration in the lack of patient care they receive. One survey response complained that the state was only looking to increase profits instead of providing comprehensive and quality care to those seeking medical treatment.

Background

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Scoring Information

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Recommendations for Regulators

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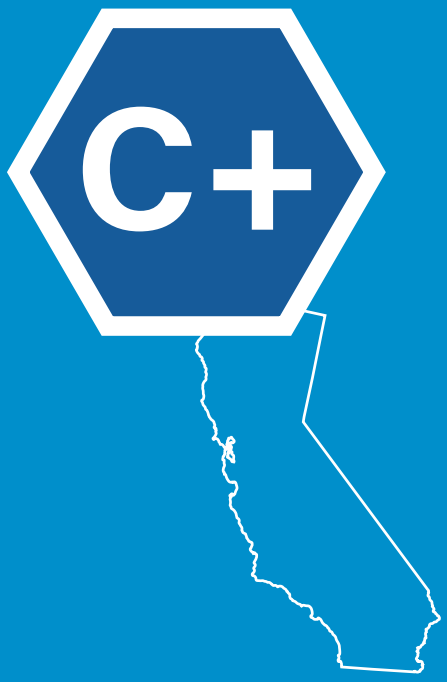
Americans for Safe Access

CALIFORNIA



Improvements and Recommendations

2022 was a productive year for the California legislature in terms of cannabis reforms signed into law. However, because this scorecard analyzes state laws already in effect by the end of 2022, many of these bills are not accounted for in this year's scorecard, but will be in subsequent years when they go into effect.

We would still like to give credit where it is due, even if the scorecard does not yet reflect these changes of law, California made some important improvements this year that will have a positive impact on patients statewide. The first is SB 1186, which prohibits localities from banning medical cannabis delivery services in their area. This is a critical step to resolving the incredible access disparities in the state, and further improves access for those with mobility issues. The second improvement came from AB 2188, which prohibits employment-based THC testing for most employers, and further makes it unlawful for an employer to discrimination, or otherwise penalize a person, for their off-duty use of cannabis. The Governor also approved a bill to enhance the justice reform provisions within the state.

In 2023, ASA recommends that California legislators continue making much needed improvements to the state's medical cannabis program. One particular area of focus within California should be the sense of urgency with which these improvements are enacted. Patients have been waiting for improvements to the program for some time, and passing legislation does not do much to improve the patient experience until it is enacted. In light of the adult use/recreational laws, California should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: **496**
PENALTIES: ..... **-10**
POINT TOTAL: **486/700**
SCORE PERCENTAGE: **69.43%**

1,920,294	4.81%	1,029	1,855 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**70/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**73/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	13/20
– Authorizes Delivery	8/10
– Authorizes Curbside Pickup	5/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	25/30
Reciprocity	10/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	10/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	10/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**85/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	5/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**74/100**
State Program Protections	25/25
Housing Protections	20/25
Access for Minors	10/10
Access in Underserved Areas	5/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	3/5
Ownership or Employment Restrictions	1/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**154/200**
Cultivation Operations	**34/50**
Quality Management Systems	10/10
Staff Training	2/10
Standard Operating Procedures	3/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	2/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	7/7
Manufacturing Operations	**48/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	3/3
Required Testing	9/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	1/1
– Foreign Matter	1/1
– Water Activity	1/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	5/5
Dispensary Operations	**27/50**
Staff Training	5/20
Standard Operating Procedures	4/7
– Facility Sanitation	1/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	13/13

CATEGORY	POINTS
Laboratory Operations	**45/50**
Independent or Third-Party	0/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**10/100**
Gives Regulatory Preference to Adult Use	10/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in California gave the state's medical cannabis program relatively positive reviews, with most responses indicating no change in access or increased access to medical cannabis over the last year. Most patients are satisfied with the amount of convenient dispensaries, but many still believe that there are too few in their proximity. The negative feedback came predominantly from the lack of focus on medical cannabis due to the state's adult use/recreational market, leaving medical patients with limited inventory and higher prices. One survey response noted the lack of medicinal grade products available to purchase. Additionally, patients expressed frustration that dispensary products are overly focused on THC content to the detriment of more therapeutic chemical profiles.

Background

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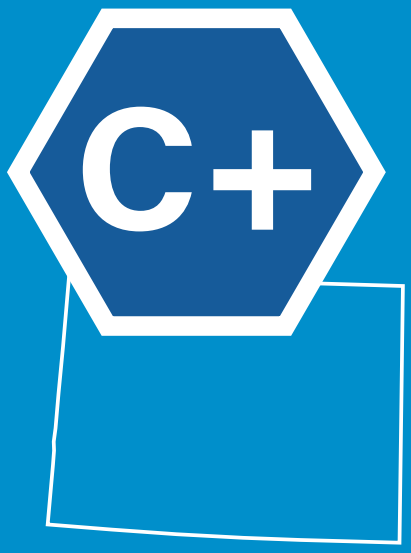
COLORADO



Improvements and Recommendations

In 2021, Colorado legislators and Governor Polis presided over the single worst rollback of medical cannabis and patient rights that ASA has ever witnessed in this country. These rollbacks included giving operators the ability to re-designate medical products in their inventory for adult use/recreational sale, inflating program-related fees for patients, forcing patients through additional rounds of physician certification which had not been required before.

Moving into 2022, it seems as though Colorado was focused on everything except righting the wrongs to the medical cannabis program. Legislators must recognize that patients are leaving the medical cannabis program due to added financial obligations and hurdles that have been added in recent years, and not because the adult use/recreational market is a suitable replacement. Physicians are pulling out of the program due to concerns over professional licenses, which makes it hard for patients to find a physician willing to provide a recommendation - a hurdle that becomes insurmountable when some patients are now required to have more than one physician recommendation to be allowed access.

In 2023, ASA recommends that, in order to best serve medical cannabis patients, state legislators make it a top priority to repeal the rollbacks that have damaged the medical program. ASA is disturbed by the direction Colorado policymakers have chosen to take with regards to medical cannabis laws; Colorado must act quickly before these policies devastate the state's patient population and create a crisis of access and health equity in the state. In light of the adult use/recreational laws, Colorado should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: **487**
PENALTIES: ..... **-20**
POINT TOTAL: **467/700**
SCORE PERCENTAGE: **66.71%**

71,536	1.21%	395	181 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**50/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**80/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	30/30
Reciprocity	5/20
AFFORDABILITY	**60/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**65/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**82/100**
State Program Protections	25/25
Housing Protections	20/25
Access for Minors	10/10
Access in Underserved Areas	10/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	5/10
Organ Transplants	0/5
Ownership or Employment Restrictions	2/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**150/200**
Cultivation Operations	**32/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	6/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	1/2
Required Testing	6/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	6/7
Manufacturing Operations	**33/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	2/3
Required Testing	7/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	1/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	4/5
Dispensary Operations	**40/50**
Staff Training	20/20
Standard Operating Procedures	3/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	12/13

CATEGORY	POINTS
Laboratory Operations	**45/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	20/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Colorado stated that cost has become more prohibitive due to product demand from adult use/recreational consumers. Patients felt that adult use/recreational legalization continues to have a negative impact in that it puts patient needs on the back burner.

Background

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Americans for Safe Access

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS (CNMI)

D+

Improvements and Recommendations

CNMI legalized the medical use of cannabis, in addition to adult use/recreational, in 2018. However, the territory has so far neglected to implement any substantial regulations or programs that would give patients access to medical cannabis protections, products, and retailers. CNMI accepts patient and caregiver registries for home cultivation of medical cannabis, but that is not sufficient for a medical cannabis population who must have access to a full range of products and administration methods.

In 2023, ASA recommends that lawmakers in the Northern Mariana Islands focus on protecting the civil rights of patients, including their right to housing, employment, and parental rights. CNMI must also prioritize the expedited promulgation of rules and regulations for a functional medical cannabis program that includes retail dispensaries, a full range of product types, and affordability measures for patients.

BASE CATEGORIES POINTS: 324
PENALTIES: -20
POINT TOTAL: 304/700
SCORE PERCENTAGE: 43.43%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**50/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**55/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	20/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**75/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**45/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**59/200**
Cultivation Operations	**7/50**
Quality Management Systems	0/10
Staff Training	5/10
Standard Operating Procedures	2/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**18/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	4/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	1/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**7/50**
Staff Training	5/20
Standard Operating Procedures	2/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**27/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	2/4
Quality Management Systems	3/5
Staff Training	10/20
Standard Operating Procedures	2/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	20/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

No feedback was received from patients in CNMI.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

The PFC training program prepares individuals to understand state and local regulations and to learn required safety and operational protocols, while teaching them the basics of cannabis as medicine and common therapeutic uses of cannabis. PFC trainings are available online to anyone interested in learning more about medical cannabis. Trainings are available in Cultivation, Manufacturing, Distribution, and Laboratory. A full training course guide can be found at www.PatientFocusedCertification.org/training.

Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

CONNECTICUT

Improvements and Recommendations

In 2022, Connecticut policymakers largely focused on implementing the new adult use/recreational laws in the state. Regulators did, however, implement some additional testing policies that were not included in last year's report.

Connecticut's registration fees will be eliminated effective 2023; this will not be reflected until next year's report card, but does represent an important improvement for patients.

In 2023, ASA recommends that over the next year, policymakers continue to make improvements in the medical cannabis program to include reciprocity and access to minors in school, and continue making improvements for product safety standards. In light of the adult use/recreational laws, Connecticut should also focus on passing provisions included in ASA's found in this report.

B-

BASE CATEGORIES POINTS: 513
PENALTIES: 0
POINT TOTAL: 513/700
SCORE PERCENTAGE: 73.29%

49,780	1.38%	18	2,765 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**80/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	10/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**60/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	15/30
Reciprocity	0/20
AFFORDABILITY	**50/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	10/20
Financial Hardship Waivers or Discounts	10/20
Donation Program	10/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**78/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	8/10
Reasonable Purchase Limits	6/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	10/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	4/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**85/100**
State Program Protections	25/25
Housing Protections	25/25
Access for Minors	5/10
Access in Underserved Areas	5/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	5/10
Organ Transplants	5/5
Ownership or Employment Restrictions	5/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**160/200**
Cultivation Operations	**40/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	8/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	6/8
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	2/3
– Cannabinoids	1/1
– Terpenes	1/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/7
Manufacturing Operations	**33/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	5/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	5/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	1/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/5
Dispensary Operations	**38/50**
Staff Training	20/20
Standard Operating Procedures	4/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Product Testing	10/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	5/5
Complaints, Adverse Event Reporting and Recall Protocol	4/13

CATEGORY	POINTS
Laboratory Operations	**47/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	2/4
Quality Management Systems	4/5
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed from Connecticut had an overall negative opinion on the state medical cannabis program. Within the last year, they noted the increasing cost of products, making it challenging to afford medical cannabis. In addition to the financial burden and lack of accessibility, there are a limited number of conveniently located dispensaries in the state.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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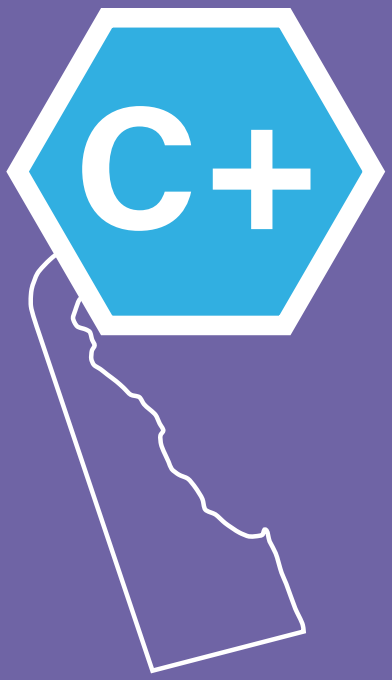
Americans for Safe Access

DELAWARE



Improvements and Recommendations

The Delaware legislature largely focused on adult use/recreational legalization efforts yet again this year, while neglecting the medical cannabis program. While the legislature did manage to pass an adult use/recreational bill this year, it was ultimately vetoed by Governor Carney.

In 2023, ASA recommends that legislators begin focusing on much needed improvements to the medical cannabis program, even if they decide to continue to focus on passing adult use/recreational use. While ASA does not oppose adult use/recreational efforts, Delaware policymakers must understand that adult use/recreational programs and medical cannabis programs are distinct, and should remain distinct in order to better meet the needs of both consumer populations. In light of the adult use/recreational policy debate, Delaware should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

ASA also recommends that policymakers allow reciprocity, not limit patients to a single retailer, allow multi-year patient registrations, remove registration fees, and license more retailers across the state to ensure underserved populations and areas have access. Changes like those mentioned will make a big impact on patients and their health in the state.

BASE CATEGORIES POINTS: 472
PENALTIES: -10
POINT TOTAL: 462/700
SCORE PERCENTAGE: 66%

19,715	1.96%	10	1,971 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**90/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**45/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	15/30
Reciprocity	0/20
AFFORDABILITY	**50/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	10/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**95/100**
Legal Protections Within Reasonable Time Frame	15/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**76/100**
State Program Protections	25/25
Housing Protections	15/25
Access for Minors	10/10
Access in Underserved Areas	5/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	5/10
Organ Transplants	5/5
Ownership or Employment Restrictions	1/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**116/200**
Cultivation Operations	**9/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	5/8
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	1/1
– Moisture Content	0/1
Packaging and Labeling	2/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**28/50**
Quality Management Systems	10/10
Staff Training	5/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	6/10
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	0/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**29/50**
Staff Training	20/20
Standard Operating Procedures	4/7
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**50/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**10/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	10/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Delaware expressed frustrated with the limit of retailers across the state and the high cost of medicine.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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DISTRICT OF COLUMBIA (DC)

Improvements and Recommendations

2022 was a busy year for policymakers in the District of Columbia, passing a number of emergency measures and bills to amend the medical cannabis program. Some of these improvements have yet to take effect, and as such are not calculated as part of DC's score - and other changes may not be fully accounted for due to the nature of our scoring rubric.

ASA will still give credit to DC for making these changes. Amendments included an emergency order pausing registration fees for patients, which was in effect for most of 2022. An emergency order, which was later made permanent by the council, allows patients to self-certify for a medical cannabis card, cutting down on associated costs with being a patient. DC policymakers also lifted the cap on the number of dispensaries allowed to operate within the district, and provided a way for "gray market" retailers to receive licenses to operate legally. DC also expanded the types of licenses available, which will now include educational licenses and consumption lounges.

ASA commends DC on the improvements made during 2022. Unfortunately, DC still falls behind in other areas, including patient rights and civil protections.

In 2023, ASA recommends that policymakers prioritize medical cannabis patient parental rights and work to ensure that DUI laws in the district do not unfairly prosecute patients. To date, DC only has employment protections for district workers; policymakers should work to ensure that all eligible workers in the district, not just those employed by the government, have employment protections in place.

BASE CATEGORIES POINTS: 448
PENALTIES: 0
POINT TOTAL: 448/700
SCORE PERCENTAGE: 64%

16,348	2.31%	7	2,335 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**60/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	10/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**60/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	5/30
Reciprocity	20/20
AFFORDABILITY	**45/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	15/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**98/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	3/5
– Background Checks	0/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**60/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	5/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	5/5
Ownership or Employment Restrictions	5/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**125/200**
Cultivation Operations	**22/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	8/8
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	2/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**28/50**
Quality Management Systems	5/10
Staff Training	10/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	10/10
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	1/1
– Foreign Matter	1/1
– Water Activity	1/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**25/50**
Staff Training	20/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**50/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in D.C. appreciated the convenience of self-certification but also felt frustrated that it turned the medical market into more of a adult use/recreational-focused market.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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Learn more about PFC at www.PatientFocusedCertification.org.

FLORIDA

Improvements and Recommendations

The Florida medical cannabis program has seen tremendous growth over the past few years. In 2021, the state added almost 260,000 patients to the registry, and in 2022 another 170,000 new patients enrolled. The state is fast approaching one million registered medical cannabis patients, but has a long way to go in ensuring the medical cannabis law protects and serves patients in the state. At the end of 2022, the state opened the door to adding more cannabis retailers and facilities, which will eventually ease access restrictions. At the same time, the state also substantially raised licensing fees and requirements for cannabis businesses; only time will tell just how that impacts patient access and affordability.

In 2023, ASA recommends that legislators make improvements, particularly when it comes to patients rights. These include, addressing discriminatory roadside sobriety testing, and provisions that protect medical cannabis patients from discrimination in their employment; something that must be corrected immediately. While the current law prohibits landlords from discriminating against someone based on their status as a medical cannabis patient, landlords are permitted to prohibit specific behaviors within the lease, which harms patients. ASA also recommends that Florida do away with requiring patients to register every 7 months; administrative costs of running the medical cannabis program should not fall on the shoulders of patients, and patients should not be required to pay a fee just to have access to a treatment option.

BASE CATEGORIES POINTS: 341
PENALTIES: 0
POINT TOTAL: 341/700
SCORE PERCENTAGE: 48.71%

778,781	3.53%	571	1,506 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**50/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**65/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	30/30
Reciprocity	5/20
AFFORDABILITY	**30/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	10/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**80/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	2/5
– Background Checks	2/2
– Number of Caregivers	0/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	3/5
HEALTH AND SOCIAL EQUITY	**32/100**
State Program Protections	10/25
Housing Protections	10/25
Access for Minors	5/10
Access in Underserved Areas	2/10
List of Qualifying Conditions is Exhaustive or All Inclusive	5/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**84/200**
Cultivation Operations	**12/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/7
Manufacturing Operations	**17/50**
Quality Management Systems	5/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	8/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	1/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	1/5
Dispensary Operations	**15/50**
Staff Training	5/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	10/13

CATEGORY	POINTS
Laboratory Operations	**40/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	10/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Florida had varying opinions on the state's medical cannabis program, with most believing access to medical cannabis has decreased. While many surveyed patients believe that there are an adequate amount of dispensaries to purchase products from, patients reported that products are expensive, there are harsh regulations on the quantity of cannabis one can purchase, and the new limits on THC content prevent patients from receiving therapeutic benefits. One survey response noted that Florida's requirement to renew certifications every 7 months creates financial stress for patients, preventing many from having consistent access to cannabis and receiving its subsequent benefits.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

GEORGIA

Improvements and Recommendations

Georgia's medical cannabis program has suffered from roadblocks for many years as the state tries to determine if they can regulate a medical cannabis market, first permitted in 2015. In Fall 2022, Governor Kemp announced that he would end the backlog of lawsuits and allow the program to move forward. However, even after this pledge, the medical cannabis program still remains at a standstill. Licenses have not been awarded, retailers are not open, patients lack any kind of meaningful access, and the state does not appear to be motivated to fix these problems.

In 2023, ASA recommends once again that Georgia get their in-state production, distribution, and retail of medical cannabis off the ground, and encourages Georgia to proactively improve its program by strengthening product safety standards, increasing the forms of medical cannabis and medical cannabis products available, and remove arbitrary limits on THC percentages. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 170
PENALTIES: -20
POINT TOTAL: 150/700
SCORE PERCENTAGE: 21.43%

25,000	0.23%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**50/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**18/100**
Authorizes Retail Access	5/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	13/20
AFFORDABILITY	**30/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**54/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	4/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**18/100**
State Program Protections	5/25
Housing Protections	0/25
Access for Minors	8/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	5/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	15/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Georgia had negative views on the state medical cannabis program. Patients highlighted the lack of attention and progress given to the program, as there are still no operating dispensaries in the state. Patients are unable to purchase any sort of medical cannabis despite being approved by certifying practitioners and possessing medical cannabis cards.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

GUAM

Improvements and Recommendations

Guam's cannabis implementation has been rife with long delays and administrative stalemates since its passage in 2019. In May 2022, Guam finally released regulations for the cannabis market within the territory. To date, however, there are no dispensaries open to patients. While regulations have been released, there are still administrative hurdles and delays to opening up a fully functioning medical cannabis program for the patients in Guam.

Guam does deserve credit for allowing physicians to recommend cannabis for any qualifying condition, generous home cultivation policies, and tax breaks for patients. This alone is not enough however, if there is no access for patients within Guam.

In 2023, ASA recommends that legislators and officials expedite the licensing process to ensure that medical cannabis retailers can open as soon as possible and begin serving patients within the territory.

BASE CATEGORIES POINTS: 379
PENALTIES: -15
POINT TOTAL: 364/700
SCORE PERCENTAGE: 52%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**50/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**25/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**20/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**95/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**45/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**144/200**
Cultivation Operations	**33/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	2/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	1/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**36/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	4/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	2/3
Required Testing	7/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**32/50**
Staff Training	20/20
Standard Operating Procedures	2/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Product Testing	10/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	5/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**43/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	3/5
Staff Training	20/20
Standard Operating Procedures	2/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Result Reporting	4/4
SCORE PENALTIES	**15/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	15/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

No feedback was received from patients in Guam.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

HAWAII

Improvements and Recommendations

Hawaii continues to work on improvements to the state's medical cannabis program, which continues to grow. In 2022, Hawaii implemented a number of new product safety measures to ensure medical cannabis products are safe for patient consumption. Unfortunately, Hawaii did raise the price of patient registration fees by $10 this year. While it may not seem like a big increase, this is just one of a number of costs associated with gaining access to medical cannabis. ASA recommends Hawaii reverse course and do away with registration fees; administrative costs of running the medical cannabis program should not fall on the shoulders of patients, and patients should not be required to pay a fee just to have access to a treatment option.

