Chapter 215
(Senate Bill 308)

AN ACT concerning
Public Health – Medical Marijuana – Affirmative Defenses – Maryland
Medical Marijuana Model Program Workgroup

FOR the purpose of making marijuana a Schedule II controlled dangerous substance; prohibiting certain persons from distributing or dispensing marijuana to certain persons; providing for a certain penalty; requiring the Department of Health and Mental Hygiene (DHMH) to issue a certain request for proposals to select authorized growers of marijuana for medical use; providing for certain requirements of authorized growers; prohibiting an authorized grower from holding any other permit issued under a certain provision of law or being a physician who prepares a certain written certification; requiring DHMH, jointly with the Department of Agriculture, to adopt certain regulations; requiring DHMH to establish a certain registration program to authorize certain entities to distribute marijuana for medical purposes; authorizing DHMH to charge a certain fee for the issuance of a certain permit; requiring certain entities and individuals to apply for a certain criminal history records check and to submit to certain drug testing; requiring the Department to assign a certain identification number to certain permit holders for certain purposes; requiring certain permit holders to display a certain permit at certain times; requiring certain permit holders to report certain changes to DHMH within a certain time period; authorizing a patient or primary caregiver to provide certain reimbursement to certain entities; prohibiting certain individuals issued a certain permit from holding any other permit issued under a certain provision of law or being a physician who prepares a certain written certification; prohibiting a physician that prepares a certain written certification from holding a permit issued under a certain provision of law; requiring DHMH, in consultation with the Board of Pharmacy and stakeholders to develop certain regulations on or before a certain date; requiring DHMH to establish a registry of qualifying patients and primary caregivers and to issue a certain registry identification card to certain individuals under certain circumstances; requiring DHMH to approve or deny an application or renewal for a registry identification card within a certain time period and in a certain manner; requiring a registry identification card to include certain information; requiring an individual who has been issued a registry identification card to provide a certain notification to DHMH under certain circumstances; requiring DHMH to provide a certain notification to DHMH under certain circumstances; requiring certain physicians to provide notice to certain patients and the Department regarding the withdrawal of a patient’s written certification under certain circumstances; requiring the Department to send a certain notice; requiring certain patients and certain primary caregivers to send
circumstances and to dispose of any marijuana within the patient's possession within a certain number of days; requiring DHMH to maintain a confidential list of the individuals to whom DHMH has issued registry identification cards; providing that certain individuals and entities may not be subject to certain penalties or denied certain rights for the medical use of marijuana; providing that the possession of a registry identification card does not constitute probable cause to conduct a certain search by a government agency; providing that an individual may not be subject to arrest or prosecution for certain offenses for being in the presence of the medical use of marijuana; requiring certain pharmacies or dispensing centers to dispense a certain amount of usable marijuana to certain individuals for a certain period of time except under certain circumstances; prohibiting certain pharmacies and dispensing centers from dispensing more than a certain amount of marijuana to certain individuals within a certain period of time except under certain circumstances; authorizing certain pharmacies or dispensing centers to dispense more than a certain amount of marijuana to certain individuals under certain circumstances; requiring certain pharmacies and dispensing centers to maintain certain records; requiring qualifying patients, primary caregivers, and certain pharmacies and dispensing centers to follow certain procedures; providing that a patient may be registered at only one pharmacy or dispensing center at a time; establishing procedures for a patient to change an authorized pharmacy or dispensing center; requiring the Secretary of Health and Mental Hygiene to establish a system to monitor the dispensation of marijuana for medical use in the State; providing that a person who knowingly gives certain false information is subject to a certain penalty; requiring certain physicians, pharmacies, and dispensing centers to provide certain information to the Secretary; providing for the construction of this Act; providing that this Act may not be construed to provide immunity to certain persons; providing that this Act may not be construed to require certain insurance reimbursement; requiring DHMH to submit certain reports to the Governor and General Assembly on or before certain dates; requiring DHMH to adopt certain regulations on or before a certain date; authorizing DHMH to accept certain funds; requiring DHMH to use certain fees in a certain manner; requiring DHMH to distribute certain funds to drug rehabilitation programs throughout the State; defining certain terms; and generally relating to marijuana for medical use establishing that, in a prosecution for the use or possession of marijuana, the defendant may introduce and the court shall consider as an affirmative defense certain evidence of medical necessity; requiring a court to enter a finding of not guilty if the court finds that a person possessed marijuana because of a medical necessity; establishing that, in a prosecution for the use of or possession with intent to use drug paraphernalia related to marijuana, the defendant may introduce and the court shall consider as an affirmative defense certain evidence of medical necessity; requiring a court to enter a finding of not guilty if the court finds that a person used or possessed with intent to use drug paraphernalia related to marijuana or manufactured marijuana for personal use because of a medical necessity; requiring the court to make a certain finding
of medical necessity if the defendant establishes certain facts by clear and convincing evidence; establishing that certain evidence may include certain statements, records, or testimony; or the use or possession with intent to use drug paraphernalia related to marijuana, it is an affirmative defense that the defendant used or possessed marijuana or drug paraphernalia related to marijuana because the defendant has a certain debilitating medical condition, the debilitating medical condition is severe and resistant to conventional medicine, and marijuana is likely to provide the defendant with therapeutic or palliative relief from the debilitating medical condition; providing that a certain affirmative defense may not be used under certain circumstances; prohibiting the State Board of Physicians from reprimanding, placing on probation, or suspending or revoking a license of a licensee for providing a patient with a written statement, medical records, or testimony that, in the licensee’s professional opinion, the patient is likely to receive therapeutic or palliative relief from marijuana; providing that this Act shall not be deemed to release a licensee from the duty to exercise a professional standard of care when evaluating a patient’s medical condition; requiring the Secretary of Health and Mental Hygiene to convene a Work Group to develop a model program to facilitate patient access to marijuana for medical purposes; providing for the membership and staffing of the Work Group; providing for the designation of the chair of the Work Group; prohibiting a member of the Work Group from receiving certain compensation; authorizing a member of the Work Group to receive certain reimbursement; specifying the duties of the Work Group; requiring the Work Group to make a certain report to certain committees of the General Assembly on or before a certain date; providing for the termination of a certain provision of this Act; defining certain terms; and generally relating to medical marijuana.

BY renumbering
Article—Criminal Law
Section 5–403(d), (e), and (f), respectively
to be Section 5–403(e), (f), and (g), respectively
Annotated Code of Maryland
(2002 Volume and 2010 Supplement)

BY repealing and reenacting, with amendments,
Article—Criminal Law
Section 5–402(d)(1)
Annotated Code of Maryland
(2002 Volume and 2010 Supplement)

BY adding to
Article—Criminal Law
Section 5–403(d) and 5–611
Annotated Code of Maryland
(2002 Volume and 2010 Supplement)
BY adding to
Article – Health – General
Section 13–3001 through 13–3013 to be under the new subtitle “Subtitle 30. Medical Marijuana”
Annotated Code of Maryland
(2009 Replacement Volume and 2010 Supplement)

BY repealing and reenacting, with amendments,
Article – Criminal Law
Section 5–601 and 5–619
Annotated Code of Maryland
(2002 Volume and 2010 Supplement)

BY adding to
Article – Health Occupations
Section 14–404(c)
Annotated Code of Maryland
(2009 Replacement Volume and 2010 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That Section(s) 5–403(d), (e), and (f), respectively, of Article – Criminal Law of the Annotated Code of Maryland be renumbered to be Section(s) 5–403(e), (f), and (g), respectively.

SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

Article – Criminal Law

5–402.

(d) (1) A material, compound, mixture, or preparation that contains any of the following hallucinogenic or hallucinogenic–like substances is a substance listed in Schedule I:

(i) bufotenine;

(ii) diethyltryptamine;

(iii) dimethyltryptamine;

(iv) 4–methyl–2, 5–dimethoxyamphetamine;

(v) ibogaine;
(vi) lysergic acid diethylamide;

[(vii) marijuana;]

[(viii) mesaline;]

[(ix) peyote;]

[(x) psilocybin;]

[(xi) psilocyn;]

[(xii) tetrahydrocannabinol;]

[(xiii) thiophene analog of phencyclidine;]

[(xiv) 2, 5–dimethoxyamphetamine;]

[(xv) 4–bromo–2, 5–dimethoxyamphetamine;]

[(xvi) 4–methoxyamphetamine;]

[(xvii) 3, 4–methylenedioxyamphetamine;]

[(xviii) 3, 4–methylenedioxymethamphetamine (MDMA);]

[(xix) 5–methoxy–3, 4–methylenedioxyamphetamine;]

[(xx) 3, 4, 5–trimethoxyamphetamine;]

[(xxi) N–methyl–3–piperidyl benzilate;]

[(xxii) N–ethyl–3–piperidyl benzilate;]

[(xxiii) N–ethyl–1–phenylethyl–4–phenyl 4–propionoxypiperidine]

(MPPP), and

[(PEPAP),]
5–403.

(D) A MATERIAL, COMPOUND, MIXTURE, OR PREPARATION THAT CONTAINS MARIJUANA IS A SUBSTANCE LISTED IN SCHEDULE II.

5–611.

(A) A PERSON WHO IS EMPLOYED BY A PHARMACY OR A DISPENSING CENTER REGISTERED WITH THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE TO DISPENSE MARIJUANA UNDER TITLE 13, SUBTITLE 30 OF THE HEALTH–GENERAL ARTICLE MAY NOT DISTRIBUTE OR DISPENSE MARIJUANA EXCEPT TO A REGISTERED QUALIFYING PATIENT OR A REGISTERED PRIMARY CAREGIVER.

(B) A PERSON WHO IS REGISTERED WITH THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE AS A QUALIFYING PATIENT OR A PATIENT’S PRIMARY CAREGIVER UNDER TITLE 13, SUBTITLE 30 OF THE HEALTH–GENERAL ARTICLE MAY NOT DISTRIBUTE OR DISPENSE MARIJUANA TO ANOTHER PERSON WHO IS NOT A REGISTERED QUALIFYING PATIENT OR PRIMARY CAREGIVER.

(C) A PERSON WHO VIOLATES SUBSECTION (A) OR (B) OF THIS SECTION IS GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO IMPRISONMENT NOT EXCEEDING 7 YEARS OR A FINE NOT EXCEEDING $7,000 OR BOTH.

Article—Health—General

SUBTITLE 30. MEDICAL MARIJUANA.

13–3001.

(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

(B) “AUTHORIZED GROWER” MEANS AN ENTITY THAT:

(1) IS SELECTED BY THE DEPARTMENT UNDER THIS SUBTITLE TO CULTIVATE MARIJUANA; AND

(2) MAY DISPENSE MARIJUANA CULTIVATED BY THE ENTITY TO A PHARMACY THAT HOLDS A REGISTRATION PERMIT TO DISTRIBUTE MARIJUANA UNDER THIS SUBTITLE OR TO A DISPENSING CENTER FOR A FEE.
(c) "Bona fide physician–patient relationship" means a relationship in which the physician has ongoing responsibility for the assessment, care, and treatment of a patient's medical condition.

(d) "Debilitating medical condition" means a chronic or debilitating disease or medical condition or the treatment of a chronic or debilitating disease or medical condition that produces one or more of the following:

1. cachexia or wasting syndrome;
2. severe or chronic pain;
3. severe nausea;
4. seizures;
5. severe and persistent muscle spasms; or
6. as documented by the physician with whom the patient has a bona fide physician–patient relationship, any other condition that is severe and resistant to conventional medicine.

(e) "Dispensing center" means an entity registered under this subtitle that acquires, possesses, delivers, transfers, transports, supplies, or dispenses marijuana or related supplies and educational materials.

(f) "Marijuana" has the meaning stated in § 5–101 of the Criminal Law Article.

(g) "Medical use" means the acquisition, possession, cultivation, manufacture, use, delivery, sale, transfer, or transportation of marijuana or paraphernalia relating to the administration of marijuana to treat or alleviate a patient's condition or symptoms.

(h) "Physician" means an individual licensed by the State Board of Physicians under Title 14 of the Health Occupations Article to practice medicine.

(i) (1) "Primary caregiver" means a resident of the State who:
(I)  **Is at least 18 years old;**

(II) **Has agreed to assist with only one qualifying patient’s medical use of marijuana at a time;**

(III) **Has been designated as primary caregiver on the qualifying patient’s application or renewal for a registry identification card or in other written notification to the department; and**

(IV) **Has satisfied the criminal history records check required under §13–3004 of this subtitle.**

(2)  "Primary caregiver" does not include the qualifying patient’s physician.

(J)  "Qualifying patient" means a resident of the State who:

(1)  **Is at least 18 years old; and**

(2)  **Has been provided with written certification by a physician pursuant to a bona fide physician–patient relationship.**

(K)  "Registry identification card" means a document issued by the department that identifies an individual as a qualifying patient or primary caregiver.

(L)  (1)  "Usable marijuana" means the dried leaves and flowers of marijuana and any mixture or preparation of the dried leaves and flowers.

(2)  "Usable marijuana" does not include the seeds, stalks, or roots of the plant.

(M)  "Written certification" means a certification that meets the requirements of §13–3004(a)(2) of this subtitle.

13–3002.

(A)  The department shall issue a request for proposals to select authorized growers of marijuana for medical use in the State.
(b) (1) The initial request for proposals issued under this section shall be for an amount set by the Department in regulations.

(2) The Department may set the minimum proposal amount for any subsequent request for proposals issued by the Department under this section.

(3) The Department shall select the fewest number of authorized growers under this section as necessary to provide an appropriate supply of medical marijuana to meet the anticipated demand of all qualifying patients in the State.

(c) An authorized grower shall:

(1) Cultivate the marijuana in the State;

(2) Meet certain security and safety standards that may be verified by an outside entity as approved by the Department;

(3) Submit to pharmacological testing of the marijuana to ensure:

   (i) Consistency of the marijuana cultivated under this subtitle; and

   (ii) That there is no adulteration or contamination of the marijuana; and

(4) Submit to a criminal history records check and to periodic drug testing, as determined by the Department in regulations, for any employee of the authorized grower as provided for in this subtitle.

