



Comparison Between Compromise Medical Marijuana Bill and Marijuana Initiative

Issue	Compromise Medical Marijuana Bill	Proposition 2 – Utah Medical Cannabis Act
Who can recommend marijuana	MDs and DOs	MDs, DOs, Dentists, NPs, PAs, Podiatrists, Optometrists
Education Requirements	MD, DO and Pharmacist required to take 4 hours before being qualified to recommend or dispense and then 4 hours continuing education every two years.	No education requirement.
Format of Marijuana (Products)	Medicinal Format that is dosed: Must be in medical dosage form given by the physician. In grams, milligrams, or milliliters. The medicinal forms are: pill, capsule, sublingual preparation, concentrated oil, liquid suspension, topical preparation, transdermal preparation, a cube that is designed for ingestion through chewing or holding in the mouth for slow dissolution; or unprocessed single cannabis flower in a blister pack with each individual blister containing a specific and consistent dosage amount; or if not responding to one of at least two other forms can do a resin or wax. No edibles in form of brownies, cookies, candies, etc.	Patient picks up what they are convinced to buy by salesperson behind dispensary counter. Forms include: Edibles – cookies, brownies, candies, flowers, wax, resin, vape - any form of marijuana including the ability to smoke if it can be lit at under 750 degrees without an open flame – can be done at 495 degree without an open flame. Can also grow their own plants, up to six plants, if not located within 100 miles of a dispensary and in some circumstances can grow for others.
Physician involvement with patient and care of patient	Physician diagnoses patient, recommends card, recommends dose on electronic system, sees what medication patient gets and system supposed to tie to EMRs. Physician required to have same standard of care with patient as for all other care including follow-up and continuation of care, not just giving a card. If physician does not dose, they can recommend card and refer to specialty pharmacy where pharmacist in consultation with physician will come up with dose.	“Physician” – which included all the other providers listed above - just gave a recommendation for a card. Did not have access to what product patient picked up. Did not have access to what doses patient was taking. Did not have access to dispensary information at all. Physician not required to treat patient beyond giving a basic exam and recommending a card.

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Qualifying Conditions	<p>Physician must diagnose and/or treat patient. The physician must have a reason for using since they are bypassing FDA process. Qualifier in bill states: “By designating a particular condition for which the use of medical cannabis to treat symptoms is decriminalized, the Legislature does not conclusively state that (a) current scientific evidence clearly supports the efficacy of a medical cannabis treatment for the condition; or (b) a medical cannabis treatment will treat, cure, or positively affect the condition.</p> <p>Conditions: HIV or acquired immune deficiency syndrome; Alzheimer’s disease; Amyotrophic lateral sclerosis; Cancer; Cachexia; Persistent nausea that is not significantly responsive to traditional treatment, except nausea related to pregnancy; Crohn’s disease or Ulcerative Colitis; Epilepsy or debilitating seizures; (already in law for CBD oil) Multiple sclerosis or persistent and debilitating muscle spasms; PTSD; Autism; Terminal illness when the patient’s remaining life expectancy is less than six months; (already in law)</p>	<p>Illnesses: HIV, acquired immune deficiency syndrome or any autoimmune disorder; Alzheimer’s disease; Amyotrophic lateral sclerosis; Cancer; Cachexia; A condition manifest by physical wasting, nausea, or malnutrition association with a chronic disease; Crohn’s Disease, Ulcerative Colitis or a similar gastrointestinal disorder; Epilepsy or a similar condition that cause debilitating seizures; Multiple sclerosis or a similar condition that causes persistent and debilitating muscle spasms; PTSD; Autism; A rare condition or disease that affects less than 200,000 persons in the U.S. (defined in Section 526 of the FDA and Cosmetic Act); Chronic or debilitating pain in an individual, if a physician determines that the individual is at risk of becoming chemically dependent on, or overdosing on, opiate-based pain medication; or a physician determines that the individual is allergic to opiates or is otherwise medically unable to use opiates; Any other condition for which the Compassionate Use Board receives satisfactory evidence that the individual suffers from a condition that substantially impairs the individual’s quality of life and is intractable and it is in the best interest of the individual to allow them to use medical cannabis.</p>

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	<p>A condition resulting in the individual receiving hospice care;</p> <p>A rare condition or disease that affections less than 200,000 individuals in the U.S. (defined in Section 526 of the FDA and 1340 Cosmetic Act) that is not substantially responsive to conventional medications other than opioids or opiates or physical interventions;</p> <p>Pain lasting longer than two weeks that is not substantially responsive to convention medications other than opioids or opiates or physicals interventions; and</p> <p>A condition that the compassionate use board approves on an individual, case by case basis.</p>	<p>The Compassionate Use Board may recommend a condition to designate as a qualifying illness or a condition to remove as a qualifying illness</p>
Limit in Homes	30 days' worth of medication	Unlimited
Who Dispenses	<p>Central Fill Pharmacy puts dosed product together and gives to County Health Departments or processor puts product together, it is given to Specialty Pharmacies filled with Pharmacists, who may have a physician onsite for consultation (5 pharmacies, max 10 if Central Fill Pharmacies and County Health Departments don't work)</p>	<p>Anyone 21 years of age or older who had a background check, unless a volunteer, then no background check required.</p>
Medical Cannabis Card	<p>Caregiver must be 21 years old or older</p> <p>Medical Cannabis Cardholder must show ID</p> <p>No felony drug distribution conviction</p> <p>Criminal Background check</p>	<p>Caregiver 18 years old or older (other states were 21)</p> <p>No ID required for Medical Cannabis Cardholder</p>
Medical Emergency	<p>Defined – Can only use in public during a medical emergency. Defined as medical condition manifesting itself by acute symptoms of sufficient severity, including</p>	<p>Not defined – allowed to use in public if they just felt they were having an emergency – undefined.</p>

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	severe pain, such that a prudent layperson, who possesses an average knowledge of medicine and health, would reasonable expect the absence of immediate medical attention at a hospital emergency department to result in: (i) placing the insured’s health, or with respect to a pregnant woman, the health of the woman or her unborn child, in serious jeopardy; (ii) serious impairment to bodily functions; or (iii) serious dysfunction of any bodily organ or part.	
Tracking Product	Tracked from “Root ball to patient” – anything that is not in medicinal format and is not labeled and able to be tracked is illegal. Unique Identifier for each plant.	Tracking was not good. Law enforcement would not be able to tell what was legal in Utah and what was not. No unique identifiers on products. Product could have been brought from out of state and they would not be able to tell. Marijuana plants individually grown would be a problem and issue. Affirmative defense an issue.
Labeling of Product	Tamper Proof & Tamper & Child Resistant & Opaque. Warning on Label: “Cannabis has intoxicating effects and may be addictive. Do not operate a vehicle or machinery under its influence. KEEP OUT OF REACH OF CHILDREN. This product is for medical use only. Use only as directed by a qualified medical provider.”	Tamper Proof & Opaque. May not look like current candy but could be candy.
Sales Tax	Medical Device taxed	No sales tax on drug or device
Destruction of Patient Records	Records not destroyed but kept and tracked, patient identifiers cleansed at certain point, but physician has access to all patient medication data. Data used to keep outcomes information and used in research for DOH and others.	Records destroyed at 60 days.

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Physician Liability	Same as for any type of care. Liable and DOPL action and sanctions.	No liability and No DOPL action – attract bad providers who would give cards just for money
Inspections on Growing and Processing Facilities	Can have inspections at anytime by the state and those inspections can shut the facility down or can cause increasing fines and non-renewal of licensing depending on non-compliance level.	Limited inspections. Infractions for non-compliance. Non-renewal of license.