In 2023, ASA recommends that legislators make further changes to Hawaii's medical cannabis program to improve the patient experience. In addition to ending registration fees, policymakers can pass employment discrimination protections, and exempt patients from discriminatory roadside sobriety tests for THC. Finally, Hawaii should follow the trend of allowing more accessibility methods for patients, including permitting curbside pickup at dispensaries and delivery to patients.

BASE CATEGORIES POINTS: 444
PENALTIES: 0
POINT TOTAL: 444/700
SCORE PERCENTAGE: 63.43%

33,424	2.27%	20	1,671 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**70/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**45/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	15/15
Collective Gardening	5/5
Sufficient Number of Licensed Retailers	5/30
Reciprocity	10/20
AFFORDABILITY	**45/100**
Sales Tax Break for Patients and Caregivers	15/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**62/100**
Legal Protections Within Reasonable Time Frame	15/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	7/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**72/100**
State Program Protections	25/25
Housing Protections	20/25
Access for Minors	10/10
Access in Underserved Areas	2/10
List of Qualifying Conditions is Exhaustive or All Inclusive	5/10
Allows Patients to Medicate Where They Choose	5/10
Organ Transplants	5/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**150/200**
Cultivation Operations	**42/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	7/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	1/2
Environmental Impact Regulations	0/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	6/7
Manufacturing Operations	**41/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	7/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	4/5
Dispensary Operations	**39/50**
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	12/13

CATEGORY	POINTS
Laboratory Operations	**28/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	3/5
Staff Training	10/20
Standard Operating Procedures	1/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	1/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Hawaii had an overall positive view on the state's medical cannabis program. Many believe that access has improved over the last year, with the state continuing to prioritize the medical cannabis market. Surveyed patients indicated that the program could improve by increasing the number of dispensaries as well as the available products they carry.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

IDAHO

Improvements and Recommendations

Idaho remains one of only two states left that does not allow access to any form of cannabis for its residents.

In 2023, ASA strongly recommends that legislators create legislation designed to imitate high scoring states within this report to provide comprehensive access to medical cannabis. ASA encourages Idaho lawmakers to engage with patients and medical cannabis advocacy organizations to build a safe and legal access model for patients, including authorizing a licensing system to support cultivation and sale of in-state medical cannabis and related products to patients. Legislators should also consider permitting patients and caregivers to cultivate cannabis at home for medical use. Lawmaker inaction in Idaho leaves sick and vulnerable residents without cannabis as an alternative treatment option that has already been proven safe and effective for millions of patients in other states. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 0
PENALTIES: 0
POINT TOTAL: 0/700
SCORE PERCENTAGE: 0%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**0/100**
Arrest Protection	0/25
Affirmative Defense	0/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	0/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**0/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	0/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**0/100**
Legal Protections Within Reasonable Time Frame	0/20
Reasonable Possession Limits	0/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	0/5
– Background Checks	0/2
– Number of Caregivers	0/3
Reasonable Physician Standards	0/5
Access to Administration Methods	0/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	0/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**0/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	0/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	0/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Idaho expressed disappointment in the state lacking a medical cannabis program and the persistent illegality of medical cannabis overall.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

ILLINOIS

Improvements and Recommendations

For the past few years, Illinois has largely focused on setting up its adult use/recreational market. Because of this focus, there have not been many changes or improvements made to the medical cannabis program. Despite this, the program does continue to grow, demonstrating the need for a robust medical cannabis program in the state; a program that is separate and distinct from the adult use/recreational program. The state has a temporary order in place, which allows for curbside pickup at dispensaries, but the order has an expiration date and an expectation that lawmakers pass legislation to make it permanent.

In 2023, ASA recommends lawmakers act swiftly before the temporary measure expires, and encourages policymakers to include delivery services to provide further accessibility options for patients, including those with chronic or debilitating conditions or mobility issues. ASA also recommends instituting reciprocity policies in the state to allow out-of-state visiting patients access to their treatment options while in Illinois. In light of the adult use/recreational laws, Illinois should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 503
PENALTIES: -10
POINT TOTAL: 493/700
SCORE PERCENTAGE: 70.43%

136,574	1.07%	55	2,483 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**90/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	10/20
Employment Protections	20/20
DUI Protections	10/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**45/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	15/30
Reciprocity	5/20
AFFORDABILITY	**65/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	15/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**90/100**
Legal Protections Within Reasonable Time Frame	15/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	10/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**75/100**
State Program Protections	25/25
Housing Protections	20/25
Access for Minors	5/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	5/10
Organ Transplants	5/5
Ownership or Employment Restrictions	5/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**138/200**
Cultivation Operations	**30/50**
Quality Management Systems	10/10
Staff Training	0/10
Standard Operating Procedures	7/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	2/2
Required Testing	4/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	2/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**27/50**
Quality Management Systems	10/10
Staff Training	0/10
Standard Operating Procedures	6/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	5/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	0/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**43/50**
Staff Training	20/20
Standard Operating Procedures	6/7
– Facility Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	10/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	5/5
Complaints, Adverse Event Reporting and Recall Protocol	7/13

CATEGORY	POINTS
Laboratory Operations	**38/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	10/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	2/4
SCORE PENALTIES	**10/100**
Gives Regulatory Preference to Adult Use	10/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Illinois had mostly favorable opinions on the state's medical cannabis program. Most patients believed that access to medical cannabis improved or stayed the same over the last 12 months. Patients stated that home growing provisions improved cannabis availability and options. Survey respondents were split over how adult use/recreational cannabis impacted the medical market, but many believe that medical cannabis is being put on the back burner and adult use/recreational is being prioritized. An overwhelming majority of surveyed patients believed that there are not enough medical dispensaries, emphasizing the need for the state to prioritize patient care and accessible medical products.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

INDIANA

Improvements and Recommendations

Once again, lawmakers in Indiana did nothing to advance the safe access of medical cannabis for patients in their state. The medical use of cannabis is permitted in every state surrounding Indiana, which means patients are forced to either forego medical cannabis as a treatment option, or break both state and federal law by traveling across the border to access their medications.

In 2023, ASA recommends legislators prioritize modernizing state law, and allow a full medical cannabis program to exist, including a production and sale system for patients to purchase medical cannabis. Sufficient retailers across the state, and legal protections in place for patients are also recommended.

Legislators should also organize functional reforms to help patients, including expanding the list of qualifying conditions, and removing arbitrary caps on THC content in cannabis-related medications. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 103
PENALTIES: -30
POINT TOTAL: 73/700
SCORE PERCENTAGE: 10.43%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**27/100**
Arrest Protection	0/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	5/10
Explicit Privacy Standards	2/5
ACCESS TO MEDICINE	**1/100**
Authorizes Retail Access	1/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**27/100**
Legal Protections Within Reasonable Time Frame	10/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	3/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**8/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	7/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	1/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**30/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	15/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	10/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Indiana reported their continued frustrations with their state's comprehensive lack of access.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

IOWA

Improvements and Recommendations

Iowan medical cannabis patients experienced a few small, but meaningful, changes in how their medical cannabis program operates in the state. With an expanded qualifying condition list, and no more arbitrary THC caps, more patients in the state are now legally able to purchase a wider variety of products to treat their conditions. As such, Iowa has seen a continual, and quite staggering growth, not only in the number of patients or total amount of medical cannabis sales, but also in the number of physicians signing on to recommend cannabis to their patients.

In 2023, ASA recommends that Iowa continue to capitalize on relaxing some of the arbitrary rules surrounding the previous program and continue to expand access for patients across the state. ASA also encourages legislators to enact some of the Cannabis Commission's recommendations, such as increasing the number of licensed dispensaries allowed in the state, and exempting medical cannabis products from state's taxes. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 275
PENALTIES: -5
POINT TOTAL: 270/700
SCORE PERCENTAGE: 38.57%

11,676	0.36%	5	2,335 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**50/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**20/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	5/30
Reciprocity	5/20
AFFORDABILITY	**20/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	10/20
Financial Hardship Waivers or Discounts	10/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**57/100**
Legal Protections Within Reasonable Time Frame	10/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	10/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	4/5
Access to Administration Methods	3/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	3/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**15/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	5/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**113/200**
Cultivation Operations	**27/50**
Quality Management Systems	10/10
Staff Training	5/10
Standard Operating Procedures	4/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	0/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	4/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**28/50**
Quality Management Systems	10/10
Staff Training	5/10
Standard Operating Procedures	3/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	0/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	5/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	2/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**16/50**
Staff Training	5/20
Standard Operating Procedures	4/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	0/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	7/13

CATEGORY	POINTS
Laboratory Operations	**42/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	4/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**5/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Iowa reported no noticeable change in access from 2021 and frustration on the high prices for the CBD oil that is available to them.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

KANSAS

Improvements and Recommendations

Another year passes without a medical cannabis authorization bill from legislators in Kansas. In 2022, a Special Committee on Medical Marijuana convened. The purpose of the Committee was to provide recommendations to the legislature for a medical cannabis bill; however, the prospects of any bill passing the Kansas legislature remains uncertain.

In 2023, ASA is once again recommending that legislators prioritize work focused on organizing a comprehensive medical cannabis program that provides legal protections to patients related to employment, housing, education, and family law, and develop an in-state production system for lab-tested medical cannabis and cannabis products that can be made available to patients throughout the state. ASA also recommends lawmakers not allow for a prolonged implementation period; Kansas patients have been made to wait long enough. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 72
PENALTIES: -20
POINT TOTAL: 52/700
SCORE PERCENTAGE: 7.43%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**40/100**
Arrest Protection	0/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	0/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**0/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	0/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**21/100**
Legal Protections Within Reasonable Time Frame	10/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	0/5
– Background Checks	0/2
– Number of Caregivers	0/3
Reasonable Physician Standards	0/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**11/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	5/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	6/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	15/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Kansas expressed disappointment in the state's continued criminalization of medical cannabis, highlighting their persistent stalling in implementing a medical cannabis program as well as the high prices on available CBD oil products.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

KENTUCKY

Improvements and Recommendations

Once again, the Kentucky legislature has failed to pass any meaningful medical cannabis legislation for their constituents. Governor Beshear did sign an executive order in 2022 which would automatically pardon anyone arrested with cannabis pursuant to a condition list, but this action did not go into effect the same year, and thus is not accounted for in this year's report card.

In 2023, ASA is once again recommending that legislators prioritize work focused on organizing a comprehensive medical cannabis program that provides legal protections to patients related to employment, housing, education, and family law, and develop an in-state production system for lab-tested medical cannabis and cannabis products that can be made available to patients throughout the state. ASA also recommends lawmakers not allow for a prolonged implementation period; Kentucky patients have been made to wait long enough.

BASE CATEGORIES POINTS: 114
PENALTIES: -45
POINT TOTAL: 69/700
SCORE PERCENTAGE: 9.86%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**25/100**
Arrest Protection	0/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**20/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**33/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	0/5
– Background Checks	0/2
– Number of Caregivers	0/3
Reasonable Physician Standards	2/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**36/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	1/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**45/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	15/15
Administrative or Supply Problems	15/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	10/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Surveyed patients from Kentucky expressed universal frustration over the lack of an established medical cannabis program, with responses indicating that patients are eagerly awaiting the program to go into effect.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

LOUISIANA

Improvements and Recommendations

Louisiana continues to make improvements to the state's medical cannabis program. In 2022, policymakers authorized nurses to recommend cannabis, and added provisions allowing reciprocity in some cases, as well as preventing work-place discrimination against cannabis patients. ASA is encouraged by the continued improvements to the state's program.

In 2023, ASA recommends extending non-discriminatory practices to include housing and family law issues. Policymakers should also consider expanding accessibility methods to allow curbside pickup at dispensaries as well as medical cannabis product dispensary, to assist those with debilitating conditions or mobility issues. Lawmakers may also wish to consider allowing home cultivation of cannabis for medical cannabis patients.

BASE CATEGORIES POINTS: 314.5
PENALTIES: -15
POINT TOTAL: 299.5/700
SCORE PERCENTAGE: 42.79%

20,321	0.43%	9	2,258 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**70/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**41/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	1/30
Reciprocity	20/20
AFFORDABILITY	**30/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	10/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**56/100**
Legal Protections Within Reasonable Time Frame	10/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	8/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**45/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**72.5/200**
Cultivation Operations	**18.5/50**
Quality Management Systems	2.5/10
Staff Training	5/10
Standard Operating Procedures	5/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	1/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	1/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	2/7
Manufacturing Operations	**24.5/50**
Quality Management Systems	2.5/10
Staff Training	5/10
Standard Operating Procedures	5/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	7/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	1/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**29.5/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	2/4
Quality Management Systems	3.5/5
Staff Training	10/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	4/4
SCORE PENALTIES	**15/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	15/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Louisiana reported disappointment that cannabis is not as widely accessible as it is in other states.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

MAINE

Improvements and Recommendations

Maine continues to have a strong medical cannabis program, relative to the rest of the states across the country. In 2022, policymakers made permanent some policies improving accessibility, like curbside pickup and delivery. Physicians are also able to consult with patients via telehealth, which helps cut down on some of the administrative burdens patients face.

Even though Maine ranked well relative to other states around the country, there are still a number of things policymakers can do to improve the patient experience.

In 2023, ASA recommends that legislators extend the stricter adult use/recreational third-party testing standards to products intended for medical cannabis patients. Additionally, the state should consider allowing multiple years-long registrations at no cost to avoid burdening patients with unnecessary paperwork or administrative fees. In light of the adult use/recreational laws, Maine should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 480
PENALTIES: -10
POINT TOTAL: 470/700
SCORE PERCENTAGE: 67.14%

106,164	7.75%	35	3,033 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**90/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**95/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	5/5
Sufficient Number of Licensed Retailers	30/30
Reciprocity	15/20
AFFORDABILITY	**60/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**100/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**87/100**
State Program Protections	25/25
Housing Protections	20/25
Access for Minors	5/10
Access in Underserved Areas	10/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	7/10
Organ Transplants	5/5
Ownership or Employment Restrictions	5/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**48/200**
Cultivation Operations	**7/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	3/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	1/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**18/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	3/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	1/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**23/50**
Staff Training	20/20
Standard Operating Procedures	3/7
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	/4
SCORE PENALTIES	**10/100**
Gives Regulatory Preference to Adult Use	10/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Even at prices substantially lower than most other states, patients surveyed in Maine's still reported overall prohibitive costs, highlighting the alarming cost to patients in other jurisdictions.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

MARYLAND

Improvements and Recommendations

This year the Commission adopted several wide-ranging provisions to improve the program for patients, including, extending the registration period for patients from 3 to 6 years, reducing fees from $50 to $25, waiving fees for low-income individuals and veterans, reducing registration processing times from 2 weeks to 1-2 days, allowing telehealth permanently, and establishing and expanding a public health research and education unit.

While Maryland had a heavy focus on passing comprehensive adult use/recreational legislation and policies, it did continue to make improvements to the medical cannabis program, which was highly appreciated. In November 2022, Maryland voters approved a ballot measure to legalize adult use/recreational cannabis in the state. It is now up to legislators and regulators to implement that program.

In 2023, ASA strongly encourages policymakers to tread carefully as they work to implement the adult use/recreational market. Medical and adult use/recreational program needs should not be considered the same as medical, and the consumer populations within each group are distinct, with their own needs. An adult use/recreational program alone is not sufficient for medical cannabis patients, and lawmakers must ensure that the adult use/recreational market is separate from the medical cannabis market, and policymakers must continue to make improvements on the medical side for patients. In light of the new adult use/recreational laws, Maryland should also focus on passing provisions included in ASA's Medical Cannabis Equity Checklist found in this report.

B-

BASE CATEGORIES POINTS: 530
PENALTIES: 0
POINT TOTAL: 530/700
SCORE PERCENTAGE: 75.71%

161,722	2.58%	102	1,585 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**80/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	10/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**60/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	30/30
Reciprocity	0/20
AFFORDABILITY	**60/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	10/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**94/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	9/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	15/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**67/100**
State Program Protections	25/25
Housing Protections	10/25
Access for Minors	10/10
Access in Underserved Areas	10/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	2/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**169/200**
Cultivation Operations	**44/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	4/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	0/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	8/8
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	3/3
– Cannabinoids	1/1
– Terpenes	1/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	7/7
Manufacturing Operations	**44/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	5/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	0/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	9/10
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	1/1
– Foreign Matter	1/1
– Water Activity	1/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	1/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	5/5
Dispensary Operations	**42/50**
Staff Training	20/20
Standard Operating Procedures	4/7
– Facility Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	0/1
– Waste Disposal	1/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	13/13

CATEGORY	POINTS
Laboratory Operations	**39/50**
Independent or Third-Party	5/5
Laboratory Sampling	4/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	10/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

In addition to lower prices, patients surveyed in Maryland reported more accessibility in terms of Type I products, but more limited access to Type II and III products; additionally, they reported that maximum edible dosage has decreased, meaning patients must purchase more products to get the same amount of medicine they used to be able to get. Patients surveyed also reported increased amounts of time allotted until certification renewal (now 6 years).

Background

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Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

MASSACHUSETTS

Improvements and Recommendations

Medical cannabis sales in Massachusetts have reached almost $1 billion since the medical cannabis program was approved in 2018. Despite this promising sales number, Massachusetts did not make any noticeable improvements to the medical cannabis program in the past year.

In 2023, ASA recommends that legislators in the state expand protections provided under the law for patients. As it stands, employment protections only exist through case law and should be formalized by the state legislature. The legislature should also seek to protect patients rights within housing, education, and family court as well. ASA commends Massachusetts for not requiring a fee with patient registrations, and encourages policymakers to extend patient registrations to cover multi-year periods in order to cut down on administrative paperwork for patients. In light of the adult use/recreational laws, Massachusetts should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 465
PENALTIES: -20
POINT TOTAL: 445/700
SCORE PERCENTAGE: 63.57%

97,003	1.36%	139	697 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**60/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	10/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**65/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	15/30
Reciprocity	5/20
AFFORDABILITY	**60/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**67/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	7/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**75/100**
State Program Protections	25/25
Housing Protections	20/25
Access for Minors	10/10
Access in Underserved Areas	5/10
List of Qualifying Conditions is Exhaustive or All Inclusive	5/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	5/5
Ownership or Employment Restrictions	5/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**138/200**
Cultivation Operations	**41/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	8/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	2/2
Required Testing	5/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**39/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	3/3
Required Testing	5/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	0/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**26/50**
Staff Training	20/20
Standard Operating Procedures	6/7
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**32/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	2/4
Quality Management Systems	3/5
Staff Training	20/20
Standard Operating Procedures	2/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	20/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed expressed concern regarding inflated pricing, a concentration on potential harm rather than potential benefits, and that the adult use/recreational market is undermining the medical market. They also reported a lack of pediatric access.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

The PFC training program prepares individuals to understand state and local regulations and to learn required safety and operational protocols, while teaching them the basics of cannabis as medicine and common therapeutic uses of cannabis. PFC trainings are available online to anyone interested in learning more about medical cannabis. Trainings are available in Cultivation, Manufacturing, Distribution, and Laboratory. A full training course guide can be found at www.PatientFocusedCertification.org/training.

Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

MICHIGAN

Improvements and Recommendations

For the past few years, Michigan has largely focused on setting up its adult use/recreational market. Because of this focus, there have not been many changes or improvements made to the medical cannabis program. This has left patient needs neglected and the hurdles that exist on the medical cannabis program outweigh the few benefits the legislature has allowed to remain. This, and not the simple passing of adult use/recreational, has contributed to the stark decline in Michigan's medical cannabis population. Those still left in the program are patients that are most vulnerable, including those who are unable to receive access to their medications through the adult use/recreational market.

In 2023, ASA recommends instituting reciprocity policies in the state to allow out-of-state visiting patients access to their treatment options while in Michigan, without being forced to visit recreational dispensaries and pay the extra taxes and fees. Policymakers must also act to protect patients from discrimination in their employment for using medical cannabis. In light of the adult use/recreational laws, Michigan should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 490
PENALTIES: 0
POINT TOTAL: 490/700
SCORE PERCENTAGE: 70%

184,564	1.82%	403	458 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**80/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	10/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**85/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	20/30
Reciprocity	20/20
AFFORDABILITY	**50/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**93/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	8/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**59/100**
State Program Protections	25/25
Housing Protections	10/25
Access for Minors	5/10
Access in Underserved Areas	5/10
List of Qualifying Conditions is Exhaustive or All Inclusive	7/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	5/5
Ownership or Employment Restrictions	2/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**123/200**
Cultivation Operations	**23/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	2/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	1/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**35/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	2/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	9/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	1/1
– Foreign Matter	1/1
– Water Activity	1/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**29/50**
Staff Training	20/20
Standard Operating Procedures	2/7
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	2/13

CATEGORY	POINTS
Laboratory Operations	**36/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	4/5
Staff Training	10/20
Standard Operating Procedures	4/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	4/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed stated a concern for too many dispensaries letting their medical licensing lapse and focusing on adult use/recreational, as well as a concern for the quality of accessible cannabis not being at a level appropriate for medical cannabis treatment.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

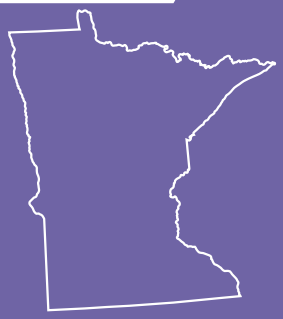
Americans for Safe Access

MINNESOTA

Improvements and Recommendations

While Minnesota made a number of important improvements to the medical cannabis program in 2021, 2022 proved to be a slower year in the legislature with no noticeable improvements passed. Lawmakers have, on the other hand, been busy contemplating adult use/recreational policies.