(d) An authorized grower may not:

(1) Hold any other permit issued under this subtitle; or

(2) Be a physician who prepares a written certification submitted to the Department under §13–3004 of this subtitle.

(e) (1) An individual who has been convicted of possession or sale of a controlled dangerous substance may not be an employee of an authorized grower, unless the conviction was for a
VIOLATION OF FEDERAL LAW RELATING TO POSSESSION OR SALE OF MARIJUANA FOR CONDUCT THAT IS LEGAL UNDER THIS SUBTITLE.

(2) AN INDIVIDUAL WHO HAS BEEN CONVICTED OF A FELONY MAY NOT BE AN EMPLOYEE OF AN AUTHORIZED GROWER.

(F) THE DEPARTMENT, JOINTLY WITH THE DEPARTMENT OF AGRICULTURE, SHALL ADOPT REGULATIONS TO BE FOLLOWED BY AN AUTHORIZED GROWER, INCLUDING:

1. THE STANDARDS TO BE USED IN CULTIVATING THE MARIJUANA;
2. THE SECURITY FEATURES TO BEREQUIRED ON THE PREMISES AND IN TRANSPORT TO AN ENTITY THAT OBTAINS A PERMIT TO DISPENSE MARIJUANA;
3. THE LOCATION OF THE AUTHORIZED GROWER, INCLUDING THE CONSIDERATION OF THE PROXIMITY OF THE ENTITY TO SCHOOLS; AND
4. THE ESTABLISHMENT OF A SYSTEM TO TRACK THE AMOUNT OF MARIJUANA DISPENSED AND TO WHOM THE MARIJUANA IS DISPENSED.

13-3003.

(A) (1) (I) THE DEPARTMENT SHALL ESTABLISH A REGISTRATION PROGRAM TO AUTHORIZE ENTITIES TO DISTRIBUTE MARIJUANA FOR MEDICAL PURPOSES.

(II) THE DEPARTMENT SHALL CHARGE A REASONABLE FEE FOR THE ISSUANCE OF A REGISTRATION PERMIT UNDER THIS SECTION THAT IS BASED ON THE AMOUNT OF THE MARIJUANA DISTRIBUTED BY THE ENTITY.

(2) THE FOLLOWING ENTITIES MAY REGISTER WITH THE DEPARTMENT TO DISTRIBUTE MARIJUANA FOR MEDICAL PURPOSES:

(I) A PHARMACY THAT HOLDS A PHARMACY PERMIT ISSUED BY THE BOARD OF PHARMACY; OR

(II) A DISPENSING CENTER AS PROVIDED FOR IN THIS SECTION.
(b) The Department shall require an applicant for a permit to provide the following information to the Department:

(1) The name of the individual who is responsible for operating the pharmacy or dispensing center;

(2) The names of any employees, whether volunteer or paid;

(3) The location of the pharmacy or dispensing center;

(4) The security measures that will be followed by the pharmacy or dispensing center in receiving, storing, and dispensing the marijuana;

(5) The method by which the pharmacy or dispensing center will account for the amount of marijuana received and dispensed; and

(6) Any other information that the Department considers necessary.

(c) (1) An entity seeking to dispense or cultivate marijuana under this subtitle shall apply to the Central Repository for a State and National Criminal History Records Check for each employee of the entity.

(2) As part of the application for the criminal history records check, the entity shall submit to the Central Repository:

(i) Two complete sets of the employee’s legible fingerprints taken on forms approved by the Director of the Central Repository and the Director of the Federal Bureau of Investigation;

(ii) Any fee required under State law for access to State criminal history records; and

(iii) The mandatory processing fee required by the Federal Bureau of Investigation for a national criminal history records check.
(3) The Central Repository shall forward to the employee and the Department the employee’s criminal history record information.

(4) Information obtained from the Central Repository under this subsection is confidential and may not be disseminated.

(5) (I) An individual who has been convicted of possession or sale of a controlled dangerous substance may not be issued a permit to operate a dispensing center or pharmacy or be an employee of a dispensing center or pharmacy, unless the conviction was for a violation of federal law relating to possession or sale of marijuana for conduct that is legal under this subtitle.

(II) An individual who has been convicted of a felony may not be issued a permit to operate a dispensing center or pharmacy or be an employee of a dispensing center or pharmacy.

(D) An entity seeking to dispense or cultivate marijuana under this subtitle shall require each employee of the entity to submit to periodic drug testing as determined by the Department in regulations.

(E) (1) The Department shall issue a permit to an individual to operate a dispensing center or pharmacy if:

(I) The requirements of this section are met; and

(II) The Department has verified the information contained in the application.

(2) The Department shall approve or deny an application within 60 days after receipt of a completed application.

(3) (I) The Department shall assign to each individual who has been issued a permit under this section a unique dispensing center or pharmacy identification number.

(II) The identification number assigned under this paragraph shall:

1. Be printed on a registry identification card issued under § 13–3004 of this subtitle; and
2. IDENTIFY THE ONLY DISPENSING CENTER OR PHARMACY FROM WHICH THE REGISTRY IDENTIFICATION CARD HOLDER IS AUTHORIZED TO OBTAIN MARIJUANA.

(4) A DENIAL OF AN APPLICATION SHALL BE CONSIDERED A FINAL AGENCY DECISION FOR PURPOSES OF JUDICIAL REVIEW UNDER THE ADMINISTRATIVE PROCEDURE ACT.

(F) AN INDIVIDUAL WHO HAS BEEN ISSUED A PERMIT UNDER THIS SECTION SHALL DISPLAY THE PERMIT AT THE PHARMACY OR DISPENSING CENTER AT ALL TIMES WHEN THE PHARMACY OR DISPENSING CENTER IS IN POSSESSION OF THE MARIJUANA.

(G) A PERMIT HOLDER SHALL REPORT ANY CHANGE IN INFORMATION TO THE DEPARTMENT NO LATER THAN 10 DAYS AFTER THE CHANGE OR THE PERMIT WILL BE CONSIDERED VOID.

(H) A PATIENT OR A PRIMARY CAREGIVER OF THE PATIENT MAY REIMBURSE THE PHARMACY OR DISPENSING CENTER FOR REASONABLE COSTS ASSOCIATED WITH THE PRODUCTION OF MARIJUANA FOR THE CARDHOLDER.

(I) AN INDIVIDUAL WHO HAS BEEN ISSUED A PERMIT UNDER THIS SECTION MAY NOT:

(1) HOLD ANY OTHER PERMIT ISSUED UNDER THIS SUBTITLE; OR

(2) BE A PHYSICIAN WHO PREPARES A WRITTEN CERTIFICATION SUBMITTED TO THE DEPARTMENT UNDER § 13–3004 OF THIS SUBTITLE.

