Utah (Compromise Legislation 10-4- 2018)	Score	Total Available		Utah (
Patient Rights and Civil	74	100		Legislation, Draft 10-4-18)	Letter Grade: F
Arrest Protection	30	40	26-61b-204, *Note however, that under 26-61b-204(1)(iii)(b) if a patient is caught with even a <i>de minimis</i> amout of cannabis over 113 grams, they are subject to a Class B misdemeanor and a \$1,000 fine, regardless of criminal intent , 58-37-3.9(1)(a) also provides some arrest protections via limiting state and local resources from completing an arrest on the sole reasons that the paitent is violating federal law.	Improvement Bonus	0
			Arrest proections via the form of an affirmative defense exist for individual who is operating a vehicle with medical cannabis in their system (41-6a-517(3)(c). Affirmative defense protections also exist for use and possesion ig individual has been diagnosed with a qualifying condition and has a pre existing relationship with health care provider. 58-37-3.8(2). Affitmative defense protects those who are not Utah residents under 58-37-3.8 (3) Additionally, the affirmative defense only is in place until January 1, 2021, but does not provide further instruction if the program is		
Affirmative Defense	10	15	not operational by this date. 62A-4a-202.1, prevents child from being removed solely bevause of presence of cannabis in medical dosage form, 30-3-10 (7) provides protections against discriminaiton for patients, cargivers and employees of medical cannabis facilities, 78A-6-508(3) prevents termination of parental rights solely for a parents lawful	Score Out of 500	286.83
Parental Rights Protection	10	10	possesion of a medical cannabis product	Percentage	57.37%

DUI Protections	2	5	41-6a-517(3)c providses an affirmataive defense, but provides no standard to measure impairment or lack thereof
Employment Protections	4	5	25-61b-111(3) provides employment protections for patients, but does not extend these protections to caregivers. That being said, this provision is consistent with other states' employment discrimination protection clauses.
Explicit Privacy Standards	7	7	26-61b-504(1), it is commendable that patient records at medical cannabis pharmacies are protected under Health Insurance Portability and Accountability Act (HIPPA). 26-61b-106(8) protects personally identifiable health information in petitions to the Compassionate Use Board.
Housing Protections	5	5	26-61b-111(2) is consistent with the housing protections included in other state programs
Does Not Create New Cri	0	5	26-61b-204(1)(B), among other sections, creates new penalties for patients.
Organ Transplants	5	5	26-61b-111(1) adequately protects patients from discrimination when it comes to organ or tissue transplants and is consistent with other state medcial programs

	Reciprocity	1	58=37-3.8(3)(a)(i) provides an affirmative defense to out of state residents, but out of state residents are not eleigible to further benefits of the Utah medical cannabis program. The way this bill is currently written with the terms medical cannabis pharmacy and state central fill medical cannabis pharmacy is deeply concerning. Louisana went through similar challegnes in its program by using the words pharmacy and prescription in its statute. As a result, the Louisaina medical cannabis program was delayed by nearly 3 yearsBy definition, a pharmacy is a facility that is capable of dispensing controlled substances Schedule II-V upon recipet of a patients valid prescription. (See, e.g. The Federal Food Drug and Cosmetic Act § 503, See also, 21 U.S.C § 823(f), distuinguishing the Attorney General's ability to register practioners "Including pharmacies, as distuingished from pharmacists" to dispense controlled substances). Having a licensed pharmacist on staff at dispensaries has been acheived in Connecticut, New York, Minnesota, Pennsylvania and Arkansas. However this is very different from the business operating as a pharmacy. If lawmakers are uncomfortable with facilited named dispensaries, they could follow the model in michigan and name these facilities
Allows Distribution Prod. 14 / 10	Access to Medicine Allows Distribution Prog		Medical Cannabis Provisioning Centers

		ı	
> Allows Access to Dried	4	15	26-61b-102(25)(I)(ii) only allows dried flower in very limited circumstances (after a patient has failed to respond to two other medical cannabis forms). This blister pack could also create issues with individuals who have conditions that aeffect their motorskills and are unable to open the pack. Delivery is allowed from the state central pharmacy to the regional department of health, but it appears that there is not delivery allowed from the regional departments of health and medical cannabis pharmacies directly to the patients. See 4-41b-404
> No Sales Tax or Reas	5	5	59-12-104.9 Appropriately exempts medical cannabis and medical cannabis products from sales tax
> Allows for a Reasonable Number of Dispensaries	2	5	The issues of nomenclature aside (pharmacy v. dispensary) this bill does not appear to provide enough access points for medical cannabis, even when the state central fill pharmacy is included. 26-61b-304 provides that only five medical cannabis pharmacy licenses may be issued. For comparision, Arkansas, which has a population comprable to Utah is allowing the issuance of 32 licenses for medical cannabis dispensaries. Connecicut which has a <i>slightly larger</i> population has 9 dispensing facilities.
> Does not Require Ver	0	2	26-61b-601 By creating a state central fill paharmacy, this forces vertical integation for the various medical cannabis businesses
> Ownership/ Employme	2	2	the ownership restrictions as described in 4-41b-201(2)(b)(i) and other similar sections are reasonable when compared to other states' medical cannabis programs
> Provisions for Labor S	0	2	None included in draft of bill.
> Environmental Impact	0	2	None included in draft of bill.