In 2023, as these conversations continue, ASA recommends legislators tread carefully as they work to legislate the adult use/recreational market. Medical cannabis and adult use/recreational cannabis are not the same, and the consumer populations within each group are distinct, with their own needs. An adult use/recreational program alone is not sufficient for medical cannabis patients, and lawmakers must ensure that the adult use/recreational market is separate from the medical cannabis market, and policymakers must continue to make improvements on the medical side for patients. In particular, policymakers should immediately move to lower the outrageous patient registration fee; the administrative costs of medical cannabis should not be placed on the shoulders of patients. Policymakers should also work to ensure that there is a sufficient number of licensed retailers around the state and prioritize licenses for facilities that would serve previously underserved areas and populations.



BASE CATEGORIES POINTS: 340
PENALTIES: 0
POINT TOTAL: 340/700
SCORE PERCENTAGE: 48.57%

39,552	0.68%	14	2,825 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**90/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**30/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	10/30
Reciprocity	0/20
AFFORDABILITY	**35/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	0/20
Financial Hardship Waivers or Discounts	15/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**59/100**
Legal Protections Within Reasonable Time Frame	10/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	4/5
– Background Checks	1/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	5/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**57/100**
State Program Protections	25/25
Housing Protections	10/25
Access for Minors	10/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	7/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	5/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**75/200**
Cultivation Operations	**25/50**
Quality Management Systems	5/10
Staff Training	5/10
Standard Operating Procedures	4/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	1/2
Environmental Impact Regulations	0/2
Required Testing	5/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	0/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	4/7
Manufacturing Operations	**21/50**
Quality Management Systems	5/10
Staff Training	5/10
Standard Operating Procedures	6/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	2/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**23/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	4/4
Quality Management Systems	3/5
Staff Training	10/20
Standard Operating Procedures	1/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	1/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients in Minnesota were divided equally between those who reported improved access to medical cannabis and those who reported that their access has diminished.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

MISSISSIPPI

Improvements and Recommendations

In the November 2020 elections, Mississippi voters approved a measure to create a medical cannabis program. Shortly after its passage, the ballot measure was challenged and in May 2021 it was nullified by the Mississippi Supreme Court nullified the ballot measure. Mississippi legislators heard what their constituents wanted, however, and in February 2022 passed a law to create a medical cannabis program in the state.

This iteration of the report only looks at laws that have gone into full effect by December 31, 2022. As such, Mississippi's grade does not yet reflect a state with a functional medical cannabis program. As of the end of 2022, medical cannabis sales were still not underway; Mississippi will no doubt expect to see a change in grade in the 2023 report, as the program achieves functionality.

In 2023, as the market begins to stand up, ASA recommends that legislators remain open to patient concerns regarding affordability, access, and patient rights. ASA also encourages policymakers to look at high scoring states in this report, which can help bolster the state's medical cannabis program.

BASE CATEGORIES POINTS: 182
PENALTIES: -40
POINT TOTAL: 142/700
SCORE PERCENTAGE: 20.29%

NO	0%	156	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**20/100**
Arrest Protection	0/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	0/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**20/100**
Legal Protections Within Reasonable Time Frame	0/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	5/5
Access to Administration Methods	2/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	2/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**11/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	1/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**91/200**
Cultivation Operations	**23/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	8/8
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	3/3
– Cannabinoids	1/1
– Terpenes	1/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**24/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	9/10
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	1/1
Packaging and Product Labeling	5/5
– Cannabinoids	1/1
– Terpenes	1/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**44/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	5/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	0/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	0/4
SCORE PENALTIES	**40/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	15/15
Administrative or Supply Problems	15/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	5/5

Patient Feedback

No feedback was received from patients in Mississippi.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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Learn more about PFC at www.PatientFocusedCertification.org.

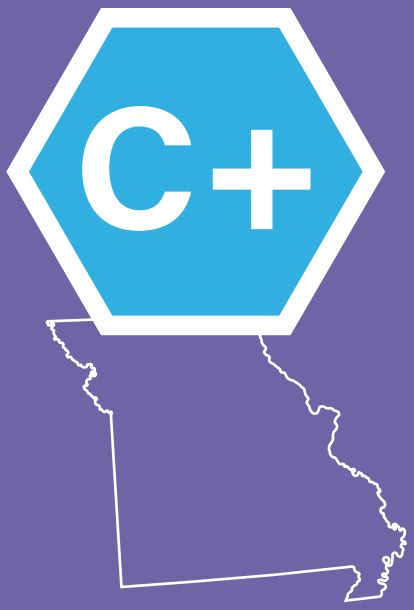
Americans for Safe Access

MISSOURI

Improvements and Recommendations

Despite a slow and rocky start to the implementation of medical cannabis in Missouri, the program is finally functional and providing access to patients across the state. Lawmakers did not make any significant changes to the medical program this year, but should prioritize medical cannabis program improvements in the years to come. In November 2022, Missouri voters approved a measure to allow adult use/recreational cannabis sales in the state.

In 2023, as the state works to implement this law, ASA recommends that legislators work to ensure that the adult use/recreational cannabis program and the medical cannabis program remain distinct, as each consumer base has separate needs that must be addressed. Lawmakers should also focus on policies that protect medical cannabis patients in the state, like employment and parental right protections. Particularly given the passage of adult use/recreational use, the legislature must also remove registration fees from patients; state administrative costs should not be shouldered by patients, especially if the state is offering free access to adult use/recreational cannabis for all adults. In light of the adult use/recreational laws, Missouri should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.



BASE CATEGORIES POINTS: 456
PENALTIES: 0
POINT TOTAL: 456/700
SCORE PERCENTAGE: 65.14%

204,165	3.30%	195	1,047 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**60/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	10/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**65/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	30/30
Reciprocity	0/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**83/100**
Legal Protections Within Reasonable Time Frame	10/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	8/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**60/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	5/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	5/5
Ownership or Employment Restrictions	5/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**148/200**
Cultivation Operations	**36/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	5/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**38/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	5/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	8/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	1/1
Packaging and Product Labeling	2/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**29/50**
Staff Training	20/20
Standard Operating Procedures	4/7
– Facility Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**45/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	10/5
Staff Training	10/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Missouri report that although access seems to have improved by way of more dispensaries and even drive-throughs, there are still not enough dispensaries.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

MONTANA

Improvements and Recommendations

Over the past year, Montana policymakers have focused on implementing the adult use/recreational cannabis laws. The state did not see any meaningful improvements to the medical cannabis program in 2022.

In 2023, ASA recommends Montana legislators expand the protections provided under the law for patients. There must be explicit language in state law to keep employers from wrongfully discriminating against medical cannabis patients. Being a patient should not be grounds for the denial of housing, or initiation of eviction proceedings, and patients should be protected within the family court system as well.

BASE CATEGORIES POINTS: 366
PENALTIES: -15
POINT TOTAL: 351/700
SCORE PERCENTAGE: 50.14%

40,801	3.70%	427	95 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**50/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**80/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	15/30
Reciprocity	20/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**51/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	5/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	3/5
– Background Checks	0/2
– Number of Caregivers	3/3
Reasonable Physician Standards	3/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**39/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	5/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	9/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**106/200**
Cultivation Operations	**21/50**
Quality Management Systems	0/10
Staff Training	5/10
Standard Operating Procedures	4/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	0/1
Pesticide Usage Limitations	1/2
Environmental Impact Regulations	1/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/7
Manufacturing Operations	**27/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	5/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	1/3
Required Testing	6/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/5
Dispensary Operations	**15/50**
Staff Training	10/20
Standard Operating Procedures	1/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	4/13

CATEGORY	POINTS
Laboratory Operations	**43/50**
Independent or Third-Party	0/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	4/5
Staff Training	20/20
Standard Operating Procedures	6/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**15/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	10/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	5/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Montana express that although the medical market has taken a backseat to the adult-use market, it has driven medical market toward better product quality, selection, availability and marketplace competition.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

NEBRASKA

Improvements and Recommendations

Nebraska remains one of two states with no medical cannabis access as legislative efforts to create a program have failed, and ballot measures were struck down.

In 2023, ASA strongly recommends that legislators create legislation designed to imitate high scoring states within this report to provide comprehensive access to medical cannabis. ASA encourages Nebraska lawmakers to engage with patients and medical cannabis advocacy organizations to build a safe and legal access model for patients, including authorizing a licensing system to support cultivation and sale of in-state medical cannabis and related products to patients. Legislators should also consider permitting patients and caregivers to cultivate cannabis at home for medical use. Lawmaker inaction in Nebraska leaves sick and vulnerable residents without cannabis as an alternative treatment option that has already been proven safe and effective for millions of patients in other states. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 0
PENALTIES: 0
POINT TOTAL: 0/700
SCORE PERCENTAGE: 0%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**0/100**
Arrest Protection	0/25
Affirmative Defense	0/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	0/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**0/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	0/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**0/100**
Legal Protections Within Reasonable Time Frame	0/20
Reasonable Possession Limits	0/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	0/5
– Background Checks	0/2
– Number of Caregivers	0/3
Reasonable Physician Standards	0/5
Access to Administration Methods	0/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	0/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**0/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	0/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	0/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

No feedback was received from patients in Nebraska.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

NEVADA

Improvements and Recommendations

2022 was the first full year for the Cannabis Advisory Committee in Nevada. While the committee does not have rulemaking authority and can only give recommendations for the cannabis programs, ASA is encouraged by the existence of such a committee. There were few actual improvements made to the Nevada medical cannabis program by legislators this year, and as such, Nevada's grade has only marginally changed.

In 2023, ASA recommends Nevada legislators look to improve their grade by focusing on expanding civil rights protections for patients to include housing and parental rights. In light of the adult use/recreational laws, Nevada should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 468
PENALTIES: 0
POINT TOTAL: 468/700
SCORE PERCENTAGE: 66.86%

12,788	0.40%	133	96 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**70/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**80/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	5/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	25/30
Reciprocity	20/20
AFFORDABILITY	**60/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	10/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**71/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**39/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	5/10
Access in Underserved Areas	1/10
List of Qualifying Conditions is Exhaustive or All Inclusive	8/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**148/200**
Cultivation Operations	**36/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	6/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	8/8
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**37/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	5/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	9/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	1/1
– Foreign Matter	1/1
– Water Activity	1/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**30/50**
Staff Training	20/20
Standard Operating Procedures	5/7
– Facility Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**45/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Nevada reported no noticeable change in accessibility to medicine. Some patients noted frustration with both sub-par products and unbalanced foci resulting in over-concentration of resources on adult-use market and social justice surpassing potential focus on the state's medical program. Prices increased following post-adult-use legislation, and limitations on medical purchases were tightened. Nevertheless, one improvement is that curbside pickup and delivery is available at more locations.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

The PFC training program prepares individuals to understand state and local regulations and to learn required safety and operational protocols, while teaching them the basics of cannabis as medicine and common therapeutic uses of cannabis. PFC trainings are available online to anyone interested in learning more about medical cannabis. Trainings are available in Cultivation, Manufacturing, Distribution, and Laboratory. A full training course guide can be found at www.PatientFocusedCertification.org/training.

Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

NEW HAMPSHIRE

Improvements and Recommendations

New Hampshire spent another year mostly focused on comprehensive adult use/recreational legislation and policies, while ignoring the medical cannabis program and neglecting needed improvements.

In 2023, ASA recommends legislators tread carefully as they work toward passage and implementation of the adult use/recreational market. Medical cannabis and adult use/recreational cannabis are not the same, and the consumer populations within each group are distinct, with their own needs. An adult use/recreational program alone is not sufficient for medical cannabis patients, and lawmakers must ensure that the adult use/recreational market is separate from the medical cannabis market, and policymakers must continue to make improvements on the medical side for patients. In light of the adult use/recreational laws, New Hampshire should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 336
PENALTIES: -15
POINT TOTAL: 321/700
SCORE PERCENTAGE: 45.86%

12,237	0.88%	7	1,748 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**75/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	0/20
DUI Protections	5/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**20/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	10/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**68/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	5/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	2/5
– Background Checks	0/2
– Number of Caregivers	2/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**49/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	9/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	5/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**84/200**
Cultivation Operations	**27/50**
Quality Management Systems	10/10
Staff Training	0/10
Standard Operating Procedures	6/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	5/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**37/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	6/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	5/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	0/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**13/50**
Staff Training	0/20
Standard Operating Procedures	6/7
– Facility Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	7/13

CATEGORY	POINTS
Laboratory Operations	**7/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	2/4
SCORE PENALTIES	**15/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	5/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	10/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in New Hampshire reported a largely limited program, containing only a handful of dispensaries across the state, with patients being forced to choose only one location/dispensary to purchase from within the system.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

NEW JERSEY

Improvements and Recommendations

In November 2020, voters in New Jersey approved a ballot measure legalizing the adult/recreational use of cannabis. For the past two years, policymakers in the state have largely focused solely on the adult use/recreational industry, and have not made any meaningful improvements to the medical cannabis program over the past year.

In 2023, ASA recommends that New Jersey legislators shift their focus from adult use/recreational legalization to cover the existing gaps in their legal protections for patients in the medical cannabis program. Patients must be protected in family court and child custody hearings, in housing, and from discriminatory and unreliable roadside THC sobriety tests. New Jersey is in the minority of states that allow individuals to purchase cannabis, but does not allow residents to grow their own plants at home. In light of the adult use/recreational laws, New Jersey should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 473
PENALTIES: -20
POINT TOTAL: 453/700
SCORE PERCENTAGE: 64.71%

112,404	1.20%	30	3,746 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**70/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**55/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	5/30
Reciprocity	20/20
AFFORDABILITY	**63/100**
Sales Tax Break for Patients and Caregivers	16/20
Covered by State Insurance or Health Aid	7/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	10/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**76/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	5/10
Telemedicine for Physician Certification	8/15
Patient and Physician Representation in Program Decision Making	15/20
Reasonable Caregiver Standards	2/5
– Background Checks	0/2
– Number of Caregivers	2/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**58/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	8/10
Access in Underserved Areas	2/10
List of Qualifying Conditions is Exhaustive or All Inclusive	9/10
Allows Patients to Medicate Where They Choose	4/10
Organ Transplants	5/5
Ownership or Employment Restrictions	5/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**151/200**
Cultivation Operations	**41/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	8/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	2/2
Required Testing	5/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	0/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**41/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	3/3
Required Testing	6/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	0/1
Packaging and Product Labeling	2/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**34/50**
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	7/13

CATEGORY	POINTS
Laboratory Operations	**35/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	10/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	20/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in NJ explained that while access has improved somewhat (more products available), there are still too few dispensaries and the cost to register for the program is too high at $150-$200 annually. Patients feel the state's current priority is to focus on corporate cannabis, which is reflected in the state's decision to outlaw patient at-home cultivation.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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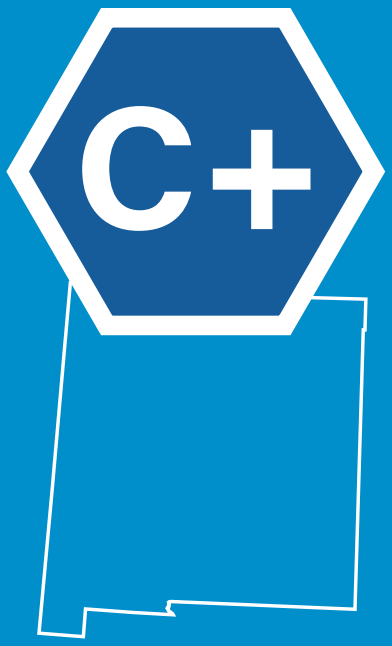
Americans for Safe Access

NEW MEXICO



Improvements and Recommendations

After passing an adult use/recreational legalization bill in 2021, New Mexico lawmakers and regulators largely focused on implementing the program during 2022. To help get the adult use/recreational program off the ground quickly, policymakers approved medical dispensaries for dual-licenses in order to serve both the adult use/recreational and medical populations. While dispensaries are now stretched between two consumer bases, policymakers require these dispensaries to hold a percentage of product aside for medical cannabis patients only; this helped ensure there was no medical product shortage during implementation of the adult use/recreational cannabis program.

In 2023, ASA recommends that legislators focus on patient rights and equity by passing anti-discrimination policies for patients in housing and education. New Mexico regulators should also focus on improving product safety in the medical market. In light of the adult use/recreational laws, New Mexico should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 493
PENALTIES: ..... -45
POINT TOTAL: 443/700
SCORE PERCENTAGE: 63.29%

112,426	5.28%	502	224 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**86/100**
Arrest Protection	25/25
Affirmative Defense	16/20
Parental Rights Protections	20/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**78/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	3/5
Sufficient Number of Licensed Retailers	10/30
Reciprocity	20/20
AFFORDABILITY	**61/100**
Sales Tax Break for Patients and Caregivers	16/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	5/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**71/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	4/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	3/5
HEALTH AND SOCIAL EQUITY	**53/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	9/10
Access in Underserved Areas	5/10
List of Qualifying Conditions is Exhaustive or All Inclusive	9/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	5/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**139/200**
Cultivation Operations	**27/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	4/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	2/2
Required Testing	5/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	0/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	2/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	2/7
Manufacturing Operations	**38/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	4/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	1/3
Required Testing	5/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	0/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	0/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	2/5
Dispensary Operations	**32/50**
Staff Training	20/20
Standard Operating Procedures	3/7
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	4/13

CATEGORY	POINTS
Laboratory Operations	**44/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	4/4
Quality Management Systems	4/5
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**45/100**
Gives Regulatory Preference to Adult Use	15/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	15/15
Requires Vertical Integration	10/10
Creates New Criminal Penalties for Patients	5/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in NM reported that the emergence of adult-use legalization has increased the number of dispensaries. Additionally, patients can now grow more plants and no longer have to pay a fee or have a license to cultivate at home. The patients still report unreasonably high prices and generally too few dispensaries.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

NEW YORK

Improvements and Recommendations

After passing an adult use/recreational legalization bill in 2021, New York lawmakers and regulators largely focused on implementing the program during 2022. Unlike some other states, New York policymakers also implemented much needed improvements to the medical program. These included employment protections, an expanded qualifying condition list, and permitting home cultivation for patients. The adult use/recreational bill also focused heavily on social justice reforms like automatic criminal record expungement for past cannabis-related offenses, as well as a social and economic equity licensing program, both of which also benefit the medical program.

In 2023, ASA recommends that New York legislators focus on patient equity within the cannabis market. This includes providing free patient registration fees, multi-year registrations to cut down on administrative paperwork for patients, and prioritizing opening more medical dispensaries to serve the many underserved populations and areas in the state. In light of the adult use/recreational laws, New York should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 396
PENALTIES: -17
POINT TOTAL: 389/700
SCORE PERCENTAGE: 55.57%

123,391	0.61%	39	3,163 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**90/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**50/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	15/20
– Authorizes Delivery	5/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	10/30
Reciprocity	0/20
AFFORDABILITY	**43/100**
Sales Tax Break for Patients and Caregivers	5/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	18/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**70/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	1/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	3/5
HEALTH AND SOCIAL EQUITY	**41/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	8/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	8/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**112/200**
Cultivation Operations	**30/50**
Quality Management Systems	10/10
Staff Training	0/10
Standard Operating Procedures	4/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	6/7
Manufacturing Operations	**21/50**
Quality Management Systems	0/10
Staff Training	5/10
Standard Operating Procedures	4/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	7/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	1/1
Packaging and Product Labeling	1/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	4/5
Dispensary Operations	**15/50**
Staff Training	0/20
Standard Operating Procedures	3/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	12/13

CATEGORY	POINTS
Laboratory Operations	**46/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	3/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	0/1
– Sample Tracking	1/1
– Security	0/1
– Waste Disposal	1/1
– Records Management	0/1
Result Reporting	4/4
SCORE PENALTIES	**17/100**
Gives Regulatory Preference to Adult Use	10/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	7/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in NY expressed concern about the looming rollout of the adult-use market, but also, appreciation that home cultivation is allowed. Additionally, they do not feel that access to medical access is ideal with the few number of current dispensaries. Patients are also concerned about black and gray markets undercutting the regulated markets in the state.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

NORTH CAROLINA

Improvements and Recommendations

2022 marks yet another year that North Carolina lawmakers have done nothing to improve medical cannabis access for their constituents. While a bipartisan bill to establish a medical cannabis access program passed the Senate, the North Carolina House declined to take up the bill citing its "rushed" nature.