(J) ON OR BEFORE JULY 1, 2012, THE DEPARTMENT, IN CONSULTATION WITH THE BOARD OF PHARMACY AND STAKEHOLDERS, SHALL DEVELOP REGULATIONS REGARDING THE PROCEDURES TO BE FOLLOWED BY PHARMACIES AND DISPENSING CENTERS IN DISPENSING MARIJUANA UNDER THIS SUBTITLE.

13–3004.

(A) (1) THE DEPARTMENT SHALL ESTABLISH A REGISTRY OF QUALIFYING PATIENTS AND SHALL ISSUE A REGISTRY IDENTIFICATION CARD WITH A PHOTOGRAPH TO A QUALIFYING PATIENT WHO SUBMITS THE FOLLOWING INFORMATION TO THE DEPARTMENT:
(i) Written certification that the individual is a qualifying patient;

(ii) An application or renewal fee that may be based on a sliding scale as determined by the Secretary;

(iii) The name, address, and date of birth of the qualifying patient, including documentation establishing proof of identity and residency to the satisfaction of the Department;

(iv) The name, address, and telephone number of the qualifying patient’s physician who prepared the written certification submitted under item (i) of this paragraph; and

(v) The name, address, and date of birth of the qualifying patient’s primary caregiver, if any.

(2) The written certification required under paragraph (1)(i) of this subsection shall:

(i) Be prepared by a physician:

1. With whom the patient has a bona fide physician–patient relationship;

2. Who is the primary care physician, hospice physician, or physician responsible for ongoing treatment of the patient’s debilitating medical condition; and

3. Whose treatment of the patient may not be limited to authorization for the patient to use medical marijuana or consultation for that purpose; and

(ii) Include a statement by the physician that:

1. In the physician’s professional opinion, after having completed a full assessment of the patient’s medical history and current medical condition, the patient has a debilitating medical condition for which:

   A. Recognized drugs or treatments would not be effective; or
B. Other treatment options have more serious side effects or a greater risk of addiction; and

2. The potential benefits of the medical use of marijuana would likely outweigh the health risks for the patient.

(3) A physician who prepares a written certification submitted under paragraph (1)(i) of this subsection may not hold any permit issued under this subtitle.

(B) The Department shall establish a registry of primary caregivers and shall issue a registry identification card to a primary caregiver who submits the following information to the Department:

(1) An application or renewal fee that may be based on a sliding scale as determined by the Secretary;

(2) The name, address, and date of birth of the qualifying patient, including documentation establishing proof of identity and residency to the satisfaction of the Department;

(3) The name, address, and telephone number of the patient's physician who prepared the written certification submitted for the patient under subsection (a) of this section; and

(4) The name, address, and date of birth of the primary caregiver.

(C) Before issuing an identification card, the Department shall:

(1) Verify the information contained in the application or renewal form submitted under this section; and

(2) Require the qualifying patient or the primary caregiver to choose the dispensing center or pharmacy from which the registrant will be obtaining the marijuana.

(D) (1) The Department shall:

(i) Approve or deny an application or renewal within 30 days of receipt of the application or renewal; and
(II) ISSUE A REGISTRY IDENTIFICATION CARD WITHIN 5 DAYS OF APPROVING THE APPLICATION OR RENEWAL.

(2) THE DEPARTMENT MAY DENY AN APPLICATION OR RENEWAL ONLY IF THE APPLICANT FAILS TO PROVIDE THE INFORMATION REQUIRED UNDER THIS SECTION OR IF THE DEPARTMENT DETERMINES THAT THE INFORMATION WAS FALSIFIED.

(3) DENIAL OF THE APPLICATION SHALL BE CONSIDERED A FINAL AGENCY DECISION FOR PURPOSES OF JUDICIAL REVIEW UNDER THE ADMINISTRATIVE PROCEDURE ACT.

(E) (1) THE DEPARTMENT SHALL REQUIRE EACH APPLICANT SEEKING TO SERVE AS PRIMARY CAREGIVER TO APPLY TO THE CENTRAL REPOSITORY FOR A STATE AND NATIONAL CRIMINAL HISTORY RECORDS CHECK.

(2) THE DEPARTMENT SHALL PROVISIONALLY APPROVE AN APPLICATION TO SERVE AS PRIMARY CAREGIVER PENDING THE RESULTS OF A CRIMINAL HISTORY RECORDS CHECK.

(3) AS PART OF THE APPLICATION FOR THE CRIMINAL HISTORY RECORDS CHECK, THE APPLICANT SHALL SUBMIT TO THE CENTRAL REPOSITORY:

(I) TWO COMPLETE SETS OF THE APPLICANT’S LEGIBLE FINGERPRINTS TAKEN ON FORMS APPROVED BY THE DIRECTOR OF THE CENTRAL REPOSITORY AND THE DIRECTOR OF THE FEDERAL BUREAU OF INVESTIGATION;

(II) ANY FEE REQUIRED UNDER STATE LAW FOR ACCESS TO STATE CRIMINAL HISTORY RECORDS; AND

(III) THE MANDATORY PROCESSING FEE REQUIRED BY THE FEDERAL BUREAU OF INVESTIGATION FOR A NATIONAL CRIMINAL HISTORY RECORDS CHECK.

(4) THE CENTRAL REPOSITORY SHALL FORWARD TO THE APPLICANT AND TO THE DEPARTMENT THE EMPLOYEE’S CRIMINAL HISTORY RECORD INFORMATION.
(5) **Information obtained from the Central Repository under this subsection is confidential and may not be disseminated.**

(6) (i) An applicant who has been convicted of possession or sale of a controlled dangerous substance may not serve as a primary caregiver, unless the conviction occurred on or after October 1, 2011, and was for a violation of federal law relating to possession or sale of marijuana for conduct that is legal under this title.

(ii) An individual who has been convicted of a felony may not be issued a registry identification card to serve as a primary caregiver.

(7) On receipt of the criminal history records check from the Central Repository, the Secretary shall notify the applicant in writing of the applicant’s qualification or disqualification for serving as a primary caregiver.

(F) (1) A registry identification card shall contain the following information:

(i) The name, address, and date of birth of the qualifying patient;

(ii) The name, address, and date of birth of the qualifying patient’s primary caregiver, if any;

(iii) The date of issuance and expiration date of the registry identification card;

(iv) Photo identification of the cardholder;

(v) The identification code of the authorized dispensing center or pharmacy; and

(vi) Any other information provided for by the Department in regulations.

(2) (i) A patient who has been issued a registry identification card shall notify the Department of any change in the patient’s name, address, physician or primary caregiver, or change in status of the patient’s debilitating medical condition
WITHIN 10 DAYS OF THE CHANGE OR THE REGISTRY IDENTIFICATION CARD SHALL BE CONSIDERED VOID.

(II) A PRIMARY CAREGIVER WHO HAS BEEN ISSUED A REGISTRY IDENTIFICATION CARD SHALL NOTIFY THE DEPARTMENT OF ANY CHANGE IN THE PRIMARY CAREGIVER’S NAME OR ADDRESS WITHIN 10 DAYS OF THE CHANGE OR THE REGISTRY IDENTIFICATION CARD SHALL BE CONSIDERED VOID.