			Small number of cannabis pharmacies limits
> Choice of Dispensary	0	2	patient choice
Noncommercial Cultivat	tion	20	
			Unlike the Ballot Initiative, personal cultivation if
			an idividual lives more than 100 miles form a
> Personal Cultivation	0	15	medical cannabis pharmacy is not allowed
> Collective Gardening	0	5	No mention in this draft of bill
3	-		
			26 61h 102/25\(a) limits the form of connabis to
			26-61b-102(25)(a) limits the form of cannabis to
			tablets, capsules, concentrated oils, liquid
			suspension, topicals, transdermal preparation,
			and cube designed for ingestion. 4-41b-603 limits
			the types of edible products that can be made.
			ASA supports creating products that do not
	_		appeal to children however, this definition may
Explicit Right to Edibles	5	10	overly limit patient medical options
			Bill limits the total number of grams of THC for
Does not Impose Bans	7	10	cannabis products
			4-41-102(2)(b) describes and limits the ration of
Does not Impose Bans	7	10	CBD to THC
			4-41b-406 and other sections prevent localities
			and municipalites from enacting overly restrictive
			zoning ordinances on medical cannabis
Local Bans/Zoning	10	10	businesses
Ease of Navigation	73	100	
			26-61b-105 outlines which conditions qualify for
			the use of medical cannabis. The defintion
			provided for pain in 26-61b-105(o) requires that
			individuals in pain try opioids and physical
			interventions before trying medical cannabis.
			According to the CDC, over 115 individuals lose
			their lives each to due to opioid related causes.
			An individual in pain should have the opiton to try
			medical cannabis <i>in lieu</i> of opioid therapy from
Comprehensive Qualify	40	50	the start of treatment.
Adding New Conditions		10	
			26-61b-105(p) and 26-61b-106 (5) allows new
			conditions to be added through the
> Law/Regulations Allov	5	5	Compassionate Use Board

			I I
			This category can not be assesed until an
			individual goes through the petiioning process to
> System Works for Add	0	5	asses wheter or not adding conditions works
Gystem Works for Add	0		The restrictions placed on minors under 26-61b-
			201(2) are not unduly burdensome and are
			similar to the restrictions put in place by other
Reasonable Access for	10	10	states programs
Treasonable Access for	10	10	26-61b-202-203 places stringent background
			check requirements on medical cannabis
Reasonable Caregiver E	2	4	caregivers
Number of Caregivers	2	2	our ogrivers
Tunibor of ourogivers	_	_	26-61b-106 Includes practicioners but not
Patient/ Practitioner- Fo	1	2	patients
	•	_	Patient fees are not etablished by this bill,
			however a medical cannabis pharamcy may not
			give products at no cost to patients 26-61b-
			502(7). Additonally, no mention is made for
			lowincome individuals receiving a discount or
Reasonable Fees (Patie	5	10	waiver on fees
,			26-61b-201(5) limits card vaildity to 30 days upon
			the first issuance, 60 days upon the first renewal
			and then six months for subsequent renewals.
			This is one of the shortest vard validity times in
Allows Multiple-Year Re	0	2	the country.
•			26-61b-107 provides reasonable training and
			education requirements for qualified medical
Reasonable Physician F	5	5	providers
			26-61b-105(o) puts a preference on physical
Does Not Classify Cann	3	5	interventions and opioids before cannabis
Functionality	40	100	
			This category is difficult to asses until a program
			is fully operational. However, to due the limited
Patients Able to Access			number of access points for patients and the
Medicine at			challenges of using a central sate fill pharmacy, it
Dispensaries or by			is projected that Utah could vastly improve in this
Cultivation	15	50	category.
No Significant			
Administrative or Supply			
Problems	5	15	* See note in Access to Medicine Category