In 2023, ASA recommends that legislators have a serious policy discussion to advance medical cannabis policies to serve patients in the state. Legislators should seek to cover patients with a diversity of health conditions through significant expansion of the state's list of eligible conditions. The state must also immediately implement statutory protections for patients related to housing, employment, education, and parental rights. North Carolina policymakers should look to high scoring states within this report and seek to duplicate those efforts that best serve patients. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 107
PENALTIES: -45
POINT TOTAL: 62/700
SCORE PERCENTAGE: 8.86%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**50/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**20/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**31/100**
Legal Protections Within Reasonable Time Frame	14/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	0/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	3/5
HEALTH AND SOCIAL EQUITY	**6/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	5/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	1/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**45/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	15/15
Administrative or Supply Problems	15/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	10/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in North Carolina are frustrated by the lack of access to a full medical program and demand that dispensaries and home cultivation be allowed in the state.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

NORTH DAKOTA

Improvements and Recommendations

In 2021, North Dakota lawmakers passed a few laws to improve the medical cannabis program. These laws did not fully take effect until 2022, however, after many administrative and supply delays. While these improvements are now in effect, it has only just begun and the state currently has too few dispensaries and not enough product for the patient population.

In 2023, ASA recommends legislators focus on improving the medical cannabis program, particularly when it comes to access. Underserved and rural populations must have dispensaries available, and patients in those areas must not be forced to travel long distances just to obtain their medications. Policymakers should also prioritize policies to protect patient rights when it comes to housing, employment, education, and family court cases.

BASE CATEGORIES POINTS: 286
PENALTIES: -17
POINT TOTAL: 269/700
SCORE PERCENTAGE: 38.43%

8,898	1.11%	8	1,112 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**40/100**
Arrest Protection	25/25
Affirmative Defense	10/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**35/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	15/30
Reciprocity	0/20
AFFORDABILITY	**45/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	5/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**67/100**
Legal Protections Within Reasonable Time Frame	14/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	7/10
Telemedicine for Physician Certification	7/15
Patient and Physician Representation in Program Decision Making	10/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	9/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	4/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**37/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	7/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	5/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**62/200**
Cultivation Operations	**16/50**
Quality Management Systems	**0/10**
Staff Training	**0/10**
Standard Operating Procedures	**5/8**
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	**2/2**
Environmental Impact Regulations	**0/2**
Required Testing	**6/8**
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	1/1
Packaging and Labeling	**1/3**
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	**2/7**
Manufacturing Operations	**27/50**
Quality Management Systems	**10/10**
Staff Training	**0/10**
Standard Operating Procedures	**5/7**
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Environmental Impact Regulations	**1/3**
Required Testing	**7/10**
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	1/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	**2/5**
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	**2/5**
Dispensary Operations	**14/50**
Staff Training	**0/20**
Standard Operating Procedures	**5/7**
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	**5/10**
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	**4/13**

CATEGORY	POINTS
Laboratory Operations	**5/50**
Independent or Third-Party	**0/5**
Laboratory Sampling	**5/5**
Method Validation	**0/4**
Quality Management Systems	**0/5**
Staff Training	**0/20**
Standard Operating Procedures	**0/7**
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	**0/4**
SCORE PENALTIES	**17/100**
Gives Regulatory Preference to Adult Use	**0/20**
Classifies Cannabis as a Medicine of Last Resort	**5/15**
Administrative or Supply Problems	**0/15**
Requires Vertical Integration	**0/10**
Creates New Criminal Penalties for Patients	**10/10**
Limits Patients to a Single Retailer	**0/10**
No System for Adding Qualifying Conditions	**0/10**
Imposes Bans or Limits on THC	**2/5**
Imposes Bans or Limits on CBD	**0/5**

Patient Feedback

No feedback was received from patients in North Dakota.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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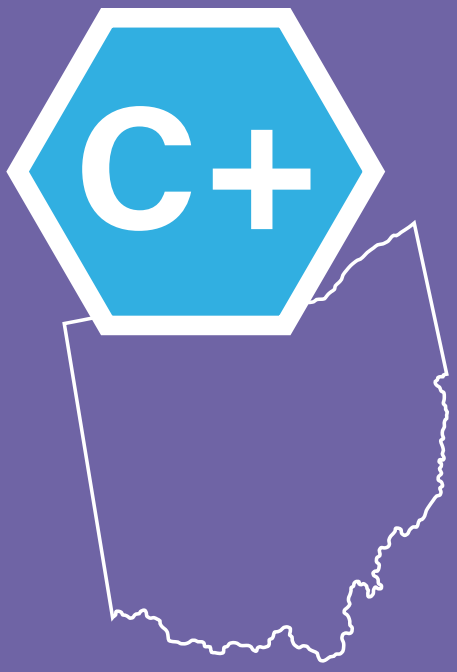
Americans for Safe Access

OHIO

Improvements and Recommendations

In 2022, policymakers in Ohio debated a number of cannabis provisions including improvements to the medical cannabis program as well as legalization of adult use/recreational cannabis. These measures did not pass in 2022, but it looks like these conversations and debates will continue into 2023.

In 2023, ASA recommends that Ohio lawmakers prioritize improvements to the state's medical cannabis while they are debating adult use/recreational. Policymakers should tread carefully, however, because improvements made to the medical program must be separate from any new regulations or rules for adult use/recreational. Both medical cannabis and adult use/recreational laws can co-exist in a state, but each program and consumer base is distinct with different needs that must be addressed. In light of the adult use/recreational laws, Ohio should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.



BASE CATEGORIES POINTS: 470
PENALTIES: 0
POINT TOTAL: 470/700
SCORE PERCENTAGE: 67.14%

317,018	2.67%	59	5,373 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**63/100**
Arrest Protection	25/25
Affirmative Defense	13/20
Parental Rights Protections	20/20
Employment Protections	0/20
DUI Protections	2/10
Explicit Privacy Standards	3/5
ACCESS TO MEDICINE	**30/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	10/30
Reciprocity	0/20
AFFORDABILITY	**49/100**
Sales Tax Break for Patients and Caregivers	15/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	14/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**87/100**
Legal Protections Within Reasonable Time Frame	14/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	3/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**90/100**
State Program Protections	25/25
Housing Protections	25/25
Access for Minors	9/10
Access in Underserved Areas	9/10
List of Qualifying Conditions is Exhaustive or All Inclusive	8/10
Allows Patients to Medicate Where They Choose	8/10
Organ Transplants	5/5
Ownership or Employment Restrictions	1/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**151/200**
Cultivation Operations	**35/50**
Quality Management Systems	10/10
Staff Training	5/10
Standard Operating Procedures	7/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	1/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/7
Manufacturing Operations	**37/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	1/3
Required Testing	6/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/5
Dispensary Operations	**33/50**
Staff Training	20/20
Standard Operating Procedures	4/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	4/13

CATEGORY	POINTS
Laboratory Operations	**44/50**
Independent or Third-Party	0/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	4/5
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients in Ohio continue to be frustrated by the high price of cannabis in their state and feel that the price makes it prohibitive to many, especially patients that depend on their medicine every month.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

OKLAHOMA

C

Improvements and Recommendations

Over the past year, Oklahoma lawmakers and policymakers have been largely focused on adult use/recreational cannabis laws, and as such, no meaningful improvements to the medical cannabis program went into effect in 2022. Oklahomans will vote on whether to allow adult use/recreational cannabis in the state in a special election in 2023. If the ballot measure passes, lawmakers should continue prioritizing patient needs within the medical cannabis program, and work to keep the adult use/recreational program separate from the medical cannabis program.

In 2023, ASA recommends that Oklahoma lawmakers prioritize improvements to the state's medical cannabis while they are debating adult use/recreational. These policies can include removing the state's registration fee for patients, and providing tax exemptions to medical cannabis products. Policymakers should tread carefully, however, because improvements made to the medical program must be separate from any new regulations or rules for adult use/recreational. Both medical cannabis and adult use/recreational laws can co-exist in a state, but each program and consumer base is distinct with different needs that must be addressed. In light of the adult use/recreational laws, Oklahoma should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 419
PENALTIES: 0
POINT TOTAL: 419/700
SCORE PERCENTAGE: 59.86%

374,077	9.35%	2,599	143 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**88/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	3/5
ACCESS TO MEDICINE	**80/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	30/30
Reciprocity	15/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	10/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**74/100**
Legal Protections Within Reasonable Time Frame	14/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	5/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**70/100**
State Program Protections	0/25
Housing Protections	25/25
Access for Minors	5/10
Access in Underserved Areas	10/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	10/10
Organ Transplants	5/5
Ownership or Employment Restrictions	5/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**67/200**
Cultivation Operations	**15/50**
Quality Management Systems	**0/10**
Staff Training	**0/10**
Standard Operating Procedures	**0/8**
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	**1/2**
Environmental Impact Regulations	**0/2**
Required Testing	**7/8**
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	**2/3**
– Cannabinoids	1/1
– Terpenes	1/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/7**
Manufacturing Operations	**13/50**
Quality Management Systems	**0/10**
Staff Training	**0/10**
Standard Operating Procedures	**0/7**
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	**0/3**
Required Testing	**8/10**
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	0/1
Packaging and Product Labeling	**5/5**
– Cannabinoids	1/1
– Terpenes	1/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/5**
Dispensary Operations	**5/50**
Staff Training	**0/20**
Standard Operating Procedures	**0/7**
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	**5/10**
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	**0/13**

CATEGORY	POINTS
Laboratory Operations	**39/50**
Independent or Third-Party	**5/5**
Laboratory Sampling	**5/5**
Method Validation	**4/4**
Quality Management Systems	**5/5**
Staff Training	**10/20**
Standard Operating Procedures	**6/7**
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	0/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	**4/4**
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	**0/20**
Classifies Cannabis as a Medicine of Last Resort	**0/15**
Administrative or Supply Problems	**0/15**
Requires Vertical Integration	**0/10**
Creates New Criminal Penalties for Patients	**0/10**
Limits Patients to a Single Retailer	**0/10**
No System for Adding Qualifying Conditions	**0/10**
Imposes Bans or Limits on THC	**0/5**
Imposes Bans or Limits on CBD	**0/5**

Patient Feedback

Patients surveyed in Oklahoma did not notice a change in patient access to medical cannabis. However, they reported the closing of a dispensary as well as the governor placing a moratorium on dispensaries as limitations of the program. These patients were split on whether there are too few or an appropriate amount of dispensaries.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

OREGON

Improvements and Recommendations

In 2022, no improvements were passed or enacted to the medical cannabis program in Oregon. On the administrative side, there was some realignment in bureaucracy and changes to how the program is run from the government's side, but patients did not see any meaningful improvements to functionality on their end.

In 2023, ASA recommends that Oregon weigh the costs to enter the program against the benefits. Patients are saddled with an enormous yearly registration fee just to access medical cannabis in the state; this should be removed immediately. Patients should also not face discrimination, and lawmakers should act swiftly to protect patient rights when it comes to housing, employment, education, and family court cases. In light of the adult use/recreational laws, Oregon should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 402
PENALTIES: -21
POINT TOTAL: 381/700
SCORE PERCENTAGE: 54.43%

17,957	0.42%	417	43 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**50/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	0/5
ACCESS TO MEDICINE	**80/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	30/30
Reciprocity	5/20
AFFORDABILITY	**45/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	0/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	5/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**85/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	6/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**58/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	10/10
List of Qualifying Conditions is Exhaustive or All Inclusive	8/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	5/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**84/200**
Cultivation Operations	**14/50**
Quality Management Systems	0/10
Staff Training	5/10
Standard Operating Procedures	2/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	1/2
Environmental Impact Regulations	1/2
Required Testing	4/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**28/50**
Quality Management Systems	5/10
Staff Training	10/10
Standard Operating Procedures	4/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	5/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	0/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	1/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**16/50**
Staff Training	10/20
Standard Operating Procedures	1/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**26/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	0/4
Quality Management Systems	1/5
Staff Training	10/20
Standard Operating Procedures	1/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	4/4
SCORE PENALTIES	**21/100**
Gives Regulatory Preference to Adult Use	20/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	1/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Oregon reported no noticeable change in medical cannabis access and that there are either the right amount or too many dispensaries. These patients also feel that their state prioritizes adult-use over medical cannabis, which has led to issues such as increased cost, budtenders who lack a proper understanding of medical cannabis, and less product choices.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

PENNSYLVANIA

Improvements and Recommendations

In 2022, policymakers in Pennsylvania debated a number of bills that would amend the medical cannabis program. Only one of these bills was signed into law, codifing some of the previous temporary provisions in place for on-site pickup, caregivers, and increased purchase amount. While these policies were already in place, patients now have assurances that these changes are permanent.

In 2023, ASA recommends that Pennsylvania lawmakers continue focusing on improvements to the medical cannabis program. In particular, policymakers should prioritize expanding patient access, ensuring sufficient medical cannabis products are available, and work to reduce product costs. Lawmakers should consider policies that would allow home cultivation of medical cannabis. Other modifications to prioritize include patient protections related to housing and education, and expanding employment rights to more workers in the state.

BASE CATEGORIES POINTS: 477
PENALTIES: -15
POINT TOTAL: 462/700
SCORE PERCENTAGE: 66%

423,443	3.24%	166	2,550 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**70/100**
Arrest Protection	25/25
Affirmative Defense	10/20
Parental Rights Protections	20/20
Employment Protections	10/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**50/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	15/20
– Authorizes Delivery	5/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	25/30
Reciprocity	0/20
AFFORDABILITY	**58/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	18/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**91/100**
Legal Protections Within Reasonable Time Frame	14/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	4/5
– Background Checks	1/2
– Number of Caregivers	3/3
Reasonable Physician Standards	3/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**43/100**
State Program Protections	20/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	4/10
List of Qualifying Conditions is Exhaustive or All Inclusive	9/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**165/200**
Cultivation Operations	**36/50**
Quality Management Systems	5/10
Staff Training	10/10
Standard Operating Procedures	7/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	1/2
Environmental Impact Regulations	1/2
Required Testing	8/8
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	7/7
Manufacturing Operations	**37/50**
Quality Management Systems	5/10
Staff Training	10/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	9/10
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	1/1
Packaging and Product Labeling	1/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	5/5
Dispensary Operations	**40/50**
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	13/13

CATEGORY	POINTS
Laboratory Operations	**48/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	4/5
Staff Training	20/20
Standard Operating Procedures	6/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**15/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	5/10
Creates New Criminal Penalties for Patients	10/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Most patients surveyed in Pennsylvania did not notice a change in access to medical cannabis, while a few felt that medical cannabis became more accessible this year. However, they were more evenly split on whether there are too few or an appropriate amount of dispensaries. These patients also reported improvements including an increase in the amount of medical cannabis that can be purchased per patient, greater availability of products and number of dispensaries, and the continuation of curbside pickup. Despite the improvements, limitations such as a focus on high THC products and expensive pricing are still a hindrance to patients.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

PUERTO RICO

Improvements and Recommendations

After making a few small improvements in 2021, Puerto Rico did not pass any meaningful changes to the medical cannabis program over this past year. While Puerto Ricans have more rights under the medical cannabis law now than they did when it originally passed, the program is far from perfect.

In 2023, ASA recommends that Puerto Rico lawmakers prioritize fixing some of the major flaws of the program. These include extending patient protections to not only cover employment, but also housing, education, and family court cases. Puerto Rico policymakers should also consider allowing patients and caregivers to grow cannabis at home to help alleviate some of the costs associated with being a medical cannabis patient.

BASE CATEGORIES POINTS: 274
PENALTIES: 0
POINT TOTAL: 274/700
SCORE PERCENTAGE: 39.14%

118,007	3.69%	100	1,180 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**62/100**
Arrest Protection	25/25
Affirmative Defense	12/20
Parental Rights Protections	0/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**50/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	10/30
Reciprocity	20/20
AFFORDABILITY	**20/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**47/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	4/10
Reasonable Purchase Limits	4/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	5/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**20/100**
State Program Protections	5/25
Housing Protections	0/25
Access for Minors	7/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	8/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**75/200**
Cultivation Operations	**21/50**
Quality Management Systems	10/10
Staff Training	5/10
Standard Operating Procedures	6/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**22/50**
Quality Management Systems	10/10
Staff Training	5/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**10/50**
Staff Training	10/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**22/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	5/5
Staff Training	10/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	0/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Puerto Rico reported that access to medical cannabis had improved this year due to an increased number of dispensaries. However, the patients still felt that there were too few dispensaries.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

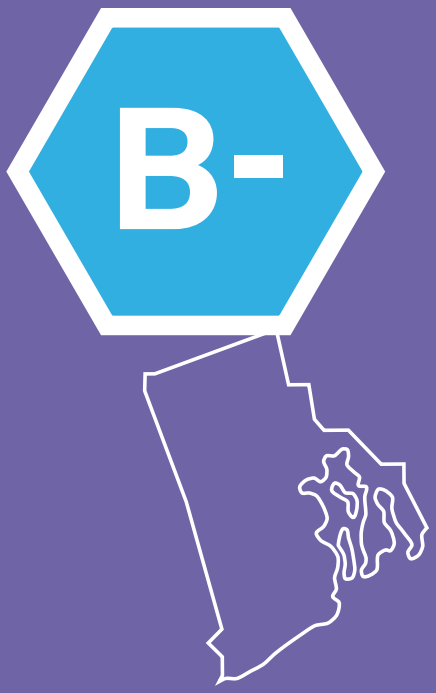
Americans for Safe Access

RHODE ISLAND

Improvements and Recommendations

This year, Rhode Island doubled the number of dispensaries in the state. While this is a big boost to patients, Rhode Island policymakers should also be aware that more than 6 dispensary locations are necessary to serve medical cannabis patients in the state.

In 2023, ASA recommends that Rhode Island lawmakers focus on expanding protections for patients including against discrimination in custody hearings or medical procedures involving organ transplants. Legislators should also look to create an independent review body consisting of patients and caregivers that can give the state specific recommendations for the medical cannabis program and Rhode Island patient needs.



BASE CATEGORIES POINTS: 494
PENALTIES: 0
POINT TOTAL: 494/700
SCORE PERCENTAGE: 70.57%

16,462	1.49%	6	2,743 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**70/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**81/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	1/5
Sufficient Number of Licensed Retailers	15/30
Reciprocity	20/20
AFFORDABILITY	**54/100**
Sales Tax Break for Patients and Caregivers	16/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	18/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**71/100**
Legal Protections Within Reasonable Time Frame	18/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	3/5
– Background Checks	0/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**65/100**
State Program Protections	25/25
Housing Protections	15/25
Access for Minors	9/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	8/10
Allows Patients to Medicate Where They Choose	8/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**153/200**
Cultivation Operations	**38/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	6/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	5/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	1/1
Packaging and Labeling	2/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	1/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**38/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	6/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	4/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	4/5
Dispensary Operations	**33/50**
Staff Training	10/20
Standard Operating Procedures	6/7
– Facility Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	7/13

CATEGORY	POINTS
Laboratory Operations	**44/50**
Independent or Third-Party	0/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	6/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Result Reporting	4/4
SCORE PENALTIES	**0/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Most patients surveyed in Rhode Island felt there were too few dispensaries, they also noticed an improvement in medical cannabis access and attributed this to an increase in the number of dispensaries as well as online ordering with pick-up and home delivery options. While adult-use sales only began in December 2022, patients felt that this will have a negative impact on the medical cannabis program. The concern stems from the pressure on medical cannabis dispensaries to accommodate the adult-use market and the potential influence of corporations and prioritizing profit over patients.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Americans for Safe Access

SOUTH CAROLINA

Improvements and Recommendations

South Carolina's lawmakers did nothing in the past year to advance cannabis access for their constituents. The few patients who do qualify for the very limited program in the state still lack total access from a regulated market.

In 2023, ASA recommends that South Carolina policymakers remove arbitrary caps on THC levels in authorized cannabis products to allow for more effective treatment. Legislators should also seek to cover patients with diverse conditions and needs, and allow physicians to recommend cannabis for any condition they think necessary. ASA also encourages policymakers to immediately implement statutory protections for patients related to housing, employment, education, and custody hearings. Finally, authorizing a licensing system to support cultivation and sale of in-state medical cannabis and medical cannabis products to patients is a basic requirement for medical cannabis access. South Carolina policymakers should avoid delaying implementation of a medical cannabis program; patients in the state are actively harmed by the state's inaction. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 91
PENALTIES: -20
POINT TOTAL: 71/700
SCORE PERCENTAGE: 10.14%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**5/100**
Arrest Protection	5/25
Affirmative Defense	0/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	0/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**11/100**
Legal Protections Within Reasonable Time Frame	0/20
Reasonable Possession Limits	0/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	2/5
– Background Checks	2/2
– Number of Caregivers	0/3
Reasonable Physician Standards	3/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**35/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	9/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	1/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	15/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in South Carolina reported no noticeable change in access to medical cannabis. There is no medical cannabis program in South Carolina.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

SOUTH DAKOTA

Improvements and Recommendations

In 2021, South Dakota lawmakers passed a few laws to improve the medical cannabis program. These laws did not fully take effect until 2022, however, after many administrative and supply delays. While these improvements are now in effect, it has only just begun and the state currently has too few dispensaries and not enough product for the patient population.