(III) 1. IF THERE IS A CHANGE IN THE STATUS OF A PATIENT’S DEBILITATING MEDICAL CONDITION THAT REQUIRES A PHYSICIAN TO WITHDRAW THE PATIENT’S WRITTEN CERTIFICATION, THE PHYSICIAN SHALL PROVIDE WRITTEN NOTICE TO THE PATIENT AND THE DEPARTMENT WITHIN 10 DAYS OF THE CHANGE.

2. ON RECEIPT OF A PHYSICIAN’S NOTICE OF WITHDRAWAL OF A PATIENT’S WRITTEN CERTIFICATION, THE DEPARTMENT SHALL:

   A. REVOKE THE PATIENT’S AND, IF APPLICABLE, THE PATIENT’S PRIMARY CAREGIVER’S REGISTRY IDENTIFICATION CARD; AND

   B. SEND THE PATIENT AND, IF APPLICABLE, THE PATIENT’S PRIMARY CAREGIVER A REVOCATION NOTICE REQUIRING THE IMMEDIATE RETURN OF ALL REGISTRY IDENTIFICATION CARDS.

3. ON RECEIPT OF A REVOCATION NOTICE UNDER SUBSUBPARAGRAPH 2 OF THIS SUBPARAGRAPH, A PATIENT AND, IF APPLICABLE, A PATIENT’S PRIMARY CAREGIVER SHALL:


   B. HAVE 15 DAYS TO DISPOSE OF ANY MARIJUANA IN THE PATIENT’S POSSESSION.

(6) (1) THE DEPARTMENT SHALL MAINTAIN A CONFIDENTIAL LIST OF THE INDIVIDUALS TO WHOM THE DEPARTMENT HAS ISSUED REGISTRY IDENTIFICATION CARDS AND THE AUTHORIZED DISPENSING CENTER OR PHARMACY OF EACH REGISTERED QUALIFYING PATIENT.
(2) The names of individuals and other identifying information of the list:

(i) Are confidential;

(ii) May not be considered a public record; and

(iii) May not be disclosed except to:

1. Authorized employees of the Department as necessary to perform official duties of the Department; or

2. Authorized employees of State or local law enforcement, to verify that an individual who is engaged in the suspected or alleged medical use of marijuana is lawfully in possession of a registry identification card.

(ii) A registry identification card is valid for 1 year.

13–3005.

(A) Any of the following persons acting in accordance with the provisions of this subtitle may not be subject to arrest, prosecution, or any civil or administrative penalty, including civil penalty or disciplinary action by a professional licensing board, nor be denied any right or privilege, for the medical use of marijuana:

(1) A qualifying patient or a patient’s primary caregiver who:

(i) Holds a valid registry identification card; or

(ii) Holds a valid registry identification card and is in possession of an authorized amount of usable marijuana purchased in accordance with the provisions of this subtitle;

(2) An authorized grower or an authorized grower’s employee;

(3) A pharmacy that holds a registration permit under this subtitle or a dispensing center or an employee of a pharmacy or dispensing center;
(4) A physician; or

(5) Any other person.

(b) The possession of, or the application for, a registry identification card does not alone constitute probable cause to search an individual or the property of an individual possessing or applying for the registry identification card, or otherwise subject the individual or the property of the individual to inspection by a governmental unit.

(c) An individual may not be subject to arrest or prosecution for constructive possession, conspiracy, or any other offense for being in the presence or vicinity of the medical use of marijuana as allowed under this subtitle.

13–3006.

(a) (1) Except as provided in paragraph (3) of this subsection, an agent of a pharmacy that holds a registration permit under this subtitle or a dispensing center may dispense an amount of usable marijuana that does not exceed 6 ounces for a 30-day period to a registered qualifying patient or the qualifying patient’s primary caregiver if the individual:

(i) presents a valid registry identification card with the identification code of the pharmacy or dispensing center; and

(ii) is registered with that pharmacy or dispensing center with the Department as the patient’s authorized pharmacy or dispensing center.

(2) Except as provided in paragraph (3) of this subsection, an approved pharmacy or dispensing center may not dispense more than 6 ounces of usable marijuana to a registered qualifying patient or the patient’s registered primary caregiver in a single 30-day period.

(3) An approved pharmacy or dispensing center may dispense more than 6 ounces of usable marijuana to a registered qualifying patient or a patient’s primary caregiver if the patient or the patient’s primary caregiver presents the agent of the patient’s
DESIGNATED APPROVED PHARMACY OR DISPENSING CENTER A SIGNED, WRITTEN CERTIFICATION STATING THAT THE PATIENT NEEDS A SPECIFIED AMOUNT OF MARIJUANA THAT IS GREATER THAN 6 OUNCES FOR A SINGLE 30-DAY PERIOD.

(B) ON RECEIPT OF THE INFORMATION REQUIRED UNDER SUBSECTION (A) OF THIS SECTION, THE APPROVED PHARMACY OR DISPENSING CENTER SHALL VERIFY AND LOG THE INFORMATION PRESENTED.

(C) (1) EACH APPROVED PHARMACY AND DISPENSING CENTER SHALL MAINTAIN INTERNAL RECORDS OF EACH MARIJUANA DISPENSING TRANSACTION.

(2) THE RECORDS REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL INCLUDE:

(i) THE AMOUNT OF MARIJUANA DISPENSED;

(ii) THE REGISTRY IDENTIFICATION NUMBER OF THE INDIVIDUAL TO WHOM THE MARIJUANA WAS DISPENSED AND WHETHER THAT INDIVIDUAL WAS A QUALIFYING PATIENT OR THE QUALIFYING PATIENT'S PRIMARY CAREGIVER; AND

(iii) THE DATE AND TIME OF THE TRANSACTION.

(3) A RECORD MAINTAINED UNDER THIS SUBSECTION:

(i) IS CONFIDENTIAL; AND

(ii) MAY NOT INCLUDE NAMES OR OTHER PERSONAL IDENTIFYING INFORMATION.

(D) (1) A PATIENT MAY BE REGISTERED AT ONLY ONE PHARMACY OR DISPENSING CENTER AT ANY TIME.

(2) (i) IF A REGISTERED QUALIFYING PATIENT NEEDS TO CHANGE TO A DIFFERENT AUTHORIZED PHARMACY OR DISPENSING CENTER, THE PATIENT SHALL:

1. REGISTER THE CHANGE WITH THE DEPARTMENT;

AND

2. PAY A $15 FEE TO THE DEPARTMENT.
Within 5 business days after receiving a request to change a patient’s designated pharmacy or dispensing center under subparagraph (i) of this paragraph, the Department shall:

1. Update the registered qualifying patient’s record and the patient’s primary caregiver record, if any; and

2. Notify the patient that the designation change request has been processed.

On receipt of a patient’s old registry identification card, the Department shall issue a new registry identification card to a patient who registers with a different authorized pharmacy or dispensing center under subparagraph (i) of this paragraph.

The Department may limit the number of times a patient may change a designation of a pharmacy or dispensing center to one time every 30 days.

