

Report Summary of Utah's 2017 Medical Cannabis Bills

Using a rubric provided by Americans for Safe Access, TRUCE has analyzed the three medical cannabis access bills that have been working their way towards legislative review so far. In the interest of fairness and transparency, we have also evaluated and graded the bill presented by Senator Mark Madsen, in its first iteration, during the 2016 legislative session. For purposes of this report, we are not evaluating the two bills that deal only with research for medical cannabis as the evaluation rubric for them would need to be significantly different given their scope and intent.

The grading system itself is in-depth and detailed, including 62 separate points of consideration, but a basic breakdown of the various issues that are taken into account in the final scores are provided in this report summary. Each score is a percentage of total points possible in each area of consideration. The more detailed report can be found further down in this document.

I. Patient Rights and Civil Protection From Discrimination

In this section, we evaluate how each bill goes about protecting patients from arrest, DUI prosecution, employment and housing discrimination, how they handle reciprocity with other states, child custody protections, and various other legal protections. The scores for each bill in this section are as follows:

Daw 35%; Vickers 5%; Froerer 30%; Madsen 75%.

II. Access to Medicine

This section evaluates patients' ability to access medicine at dispensaries or via cultivation. It looks at a bill's handling of distribution programs, access to whole plant, home delivery, sales tax, the number of dispensaries allowed statewide, home grow, labor standards, environmental impact, the various forms of ingestion allowed, limits or bans on THC content, local zoning restrictions, and medical card requirements and cost. The scores for each bill in this section are as follows:

Daw 5%; Vickers 6%; Froerer 15%; Madsen 47%.

III. Ease of Navigation

In this section, we consider how a bill addresses the issues of adding new conditions to an existing list of qualifying patient conditions, reasonable access for patients who are minors, caregivers' access, the formation of an advisory board that consists of patients and practitioners, multi-year registration, reasonable physician requirements, and whether or not the proposed law classifies cannabis as a medicine of last resort. The scores for each bill in this section are as follows:

Daw 14%; Vickers 14%; Froerer 18%; Madsen 96%.

IV. Functionality

Here, we look into whether a bill presents any significant built-in administrative or supply problems, what legal protections are afforded physicians who recommend medical cannabis to their patients, and whether or not the medicine can be covered by insurance or state-assisted healthcare. We also look for reasonable possession and purchase quantity limits. The scores for each bill in this section are as follows:

Daw 1%; Vickers 7%; Froerer 13%; Madsen 26%.

V. Safety, Training, and Testing Requirements

This section evaluates how a bill addresses the training and qualifications of dispensary employees, facility safety and sanitation conditions, storage and labeling protocols, and how recalls or adverse events are to be handled within the local industry. We consider product testing and quality assurance requirements, product tracking, waste management, and water management protocols. Additionally, we look at cultivation process considerations, including pesticide use or limitations, facility Standard Operating Procedures requirements, and disclosure requirements for product quality tests. The scores for each bill in this section are as follows:

Daw 23%; Vickers 32%; Froerer 33%; Madsen 45%.

VI. Laboratory Operations

In this final section, we examine how a bill approaches the issues of staff qualifications and training requirements for laboratory testing facilities, the implementation of standardized methods of testing, whether or not lab facilities are required to disclose their testing methods, and whether cultivators and manufacturers will be permitted to test their own products in house to verify quality, safety, and labeling accuracy without third party testing. The scores for each bill in this section are as follows:

Daw 20%; Vickers 28%; Froerer 28%; Madsen 36%.

The final, overall scores for each bill are 15% for Daw's bill, 13% for Vickers', 22% for Froerer's, and 54% for Madsen's. These scores, particularly those for the bills moving forward for legislative consideration this coming session, are alarming, to say the least. We feel that these bills are severely lacking in all respects and would place such a severe burden upon patients, caregivers, physicians, law enforcement, and any future local cannabis industry, as to nearly, if not entirely, defeat their potential benefits.

We hope that the legislators proposing these bills, and their peers who will be considering them and voting on them, will be mindful of the many patients across Utah who are in dire need of serious, effective, and responsible legislation on the issue of medical cannabis. Bills as insufficient and lacking as those heading into the 2017 Legislative Session show the glaring deficiency in our state legislature's understanding of cannabis and the plight of patients in our state. TRUCE will continue its efforts to educate the community and endeavor to end the stigmatization and misinformation surrounding the cannabis plant and its incredible potential for good.