In 2023, ASA recommends legislators focus on improving the medical cannabis program, particularly when it comes to access. Underserved and rural populations must have dispensaries available, and patients in those areas must not be forced to travel long distances just to obtain their medications. Policymakers should also prioritize policies to protect patient rights when it comes to housing, employment, education, and family court cases.

BASE CATEGORIES POINTS: 420
PENALTIES: -15
POINT TOTAL: 401/700
SCORE PERCENTAGE: 57.29%

6,166	0.68%	98	63 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**90/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**35/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	10/20
AFFORDABILITY	**36/100**
Sales Tax Break for Patients and Caregivers	5/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	16/20
Financial Hardship Waivers or Discounts	10/20
Donation Program	0/10
Allows Multi-year Registrations	5/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**58/100**
Legal Protections Within Reasonable Time Frame	0/20
Reasonable Possession Limits	7/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	20/20
Reasonable Caregiver Standards	1/5
– Background Checks	0/2
– Number of Caregivers	1/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**75/100**
State Program Protections	25/25
Housing Protections	25/25
Access for Minors	9/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	5/10
Allows Patients to Medicate Where They Choose	5/10
Organ Transplants	5/5
Ownership or Employment Restrictions	1/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**126/200**
Cultivation Operations	**31/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	4/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	2/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/7
Manufacturing Operations	**30/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	3/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	2/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	4/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	1/5
Dispensary Operations	**17/50**
Staff Training	10/20
Standard Operating Procedures	3/7
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	4/13

CATEGORY	POINTS
Laboratory Operations	**48/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	5/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	0/1
Result Reporting	4/4
SCORE PENALTIES	**15/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	5/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	10/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in South Dakota reported improved access to medical cannabis. However, they still feel there are too few dispensaries.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

TENNESSEE

Improvements and Recommendations

For another year, Tennessee failed to pass legislation to create a medical cannabis access program. The few patients who do qualify for the very limited program in the state still lack total access from a regulated market.

In 2023, ASA recommends that Tennessee policymakers remove arbitrary caps on THC levels in authorized cannabis products to allow for more effective treatment. Legislators should also seek to cover patients with diverse conditions and needs, and allow physicians to recommend cannabis for any condition they think necessary. ASA also encourages policymakers to immediately implement statutory protections for patients related to housing, employment, education, and custody hearings. Finally, authorizing a licensing system to support cultivation and sale of in-state medical cannabis and medical cannabis products to patients is a basic requirement for medical cannabis access. Tennessee policymakers should avoid delaying implementation of a medical cannabis program; patients in the state are actively harmed by the state's inaction. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 99
PENALTIES: -15
POINT TOTAL: 84/700
SCORE PERCENTAGE: 12%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**24/100**
Arrest Protection	12/25
Affirmative Defense	12/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	0/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**22/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	2/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	0/5
– Background Checks	0/2
– Number of Caregivers	0/3
Reasonable Physician Standards	3/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**13/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	9/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	4/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	**0/10**
Staff Training	**0/10**
Standard Operating Procedures	**0/8**
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	**0/2**
Environmental Impact Regulations	**0/2**
Required Testing	**0/8**
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	**0/3**
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/7**
Manufacturing Operations	**0/50**
Quality Management Systems	**0/10**
Staff Training	**0/10**
Standard Operating Procedures	**0/7**
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	**0/3**
Required Testing	**0/10**
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	**0/5**
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/5**
Dispensary Operations	**0/50**
Staff Training	**0/20**
Standard Operating Procedures	**0/7**
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	**0/10**
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	**0/13**

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	**0/5**
Laboratory Sampling	**0/5**
Method Validation	**0/4**
Quality Management Systems	**0/5**
Staff Training	**0/20**
Standard Operating Procedures	**0/7**
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	**0/4**
SCORE PENALTIES	**15/100**
Gives Regulatory Preference to Adult Use	**0/20**
Classifies Cannabis as a Medicine of Last Resort	**0/15**
Administrative or Supply Problems	**0/15**
Requires Vertical Integration	**0/10**
Creates New Criminal Penalties for Patients	**0/10**
Limits Patients to a Single Retailer	**0/10**
No System for Adding Qualifying Conditions	**10/10**
Imposes Bans or Limits on THC	**5/5**
Imposes Bans or Limits on CBD	**0/5**

Patient Feedback

Patients surveyed in Tennessee reported no noticeable change in access to medical cannabis. There is no medical cannabis program in Tennessee.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

TEXAS

Improvements and Recommendations

The Texas legislature did not meet in 2022. The debate surrounding expansion of a medical cannabis program did not disappear, and a number of bills have been pre-filed for the 2023 legislative session.

In 2023, ASA recommends that Texas policymakers remove arbitrary caps on THC levels in authorized cannabis products to allow for more effective treatment. Legislators should also seek to cover patients with diverse conditions and needs, and allow physicians to recommend cannabis for any condition they think necessary. ASA also encourages policymakers to immediately implement statutory protections for patients related to housing, employment, education, and custody hearings. Finally, authorizing a licensing system to support cultivation and sale of in-state medical cannabis and medical cannabis products to patients is a basic requirement for medical cannabis access. Texan policymakers should avoid delaying implementation of a medical cannabis program; patients in the state are actively harmed by the state's inaction. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 213
PENALTIES: -30
POINT TOTAL: 183/700
SCORE PERCENTAGE: 26.14%

43,056	0.14%	3	14,352 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**29/100**
Arrest Protection	12/25
Affirmative Defense	12/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**12/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	2/20
– Authorizes Delivery	2/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**48/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	0/5
– Background Checks	0/2
– Number of Caregivers	0/3
Reasonable Physician Standards	3/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	3/5
HEALTH AND SOCIAL EQUITY	**42/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	10/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	7/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**42/200**
Cultivation Operations	**14/50**
Quality Management Systems	5/10
Staff Training	0/10
Standard Operating Procedures	3/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**15/50**
Quality Management Systems	5/10
Staff Training	3/10
Standard Operating Procedures	3/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	1/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**10/50**
Staff Training	0/20
Standard Operating Procedures	3/7
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	7/13

CATEGORY	POINTS
Laboratory Operations	**3/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	3/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**30/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	5/15
Requires Vertical Integration	10/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	10/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Most patients surveyed in Texas responded that the access to medical cannabis had improved in the last year; the improvement is associated with more people gaining awareness of the program.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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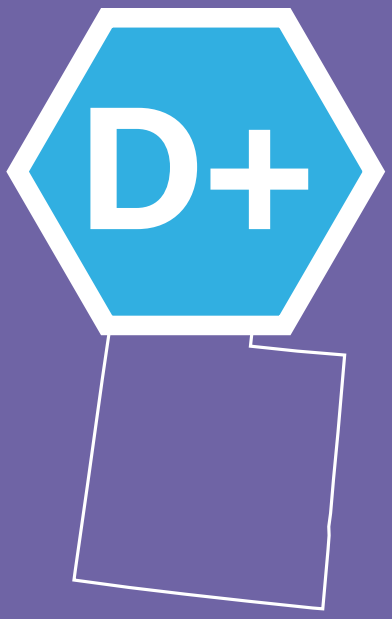
Americans for Safe Access

UTAH

Improvements and Recommendations

Policymakers in Utah failed to enact many changes to the medical cannabis law in 2022. The only amendment, albeit a life-changing amendment for some patients, included expanding the condition list to include chronic pain. This opens the program up to many more Utahns, many of whom may have no other alternative than opioid medications.

In 2023, ASA recommends that Utah regulators continue extending more forms of access to patients by removing the requirement for concentrates to be separately recommended by a physician. The state should also consider allowing for patients and caregivers to grow cannabis at home to lower the impact of supply issues and costs to patients. Additionally, retailers should be allowed to offer curbside pickup and/or delivery to help ensure that patients with debilitating conditions or mobility issues have access to medical cannabis products.



BASE CATEGORIES POINTS: 337
PENALTIES: -20
POINT TOTAL: 317/700
SCORE PERCENTAGE: 45.29%

61,991	1.84%	14	4,428 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**70/100**
Arrest Protection	20/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	5/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**30/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	10/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	5/30
Reciprocity	5/20
AFFORDABILITY	**38/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	18/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**62/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	6/10
Reasonable Purchase Limits	8/10
Telemedicine for Physician Certification	9/15
Patient and Physician Representation in Program Decision Making	10/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	3/5
Access to Administration Methods	7/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	2/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**17/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	6/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	6/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	5/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**120/200**
Cultivation Operations	**29/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	6/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	0/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	1/2
Required Testing	6/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**42/50**
Quality Management Systems	10/10
Staff Training	10/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	2/3
Required Testing	7/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	1/1
– Water Activity	0/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**13/50**
Staff Training	10/20
Standard Operating Procedures	3/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**36/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	10/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	0/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	5/15
Administrative or Supply Problems	15/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Utah were generally split over whether access to medical cannabis had improved or if there was no noticeable change this year. Cost was a widely reported limitation as well as tainted products and a small market. All patients surveyed in Utah agreed that there are too few dispensaries in the state.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

The PFC training program prepares individuals to understand state and local regulations and to learn required safety and operational protocols, while teaching them the basics of cannabis as medicine and common therapeutic uses of cannabis. PFC trainings are available online to anyone interested in learning more about medical cannabis. Trainings are available in Cultivation, Manufacturing, Distribution, and Laboratory. A full training course guide can be found at www.PatientFocusedCertification.org/training.

Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

VERMONT

Improvements and Recommendations

Since passing adult use/recreational cannabis laws, Vermont has neglected to update or improve the state's medical cannabis program in any truly meaningful way. This has left patient needs neglected and the hurdles that exist on the medical cannabis program outweigh the few benefits the legislature has allowed to remain. This, and not the simple passing of adult use/recreational, has contributed to the stark decline in Vermont's medical cannabis population. Those still left in the program are patients that are most vulnerable, including those who are unable to receive access to their medications through the adult use/recreational program.

In 2023, ASA recommends that legislators prioritize improving the medical cannabis program and weigh the costs of entering the program against the benefits. Particular attention should be paid to affordability measures as well as health and social equity policies. The state must continue to provide patients with these crucial protections, and not relegate them to the adult use/recreational market for the state's administrative ease. In light of the adult use/recreational laws, Vermont should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 311
PENALTIES: ..... -30
POINT TOTAL: 301/700
SCORE PERCENTAGE: 43%

4,302	0.67%	5	860 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**41/100**
Arrest Protection	20/25
Affirmative Defense	16/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**45/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**40/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**67/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	8/10
Reasonable Purchase Limits	8/10
Telemedicine for Physician Certification	9/15
Patient and Physician Representation in Program Decision Making	10/20
Reasonable Caregiver Standards	1/5
– Background Checks	0/2
– Number of Caregivers	1/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**43/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	9/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	9/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**95/200**
Cultivation Operations	**20/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	4/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	2/2
Required Testing	3/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**22/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	3/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	2/3
Required Testing	5/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	0/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	2/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**36/50**
Staff Training	20/20
Standard Operating Procedures	6/7
– Facility Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Product Testing	10/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	5/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**17/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	4/4
Quality Management Systems	0/5
Staff Training	10/20
Standard Operating Procedures	3/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	1/1
– Sample Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**30/100**
Gives Regulatory Preference to Adult Use	20/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	10/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Vermont did not notice a change in access to medical cannabis this year. They did suggest that the state prioritizes adult-use cannabis, but reported that the adult-use market has not made an impact on the medical cannabis program.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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Americans for Safe Access

VIRGINIA

Improvements and Recommendations

Despite a tumultuous year in Virginia surrounding the debate for recreational adult use/recreational cannabis sales, the state's policymakers managed to enact a few changes to the medical cannabis law. First, policymakers amended the definition of "CBD oil" so it is no longer a requirement that all CBD products be "hemp-derived." Second, Virginia policymakers repealed the patient registration requirement. While patients are still required to obtain a doctor recommendation in order to access medical cannabis, they no longer have the added administrative burden of yearly registrations.

In 2023, ASA recommends that Virginia lawmakers re-focus their efforts on addressing the areas where they left gaps for patient protections. Virginia is the only state that has medical cannabis access for patients, but no form of caregiver status to help with acquisition or dosing; this is a critical failure that must be fixed. The state must also prioritize providing protections for patients against discrimination in housing, family court, or arbitrary roadside THC testing. The state should also authorize existing and future retailers to allow curbside pickup and delivery to patients. In light of the ongoing debate around adult use/recreational laws, Virginia should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 420
PENALTIES: -20
POINT TOTAL: 400/700
SCORE PERCENTAGE: 57.14%

52,810	0.60%	30	1,760 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**70/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	0/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**48/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	13/20
– Authorizes Delivery	8/10
– Authorizes Curbside Pickup	5/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	10/30
Reciprocity	0/20
AFFORDABILITY	**65/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	15/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**79/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	6/10
Reasonable Purchase Limits	8/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	10/20
Reasonable Caregiver Standards	0/5
– Background Checks	0/2
– Number of Caregivers	0/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**44/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	9/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**114/200**
Cultivation Operations	**26/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	3/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	1/2
Environmental Impact Regulations	0/2
Required Testing	7/8
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Foreign Matter	0/1
– Moisture Content	1/1
Packaging and Labeling	2/3
– Cannabinoids	1/1
– Terpenes	1/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/7
Manufacturing Operations	**25/50**
Quality Management Systems	0/10
Staff Training	10/10
Standard Operating Procedures	3/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	7/10
– Cannabinoids	1/1
– Terpenes	1/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	1/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	2/5
– Cannabinoids	1/1
– Terpenes	1/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	3/5
Dispensary Operations	**30/50**
Staff Training	10/20
Standard Operating Procedures	3/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	10/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	5/5
Complaints, Adverse Event Reporting and Recall Protocol	7/13

CATEGORY	POINTS
Laboratory Operations	**33/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	10/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	2/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	15/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	5/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	3/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Most patients surveyed in Virginia felt that access to medical cannabis had improved this year, citing a more efficient application and renewal system along with a special program for disabled patients. However, they still view overall cost as limiting and the number of dispensaries as too few. Generally, these patients saw the legalization of adult-use as having a positive impact on the medical cannabis program due to the patients' ability to cultivate their own cannabis.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

UNITED STATES VIRGIN ISLAND

Improvements and Recommendations

USVI did not have a medical cannabis law before 2019, although voters did approve a non-binding referendum in support of medical cannabis in 2014. In early 2019, the Governor of the U.S. Virgin Islands signed the Virgin Islands Medicinal Cannabis Care Act to allow patients to possess and obtain cannabis for medicinal purposes. Three years later, and patients in USVI are still left waiting for a functional program.

In 2023, ASA recommends USVI lawmakers prioritize regulating and licensing retail dispensary locations for medical cannabis patients. These dispensaries should offer a wide variety of products for medicinal purposes, and USVI policymakers should ensure that underserved populations and areas are prioritized in the licensing process.

BASE CATEGORIES POINTS: 323
PENALTIES: -15
POINT TOTAL: 308/700
SCORE PERCENTAGE: 44%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**90/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	20/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**35/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	15/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	10/20
AFFORDABILITY	**30/100**
Sales Tax Break for Patients and Caregivers	10/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**71/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	15/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**70/100**
State Program Protections	25/25
Housing Protections	25/25
Access for Minors	0/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	5/10
Organ Transplants	5/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**27/200**
Cultivation Operations	**7/50**
Quality Management Systems	**0/10**
Staff Training	**2/10**
Standard Operating Procedures	**2/8**
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	**1/2**
Environmental Impact Regulations	**0/2**
Required Testing	**1/8**
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	**1/3**
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/7**
Manufacturing Operations	**9/50**
Quality Management Systems	**0/10**
Staff Training	**2/10**
Standard Operating Procedures	**2/7**
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Environmental Impact Regulations	**0/3**
Required Testing	**1/10**
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	**4/5**
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	1/1
Complaints, Adverse Event Reporting and Recall Protocol	**0/5**
Dispensary Operations	**4/50**
Staff Training	**2/20**
Standard Operating Procedures	**2/7**
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	1/1
– Waste Disposal	0/1
– Records Management	1/1
Product Testing	**0/10**
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	**0/13**

CATEGORY	POINTS
Laboratory Operations	**7/50**
Independent or Third-Party	**5/5**
Laboratory Sampling	**0/5**
Method Validation	**0/4**
Quality Management Systems	**0/5**
Staff Training	**2/20**
Standard Operating Procedures	**0/7**
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	**0/4**
SCORE PENALTIES	**15/100**
Gives Regulatory Preference to Adult Use	**0/20**
Classifies Cannabis as a Medicine of Last Resort	**0/15**
Administrative or Supply Problems	**15/15**
Requires Vertical Integration	**0/10**
Creates New Criminal Penalties for Patients	**0/10**
Limits Patients to a Single Retailer	**0/10**
No System for Adding Qualifying Conditions	**0/10**
Imposes Bans or Limits on THC	**0/5**
Imposes Bans or Limits on CBD	**0/5**

Patient Feedback

No feedback was received from patients in the U.S. Virgin Islands

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

To aid government agencies in establishing sound rulemaking policies, ASA created the Patient Focused Certification (PFC) program. PFC is a third party certification and training program for the cannabis industry. PFC utilizes the American Herbal Products Association (AHPA) recommendations for botanical products, good agricultural (collection) practices (GAP), good manufacturing practices (GMP), and good laboratory practices (GLP) to thoroughly evaluate a business for compliance. PFC was the first and only first cannabis compliance organization to attain ISO/IEC 17065 accreditation in the U.S. cannabis market. PFC is available to companies cultivating, manufacturing, or distributing cannabis and hemp products, as well as to laboratories providing cannabis analytic services.

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

WASHINGTON

Improvements and Recommendations

Washington's medical cannabis program continues to decline, and policymakers in the state have failed to make meaningful changes or improvements to the program in a number of years. Since passing adult use/recreational cannabis laws, the state has neglected to update or improve the state's medical cannabis program. This has left patient needs neglected and the hurdles that exist on the medical cannabis program outweigh the few benefits the legislature has allowed to remain. This, and not the simple passing of adult use/recreational, has contributed to the stark decline in Washington's medical cannabis population. Those still left in the program are patients that are most vulnerable, including those who are unable to receive access to their medications through the adult use/recreational program.

In 2023, ASA recommends that legislators prioritize improving the medical cannabis program and weigh the costs of entering the program against the benefits. Particular attention should be paid to affordability measures as well as health and social equity policies. The state must continue to provide patients with these crucial protections, and not relegate them to the adult use/recreational market for the state's administrative ease. In light of the adult use/recreational laws, Washington should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report.

BASE CATEGORIES POINTS: 457
PENALTIES: -41
POINT TOTAL: 416/700
SCORE PERCENTAGE: 59.43%

52,479	0.66%	273	192 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**80/100**
Arrest Protection	25/25
Affirmative Defense	20/20
Parental Rights Protections	20/20
Employment Protections	10/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**80/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	20/20
– Authorizes Delivery	10/10
– Authorizes Curbside Pickup	10/10
Personal Cultivation	15/15
Collective Gardening	5/5
Sufficient Number of Licensed Retailers	30/30
Reciprocity	0/20
AFFORDABILITY	**60/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**64/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	10/10
Telemedicine for Physician Certification	3/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	5/5
Access to Administration Methods	10/10
– Allows Dried Flower	5/5
– Allows Edibles, Concentrates, and Other Forms	5/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**57/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	9/10
Access in Underserved Areas	5/10
List of Qualifying Conditions is Exhaustive or All Inclusive	5/10
Allows Patients to Medicate Where They Choose	8/10
Organ Transplants	5/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**116/200**
Cultivation Operations	**15/50**
Quality Management Systems	0/10
Staff Training	5/10
Standard Operating Procedures	1/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	1/2
Required Testing	6/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	0/1
– Foreign Matter	1/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/7
Manufacturing Operations	**28/50**
Quality Management Systems	10/10
Staff Training	5/10
Standard Operating Procedures	1/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	1/1
Environmental Impact Regulations	2/3
Required Testing	5/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	1/1
Packaging and Product Labeling	3/5
– Cannabinoids	1/1
– Terpenes	0/1
– Ingredients	1/1
– Allergens	1/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	2/5
Dispensary Operations	**25/50**
Staff Training	20/20
Standard Operating Procedures	1/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	1/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	4/5
Complaints, Adverse Event Reporting and Recall Protocol	4/13

CATEGORY	POINTS
Laboratory Operations	**44/50**
Independent or Third-Party	5/5
Laboratory Sampling	0/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	20/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**41/100**
Gives Regulatory Preference to Adult Use	20/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	10/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	10/10
Imposes Bans or Limits on THC	1/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Washington State did not notice a change in access to medical cannabis. However, they have expressed frustration due to the limitations imposed by the replacement of medical dispensaries with adult-use retail locations. While medical certifications still allow patients to be relieved of taxation, the focus on high level THC products has made it more difficult for patients to find products that meet their therapeutic needs. Overall, these patients feel there are an appropriate amount of dispensaries, but they lack an appropriate medical menu.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

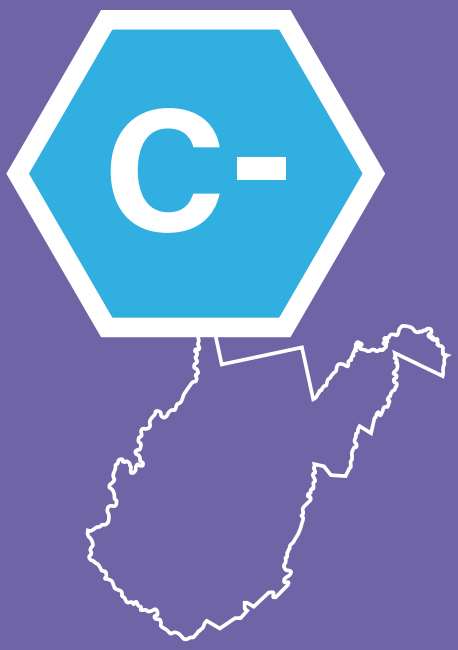
Americans for Safe Access

WEST VIRGINIA

Improvements and Recommendations

After nearly five years of inactivity, West Virginia's medical cannabis program finally began taking strides in 2022. The state increased the number of dispensaries, and the number of patients registered has surged over the past year. The state has issued many more retail licenses with plans to open those retail facilities in coming years.