The Secretary shall establish a system to monitor the dispensation of marijuana in the State for medical use as authorized under this subtitle.

A person who knowingly gives false information or makes a material misstatement in an application for registration or a permit or in an application for a renewal of a registration or permit under this subtitle is guilty of a misdemeanor and on conviction is subject to imprisonment not exceeding 1 year or a fine not exceeding $1,000 or both.

This subtitle may not be construed to authorize any individual to:
(1) Operate, navigate, or be in actual physical control of any motor vehicle, aircraft, or boat while under the influence of marijuana;

(2) Smoke marijuana in any public place;

(3) Smoke marijuana in a motor vehicle; or

(4) Smoke marijuana on private property that:

(i) is rented from a landlord; and

(ii) is subject to a policy that prohibits the smoking of marijuana on the property; or

(ii) is subject to a policy that prohibits the smoking of marijuana on the property of an attached dwelling adopted by one of the following entities:

1. The board of directors of the council of unit owners of a condominium regime; or

2. The governing body of a homeowners association.

(b) This subtitle may not be construed to provide immunity to a person who violates the provisions of this subtitle from criminal prosecution for a violation of any law prohibiting or regulating the use, possession, dispensing, distribution, or promotion of controlled dangerous substances, dangerous drugs, detrimental drugs, or harmful drugs or any conspiracy or attempt to commit any of those offenses.

13–3010.

Nothing in this subtitle shall be construed to require a public or private health insurer to reimburse an individual for the costs associated with the medical use of marijuana.

13–3011.

(A) Beginning October 1, 2012, and each October 1 thereafter, the Department shall report to the Governor and, in
ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY ON:

(1) THE NUMBER OF APPLICATIONS FOR REGISTRY IDENTIFICATION CARDS;

(2) THE NUMBER OF QUALIFYING PATIENTS AND PRIMARY CAREGIVERS REGISTERED;

(3) THE NATURE OF THE DEBILITATING MEDICAL CONDITIONS OF THE QUALIFYING PATIENTS;

(4) THE ENTITIES SELECTED TO GROW MARIJUANA;

(5) THE ENTITIES RECEIVING PERMITS TO DISPENSE MARIJUANA;

(6) THE NUMBER OF REGISTRY IDENTIFICATION CARDS REVOKED;

(7) THE NUMBER OF PERMITS TO ENTITIES TO GROW OR DISPENSE MARIJUANA REVOKED; AND

(8) THE NUMBER OF PHYSICIANS PROVIDING WRITTEN CERTIFICATIONS FOR PATIENTS.

(b) The report required under subsection (a) of this section may not contain any identifying information of patients, primary caregivers, entities selected to grow or dispense marijuana, or physicians.

(c) On or before October 1, 2013, and every 2 years thereafter, the Secretary shall report to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly on:

(1) Whether there are sufficient numbers of approved pharmacies and dispensing centers to meet the needs of registered qualifying patients throughout the State;

(2) Whether the maximum amount of medical marijuana allowed under this subtitle is sufficient to meet the medical needs of qualifying patients; and
(3) Whether any approved pharmacy or dispensing center has charged excessive prices for marijuana that the pharmacy or center dispensed.

13–3012.

On or before January 1, 2012, the Department shall adopt regulations to implement this subtitle.

13–3013.

(A) The Department may accept from any source grants or contributions to be used in carrying out this subtitle.

(B) Any fees collected under this subtitle shall be used to offset the cost of the Department’s administration of this subtitle.

(C) Any funds received by the Department in excess of the amount required to fulfill this subtitle shall be distributed to drug rehabilitation programs throughout the state.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2011.

5–601.

(a) Except as otherwise provided in this title, a person may not:

(1) possess or administer to another a controlled dangerous substance, unless obtained directly or by prescription or order from an authorized provider acting in the course of professional practice; or

(2) obtain or attempt to obtain a controlled dangerous substance, or procure or attempt to procure the administration of a controlled dangerous substance by:

   (i) fraud, deceit, misrepresentation, or subterfuge;

   (ii) the counterfeiting or alteration of a prescription or a written order;

   (iii) the concealment of a material fact;

   (iv) the use of a false name or address;
(v) falsely assuming the title of or representing to be a manufacturer, distributor, or authorized provider; or

(vi) making, issuing, or presenting a false or counterfeit prescription or written order.

(b) Information that is communicated to a physician in an effort to obtain a controlled dangerous substance in violation of this section is not a privileged communication.

(c) (1) Except as provided in paragraphs (2) and (3) of this subsection, a person who violates this section is guilty of a misdemeanor and on conviction is subject to imprisonment not exceeding 4 years or a fine not exceeding $25,000 or both.

(2) A person whose violation of this section involves the use or possession of marijuana is subject to imprisonment not exceeding 1 year or a fine not exceeding $1,000 or both.

(3) (i) In a prosecution for the use or possession of marijuana, the defendant may introduce and the court shall consider as an affirmative defense any evidence of medical necessity.

(ii) Notwithstanding paragraph (2) of this subsection, if the court finds that the person used or possessed marijuana because of medical necessity, on conviction of a violation of this section, the maximum penalty that the court may impose on the person is a fine not exceeding $100.

(III) 1. The court shall find that marijuana was used or possessed because of medical necessity if the defendant establishes by clear and convincing evidence that the defendant is suffering from an illness or ailment, or symptoms created by treatment of an illness or ailment, for which the defendant is likely to receive therapeutic or palliative relief from marijuana.

2. Evidence of medical necessity may include:

A. A written statement from a licensed physician stating that, in the physician’s professional opinion, the defendant is likely to receive therapeutic or palliative relief from marijuana;

B. Medical records demonstrating illness or ailment, or symptoms created by treatment of an illness or ailment;
FOR WHICH THE DEFENDANT IS LIKELY TO RECEIVE THERAPEUTIC OR PALLIATIVE RELIEF FROM MARIJUANA; OR

C. TESTIMONY BY THE DEFENDANT’S LICENSED PHYSICIAN THAT, IN THE PHYSICIAN’S PROFESSIONAL OPINION, THE DEFENDANT IS LIKELY TO RECEIVE THERAPEUTIC OR PALLIATIVE RELIEF FROM MARIJUANA.

1. IN THIS PARAGRAPH THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

2. “BONA FIDE PHYSICIAN–PATIENT RELATIONSHIP” MEANS A RELATIONSHIP IN WHICH THE PHYSICIAN HAS ONGOING RESPONSIBILITY FOR THE ASSESSMENT, CARE, AND TREATMENT OF A PATIENT’S MEDICAL CONDITION.