2017 Utah Medical Cannabis Bills Report

*Mark Madsen	Brad Daw	Gage Froerer	Evan Vickers
Overall Bill Scores:			
54%	15%	22%	13%

Total Points Possible
460

Individual Section Scores:						
#	75%	35%	30%	5%		
					I. PATIENT RIGHTS AND CIVIL PROTECTION FROM DISCRIMINATION	100
1	40	35	0	0	Arrest Protection	40
2	15	0	10	0	Affirmative Defense	15
3	10	0	10	5	Child Custody Protections	10
4	2	0	5	0	DUI Protections	5
5	3	0	0	0	Employment Protections	5
6	0	0	0	0	Explicit Privacy Standards	7
7	0	0	0	0	Housing Protections	5
8	5	0	5	0	Does Not Create New Criminal Penalties For Patients	5
9	0	0	0	0	Organ Transplants	5
10	0	0	0	0	Reciprocity	3
					II. ACCESS TO MEDICINE	110
	47%	5%	15%	6%		
11	15	0	0	0	Allows Access To Dried Flowers	15
12	0	0	0	0	Allows Delivery	5
13	5	5	5	5	No Sales Tax Or Reasonable Sales Tax	5
14	3	0	0	0	Allows For A Reasonable Number Of Dispensaries	5
15	1	0	1	1	Does Not Require Vertical Integration	2
16	1	0	0	0	Ownership/Employment Restrictions	2
17	0	0	0	0	Provisions For Labor Standards	2
18	1	0	0	0	Environmental Impact Regulations	2
19	1	0	1	1	Choice Of Dispensary Without Restrictions	2
20	0	0	0	0	Personal Cultivation	15
21	0	0	0	0	Collective Gardening	5
22	0	0	0	0	Explicit Right to Edibles/Concentrates/Other Forms	10
23	5	0	0	0	Does Not Impose Limits Or Bans On THC	10
24	10	0	0	0	Does Not Impose Minimum CBD Requirements	10
25	5	0	10	0	Local Bans/Zoning	10
25b	5	0	0	0	Medical Card background requirements and costs	10

	96%	14%	18%	14%	III. EASE OF NAVIGATION	50
26	10	0	0	0	Adding New Conditions	10
27	10	0	0	0	Reasonable Access For Minors	10
28	4	0	2	1	Reasonable Caregiver Background Check Requirements	4
29	2	1	1	1	Number Of Caregivers	2
30	1	1	1	0	Patient/Practitioner-Focused Task Force Or Advisory Board	2
31	10	0	0	0	Reasonable Fees (Patients & Caregivers)	10
32	2	0	0	0	Allows Multiple Year Registrations	2
33	4	0	0	0	Reasonable Physician Requirements	5
34	5	5	5	5	Does Not Classify Cannabis As A Medicine Of Last Resort	5

	26%	1%	13%	7%	IV. FUNCTIONALITY	100
35	0	0	0	0	Patient Access to Medicine From Multiple Sources (Personal/Communal Cultivation in Addition to Dispensary)	50
36	7	0	0	0	No Significant Administrative Or Supply Problems	15
37	8	1	0	0	Patients Can Receive Legal Protections Within Reasonable Time Frame Of Doctors' Recommendation	10
38	3	0	5	2	Reasonable Possession Limit	5
39	5	0	5	2	Reasonable Purchase Limits	5
40	3	0	3	3	Allows Patients To Medicate Where They Choose	5
41	0	0	0	0	Covered By Insurance/State Health Aide	3
42	0	0	0	0	Financial Hardship (Fee Waivers/Discount Medicine)	7

	45%	23%	33%	32%	V. SAFETY, TRAINING, & TESTING REQUIREMENTS	75
	27%	0%	13%	13%	Part A. Consumer Safety & Provider Requirements	15
43	2	0	0	0	Staff Training (Provider)	5
44	2	0	2	2	Standard Operating Procedures And Protocols (Dispensaries)	5
45	0	0	0	0	Recall protocol and adverse event reporting (Dispensaries)	5

	76%	44%	56%	56%	Part B. Growing & Cultivation	25
46	5	4	5	5	Product labeling (Original Source)	5
47	5	2	5	5	Required Testing -- (Required Testing Records And/Or Testing If They Are Repackaging Or Processing)	5
48	2	0	0	0	Staff Training (Cultivator)	5
49	2	0	0	0	Standard Operating Procedures And Protocols (Cultivator)	5
50	5	5	4	4	Pesticide Guidance And Protocols - (Pesticide Guidance And Disclosure/Labeling)	5

	29%	17%	23%	20%	Part C. Product Safety -- Cultivators & Manufacturer	35
51	2	2	3	0	Required Testing (Cultivators)	5
52	0	0	0	0	Recall protocol and adverse event reporting (Cultivators)	5
53	2	0	0	0	Staff Training (Manufacturer)	5

54	2	0	0	0	Standard Operating Procedures and Protocols (Manufacturer)	5
55	2	2	5	5	Product Labeling (Manufactured Products)	5
56	2	2	0	2	Required Testing (Manufacturers)	5
57	0	0	0	0	Recall Protocol And Adverse Event Reporting (Manufacturer)	5

	36%	20%	28%	28%	VI. LABORATORY OPERATIONS	25
58	2	0	0	0	Staff Training	5
59	0	0	0	0	Method Validation In Accordance With AHP Guidelines	5
60	0	0	0	0	Result Reporting	5
61	5	3	5	5	Independent Or Third Party	5
62	2	2	2	2	Standard Operating Procedures And Protocols	5

* TRUCE evaluated Senator Madsen's 2016 Medical Cannabis bill (what eventually became known as SB 73) in its original form, before any amendments were made during the 2016 General Legislative Session.