In 2023, ASA recommends that West Virginia legislators follow through on allowing patients and caregivers to grow cannabis at home. West Virginia should also move to make delivery and curbside pickup available for all patients; these measures go a long way to improving access for many patients. Finally, West Virginia should prioritize the civil rights that current laws do not protect. These include patient protections from discrimination in employment, housing, education, and child custody cases.



BASE CATEGORIES POINTS: 373
PENALTIES: -20
POINT TOTAL: 353/700
SCORE PERCENTAGE: 50.43%

7,000	0.39%	37	1,089 : 1
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**55/100**
Arrest Protection	25/25
Affirmative Defense	15/20
Parental Rights Protections	0/20
Employment Protections	10/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**36/100**
Authorizes Retail Access	10/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	20/30
Reciprocity	6/20
AFFORDABILITY	**60/100**
Sales Tax Break for Patients and Caregivers	20/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**62/100**
Legal Protections Within Reasonable Time Frame	16/20
Reasonable Possession Limits	8/10
Reasonable Purchase Limits	8/10
Telemedicine for Physician Certification	15/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	5/5
– Background Checks	2/2
– Number of Caregivers	3/3
Reasonable Physician Standards	2/5
Access to Administration Methods	3/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	3/5
Provides Access to Minors on School Grounds	5/5
HEALTH AND SOCIAL EQUITY	**15/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	8/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	7/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**145/200**
Cultivation Operations	**33/50**
Quality Management Systems	10/10
Staff Training	0/10
Standard Operating Procedures	8/8
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Water Management	1/1
– Records Management	1/1
Pesticide Usage Limitations	2/2
Environmental Impact Regulations	0/2
Required Testing	5/8
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	1/1
Packaging and Labeling	1/3
– Cannabinoids	1/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	7/7
Manufacturing Operations	**28/50**
Quality Management Systems	10/10
Staff Training	0/10
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Environmental Impact Regulations	0/3
Required Testing	6/10
– Cannabinoids	1/1
– Terpenes	0/1
– Microbials	1/1
– Aflatoxins	1/1
– Pesticides	1/1
– Heavy Metals	0/1
– Residual Solvents	1/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	1/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	5/5
Dispensary Operations	**44/50**
Staff Training	20/20
Standard Operating Procedures	6/7
– Facility Sanitation	0/1
– Workplace Safety	1/1
– Storage	1/1
– Batch and Lot Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Product Testing	5/10
– Product Meets Requirements Before Sale	5/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	13/13

CATEGORY	POINTS
Laboratory Operations	**40/50**
Independent or Third-Party	5/5
Laboratory Sampling	5/5
Method Validation	4/4
Quality Management Systems	5/5
Staff Training	10/20
Standard Operating Procedures	7/7
– Facility and Equipment Sanitation	1/1
– Equipment and Instrument Calibration	1/1
– Workplace Safety	1/1
– Sample Tracking	1/1
– Security	1/1
– Waste Disposal	1/1
– Records Management	1/1
Result Reporting	4/4
SCORE PENALTIES	**20/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	10/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	10/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	0/10
Imposes Bans or Limits on THC	0/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in West Virginia reported improved access along with helpful assistance in the registration process. A noted limitation is that there are too few dispensaries.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Americans for Safe Access

WISCONSIN

Improvements and Recommendations

Governor Evers floated the idea of cannabis legalization in his 2021-2023 state budget proposal, but conservative legislators stripped the provision before final passage. Since then, lawmakers have failed to pass a medical cannabis bill, but the Governor has stated it still remains a priority.

In 2023, ASA recommends that Wisconsin legislators work to provide more comprehensive medical cannabis access to its citizens before relying on adult use/recreational adult-use cannabis legislation to serve patients. ASA encourages collaborating with patients to organize a comprehensive medical cannabis program. While adult use/recreational and medical cannabis laws can co-exist in a state, policymakers should understand that medical and adult use/recreational populations are distinct, and that medical cannabis patients require additional protections and considerations. In light of the debate around adult use/recreational laws, Wisconsin should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 126
PENALTIES: -15
POINT TOTAL: 111/700
SCORE PERCENTAGE: 15.86%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**24/100**
Arrest Protection	12/25
Affirmative Defense	12/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	0/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**50/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	20/20
Financial Hardship Waivers or Discounts	20/20
Donation Program	0/10
Allows Multi-year Registrations	10/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**36/100**
Legal Protections Within Reasonable Time Frame	20/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	0/5
– Background Checks	0/2
– Number of Caregivers	0/3
Reasonable Physician Standards	5/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**16/100**
State Program Protections	0/25
Housing Protections	0/25
Access for Minors	6/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	10/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**15/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	0/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	10/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	0/5

Patient Feedback

Patients surveyed in Wisconsin reported that there was no noticeable change in access to medical cannabis. There is no recognized medical cannabis program in the state.

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

For information on how each section was scored, please check out the full scoring rubric at www.safeaccessnow.org/sos22rubric

Recommendations for Regulators

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Learn more about PFC at www.PatientFocusedCertification.org.

Americans for Safe Access

WYOMING

Improvements and Recommendations

Wyoming continues to debate legalization of adult-use cannabis while access for patients remains wholly inadequate. Policymakers in Wyoming did not make any meaningful improvements to the state's extremely limited medical cannabis program in 2022.

In 2023, ASA recommends that Wyoming legislators work to provide more comprehensive medical cannabis access to its citizens before abandoning the idea in favor of adult use/recreational adult-use cannabis legislation to serve patients. ASA encourages collaborating with patients to organize a comprehensive medical cannabis program. While adult use/recreational and medical cannabis laws can co-exist in a state, policymakers should understand that medical and adult use/recreational populations are distinct, and that medical cannabis patients require additional protections and considerations. In light of the debate around adult use/recreational laws, Wyoming should also focus on passing provisions included in ASA's *Medical Cannabis Equity Checklist* found in this report. Legislators should introduce comprehensive medical cannabis legislation based on *ASA's State Medical Cannabis Program Model Legislation*.

BASE CATEGORIES POINTS: 110
PENALTIES: -31
POINT TOTAL: 79/700
SCORE PERCENTAGE: 11.29%

NO	0%	0	N/A
Registered Patient Population	of Total Population Represented by Patients	Retail Locations Currently in Operation	Patients : Retail Locations

CATEGORY	POINTS
PATIENT RIGHTS AND CIVIL PROTECTIONS	**31/100**
Arrest Protection	14/25
Affirmative Defense	12/20
Parental Rights Protections	0/20
Employment Protections	0/20
DUI Protections	0/10
Explicit Privacy Standards	5/5
ACCESS TO MEDICINE	**0/100**
Authorizes Retail Access	0/10
Alternative Accessibility Methods	0/20
– Authorizes Delivery	0/10
– Authorizes Curbside Pickup	0/10
Personal Cultivation	0/15
Collective Gardening	0/5
Sufficient Number of Licensed Retailers	0/30
Reciprocity	0/20
AFFORDABILITY	**12/100**
Sales Tax Break for Patients and Caregivers	0/20
Covered by State Insurance or Health Aid	0/20
Reasonable Registration Fees	12/20
Financial Hardship Waivers or Discounts	0/20
Donation Program	0/10
Allows Multi-year Registrations	0/10

CATEGORY	POINTS
PROGRAM FUNCTIONALITY	**33/100**
Legal Protections Within Reasonable Time Frame	14/20
Reasonable Possession Limits	10/10
Reasonable Purchase Limits	0/10
Telemedicine for Physician Certification	0/15
Patient and Physician Representation in Program Decision Making	0/20
Reasonable Caregiver Standards	3/5
– Background Checks	2/2
– Number of Caregivers	1/3
Reasonable Physician Standards	5/5
Access to Administration Methods	1/10
– Allows Dried Flower	0/5
– Allows Edibles, Concentrates, and Other Forms	1/5
Provides Access to Minors on School Grounds	0/5
HEALTH AND SOCIAL EQUITY	**34/100**
State Program Protections	25/25
Housing Protections	0/25
Access for Minors	7/10
Access in Underserved Areas	0/10
List of Qualifying Conditions is Exhaustive or All Inclusive	2/10
Allows Patients to Medicate Where They Choose	0/10
Organ Transplants	0/5
Ownership or Employment Restrictions	0/5

CATEGORY	POINTS
CONSUMER PROTECTION AND PRODUCT SAFETY	**0/200**
Cultivation Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/8
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Water Management	0/1
– Records Management	0/1
Pesticide Usage Limitations	0/2
Environmental Impact Regulations	0/2
Required Testing	0/8
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Foreign Matter	0/1
– Moisture Content	0/1
Packaging and Labeling	0/3
– Cannabinoids	0/1
– Terpenes	0/1
– Pesticides	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/7
Manufacturing Operations	**0/50**
Quality Management Systems	0/10
Staff Training	0/10
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Environmental Impact Regulations	0/3
Required Testing	0/10
– Cannabinoids	0/1
– Terpenes	0/1
– Microbials	0/1
– Aflatoxins	0/1
– Pesticides	0/1
– Heavy Metals	0/1
– Residual Solvents	0/1
– Homogeneity	0/1
– Foreign Matter	0/1
– Water Activity	0/1
Packaging and Product Labeling	0/5
– Cannabinoids	0/1
– Terpenes	0/1
– Ingredients	0/1
– Allergens	0/1
– Nutritional Content	0/1
Complaints, Adverse Event Reporting and Recall Protocol	0/5
Dispensary Operations	**0/50**
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility Sanitation	0/1
– Workplace Safety	0/1
– Storage	0/1
– Batch and Lot Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Product Testing	0/10
– Product Meets Requirements Before Sale	0/5
– COA Disclosure	0/5
Complaints, Adverse Event Reporting and Recall Protocol	0/13

CATEGORY	POINTS
Laboratory Operations	**0/50**
Independent or Third-Party	0/5
Laboratory Sampling	0/5
Method Validation	0/4
Quality Management Systems	0/5
Staff Training	0/20
Standard Operating Procedures	0/7
– Facility and Equipment Sanitation	0/1
– Equipment and Instrument Calibration	0/1
– Workplace Safety	0/1
– Sample Tracking	0/1
– Security	0/1
– Waste Disposal	0/1
– Records Management	0/1
Result Reporting	0/4
SCORE PENALTIES	**31/100**
Gives Regulatory Preference to Adult Use	0/20
Classifies Cannabis as a Medicine of Last Resort	15/15
Administrative or Supply Problems	0/15
Requires Vertical Integration	0/10
Creates New Criminal Penalties for Patients	0/10
Limits Patients to a Single Retailer	0/10
No System for Adding Qualifying Conditions	10/10
Imposes Bans or Limits on THC	5/5
Imposes Bans or Limits on CBD	1/5

Patient Feedback

Patients surveyed in Wyoming reported that there was no noticeable change in access to medical cannabis. There is no recognized medical cannabis program in the state

Background

For background information regarding this state, please visit www.safeaccessnow.org/states and click on the state.

Scoring Information

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Recommendations for Regulators

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Conclusion

When looking at state data in the aggregate, it is clear that nationwide medical cannabis programs need to be stronger. Programs ranged from 0% (Idaho & Nebraska) to 75.71% (Maryland). However, **when the 56 state and territory grades were averaged, medical cannabis access in the United States only received 46.16% or a "D+" on ASA's grading scale.**

Since 1996, states have developed medical cannabis programs through citizen initiatives, comprehensive and piecemeal legislation, regulations, and executive action. **Although the majority of states now have some form of a medical cannabis program, there is still not one program in the country that meets the needs of all patients.** However, we understand that many of the obstacles to access that remain in state programs stem from the conflict between current federal and state policies and that **without coordination and guidance from the federal government, there are numerous barriers to access for patients that cannot be resolved by the states alone.**

In states looking to the future and debating recreational adult-use laws, we have also noticed a plateau in overall improvements to the medical cannabis programs. State lawmakers and regulators recognize the value of developing robust medical cannabis programs that serve a variety of patient health conditions, improve ease of patient access, and offer patients legal protections related to employment, housing, education, and family law. However, many states with limited and even comprehensive medical cannabis programs have dedicated much, if not all, of their time for cannabis reforms to adult-use access during the 2021-2022 year, while failing to make much-needed improvements to their medical programs. This year's report illustrates this phenomenon, with most states that maintain medical programs debating only adult-use options or, more alarmingly, merging the programs and foregoing many patient rights and protections afforded by the medical program.

The grading of this report highlighted a few trends across the country. Unfortunately, many of these trends have negative consequences for medical cannabis patients, and lawmakers should keep these issues at the front of their minds when crafting any cannabis policy:

Prioritization of Recreational Use Over Patient Needs: While states continue to slowly adapt their laws to meet the needs of patients, we have noticed a big shift in states prioritizing adult-use.

Recreational adult-use programs and medical cannabis programs are NOT the same and should not be treated as such. A state may have both recreational adult-use laws and medical cannabis laws, but those programs must remain separate in order to serve the distinct needs of the population. Cannabis patients rely on medical cannabis products for their health and well-being and should be treated as patients by the state — not as recreational consumers. This includes protections and considerations that may not exist in the recreational market, such as excise and sales tax breaks on medical cannabis products, continued access to medical cannabis for minor patients, civil rights protections for employment, housing, parental rights, and even alternative accessibility methods.

Medical cannabis programs are essential to patient health and well-being and should be maintained and improved upon regardless of the legality of recreational adult-use in the state.

While adult-use models can expand access to a larger population of people and may even increase the number of legal cannabis retailers, these systems and associated businesses are often not held to the same standards as authorized medical cannabis businesses. For example, laboratory testing of adult-use products may not have to undergo screening for the full array of heavy metals and contaminants that medical products require. It is also uncommon that states ask adult-use retailers to maintain staff competent about medical cannabis products or their applications to ensure patients have a trained advisor to consult with when they purchase medicine. It is critical to patient health that states maintain focus on addressing medical cannabis program challenges and patient needs before, during, and after developing adult-use programs.

Patients Are Forgotten: One of the most concerning emerging trends in this report is the fact that some states without a robust medical cannabis program are debating policies to legalize recreational adult-use, without considering the patient population's needs.

Patients in all of these states have been advocating for a medical cannabis program for years, and it appears as though lawmakers are willing to skip over patients and their needs to go straight to adult-use only. There is no reason why these states cannot pass a robust medical cannabis program in conjunction with adult-use. Adult-use cannabis laws do not serve patients, and while ASA supports the need for recreational adult-use laws, we are

vehemently opposed to policies that ignore patient and caregiver needs.

Product Testing and Labeling: This is one area in which we saw positive trends for the year, with a number of states adding or amending testing requirements for cannabis products. While this is a positive trend this year, there are still many states that fall well below minimum standards, and this remains one of the lowest-scoring categories across the country.

Requiring licensed laboratories to screen for harmful molds, pesticides, heavy metals, and other contaminants is important to keep patients safe, however equally as important are requirements that labs identify the full spectrum of plant compounds and terpenes present in medical products being sold to patients. After testing to ensure product safety, states should also require that adequate labeling standards capturing this information are put in place to convey testing results to patients and medical cannabis dispensary staff.

Considerations for pesticide use limitations and encouraging sustainable best practices are important factors in the production of safe medicine. In the event a product does not meet specifications, all operators should be prepared to conduct a recall, and states should require that all operators have policies and procedures for receiving complaints and reports of adverse events. Oftentimes states only require this of dispensaries that are interacting directly with medical cannabis patients. However, all products should be labeled such that the cultivator or manufacturer is identified and provide contact information for those businesses as well.

Lack of Insight on Federal Policy: While medical cannabis programs are completely in state control, one common theme among all legislatures is the open question about federal intervention and/or penalties. States have been far more responsive to patient needs than the federal government, which still does not formally allow for the medical use of cannabis. Federal inaction creates a backlog of patient issues in which state legislators and regulators need federal guidance. Until the federal government acts, important protections like the right to access cannabis on school grounds, safety in federal housing, and many more issues face legislative and regulatory hurdles that are hard for patients and states to overcome. State policymakers should be bringing this to the attention of their federal counterparts and demanding answers. One way to begin is by passing ASA's Federal Guidance resolution, the text of which is included in this report in the appendix "State's Government's Role in Ending Federal Prohibition," in your state chamber.

While this Presidential Administration has made indications that it may be receptive to revisiting the issues of the federal prohibition of cannabis, it still remains illegal and is subject to penalties. Without some kind of federal oversight and guidance in place, state medical cannabis laws, but more importantly, medical cannabis patients, remain subject to the ever-changing and evolving political decisions of those in federal office.

Access: Most states that have organized medical cannabis access systems have not deployed a sufficient number of medical cannabis retail facilities to serve patients. Many patients responding to ASA's 2022 patient survey reported needing to travel long distances to reach the limited amount of such facilities that do exist. A variety of factors can produce this outcome, including state laws that permit local governments to completely prohibit a patient's legal access to medicine by banning licensed medical retail providers.

While it is appropriate for local governments to make decisions about the configuration of their communities, it is completely inappropriate and discriminatory to use these powers to deny patients access to medicine they need to treat their health conditions. Medical cannabis is as important to the treatment of both acute and chronic conditions as pharmaceutical products are to treating the conditions for which they are effective. As such, patients utilizing medical cannabis require the same ease of access to medical retail that pharmaceutical patients do to pharmacies. ASA encourages state and local elected leaders and health regulators to cut through stigma and negative propaganda about cannabis and address the access needs of all patients.

Insufficient Legal Protections: This year's report once again highlighted a huge lack of legal protections for patients. Granting state-regulated access to medical cannabis does nothing to protect patients who require legal protections pertaining to employment, housing, education, and family legal matters in order to purchase, possess, and use medical cannabis without fear of monetary fines, arrest, prosecution, and imprisonment. Many states with medical cannabis programs have developed only a limited framework of these protections, and ASA encourages all states to arrange comprehensive

protections to ensure that patients are not punished, jailed, or discriminated against for legally using medical cannabis. These protections must be codified into law and cannot be left to courts to litigate.

Medical Program Challenges: Patients responding to ASA's 2022 patient survey expressed concerns with enrolling in state medical programs for reasons ranging from high enrollment costs and limited program eligibility criteria to difficulty and delays related to navigating state enrollment processes and identifying qualified physicians to provide recommendations. This report illustrates work that some states have done to improve outcomes in this arena, but for most states, there remains considerable work to be done to address concerns raised by patients about their experience with state medical cannabis systems. Further, in order to not penalize patients for needing a treatment option, states that legalize adult-use must do away with medical cannabis registration fees.

GRADING SUMMARY

ASA's evaluations of state grades are based on an analysis of the individual laws and policies, which govern each state's medical cannabis program, **that were in effect by December 31, 2022.** We look at state programs both in isolation as well as in comparison to other state models to determine scoring standards that can be reasonably applied across the board. This report is designed to show that even the states with high scores can and should make improvements and to highlight the specific advancements that states and territories should pursue to improve medical program function and cost to patients.

Looking at the grade distribution, it is clear that some of the lowest-scoring programs across the country passed important improvements over the last year. ASA is encouraged by these improvements and encourages states to continue, especially considering most states have a long way to go until they reach an A grade.

States that continually receive an F grade in this report still seem reluctant to pass any meaningful medical cannabis legislation in the state, which prevents them from ever moving up in this grading scale.

ASA is generally encouraged by the upward movement of grades, particularly in the lower half of the grading bracket where improvements are most urgently needed.

While some states did manage to make enough improvements to boost their score, we also have seen inaction among the states in the upper half of the grading bracket. These states should be on notice that their inaction will lead to other states passing them in grades and will hurt patients in their state.

It should also be noted that ASA's grading scale is very generous considering a state earning only 50% of possible points will put a state in the C grading range. Therefore, despite what may look like an adequate score for a medical cannabis program, lawmakers and regulators must take a closer look at places they are falling behind in the rubric.