3. “DEBILITATING MEDICAL CONDITION” MEANS A CHRONIC OR DEBILITATING DISEASE OR MEDICAL CONDITION OR THE TREATMENT OF A CHRONIC OR DEBILITATING DISEASE OR MEDICAL CONDITION THAT PRODUCES ONE OR MORE OF THE FOLLOWING, AS DOCUMENTED BY A PHYSICIAN WITH WHOM THE PATIENT HAS A BONA FIDE PHYSICIAN–PATIENT RELATIONSHIP:

A. CACHEXIA OR WASTING SYNDROME;

B. SEVERE OR CHRONIC PAIN;

C. SEVERE NAUSEA;

D. SEIZURES;

E. SEVERE AND PERSISTENT MUSCLE SPASMS; OR

F. ANY OTHER CONDITION THAT IS SEVERE AND RESISTANT TO CONVENTIONAL MEDICINE.

(II) 1. In a prosecution for the use or possession of marijuana, the defendant may introduce and the court shall consider as a mitigating factor any evidence of medical necessity.

(ii) 2. Notwithstanding paragraph (2) of this subsection, if the court finds that the person used or possessed marijuana because of medical necessity, on conviction of a violation of this section, the maximum penalty that the court may impose on the person is a fine not exceeding $100.
(III) 1. In a prosecution for the use or possession of marijuana under this section, it is an affirmative defense that the defendant used or possessed marijuana because:

A. The defendant has a debilitating medical condition that has been diagnosed by a physician with whom the defendant has a bona fide physician–patient relationship;

B. The debilitating medical condition is severe and resistant to conventional medicine; and

C. Marijuana is likely to provide the defendant with therapeutic or palliative relief from the debilitating medical condition.

2. The affirmative defense may not be used if the defendant was:

A. Using marijuana in a public place; or

B. In possession of more than 1 ounce of marijuana.

5–619.

(a) To determine whether an object is drug paraphernalia, a court shall consider, among other logically relevant factors:

(1) any statement by an owner or a person in control of the object concerning its use;

(2) any prior conviction of an owner or a person in control of the object under a State or federal law relating to a controlled dangerous substance;

(3) the proximity of the object, in time and space, to a direct violation of this section or to a controlled dangerous substance;

(4) a residue of a controlled dangerous substance on the object;

(5) direct or circumstantial evidence of the intent of an owner or a person in control of the object to deliver it to another who, the owner or the person knows or should reasonably know, intends to use the object to facilitate a violation of this section;
any instructions, oral or written, provided with the object concerning its use;

(7) any descriptive materials accompanying the object that explain or depict its use;

(8) national and local advertising concerning use of the object;

(9) the manner in which the object is displayed for sale;

(10) whether the owner or a person in control of the object is a licensed distributor or dealer of tobacco products or other legitimate supplier of related items to the community;

(11) direct or circumstantial evidence of the ratio of sales of the object to the total sales of the business enterprise;

(12) the existence and scope of legitimate uses for the object in the community; and

(13) expert testimony concerning use of the object.

(b) The innocence of an owner or a person in control of the object as to a direct violation of this section does not prevent a finding that the object is intended for use or designed for use as drug paraphernalia.

(c) (1) Unless authorized under this title, a person may not use or possess with intent to use drug paraphernalia to:

(i) plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, pack, repack, store, contain, or conceal a controlled dangerous substance; or

(ii) inject, ingest, inhale, or otherwise introduce into the human body a controlled dangerous substance.

(2) A person who violates this subsection is guilty of a misdemeanor and on conviction is subject to:

(i) for a first violation, a fine not exceeding $500; and

(ii) for each subsequent violation, imprisonment not exceeding 2 years or a fine not exceeding $2,000 or both.
(3) A person who is convicted of violating this subsection for the first time and who previously has been convicted of violating subsection (d)(4) of this section is subject to the penalty specified under paragraph (2)(ii) of this subsection.

(4) (i) In a prosecution under this subsection involving drug paraphernalia related to marijuana, the defendant may introduce and the court shall consider as a mitigating factor any evidence of medical necessity.

(ii) Notwithstanding paragraph (2) of this subsection, if the court finds that the person used or possessed drug paraphernalia related to marijuana because of medical necessity, on conviction of a violation of this subsection, the maximum penalty that the court may impose on the person is a fine not exceeding $100. THE COURT SHALL ENTER A FINDING OF NOT GUILTY.

(III) The court shall find that the drug paraphernalia related to marijuana was used or possessed because of medical necessity if the defendant establishes by clear and convincing evidence that the defendant is suffering from an illness or ailment, or symptoms created by treatment of an illness or ailment, for which the defendant is likely to receive therapeutic or palliative relief from marijuana.

1. Evidence of medical necessity may include:

A. A written statement from a licensed physician stating that, in the physician's professional opinion, the defendant is likely to receive therapeutic or palliative relief from marijuana;

B. Medical records demonstrating illness or ailment, or symptoms created by treatment of an illness or ailment, for which the defendant is likely to receive therapeutic or palliative relief from marijuana; or

C. Testimony by the defendant's licensed physician that, in the physician's professional opinion, the defendant is likely to receive therapeutic or palliative relief from marijuana.

(4) (i) 1. In this paragraph the following words have the meanings indicated.
2. “BONA FIDE PHYSICIAN–PATIENT RELATIONSHIP” MEANS A RELATIONSHIP IN WHICH THE PHYSICIAN HAS ONGOING RESPONSIBILITY FOR THE ASSESSMENT, CARE, AND TREATMENT OF A PATIENT’S MEDICAL CONDITION.

3. “DEBILITATING MEDICAL CONDITION” MEANS A CHRONIC OR DEBILITATING DISEASE OR MEDICAL CONDITION OR THE TREATMENT OF A CHRONIC OR DEBILITATING DISEASE OR MEDICAL CONDITION THAT PRODUCES ONE OR MORE OF THE FOLLOWING, AS DOCUMENTED BY A PHYSICIAN WITH WHOM THE PATIENT HAS A BONA FIDE PHYSICIAN–PATIENT RELATIONSHIP:

A. CACHEXIA OR WASTING SYNDROME;

B. SEVERE OR CHRONIC PAIN;

C. SEVERE NAUSEA;

D. SEIZURES;

E. SEVERE AND PERSISTENT MUSCLE SPASMS; OR

F. ANY OTHER CONDITION THAT IS SEVERE AND RESISTANT TO CONVENTIONAL MEDICINE.

(II) 1. In a prosecution under this subsection involving drug paraphernalia related to marijuana, the defendant may introduce and the court shall consider as a mitigating factor any evidence of medical necessity.

[(ii)] 2. Notwithstanding paragraph (2) of this subsection, if the court finds that the person used or possessed drug paraphernalia related to marijuana because of medical necessity, on conviction of a violation of this subsection, the maximum penalty that the court may impose on the person is a fine not exceeding $100.

