

**SENATE  
STATE OF MINNESOTA  
NINETIETH SESSION**

**S.F. No. 3822**

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DATE  
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OFFICIAL STATUS  
Introduction and first reading  
Referred to Health and Human Services Finance and Policy

1.1 A bill for an act  
1.2 relating to health; modifying the maximum supply of medical cannabis that may  
1.3 be distributed to patients; amending Minnesota Statutes 2016, section 152.29,  
1.4 subdivision 3.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2016, section 152.29, subdivision 3, is amended to read:

1.7 Subd. 3. **Manufacturer; distribution.** (a) A manufacturer shall require that employees  
1.8 licensed as pharmacists pursuant to chapter 151 be the only employees to give final approval  
1.9 for the distribution of medical cannabis to a patient.

1.10 (b) A manufacturer may dispense medical cannabis products, whether or not the products  
1.11 have been manufactured by the manufacturer, but is not required to dispense medical cannabis  
1.12 products.

1.13 (c) Prior to distribution of any medical cannabis, the manufacturer shall:

1.14 (1) verify that the manufacturer has received the registry verification from the  
1.15 commissioner for that individual patient;

1.16 (2) verify that the person requesting the distribution of medical cannabis is the patient,  
1.17 the patient's registered designated caregiver, or the patient's parent or legal guardian listed  
1.18 in the registry verification using the procedures described in section 152.11, subdivision  
1.19 2d;

1.20 (3) assign a tracking number to any medical cannabis distributed from the manufacturer;

1.21 (4) ensure that any employee of the manufacturer licensed as a pharmacist pursuant to  
1.22 chapter 151 has consulted with the patient to determine the proper dosage for the individual

2.1 patient after reviewing the ranges of chemical compositions of the medical cannabis and  
2.2 the ranges of proper dosages reported by the commissioner. For purposes of this clause, a  
2.3 consultation may be conducted remotely using a videoconference, so long as the employee  
2.4 providing the consultation is able to confirm the identity of the patient, the consultation  
2.5 occurs while the patient is at a distribution facility, and the consultation adheres to patient  
2.6 privacy requirements that apply to health care services delivered through telemedicine;

2.7 (5) properly package medical cannabis in compliance with the United States Poison  
2.8 Prevention Packing Act regarding child-resistant packaging and exemptions for packaging  
2.9 for elderly patients, and label distributed medical cannabis with a list of all active ingredients  
2.10 and individually identifying information, including:

2.11 (i) the patient's name and date of birth;

2.12 (ii) the name and date of birth of the patient's registered designated caregiver or, if listed  
2.13 on the registry verification, the name of the patient's parent or legal guardian, if applicable;

2.14 (iii) the patient's registry identification number;

2.15 (iv) the chemical composition of the medical cannabis; and

2.16 (v) the dosage; and

2.17 (6) ensure that the medical cannabis distributed contains a maximum of a ~~30-day~~ 120-day  
2.18 supply of the dosage determined for that patient.

2.19 (d) A manufacturer shall require any employee of the manufacturer who is transporting  
2.20 medical cannabis or medical cannabis products to a distribution facility to carry identification  
2.21 showing that the person is an employee of the manufacturer.