2021 MEDICAL CANNABIS PROGRAM GRADE DISTRIBUTION CHART

	2021	2022
A+	0	0
A	0	0
A-	0	0
B+	0	0
B	1	0
B-	1	4
C+	10	14
C	6	5
C-	5	5
D+	8	9
D	9	5
D-	2	0
F	13	13

State Ranking Chart 2021	2022
1. Maine	1. Maryland
2. Illinois	2. Connecticut
3. Nevada	3. Rhode Island
4. California	4. Illinois
5. Rhode Island	5. Michigan
6. Maryland	6. California
7. Ohio	7. Maine
8. Delaware	8. Ohio
9. Colorado	9. Nevada
10. Missouri	10. Colorado
11. Pennsylvania	11. Delaware
12. New Jersey	12. Pennsylvania
13. Michigan	13. Missouri
14. Massachusetts	14. New Jersey
15. District of Columbia	15. District of Columbia
16. Oklahoma	16. Massachusetts
17. Connecticut	17. Hawaii
18. New Mexico	18. New Mexico
19. Washington	19. Arizona
20. Arizona	20. Oklahoma
21. South Dakota	21. Washington
22. Oregon	22. South Dakota
23. Guam	23. Virginia
24. Alaska	24. New York
25. Minnesota	25. Oregon
26. Virginia	26. Guam
27. Florida	27. West Virginia
28. Montana	28. Montana
29. West Virginia	29. Arkansas
30. Hawaii	30. Florida
31. Arkansas	31. Minnesota
32. New Hampshire	32. New Hampshire
33. Louisiana	33. Alaska
34. Utah	34. Utah
35. US Virgin Islands	35. US Virgin Islands
36. New York	36. Commonwealth of NM Islands
37. Puerto Rico	37. Vermont
38. Commonwealth of NM Islands	38. Louisiana
39. Iowa	39. labama
40. Vermont	40. Puerto Rico
41. North Dakota	41. Iowa
42. Alabama	42. North Dakota
43. Texas	43. Texas
44. Georgia	44. Georgia
45. Wisconsin	45. Mississippi
46. Indiana	46. Wisconsin
47. Tennessee	47. Tennessee
48. Wyoming	48. Wyoming
49. South Carolina	49. Indiana
50. Kentucky	50. South Carolina
51. North Carolina	51. Kentucky
52. Kansas	52. North Carolina
53. Mississippi	53. Kansas
54. Idaho	54. Idaho
55. Nebraska	55. Nebraska

GOLD STANDARDS

While the scorecard assigns grades based on the overall quality of each state's medical cannabis laws, we think it is important to highlight the states that scored the highest for each category. As policymakers work to advance medical cannabis law, these states may help to serve as a guide.

Patient Rights & Civil Protectionss

Arizona* - 96%

Average Score - 58.75%

(2021 Average - 57.47%)

Patient rights and civil protections are the legal cornerstones of medical cannabis laws. Without these protections, patients are continually at risk for legal retribution, either criminal or through civil or custody suits, for behavior allowed under their state's medical cannabis law.

This year, Arizona unseated last year's gold standard states and received an almost perfect score in this category. Arizona's grade was helped by a recent AZ Supreme Court decision not to let a lower court ruling stand, which provides parental protections for medical cannabis patients. The state's grade was also boosted by providing full arrest protections and providing for an affirmative defense in court, employment protections for medical cannabis patients and caregivers, and explicit privacy standards.

While the state's Supreme Court decision will have a big impact on patients, a lower Appeals Court ruling is not binding authority across the state. As such, lawmakers should act quickly to codify such protections and ensure all medical cannabis patients have parental protections.

Areas for Improvement:

- Codify parental protections in state law

Access to Medicine

Maine — 95%

Average Score — 42.13%

(2021 Average - 39.38%)

Medical cannabis laws are useless if they do not provide ways for patients across the state to easily access their medication. This year, only one state, Maine, received an almost perfect score in this category.

While dispensaries are one big area by which states can provide access to patients, Maine has both recognized the need and right for medical cannabis patients to grow their own medicine. The state has also provided alternative access methods, like delivery and curbside pickup, to better serve patients who may have trouble getting to, or in, brick and mortar dispensaries to purchase their medicine.

Areas for Improvement:

- Approve more dispensary licenses, particularly in rural or currently underserved areas of the state

Program Functionality

Maine — 100%

Average Score — 61.73%

(2021 Average - 60.84%)

In order to truly provide safe, legal, and affordable access to cannabis for patients, state medical cannabis programs must function smoothly with little to no administrative or supply programs. While these aspects may be less noticeable to patients in their day-to-day activities within the program, they are just as important in ensuring patients have the medication they need.

Maine received full credit in this category, which demonstrates their acknowledgment that what goes on behind the scenes of the program is just as important as the side patients see day-to-day. This includes having reasonable standards and requirements for caregivers and physicians, allowing telemedicine for certification, allowing reasonable purchase and possession limits for patients, and including physicians and patients in program decision-making.

Areas for Improvement:

- Continue streamlining the administrative process
- Remove any burden from the patient

Affordability

Illinois, Virginia* — 65%

Average Score — 40.73%

(2021 Average- 39.69%)

For many cannabis patients, affordability is the most important aspect in determining whether they can access their medication once states allow for medical cannabis. People living with disabilities, chronic conditions, terminal illnesses, and comorbidities often worry about affording their cannabis, which is not covered by any insurance and must be paid for wholly out of pocket in addition to their other health expenses.

Affordability not only covers the price of cannabis but ancillary expenses as well, including administrative costs to register and maintain a valid registry, and doctor visits for certification. States should not only look at the average price for cannabis products but the entire cost to patients when evaluating whether the program is affordable.

This year, Virginia joins the gold standard list for this category, joining Illinois, a second-year gold standard winner in Affordability.

Every state and territory should focus on affordability as they implement or improve their programs. Illinois and Virginia, this year's gold standard states in Affordability, only earned 65% of the possible points, and many states scored well below that. Illinois and Virginia do a number of things right, including giving sales tax breaks to medical patients and allowing for multi-year registrations, which cut down on the cost of regular doctor's visits for patient certifications in Illinois. In Virginia, policymakers have done away with registration altogether and now only require a physician's recommendation to allow access. Illinois also has a reasonable registration fee of $50 for one year or $100 for two and provides financial hardship waivers or discounts to low-income patients.

While Illinois did receive full points for reasonable registration fees, they still exist. ASA encourages all states to change their policies to allow for free patient registration into the program. Cannabis patients should not have to face additional financial hurdles just to be allowed to purchase medication, especially in a territory with recreational adult-use laws which let adults access cannabis for free.

Areas for Improvement:

- Covered by state insurance or health aid
- Donation program

Health & Social Equity

Ohio — 90%

Average Score — 45.82%

(2021 Average - 45.20%)

Health issues and available treatments do not change depending on a person's age, race, income level, geographic location in the state, or any other social determinant. States must ensure that all individuals, regardless of their personal situations, have the safe and legal access to cannabis medicine they deserve.

ASA was encouraged to see Ohio make enough improvements in this section to overtake Connecticut, last year's gold standard state.

Ohio provides for many, but not all, health and social equity situations to ensure that all patients are protected in the state. In Ohio, this includes opening the industry to diverse owners, protecting state benefits for cannabis patients, providing housing protections for those who do not own their own house, and including a mostly comprehensive qualifying condition list. Ohio also provides some access for minors, although this should be improved to ensure that minors do not face additional hurdles to access simply because of their age. The state also has a fair ratio of medical dispensaries located throughout the state; this means that a good number of patients have access to a close dispensary. However, Ohio should look to improve this ratio and prioritize licenses for dispensaries in areas of the state that may still be underserved.

Areas for Improvement:

- Access for minors
- Access in underserved areas

Consumer Protection & Product Safety

Maryland — 84.50%

Average Score — 44.80%

(2021 Average - 40.75%)

This year, the top-scoring state for Consumer Protection and Product Safety was Maryland. Maryland received full points for Staff Training, Quality Management Systems, Required Testing, and Complaints, Adverse Event Reporting and Recall Protocol for Cultivation and Manufacturing Operations. However, it fell short on points for environmental impact regulations.

Maryland requires the full suite of product testing, including testing for potency (cannabinoids and terpenes) as well as contaminants, including pesticides, heavy metals, and residual solvents. Mayland's labeling requirements include cannabinoids, terpenes, ingredients, and allergens.

For Dispensary Operations, they received full points for Staff Training, Complaints, Adverse Event Reporting and Recall Protocol. For Laboratory Operations, they received full points for Independent or Third-Party, Method Validation, Quality Systems Management, Standard Operating Procedures, and Results Reporting.

Two areas of improvement Maryland could make would be in Environmental Impact Regulations for Cultivation and Manufacturing Operations and COA disclosures for Dispensaries.

Overall, Maryland is taking the steps necessary to ensure that only compliant products reach the shelves. Employee training and the use of standard operating procedures are key elements in providing consistent products that are free from adulteration or contamination. Additionally, product testing requirements aim to ensure that only products that meet the safety standards are on the shelves, and that the products are labeled such that the consumer has full knowledge of the ingredients.

Areas for Improvement:

- Include stronger environmental impact regulations
- Dispensaries should make available the Certificate of Analysis (COA) to patients so that patients can see all the testing themselves.

Appendix 1

MEDICAL CANNABIS EQUITY CHECKLIST

MEDICAL CANNABIS EQUITY CHECKLIST

As evident in this report, throughout the last few years, there has been a trend among states of focusing on recreational cannabis to the detriment of the state's existing medical cannabis program. This comes in a variety of ways - from failing to update or improve the medical program; combining the medical and recreational programs under one state administrator; raising taxes on cannabis products; or failing to supply adequate access to a medical cannabis program, just to name a few.

Recreational adult-use cannabis and medical cannabis are not the same thing. While states are free to regulate the adult-use of cannabis and allow recreational use, that does not mean that millions of patients across the country do not also benefit medically and deserve the rights and protections that come with a medical cannabis program. Medical cannabis was never a "wolf in sheep's clothing" where patients advocated for a medical cannabis program, secretly hoping to turn it into adult-use in the future. While both recreational adult-use laws and medical cannabis laws serve different populations and needs, states can successfully regulate both programs while preserving all of the rights and protections for patients that the medical cannabis program alone affords.

As states move forward with recreational adult-use laws and regulations, some essential provisions must be included in these laws and regulations to ensure that patients remain protected and prioritized.

Below you will find a checklist of essential policies that must be included in recreational adult-use laws and regulations. ASA has provided model legislative language to help make this process easier. While this is a short checklist of essential policies that must be included, this is the minimum, and ASA encourages states to continue amending and improving the medical cannabis program separately. More language to assist with amending medical cannabis language can be found in Universal Improvements.

☐ **Expand Eligibility for All Conditions**

"Qualified medical professional" is any individual authorized in [STATE] to prescribe medications or any other medical professional authorized by the Department to recommend cannabis pursuant to this statute.

"Qualifying medical condition" shall mean any condition for which treatment with medical cannabis would be beneficial, as determined by a patient's qualified medical professional.

☐ **Remove Patient Registration Fees & Allow Multi-Year Registrations**

[STATE REGULATORY AUTHORITY] shall not require a fee or payment for qualified patients to register with [STATE]'s medical cannabis program.

[STATE] medical cannabis patient registrations shall be valid for a period of no less than two years, as determined by [STATE REGULATING AUTHORITY].

☐ Remove Restrictive Caregiver Requirements & Remove Caregiver Registration Fees

Any persons 21 years of age or older may be designated as a caregiver by a medical cannabis patient. [STATE] may not require background or financial checks to determine eligibility of a designated caregiver.

[STATE] medical cannabis caregiver registrations shall be valid for a period of no less than two years, as determined by [STATE REGULATING AUTHORITY].

[STATE REGULATORY AUTHORITY] shall not require a fee or payment for medical cannabis caregivers to register with [STATE]'s medical cannabis program.

☐ Exempt Medical Cannabis Products from Sales and Excise Taxes

Medical cannabis products sold at licensed medical cannabis retailers shall be exempt from state sales and excise taxes.

☐ Exempt Medical Cannabis Supply Chain from Taxes

Licensed medical cannabis cultivators, processors, and manufacturers shall be exempt from state excise and sales tax for activities related to the manufacture, transportation, distribution, or sale of medical cannabis products.

☐ Prioritize Patient Access & Medical Cannabis Product Inventory If Dual Market Licensing is Granted

Licensed cultivators and retailers shall be required to reserve sufficient supply to ensure patient access to product is not interrupted. Licensed medical cannabis retailers shall reserve at least 25% of inventory for patients only. Registered patients shall have access to a patient priority line within a co-located licensed retailer.

☐ Expand and Prioritize Licensing for Medical Cannabis Businesses

[STATE REGULATING AUTHORITY] shall prioritize medical cannabis retail and manufacturing licenses and shall not award recreational adult-use licenses in areas without a medical cannabis facility unless such businesses will serve medical cannabis patients under [STATE]'s medical cannabis law.

☐ Expand Access to Independent Cannabis Testing Laboratories

"Independent testing laboratory" shall mean a private and independent testing facility that tests cannabis and/or cannabis-derived products that are to be sold by a licensed medical cannabis establishment to identify the content of the cannabis or cannabis-derived products, including but not limited to such constitutive elements as cannabinoids, to detect the presence of any pesticides, bacteria, or other contaminants, and/or for other purposes determined by the Department.

Independent testing laboratories in the state may offer testing services to private individuals who cultivate cannabis at home under this law.

☐ **Create Proficiency Testing for Cannabis Testing Laboratories**

"The Department shall develop a proficiency testing program for all cannabis laboratories or testing facilities."

☐ **Provide Full Reciprocity for Out-of-State Patients**

"Nonresident card" means a card or other identification that:
Is issued by a state or jurisdiction other than [STATE]; and Is the functional equivalent of a registration card.

Valid nonresident cards or identification shall be acceptable for use in [STATE]'s medical cannabis program and shall grant the cardholder the right to possess and purchase medical cannabis in the state.

☐ **Allow Home Cultivation for Patients**

Medical cannabis patients and caregivers may cultivate up to 3 mature plants and 3 immature plants at home, with a maximum cap of 12 plants per household.

Personally grown medical cannabis must be cultivated indoors, and must be kept out of reach of anyone under the age of 18, with the exception of minor medical cannabis patients.

☐ **Keep Recreational and Medical Cannabis Separately Regulated by Appropriate Agencies**

[State medical cannabis program name] shall remain under the sole jurisdiction of [current regulatory authority], and functions shall not be transferred to any state agency or sub-agency unless approved by the legislature and such agency or sub-agency's primary function is health or medicine.

-OR-

[State medical cannabis program name] shall not be transferred to [state recreational cannabis regulating authority].

Appendix 2

UNIVERSAL IMPROVEMENTS FOR STATE MEDICAL CANNABIS PROGRAMS

UNIVERSAL IMPROVEMENTS & MODEL LEGISLATION

Despite the fact that each state's medical cannabis law is unique and no universal standard or governmental guidance exists to assist lawmakers, there are a number of common deficiencies across many states. While this list is certainly not exhaustive, ASA offers some universal steps that every state can take to improve their respective programs. For a full look at ASA's State Medical Cannabis Program Model Legislation, please visit: www.safeaccessnow.org/model_state_legislation.

Insurance Coverage

When looking at the 2022 state data in aggregate, the clearest issue among all states is the affordability of medical cannabis. ASA conducted a survey in 2021 revealing that over 70% of medical cannabis patients believe that their medicine is not affordable, with almost a quarter of patients surveyed indicating that their medicine is often so cost prohibitive that they must go without treatment. This year's Gold Standard for Affordability went to Illinois and Virginia, both of which only managed to earn 65% in this category. This is a clear indicator that we have a long way to go when it comes to providing patients with affordable options for accessing medical cannabis. At the forefront of this issue is the unavailability of insurance to cover the cost of the medicine.

Some states have worked to clarify the role of insurance and insurance companies when it comes to medical cannabis. New York has indicated that insurance coverage must apply for visits to physicians' offices relating to medical cannabis, as long as obtaining a recommendation is not the sole reason for the visit. Denial of coverage of visits where medical cannabis is discussed is unlawful under New York State law. However, insurers are currently under no obligation to pay for actual medical cannabis or medical cannabis products. Other states have approved Workers' compensation to cover medical cannabis.

ASA urges all policymakers to work to make medical cannabis affordable in their state by adopting legislation with the following language:

A carrier offering a health plan in this State shall provide coverage for cannabis for medical use for an enrollee who has received certification for the medical use of cannabis from a medical provider under [State Law]

Let Healthcare Practitioners Decide

Too many states limit which patients can qualify for medical cannabis by arbitrarily listing conditions while excluding others. Recommending cannabis for medical purposes should be left to the discretion of physicians and other healthcare providers. Healthcare providers are in the best position to review a patient's medical history, symptoms, and physiological responses to medicine. A patient should not be required to have to try other options first that fail to help them before being recommended cannabis. A healthcare practitioner should be able to recommend medical cannabis as a first level of treatment, simply if they believe their patient will benefit, as is medical practice for other treatment options. ASA urges all policymakers to work to make medical cannabis accessible in their state by adopting legislation with the following language:

"Debilitating medical condition" means:

A. Cancer, glaucoma, positive status for human immunodeficiency virus, acquired immune deficiency syndrome, hepatitis C, amyotrophic lateral sclerosis, Crohn's disease, agitation of Alzheimer's disease, nail-patella syndrome or the treatment of these conditions;

B. A chronic or debilitating disease or medical condition or its treatment that produces acute, chronic or intractable pain;

C. A chronic or debilitating disease or medical condition or its treatment that produces one or more of the following: cachexia or wasting syndrome; severe nausea; seizures, including but not limited to those characteristic of epilepsy; or severe and persistent muscle spasms, including but not limited to those characteristic of multiple sclerosis;

E. Post-traumatic stress disorder;

F. Opioid use disorder or pharmaceutical drug addiction and recovery; or

G. Any other medical condition or its treatment as determined by a physician.

Alternative Accessibility Methods

Prior to 2020, very few states provided alternative accessibility methods, like delivery and curbside pickup, for cannabis patients. During the height of the COVID-19 pandemic, many states rightfully acknowledged that access to medical cannabis was essential for patients and instituted temporary measures. Because these measures work and are so beneficial to patients, many states opted to make these permanent changes to their medical cannabis programs. Now, over 85% of states and territories have implemented at least one permanent alternative accessibility option.

Allowing for delivery of medicine, and an option for curbside pickup, are compassionate and common-sense solutions for patients that are necessary to achieve parity with existing delivery services for patients utilizing prescription or over-the-counter medicine from local pharmacies. Just as with pharmacy delivery models, common-sense regulations and protocols can be, and have successfully been, organized to ensure safety and discretion.

Further, many states choose to give enormous autonomy to local jurisdictions, allowing each town and city to decide whether patients can access medical dispensaries locally. Several problems exist in California, where these local bans on medical cannabis facilities have created large areas where it is extremely difficult for patients to gain access to their treatments. Even in states that do not allow local jurisdiction control, legislation or regulations often arbitrarily limit the number of dispensary licenses, meaning that most patients within the state are required to travel long distances to access medical cannabis. Having a functioning delivery system is critically important to providing patients with medicine, particularly those with medical conditions that impact physical mobility or limit their ability to travel or drive, particularly when a dispensary is not located close by.

Curbside pickup is also critical to patient access, particularly for those whose conditions impact mobility or communication. Many patients will benefit from having the option to place orders through an online portal, allowing dispensary workers to deliver cannabis to their vehicles, while confirming any information the state program requires outside of the dispensary.

For policymakers, allowing for delivery and curbside pickup should be small, common sense steps toward accessibility - but for some patients, this could mean the difference between being able to access their medication or not.

ASA urges all policymakers to work to make medical cannabis accessible in their state by adopting legislation with the following language(note: dispensary is used as a placeholder for how the state defines cannabis businesses):

Definitions

"Delivery" means the transportation of usable marijuana and related supplies to a consumer. "Delivery" also includes the use by a [dispensary] of any third party technology platform to receive, process, and fulfill orders by legal consumers, provided that any physical acts in connection with filling the order and delivery shall be accomplished by an employee of the [dispensary].

"Delivery employee" means an individual employed by a [dispensary] who delivers marijuana and related supplies from the dispensary premises to a legal consumer at a physical address.

"Transport" means the transportation of marijuana from a cultivation, processing, manufacturing or distribution site to a dispensing site approved, and the transportation of marijuana among and between sites, but does not include delivery of marijuana to consumers

Statutory Language

(1) Deliveries and curbside pickup for orders may only be made by a licensed [dispensary].

(2) Deliveries and curbside pickup shall be made only to a legal consumer by an employee of the [dispensary].

(3) A [dispensary] shall not deliver to an address located on land owned by the federal government or any address on land or in a building leased by the federal government.

(4) A [dispensary] shall staff each delivery vehicle with an employee who shall be at least 21 years of age.

(5) Each delivery employee shall carry a copy of the [dispensary] employee identification card. The employee shall present the [dispensary] employee identification card upon request to state and local law enforcement,

employees of regulatory authorities, and other state and local agencies enforcing these rules.

(6) Each delivery employee shall have access to a secure form of communication with the dispensary [dispensary], such as a cellular telephone, at all times that the vehicle contains medicinal marijuana.

(7) A delivery employee, during a delivery, shall maintain a physical or electronic copy of the delivery request and shall make it available upon request of the licensing authority and law enforcement officers.