(III) 1. IN A PROSECUTION UNDER THIS SUBSECTION INVOLVING DRUG PARAPHERNALIA RELATED TO MARIJUANA, IT IS AN AFFIRMATIVE DEFENSE THAT THE DEFENDANT USED OR POSSESSED DRUG PARAPHERNALIA RELATED TO MARIJUANA BECAUSE:

A. THE DEFENDANT HAS A DEBILITATING MEDICAL CONDITION THAT HAS BEEN DIAGNOSED BY A PHYSICIAN WITH WHOM THE DEFENDANT HAS A BONA FIDE PHYSICIAN–PATIENT RELATIONSHIP;
B. **THE DEBILITATING MEDICAL CONDITION IS SEVERE AND RESISTANT TO CONVENTIONAL MEDICINE; AND**

C. **MARIJUANA IS LIKELY TO PROVIDE THE DEFENDANT WITH THERAPEUTIC OR PALLIATIVE RELIEF FROM THE DEBILITATING MEDICAL CONDITION.**

2. **THE AFFIRMATIVE DEFENSE MAY NOT BE USED IF THE DEFENDANT WAS:**

   A. **USING MARIJUANA IN A PUBLIC PLACE; OR**

   B. **IN POSSESSION OF MORE THAN 1 OUNCE OF MARIJUANA.**

(d) (1) Unless authorized under this title, a person may not deliver or sell, or manufacture or possess with intent to deliver or sell, drug paraphernalia, knowing, or under circumstances where one reasonably should know, that the drug paraphernalia will be used to:

   (i) plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, pack, repack, store, contain, or conceal a controlled dangerous substance; or

   (ii) inject, ingest, inhale, or otherwise introduce into the human body a controlled dangerous substance.

(2) A person who violates this subsection is guilty of a misdemeanor and on conviction is subject to:

   (i) for a first violation, a fine not exceeding $500; and

   (ii) for each subsequent violation, imprisonment not exceeding 2 years or a fine not exceeding $2,000 or both.

(3) A person who is convicted of violating this subsection for the first time and who previously has been convicted of violating paragraph (4) of this subsection is subject to imprisonment not exceeding 2 years or a fine not exceeding $2,000 or both.

(4) If a person who is at least 18 years old violates paragraph (1) of this subsection by delivering drug paraphernalia to a minor who is at least 3 years younger than the person, the person is guilty of a separate misdemeanor and on conviction is subject to imprisonment not exceeding 8 years or a fine not exceeding $15,000 or both.
(e) (1)  A person may not advertise in a newspaper, magazine, handbill, poster, sign, mailing, or other writing or publication, or by sound truck, knowing, or under circumstances where one reasonably should know, that the purpose of the advertisement, wholly or partly, is to promote the sale or delivery of drug paraphernalia.

(2)  A person who violates this subsection is guilty of a misdemeanor and on conviction is subject to:

(i)  for a first violation, a fine not exceeding $500; and

(ii) for each subsequent violation, imprisonment not exceeding 2 years or a fine not exceeding $2,000 or both.

Article – Health Occupations

14–404.

(C) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, THE BOARD MAY NOT REPRIMAND, PLACE ON PROBATION, OR SUSPEND OR REVOKE A LICENSE OF A LICENSEE FOR PROVIDING A PATIENT WITH A WRITTEN STATEMENT, MEDICAL RECORDS, OR TESTIMONY THAT, IN THE LICENSEE’S PROFESSIONAL OPINION, THE PATIENT IS LIKELY TO RECEIVE THERAPEUTIC OR PALLIATIVE RELIEF FROM MARIJUANA.

(2) NOTHING IN THIS SUBSECTION SHALL BE DEEMED TO RELEASE A LICENSEE FROM THE DUTY TO EXERCISE A PROFESSIONAL STANDARD OF CARE WHEN EVALUATING A PATIENT’S MEDICAL CONDITION.

SECTION 2. AND BE IT FURTHER ENACTED, That:

(a) The Secretary of Health and Mental Hygiene shall convene a Work Group to develop a model program to facilitate patient access to marijuana for medical purposes.

(b) The Work Group shall include the following members:

(1) two members of the Senate of Maryland, appointed by the President of the Senate;

(2) two members of the House of Delegates, appointed by the Speaker of the House;

(3) the Secretary of Health and Mental Hygiene, or the Secretary’s designee; and
(4) the following members, appointed by the Governor:

(i) one member of the public who supports the use of marijuana for medical purposes;

(ii) one member of the public designated by the Maryland Chapter of the National Coalition on Alcohol and Other Drug Dependencies Council on Alcoholism and Drug Dependence;

(iii) three physicians licensed in the State, who specialize in addiction, pain, oncology, neurology, or clinical research;

(iv) one nurse licensed in the State, with experience in hospice care, nominated by a State research institution or trade association;

(v) one pharmacist licensed in the State, nominated by a State research institution or trade association;

(vi) one scientist with experience in the science of marijuana, nominated by a State research institution;

(vii) one representative of the Maryland State’s Attorneys’ Association;

(viii) one representative of the Maryland Chiefs of Police;

(ix) one representative of the Maryland Sheriffs’ Association;

(x) one representative of the Maryland Fraternal Order of Police; and

(xi) an attorney who is knowledgeable about medical marijuana laws in the United States.

(c) The Governor shall designate the chair of the Work Group.

(d) The Department of Health and Mental Hygiene and the Governor’s Office of Crime Control and Prevention shall provide staff for the Work Group.

(e) A member of the Work Group:

(1) may not receive compensation as a member of the Work Group; but

(2) is entitled to reimbursement for expenses under the Standard State Travel Regulations, as provided in the State budget.
The Work Group shall assess the feasibility of and develop a State-specific proposal, including draft legislation, for providing access to marijuana to patients in the State for medical purposes.

(ii) The proposal required under subparagraph (i) of this paragraph shall strongly consider a program model that is analogous to a compassionate use protocol for unapproved drugs.

(2) The draft legislation required under paragraph (1) of this subsection shall:

(i) outline the key elements of the program model; and

(ii) include provisions that:

1. provide for oversight and responsibility by programs located in academic medical research institutions in the State;

2. provide for the licensing of a program by the State;

3. establish a program application and review process that includes consideration of best practices and procedures for obtaining review input that is external to the Department of Health and Mental Hygiene;

4. expand the base of information on the use of marijuana for medical purposes on a scientific and policy implementation basis; and

5. implement a program as soon as feasible and incorporate the goals of:

A. regulations adopted and applications received by September 1, 2012; and

B. program operation beginning in January 2013.

(3) The Work Group shall provide guidance on the criteria for assessing program applications, including an applying program’s plans for:

(i) determining the medical conditions to be treated and the duration of therapy proposed;

(ii) identifying sources of marijuana;

(iii) determining patient eligibility and informed consent;
(iv) conducting any associated research projects;

(v) reporting data and outcomes;

(vi) instituting strict controls against illegal diversion; and

(vii) securing grants or other sources of funding to facilitate the affordability of the program.

(g) The Work Group may consult with experts and stakeholders in conducting its duties.

(h) On or before December 1, 2011, the Secretary shall report, in accordance with § 2–1246 of the State Government Article, to the Senate Judicial Proceedings Committee, the House Health and Government Operations Committee, and the House Judiciary Committee on the findings of the Work Group, including draft legislation that establishes a program to provide access to marijuana to patients in the State for medical purposes under a model analogous to a compassionate use protocol for unapproved drugs.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2011. Section 2 of this Act shall remain effective for a period of 1 year and, at the end of May 31, 2012, with no further action required by the General Assembly, Section 2 of this Act shall be abrogated and of no further force and effect.

Approved by the Governor, May 10, 2011.