



House of Representatives

General Assembly

File No. 617

January Session, 2019

Substitute House Bill No. 7287

House of Representatives, April 11, 2019

The Committee on General Law reported through REP. D'AGOSTINO of the 91st Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING REVISIONS TO THE MEDICAL MARIJUANA PROGRAM.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subdivision (3) of section 21a-408 of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective from*
3 *passage*):

4 (3) "Debilitating medical condition" means (A) cancer, glaucoma,
5 positive status for human immunodeficiency virus or acquired
6 immune deficiency syndrome, Parkinson's disease, multiple sclerosis,
7 damage to the nervous tissue of the spinal cord with objective
8 neurological indication of intractable spasticity, epilepsy or
9 uncontrolled intractable seizure disorder, cachexia, wasting syndrome,
10 Crohn's disease, posttraumatic stress disorder, irreversible spinal cord
11 injury with objective neurological indication of intractable spasticity,
12 cerebral palsy, cystic fibrosis, [or] terminal illness requiring end-of-life
13 care or opioid use disorder, except, if the qualifying patient is under
14 eighteen years of age, "debilitating medical condition" means terminal

15 illness requiring end-of-life care, irreversible spinal cord injury with
16 objective neurological indication of intractable spasticity, cerebral
17 palsy, cystic fibrosis, severe epilepsy or uncontrolled intractable
18 seizure disorder, or (B) any medical condition, medical treatment or
19 disease approved for qualifying patients by the Department of
20 Consumer Protection pursuant to regulations adopted under section
21 21a-408m;

22 Sec. 2. Subsection (a) of section 21a-408d of the general statutes is
23 repealed and the following is substituted in lieu thereof (*Effective from*
24 *passage*):

25 (a) Each qualifying patient who is issued a written certification for
26 the palliative use of marijuana under subdivision (1) of subsection (a)
27 of section 21a-408a, and the primary caregiver of such qualifying
28 patient, shall register with the Department of Consumer Protection.
29 Such registration shall be effective from the date the Department of
30 Consumer Protection issues a certificate of registration until the
31 expiration of the written certification issued by the physician or
32 advanced practice registered nurse. The qualifying patient and the
33 primary caregiver shall provide sufficient identifying information, as
34 determined by the department, to establish the personal identity of the
35 qualifying patient and the primary caregiver. If the qualifying patient
36 is under eighteen years of age and not an emancipated minor, the
37 custodial parent, guardian or other person having legal custody of the
38 qualifying patient shall also provide a letter from both the qualifying
39 patient's primary care provider and a physician who is board certified
40 in an area of medicine involved in the treatment of the debilitating
41 condition for which the qualifying patient was certified that confirms
42 that the palliative use of marijuana is in the best interest of the
43 qualifying patient. A physician may issue a written certification for the
44 palliative use of marijuana by a qualifying patient who is under
45 eighteen years of age, provided such written certification shall not be
46 for marijuana in a dosage form that requires that the marijuana be
47 smoked, inhaled or vaporized. The qualifying patient or the primary
48 caregiver shall report any change in the identifying information to the

49 department not later than five business days after such change. The
 50 department shall issue a registration certificate to the qualifying
 51 patient and to the primary caregiver [and may charge a reasonable fee,
 52 not to exceed twenty-five dollars, for each registration certificate
 53 issued under this subsection. Any registration fees collected by the
 54 department under this subsection shall be paid to the State Treasurer
 55 and credited to the General Fund] at no charge.

56 Sec. 3. (NEW) (*Effective from passage*) The Commissioner of
 57 Consumer Protection shall cease charging the nonrefundable fee for
 58 administrative costs for each qualifying patient and the nonrefundable
 59 application fee for each qualifying patient and caregiver under chapter
 60 420f of the general statutes. The commissioner shall also cease charging
 61 the renewal fee for each qualifying patient under chapter 420f of the
 62 general statutes. The commissioner shall amend existing regulations to
 63 eliminate such fees in accordance with the provisions of this section.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	21a-408(3)
Sec. 2	<i>from passage</i>	21a-408d(a)
Sec. 3	<i>from passage</i>	New section

GL *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 20 \$	FY 21 \$
Consumer Protection, Dept.	GF - Revenue Loss	4.5 million	5.8 million
Consumer Protection, Dept.	GF - Potential Cost	97,642	102,781
State Comptroller - Fringe Benefits ¹	GF - Potential Cost	38,489	40,606

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill adds opioid use disorder to the list of qualifying conditions for medical marijuana and removes the patient and caregiver fees in the medical marijuana program resulting in a revenue loss and potential cost to the Department of Consumer Protection (DCP).

Removing the patient (\$100) and caregiver (\$25) fees results in a revenue loss of \$4.5 million in FY 20 and \$5.8 million in FY 21. There are currently 33,800 patients and 4,600 caregivers in the program who pay the annual fees.

The bill also results in a potential cost to DCP of \$136,131 in FY 20 and \$143,387 in FY 21 to hire two processing technicians if the current application wait times are to remain constant, with the addition of

¹The fringe benefit costs for most state employees are budgeted centrally in accounts administered by the Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes is 41.19% of payroll in FY 20 and FY 21.

opioid use disorder to the list of qualifying conditions. Approximately 11,000 new patients are anticipated to apply to the program as a result of the new condition being added.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation and the number of applications.

OLR Bill Analysis**sHB 7287****AN ACT CONCERNING REVISIONS TO THE MEDICAL MARIJUANA PROGRAM.****SUMMARY**

This bill adds opioid use disorder to the list of qualifying debilitating conditions for adult medical marijuana patients. By law, before a patient may buy medical marijuana from a dispensary, he or she must receive a (1) medical certification from a physician or advanced practice registered nurse and (2) Department of Consumer Protection (DCP) registration certificate, which is valid for the length of the medical certification. The patient's primary caregiver must also obtain a registration certificate.

Additionally, the bill requires DCP to eliminate the (1) \$25 registration fee for patient and primary caregiver applications and patient renewals and (2) \$75 administrative fee for patient applications and renewals. The department must also amend its regulations to eliminate these fees.

EFFECTIVE DATE: Upon passage

BACKGROUND***Related Bill***

sHB 7371, favorably reported by the General Law Committee, also requires the DCP commissioner to eliminate the administrative and registration fees related to patient and caregiver registration applications and renewals and amend the department's regulations to eliminate these fees.

COMMITTEE ACTION

General Law Committee

Joint Favorable Substitute

Yea 11 Nay 7 (03/25/2019)