(8) A delivery vehicle must be equipped with a secure lockbox, container, or cage in a secured cargo area, which shall be used for the sanitary and secure transport of marijuana.

(9) A delivery employee shall not leave cannabis goods in an unattended motor vehicle unless the motor vehicle is locked and equipped with an active vehicle alarm system.

(10) A delivery vehicle shall contain a Global Positioning System (GPS) device for identifying the geographic location of the delivery vehicle. The device shall be either permanently or temporarily affixed to the delivery vehicle while the delivery vehicle is in operation, and the device shall remain active and in the possession of the delivery employee at all times during delivery. At all times, the [dispensary] shall be able to identify the geographic location of all delivery vehicles that are making deliveries for the [dispensary] and shall provide that information to the Division upon request.

(11) A [dispensary]shall, upon request, provide the regulatory authority with information regarding any motor vehicles used for delivery, including the vehicle's make, model, color, Vehicle Identification Number, license plate number and Department of Motor Vehicles' registration.

(12) A [dispensary] shall ensure that vehicles used to deliver cannabis bear no markings that would either identify or indicate that the vehicle is used to deliver marijuana.

(13) A [dispensary] shall ensure that deliveries are completed in a timely and efficient manner.

(14) A [dispensary] delivery employee, while making deliveries, shall not carry cannabis goods valued in excess of $10,000 at any time. This value shall be determined using the current retail price of all cannabis goods carried by the delivery employee.

(15) A delivery employee, while making deliveries, shall only travel from the [dispensary] licensed premises to the delivery address; from one delivery address to another delivery address; or from a delivery address back to the [dispensary]'s licensed premises. A delivery employee shall not deviate from the delivery path described in this section, except in the event of emergency or as necessary for rest, fuel, or vehicle repair stops, or because road conditions make continued use of the route or operation of the vehicle unsafe, impossible, or impracticable.

(16) A [dispensary] shall maintain a record of each delivery of cannabis in a delivery log, which may be written or electronic.

(17) A [dispensary] shall report any vehicle accidents, diversions, losses, or other reportable events that occur during delivery to the appropriate authorities.

(18) A [dispensary] employee shall not consume cannabis goods while delivering cannabis goods to customers.

Civil Rights Protections

While a state may have a functioning medical cannabis program that protects patients from criminal penalties, people may be hesitant to participate in a medical cannabis program if they could lose their housing, jobs, family, or other rights. Every state with a medical cannabis program would be benefited by adopting the below language that relates to the protection of civil rights, as these provisions relieve some of the concerns that patients face when dealing with the implied costs of being a medical cannabis patient

(A) Unless a failure to do so would cause the employer to lose a monetary or licensing-related benefit under federal law or federal regulations, an employer may not discriminate against a person in hiring, termination, or any term or condition of employment, or otherwise penalize a person, based upon either of the following:

1. The person's status as a qualifying patient, caregiver, cardholder, or employee at a cannabis business; or

2. A qualifying patient, caregiver, or cardholder tests positive for cannabis components or metabolites, unless

the individual was impaired by cannabis on the premises of the place of employment or during the hours of employment.

(B) Unless required by federal law or required to obtain federal funding, no landlord may refuse to rent a dwelling unit to a person or take action against a tenant solely on the basis of an individual's status of a qualifying patient or cardholder, or based on any behavior or actions allowed, under this act.

(C) For the purposes of medical care, including organ transplants, a qualifying patient's medical use of cannabis does not constitute the use of an illicit substance or otherwise disqualify a qualifying patient from medical care.

(D) Neither the presence of cannabinoid components or metabolites in a person's bodily fluids, nor conduct related to the medical use of cannabis by a custodial or noncustodial parent, grandparent, pregnant woman, legal guardian, or other person charged with the well-being of a child, shall form any basis for any action or proceeding by a child welfare agency or a family or juvenile court. This subsection shall apply only to conduct in compliance with this chapter.

(E) Health care practitioners shall not disqualify or refuse to provide care for a patient due to positive urinary or blood test results indicating the presence of cannabis or cannabis metabolites including tetrahydrocannabinol, nor shall the presence of compounds of cannabis or cannabis metabolites be a reason for the cessation of care.

(F) A medical cannabis patient or caregiver licensee shall not be denied the right to own, purchase or possess a firearm, ammunition, or firearm accessories based solely on his or her status as a medical cannabis patient or caregiver licensee.

Prioritize Consumer Protections and Product Safety

In regard to Consumer Protection and Product Safety, there are many opportunities for states to make improvements. Quality management systems and staff training alone can help a large number of states increase their ability to provide safe access for patients. Quality management systems are best practices that are put into place that govern how the operator cultivates, manufactures, and tests cannabis products. These are often identified in Standard Operating Procedures (SOPs). Employee training is also a critical aspect in helping to ensure that operations are conducted safely and in a way that will not adulterate or contaminate products. In addition to the training required to perform their job, ASA urges all companies to provide training on cannabinoids and terpenes, product dosing, and methods of administration.

ASA also encourages that all operators, not just dispensaries, be required to have policies and procedures for the receipt of complaints and adverse events and be prepared to conduct a recall. Many states have recall requirements. However, a large number fail to include complaints and adverse events. Lastly, states should put a greater focus on creating and maintaining environmental impact regulations. These regulations range from sustainable cultivation practices and utilizing alternative energy sources to reducing the amount of plastic in packaging and having recycling programs for vaporizer batteries.

Consumer Protection & Product Safety Recommendation: Track-and-Trace

In 2011, Colorado led the development of the first seed-to-sale system (also known as "track-and-trace") to help identify and track legal cannabis products. Since then, over 30 states require a centralized seed-to-sale solution to create a closed-loop system for legal cannabis, improve product and patient safety, and ensure proper tax compliance.

Seed-to-sale systems provide a secure and credible regulatory structure for cannabis, as called for in the original Cole Memo. They create a level playing field for businesses by increasing transparency, helping prevent the diversion of products, and making it more difficult for bad actors to evade patient protections and regulatory oversight.

Furthermore, these systems support patient and public safety by tracking products to their origin and destination in case of recalls, ensuring third-party laboratory test results are linked to final products, and preventing any products that fail testing from moving through the supply chain – aspects that directly support ASA's Patient Focused Certification (PFC) standards.

Finally, they promote tax compliance from licensed businesses, validating the funding source for many state programs that are often used for medical research studies.

Track-and-trace requirements vary among states. ASA has identified five aspects that should be included in track-and-trace policies. These include:

- **Closed Loop System:** All cannabis licensees report to the same system, under the same rules, to ensure all information is uniform and found in one place.

- **Individual Plant Tags:** All licensees producing cannabis and cannabis products must affix one tag to every plant or product. The tag and tag number must remain affiliated with the product as it passes through the supply chain.

- **Required Use by All Licensees:** Track-and-trace requirements must apply to all cannabis licensees in the state to ensure proper seed-to-sale oversight of products.

- **Track-and-Trace in State Law or Regulation:** This language must be codified into state law or addressed during the rulemaking process.

- **Require Testing Laboratory Reporting:** Cannabis testing laboratories are an important part of seed-to-sale tracking and must be required to report information to the track-and-trace system.

Further Recommendations

ASA strongly recommends all states develop strong seed-to-sale language to help ensure that patients remain safe, and the regulated market remains secure, by adopting legislation that includes the following language:

Statutory Language

The Agency shall promulgate rules and issue regulations necessary for the implementation and enforcement of this Act. The rules shall include a statewide seed-to-sale tracking system that tracks legal cannabis throughout the supply chain from either the seed or immature plant stage until the cannabis, cannabis product, or cannabis-infused product is sold to a patient to ensure that no cannabis, cannabis products or cannabis-infused products are sold or otherwise transferred except as authorized by law and to aid the Agency in ensuring compliance with this Act and the rules promulgated by the Agency. The rules and regulations pertaining to a seed-to-sale tracking system shall at a minimum include:

1. Designation of a single, statewide seed-to-sale platform for plant-and product-compliance reporting by licensed cannabis businesses;

2. Mandatory compliance with the designated seed-to-sale tracking system by all licensed cannabis businesses and establishment of fines, fees, and penalties for non-compliance;

3. Mandatory compliance with the designated seed-to-sale system for cannabis Testing Labs to ensure testing results and/or certificates of analysis are reported directly to the seed-to-sale tracking system;

4. Requiring the use of unique identification tags that are to be affixed to product packages and individual plants for the purpose of identifying legal cannabis and related records;

5. Requiring that records entered into the seed-to-sale tracking system shall include each day's beginning inventory, harvests, acquisitions, sales, disbursements, remediations, disposals, transfers, ending inventory, test results, and any other data necessary for inventory control records in the statewide seed-to-sale tracking system;

6. Requiring that each licensed cannabis business be responsible for ensuring that all cannabis sold or disbursed to a registered qualifying patient or registered designated caregiver is recorded in the seed-to-sale tracking system as a purchase by or on behalf of the applicable registered qualifying patients;

7. Maintaining the confidentiality of all patient and caregiver data and records accessed or stored by the system such that all persons or entities other than the Agency may only access the information in the system that they are authorized by law to access;

8. Providing the Agency with access to all inventory records stored in the system's database and producing analytical reports to the Agency regarding records entered into the seed-to-sale tracking system.

Increasing Cannabis Education

Education for healthcare providers as well as staff at medical cannabis businesses is not required in every state. Having strong training programs mandated or accessible improves the overall understanding of cannabis as a medicine. ASA urges lawmakers to adopt education standards by partnering with ASA's Patient Focused Certification (PFC) and Cannabis Care Certification (CCC) programs.

Patient Focused Certification Compliance Program

Since the release of the American Herbal Products Association (AHPA) and American Herbal Pharmacopoeia (AHP) guidelines, more than 16 states have used them as legislative and regulatory tools to create comprehensive product safety rules and regulations. However, these new regulations will only be effective with proper oversight and enforcement. To aid government agencies in these efforts, Americans for Safe Access (ASA) created the Patient Focused Certification (PFC) program. PFC is a non-profit, third-party certification and training program for the cannabis industry and the nation's only certification program for the AHPA and AHP standards.

As with other industries, oversight of cannabis and cannabis products are constantly evolving. PFC verifies compliance with state and local laws as well as the AHPA and AHP standards. PFC is similar to other nationally recognized certification programs, including United States Pharmacopeia (USP), Good Housekeeping, NSF International, and the International Organization for Standardization (ISO). In 2021, PFC achieve accreditation to the ISO/IEC 17065:2012 (Certificate #5284.01) standard for certifying bodies, making it the first and only compliance program to obtain this international accreditation in the cannabis and hemp industries. PFC also has a partnership with the leading ISO accreditation body in the United States, the American Association for Laboratory Accreditation (A2LA), to conduct dual PFC and ISO/IEC 17025 accreditations.

Patient Focused Certification Training Program

The Patient Focused Certification (PFC) training program prepares individuals to understand state and local regulations and to learn required safety and operational protocols while teaching them the basics of cannabis as medicine and common therapeutic uses of cannabis. PFC trainings are available to anyone interested in learning more about medical cannabis. Training is available from single-discipline certification to multi-discipline certification in: Cultivation, Manufacturing, Distribution, and Laboratory. Trainings are available online.

Cannabis Care Certification Education Program

The Cannabis Care Certification program offers patient and caregiver education as well as continuing medical education (CME) credits for medical professionals through our partnership with The Answer Page, Inc. (TAP). The medical professional course offering created for medical professionals was approved under the latest rules for dealing with controversial subjects in CME programs and provides physicians, pharmacists, nurse practitioners, nurses, and psychologists with the highest quality peer-reviewed and accredited educational content focused on medical marijuana and the endocannabinoid system. The content provides Accreditation Council for Continuing Medical Education (ACCME), Accreditation Council for Pharmacy Education (ACPE), American Academy of Nurse Practitioners (AANP), American Nurses Credentialing Center (ANCC), and American Psychological Association (APA) credits.

For more information on PFC and CCC, visit www.PatientFocusedCertification.org and www.CannabisCareCertification.org.

ASA State Medical Cannabis Program Model Legislation

For further policy recommendations and the full text of ASA's model state legislation, please visit www.safeaccessnow.org/model_state_legislation.

Americans for Safe Access
Advancing Legal Medical Marijuana Therapeutics and Research
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Appendix 3

STATE GOVERNMENT'S ROLE IN ENDING FEDERAL PROHIBITION

STATE GOVERNMENTS' ROLE IN ENDING FEDERAL PROHIBITION

While states continue to develop policy, one critical piece of the legislative puzzle is missing: the role of the federal government. Over the last few years, interest in federal reform has grown exponentially, with dozens of lawmakers introducing solutions to resolve the federal-state conflict of cannabis laws. While many of these bills focus on important topics like criminal justice reform and descheduling cannabis, very few envision any regulatory role for the federal government. As federal lawmakers grapple with cannabis proposals, it is critical that state governments demand federal participation that is effective and provides for safe cannabis without being overly burdensome on existing state regulatory frameworks.

For 25 years, state governments have implemented medical cannabis laws despite federal prohibition. At the beginning of this experiment, the clash in laws meant navigating paramilitary raids on medical cannabis patients and their providers, fighting subpoenas of patient records, and finding creative ways to create business licensing infrastructures. It has also meant that states have had to silo these businesses from other industries and have had to use state resources to create product safety standards, testing protocols, and agricultural guidance.

In 2014, Americans for Safe Access successfully passed the Medical Cannabis amendment to the Commerce-Justice-Science (CJS) budget restricting the Department of Justice (DOJ) from targeting state employees, patients and cannabis providers from arrest and prosecution (which has been included in the budget bill every year since). Today, 38 states, the District of Columbia and 4 of the 5 territories have created medical cannabis programs. The federal prohibition continues to create a burden for states, patients, and businesses providing medical cannabis.

As illustrated in the report, many states have worked diligently to pass laws and regulations to improve the lives of medical cannabis patients. However, until the federal prohibition of medical cannabis is overturned, states can only do so much. Today over 45 countries have passed federal medical cannabis laws, and the UN has rescheduled cannabis allowing for its medical use internationally. National support for medical cannabis is over 90%, and we need state governments' engagement to make changing federal law a priority for Congress.

Federal Medical Cannabis Laws and the Impact on State Programs

Impact on Patients: The federal prohibition of medical cannabis categorizes those who need these treatments as second-class US citizens. These patients are not only left out of essential safety net programs such as federal housing or use of VA health services but also have issues traveling in the US, drug testing in their workplace, and out-of-pocket costs for healthcare and treatments. For the nearly 9 million Americans working for the federal government, these treatments are not even an option, no matter what state they live in.

Furthermore, patients must bear the cost of state-siloed supply chains and absorbent federal taxes put on cannabis businesses as they trickle down to the consumer. Patients are also stuck in stymied compassionate use programs, waiting for the government and cannabis businesses to create standardized, evidence-based medications they can depend on being in supply.

Impact on the States: Historically, states have incubated many new policies, such as healthcare models and clean air legislation, but in order for these policy platforms to reach their potential, there is a point when they must be adopted into federal policy. That time has come for medical cannabis policy. Over the past 25 years, states have shouldered the burden of figuring out how to regulate cannabis. However, federal prohibition makes sharing this work across state lines, utilizing resources from other established industries, and facilitating support with supply shortages difficult, if not impossible.

States must also shoulder the burden of their residents that are left out of federal programs due to their medical cannabis use, such as federal housing, VA programs, and even attendance in school. Not to mention the missed work days, prescription costs, and even deaths of their residents left out of their medical cannabis programs due to federal employment and drug testing. States must disproportionately deal with banking issues, using state policing and emergency services to deal with robberies and finding solutions for cannabis businesses to pay taxes in cash.

Impact on Businesses: While it is true that cannabis businesses have risen to meet supply demands for state-based medical cannabis programs needs to the best of

their ability, federal prohibition puts unneeded burdens on their daily operations and business plans. Strained supply chains, banking and taxing issues, constraints on research, and robberies are issues that these businesses have to deal with on a daily basis. The lack of predictability in operations means they have very little funds to focus on product development and must pass down the financial burden on to consumers, i.e patients.

Functional View of Medical Cannabis Programs in a Post-Prohibition Environment

For the most part the day-to-day experience of medical cannabis programs would stay the same. The most immediate change would be felt by the patient population. Patients would be able to travel to see loved ones, instead of having to choose between their medicine and federal support or employment in the private or public sector, they would see a drop in the cost of their medication, and they would be able to integrate their medical cannabis treatments into their existing medical care.

Comprehensive legislation would include 2 major elements: 1) Changing the schedule of cannabis into a newly created schedule (Schedule VI) and 2) the creation of the Office of Medical Cannabis and Cannabinoid Control (OMCCC). Today, effective federal regulation of cannabis is strained by nearly a dozen agencies playing a role in the policy decision-making process. The OMCCCwould create a central authority within the U.S. Government to work with state governments to regulate medical cannabis.

All cannabis-based licensing and oversight would be moved under this agency, allowing the OMCCC to coordinate directly with state licensing agencies and streamline federal oversight. An example of this would be the DEA cultivation and manufacturing licenses–the OMCCC would have control over these licenses and could work directly with states to grandfather state licensing into a similar program and coordinate on future licenses. Dispensaries and retail locations would receive specialty pharmacy licenses.

We are calling on state legislators and offices of the governors to join us in demanding a change in federal law. Please consider introducing and passing the "Equity for Medical Cannabis Patients Resolution." Below you will find a draft of the resolution and information on getting additional resources and support for its passage.

Draft Equity for Medical Cannabis Patients Resolution

Expressing the sense of the people of ***[State]*** *that a new federal agency, the Office of Medical Cannabis and Cannabinoid Control, would be beneficial to public and individual health.*

Whereas *there are over six million medical cannabis patients and over 20,000 cannabis businesses in the United States;*

Whereas *thirty-eight states, the District of Columbia, and four of five U.S. territories have comprehensive medical cannabis legislation, with an additional ten states having cannabidiol legislation;*

Whereas *oversight authority of medical cannabis has been handled on the state and local level, rather than through the federal government, putting the United States at odds with the 1961 Single Convention on Narcotic Drugs, as amended by the 1972 Protocol, which requires a singular medical cannabis oversight body under Article 28;*

Whereas *in 2020, the United Nations reclassified cannabis recognizing its medical benefits;*

Whereas *the United States and its territories have created a patchwork of licensing, regulation, and enforcement laws that lack uniformity;*

Whereas *local level oversight of medical cannabis has led to greatly differing regulations on product safety, laboratory operations, taxation, pesticide use, civil rights, and other areas where federal guidance exists in other industries;*

Whereas *current federal oversight from the Drug Enforcement Administration (DEA) and the National Institute on Drug Abuse focuses on punitive measures and the harms of cannabis, rather than the expansion of therapeutic outcomes, which is inconsistent with the World Health Organization's (WHO) recommendations;*

Whereas *the 2018 Farm Bill has created and unregulated class of cannabinoid products;*

Whereas *on January 26, 2023 the Food and Drug Administration (FDA) concluded that current frameworks will not work for regulating Cannabidiol (CBD) and has called on Congress to create a new framework;*

Whereas *on October 6, 2022, the White House issued a statement calling for "the Secretary of Health and Human Services and the Attorney General to initiate the administrative process to review expeditiously how marijuana is scheduled under federal law";*

Whereas *Schedule I researchers in our State who do obtain the proper license may be forced to import cannabis from other countries or obtain cannabis that does not mirror what is otherwise available in* ***[State's]*** *markets to patients;*

Whereas *administrators of most federal agencies have called on Congress to resolve the conflict between state and federal laws and* ***[State]*** *is ready to work with all relevant Federal agencies; and*

Whereas *research in the Journal of the American Medical Association has shown cannabis can play a critical role in reducing opioid overdose deaths, up to 25%, when compared to states without medical cannabis programs, and cannabis is widely used for alleviating the symptoms of numerous other medical conditions.*

Therefore, be it Resolved by the people of ***[State]*** *that it is the sense of* ***[State]*** *that Congress should immediately pass legislation to end the federal prohibition on medical cannabis and create a new federal agency for the regulation of medical cannabis and cannabinoids.*

Be it further resolved that as the federal government develops regulations for medical cannabis it should build on the existing framework created by various states with robust programs and work with states to develop federal product safety standards which shall act as the minimum allowing states to set more stringent standards.

For further insight into what a Federal regulatory framework might look like, please visit: www.safeaccessnow.org/model_federal_legislation.

Additional Support Available

If you are interested in passing the Equity for Medical Cannabis Patient Resolution, please contact us at info@safeaccessnow.org.

ASA has prepared fact sheets, talking points, and materials detailing the issues facing state programs and a deep dive into functional post-prohibition governance of medical cannabis laws. ASA can also provide strategic support.

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The GMP Collective

A huge thank you to The GMP Collective who donated their time to help us score the Consumer Protection and Product Safety categories of the 2022 report. The GMP Collective is a consulting firm with a mission to bring credibility to the industry through ensuring the quality, compliance, and safety of cannabis and cannabinoid products.

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Janice Hoffmann

Stephanie Kahn - Takoma Wellness

Nikki Lawley - Nikki and the Plant

Dr. Carla Rossotti Vázquez

StreetPulse

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