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SENATE STATE OF MINNESOTA NINETY-SECOND SESSION

S.F. No. 3089

(SENATE AUTH	IORS: BIGH	IAM)
DATE 02/14/2022	D-PG 4986	OFFICIAL STATUS Introduction and first reading Referred to Health and Human Services Finance and Policy

1.1	A bill for an act
1.2 1.3 1.4 1.5	relating to health care; modifying the time period in which a patient in the medical cannabis program must resubmit a qualifying medical condition certification; amending Minnesota Statutes 2021 Supplement, sections 152.27, subdivision 3; 152.28, subdivision 1.
1.6	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.7	Section 1. Minnesota Statutes 2021 Supplement, section 152.27, subdivision 3, is amended
1.8	to read:
1.9	Subd. 3. Patient application. (a) The commissioner shall develop a patient application
1.10	for enrollment into the registry program. The application shall be available to the patient
1.11	and given to health care practitioners in the state who are eligible to serve as health care
1.12	practitioners. The application must include:
1.13	(1) the name, mailing address, and date of birth of the patient;
1.14	(2) the name, mailing address, and telephone number of the patient's health care
1.15	practitioner;
1.16	(3) the name, mailing address, and date of birth of the patient's designated caregiver, if
1.17	any, or the patient's parent, legal guardian, or spouse if the parent, legal guardian, or spouse
1.18	will be acting as a caregiver;
1.19	(4) a copy of the certification from the patient's health care practitioner that is dated
1.20	within 90 days prior to submitting the application that certifies that the patient has been
1.21	diagnosed with a qualifying medical condition; and

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2.1 (5) all other signed affidavits and enrollment forms required by the commissioner under
2.2 sections 152.22 to 152.37, including, but not limited to, the disclosure form required under
2.3 paragraph (c).

(b) The commissioner shall require a patient to resubmit a copy of the certification from
the patient's health care practitioner on a <u>yearly biennial</u> basis and shall require that the
recertification be dated within 90 days of submission.

2.7 (c) The commissioner shall develop a disclosure form and require, as a condition of
2.8 enrollment, all patients to sign a copy of the disclosure. The disclosure must include:

(1) a statement that, notwithstanding any law to the contrary, the commissioner, or an
employee of any state agency, may not be held civilly or criminally liable for any injury,
loss of property, personal injury, or death caused by any act or omission while acting within
the scope of office or employment under sections 152.22 to 152.37; and

2.13 (2) the patient's acknowledgment that enrollment in the patient registry program is
2.14 conditional on the patient's agreement to meet all of the requirements of sections 152.22 to
2.15 152.37.

2.16 Sec. 2. Minnesota Statutes 2021 Supplement, section 152.28, subdivision 1, is amended
2.17 to read:

2.18 Subdivision 1. Health care practitioner duties. (a) Prior to a patient's enrollment in
2.19 the registry program, a health care practitioner shall:

(1) determine, in the health care practitioner's medical judgment, whether a patient suffers
from a qualifying medical condition, and, if so determined, provide the patient with a
certification of that diagnosis;

2.23 (2) advise patients, registered designated caregivers, and parents, legal guardians, or
2.24 spouses who are acting as caregivers of the existence of any nonprofit patient support groups
2.25 or organizations;

(3) provide explanatory information from the commissioner to patients with qualifying
medical conditions, including disclosure to all patients about the experimental nature of
therapeutic use of medical cannabis; the possible risks, benefits, and side effects of the
proposed treatment; the application and other materials from the commissioner; and provide
patients with the Tennessen warning as required by section 13.04, subdivision 2; and

2.31 (4) agree to continue treatment of the patient's qualifying medical condition and report2.32 medical findings to the commissioner.

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3.1	(b) Upon notification from the commissioner of the patient's enrollment in the registry
3.2	program, the health care practitioner shall:
3.3	(1) participate in the patient registry reporting system under the guidance and supervision
3.4	of the commissioner;
3.5	(2) report health records of the patient throughout the ongoing treatment of the patient
3.6	to the commissioner in a manner determined by the commissioner and in accordance with
3.7	subdivision 2;
3.8	(3) determine, on a yearly biennial basis, if the patient continues to suffer from a
3.9	qualifying medical condition and, if so, issue the patient a new certification of that diagnosis;
3.10	and
3.11	(4) otherwise comply with all requirements developed by the commissioner.
3.12	(c) A health care practitioner may conduct a patient assessment to issue a recertification
3.13	as required under paragraph (b), clause (3), via telehealth, as defined in section 62A.673,
3.14	subdivision 2.
3.15	(d) Nothing in this section requires a health care practitioner to participate in the registry

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3.16 program.