			T
Patiients Can Receive Legal Protections Within Reasonable Time frame of Doctor's Recommendation	8	10	58-37-3.8 An individual receives protection of the affirmative defense upon diagnosis of a qualifying conidtion and an existing relationship with a medical provider who believes that patient can benfit from the medical use of cannabis.
Reasonable Posession Limits	4	5	26-61b-502 outlines the possesion limits a qualifying patient can have. While it is lower than some states, 56 grams of unprocessed cannabis, or just under two-ounces per 14 day period is a relatively reasonable possesion limit
Reasonable Purchase Limits	4	5	26-61b-502 outlines thepurchase limits a qualifying patient can have. While it is lower than some states, 56 grams of unprocessed cannabis, or just under two-ounces per 14 day period is a relatively reasonable purchase limit
Allows Patients to Medicate where they Choose	4	5	26-61b-204(2)© prevents an individual from using medical cannabis in public view except for a medical emeergency
Covered by Insurance/State Health Aid	0	3	No mention of this in draft bill
Financial Hardship (Fee Waivers/ Discount Medicine)	0	7	No mention of this in draft bill
Consumer Safety and Provider Requirements	56.83	100	
Dispensing Chaff Training		25	A 445 204/7\
Staff Training Standard Operating	5	5	4-41b-301(7)
Procedures		5	
> Facility Sanitary		3	
Conditions	1.25	1.25	4-41b-301(7)
> Storage Protocols	0	1.25	Not in draft bill
> Reasonable Security	<u> </u>	1.20	THOCH GIGHT DIN
Protocols	1.25	1.25	4-41b-203(1)(d)
> Inventory Control	1.25	1.25	4-41b-103
			1

Recall Protocol and			T
Adverse Event			
Reporting	3	5	4-41b-702
Product Labeling	5.01	5	
> Product Contents			
Including Source			
Material Identification	1.67	1.67	4-41b-602
> Allergens	1.67	1.67	4-41b-602
> Potency/Compound			
Identification	1.67	1.67	4-41b-602
Required Testing	5	5	
> Active Compound			
Identification		1.67	4-41b-701(1)(a)(i)
> Contaminants		1.67	4-41b-701(1)(b)
> Potency		1.67	4-41b-701(1)(a)(i)
Grow/Cultivation	18.50	25	
Staff Training	5	5	
Standard Operating			
Procedures	3.00	5	
> Facility and			
Equipment Sanitary			
Conditions	0.71	0.71	4-41b-203(3)(f)
> Workforce Safety			
Protocols	0	0.71	Not in draft bill
> Storage Proocols			
(Short Term and Long			
Term) Storage)	0	0.71	not in draft bill
> Reasonable Security			
Protocols	0.71	0.71	4-41b-203(1)(d)
> Batch and Lot			
Tracking	0.71	0.71	4-41b-103
> Disposal/Waste	0.71	0.71	4-41b-405
> Water Management	0	0.71	not in draft bill
Pesticide Guidance	2.5	5	
> Pesticide Guidance	2.5	2.5	4-41b-203(2)
> Pesticide Labeling	0	2.5	guidance on labeling not in draft bill
Required Testing	5	5	
> Active Ingredient			
Identification	1.25	1.25	4-41b-701(1)(a)(i)
> Contaminants	1.25	1.25	4-41b-701(1)(b)

> Potency	1.25	1.25	4-41b-701(1)(a)(i)
> Sample Retention	1.25	1.25	4-41b-702(1)(b)
Recall Protocol and			\ /\ /
Adverse Event			
Reporting	3	5	4-41b-702
Manufacturing	20	25	
Staff Training	5	5	
Standard Operating			
Procedures	3	5	
> Facility and			
Equipment Sanitary			
Conditions	1	1	4-41b-203(3)(f)
> Workforce Safety			
Protocols	0	1	Not in draft bill
> Storage Proocols	0	1	Not in draft bill
> Reasonable Security			
Protocols	1	1	4-41b-203(1)(d)
> Batch and Lot			
Tracking	1	1	4-41b-103
Product Labeling	5	5	
> Product Contents			
Including Source			
Material Identification	1.67	1.67	4-41b-602
> Allergens	1.67	1.67	4-41b-602
> Potency and			
Compound Information	1.67	1.67	4-41-602
Required Testing	4	5	
> Active Ingredient	_	_	
Identification	1	1	4-41b-701(1)(a)(i)
> Contaminants	1	1	4-41b-701(1)(b)
> Potency	1	1	4-41b-701(a)(i)
> Shelf Life Testing	0	1	Not in draft bill
> Sample Retention	1	1	4-41b-702(1)(b)
Recall Protocol and			
Adverse Event		_	
Reporting	3	5	4-41b-702
Labaratama Occasión	40.00	0.5	
Laboratory Operations	18.32	25	
Staff Training	5	5	

Method Validation in			
Accordance with AHP			
Guidelines	0	5	Not in draft bill
Result Reporting	5	5	4-41b-701
Independent or Third			
Party	5	5	4-41b-701
Standard Operating			
Procedures and			
Protocols	3.32	5	
> Equipment and			
Instrument Calibration	0.83	0.83	4-41b-203
> Sample Tracking	0.83	0.83	4-41b-103
> Facility and			
Equipment Sanitary			
Conditions	0.83	0.83	4-41b-203(3)(f)
> Disposal/Waste	0.83	0.83	4-41b-405
> Storage Protocols	0.00	0.83	Not in draft bill
> Workforce Safety	-		
Protocols	0	0.83	Not in draft bill