



Summary of Pennsylvania's Medical Marijuana Act

On April 17, 2016, Gov. Tom Wolf signed into law SB 3, Pennsylvania's compassionate medical cannabis legislation. The law went into effect on May 17, 2016, and the first dispensaries began serving patients in April 2018.

Below is a summary of The Medical Marijuana Act (SB 3):

Qualified Medical Conditions: Patients can qualify for medical cannabis if they have a terminal illness or if they suffer from cancer, including remission therapy; HIV/AIDS; amyotrophic lateral sclerosis; Parkinson's disease; multiple sclerosis; epilepsy; inflammatory bowel disease; neuropathies; Huntington's disease; Crohn's disease; post-traumatic stress disorder; intractable seizures; glaucoma; autism; sickle cell anemia; damage to the nervous tissue of the CNS (brain-spinal cord) with objective neurological indication of intractable spasticity and other associated neuropathies; severe, chronic, or intractable pain; dyskinetic and spastic movement disorder; or addiction substitute therapy — opioid reduction.

The above list reflects some additions made by the Health Department in May 2018, including addiction substitute therapy and removing limitations on when intractable pain qualifies.

Certifying Physicians: To qualify for the program, a patient must be under the ongoing care of a physician who issues a certification during an in-person visit. The certification must state that the patient has a qualifying medical condition and that the physician believes he or she could benefit from medical cannabis. Physicians must register, complete a four-hour course, and report to the department if a patient no longer needs access to medical cannabis as a result of improved health or death.

Regulatory Authority: The Department of Health is responsible for implementing the program, including developing rules, processing applications, and issuing patient ID cards and licenses. The law created an advisory board to make recommendations to the department. The board is comprised of 15 members, including three law enforcement members, several health or medical experts, and at least one patient advocate. Two years after the law took effect, the board was required to issue a report including recommendations regarding access to dry leaf or plant cannabis. In its [report](#), the board recommended a number of changes to the program, including allowing dry leaf cannabis, and the health department accepted the recommendations and promulgated revised rules.

Usage Limitations: Initially, the only types of medical cannabis allowed were pills, oils, gels, creams, ointments, tinctures, liquid, and non-whole plant forms for administration through vaporization. In May 2018, in keeping with the advisory board recommendations, the health department issued revised regulations to allow whole plant, flower cannabis. Dispensaries cannot sell edibles, but medical cannabis products could be mixed into food or drinks to facilitate ingestion by a patient in a facility or residence. Vaporization is allowed, and smoking is prohibited.

Health Insurance: Government medical assistance programs and private health insurers are not required to reimburse any costs involved with the use of medical cannabis or any costs associated with an employer having to make accommodations for the use of medical cannabis in the workplace.

Out-of-State Patients: Patients registered for medical cannabis in another state are not allowed access to medical cannabis in Pennsylvania.

Growers and Processors: The department is allowed to issue 25 combined grower and processor permits. In the first round of granting permits, 12 permits were issued for grower/processors. Grower/processors are required to use seed-to-sale tracking, thorough record keeping and retention, surveillance systems, and additional security measures.

Dispensaries: The board was directed to issue permits to no more than 50 dispensaries, which can each have three locations, allowing for up to 150 total dispensaries. In the first round of granting permits, the department issued 27 permits for dispensaries. Dispensaries first began serving patients in April 2018.

Legal Protections: A registered patient or caregiver is protected from arrest, prosecution, and discrimination in child custody. Employers do not have to accommodate employees' on-site use. Legal protections do not take effect until the patient has been issued a medical cannabis registration card, apart from a safe harbor provision for minors.

Taxes and Fees: Applicants pay \$5,000 per dispensary application and \$10,000 for grower/processor applications. Medical cannabis business licensees pay registration fees of \$30,000 for each dispensary location and \$200,000 for grower/processors. The grower/processor also pays a 5% tax on the sale of medical cannabis to a dispensary. Patients are initially charged \$50 for an identification card, which can be waived for financial hardship. All fees may be modified by the advisory board.

Sunset Provision: Portions of the law related to dispensaries will expire three years after the federal government completes rescheduling of marijuana.