Title 19 – DEPARTMENT OF HEALTH AND SENIOR SERVICES
Division 30 – Division of Regulation and Licensure
Chapter 95 – Medical Marijuana

PROPOSED RULE

19 CSR 30-95.080 Dispensary Facility

PURPOSE: Under Article XIV of the Missouri Constitution, the Department of Health and Senior Services has the authority to regulate and control Medical Marijuana Facilities. This rule explains what regulations apply only to Dispensary Facilities.

(1) Access to Dispensary Facility Licenses.
   (A) The number of dispensary facility licenses will be limited to one hundred ninety-two (192) unless the department determines the limit must be increased in order to meet the demand for medical marijuana by qualifying patients.
   (B) Dispensary facility licenses will be limited to twenty-four (24) in each of the eight (8) United States congressional districts in the state of Missouri as drawn and in effect on December 6, 2018. A map of the state of Missouri showing the applicable boundary lines of Missouri’s congressional districts will be available on the department’s website at http://medicalmarijuana.mo.gov.
   (C) A facility license will be issued for a single facility in a single location. Combinations of licenses at the same location must be approved pursuant to 19 CSR 30-95.040(4)(C).

(2) Dispensary Facility Requirements. In addition to the requirements of 19 CSR 30-95.040, dispensary facilities shall also comply with the following:
   (A) Dispensary facilities must ensure all facility employees are trained in at least the following:
       1. The use of security measures and controls that have been adopted by the facility for the prevention of diversion, inversion, theft, or loss of marijuana;
       2. Proper use of the statewide track and trace system;
       3. Procedures for responding to an emergency, including severe weather, fire, natural disasters, and unauthorized intrusions;
       4. Standards for maintaining the confidentiality of information related to the medical use of marijuana, including but not limited to compliance with the Health Insurance Portability and Accountability Act;
       5. Procedures for verifying the identity and purchase limitations of qualifying patients and primary caregivers;
       6. The differences in the purported effects and effectiveness of the strains of medical marijuana available for purchase at that dispensary and the methods of their use; and
       7. Recognizing signs of medical marijuana abuse in patients.
   (B) Dispensary facilities must make available to all customers patient education materials that include at least the following:
       1. Local resources for concerns about addiction, as well as the phone number for the Substance Abuse and Mental Health Services Administration’s National Helpline;
2. Information about the different strains of medical marijuana available at that dispensary and the purported effects of the different strains;
3. Information about the purported effectiveness of various methods, forms, and routes of administering medical marijuana;
4. Information about potential risks and possible side effects of medical marijuana use, including risk of poisoning and the phone number for the closest poison control center; and
5. The prohibition on consuming marijuana for medical use in a public place, including the definition of what constitutes a public place pursuant to this rule.

(C) Dispensary facilities must, for every transaction—
1. Receive the transaction order at the dispensary directly from the qualifying patient or primary caregiver in person, by phone, or via the internet, and not from a third party;
2. At the time of sale, verify through the statewide track and trace system that the qualifying patient or primary caregiver is currently authorized to purchase the amount of medical marijuana requested and, in the case of a seed purchase, that the patient or primary caregiver is currently authorized to cultivate medical marijuana;
3. In the case of a delivery order, receive payment before the medical marijuana leaves the dispensary, subject to refund if the delivery cannot be completed; and
4. At the time of sale or delivery, require production of a qualifying patient or primary caregiver identification card, a government-issued photo ID, and in the case of medical marijuana seed purchases, a patient cultivation identification card.

(D) Dispensary facilities must report any incident of theft or attempted theft of medical marijuana to the department within twenty-four (24) hours of the incident.

(E) Dispensary facilities must design their facility and staffing in such a way as to accomplish the following:
1. The general public, qualifying patients, and primary caregivers may only enter the facility through one access point into an area where facility agents shall screen individuals for qualifying patient or primary caregiver status. No medical marijuana may be accessible in this area;
2. Only qualifying patients, primary caregivers, and, if requested by a qualifying patient, up to two (2) additional persons to support the qualifying patient, may enter any areas beyond the facility’s access point area; and
3. In any limited access area where medical marijuana is accessible, the facility shall only allow access at any given time for a number of qualifying patients and/or primary caregivers equal to the number of staff available to serve those individuals at that time.

(F) Dispensary facilities shall not sell medical marijuana until the medical marijuana has been tested by a testing facility, according to the provisions of 19 CSR 30-95.070, and been verified as passing all required testing.

(G) Dispensary facilities may only transport medical marijuana:
1. To qualifying patients, primary caregivers, testing, manufacturing, and other dispensary facilities;
2. If the facility complies with the requirements of 19 CSR 30-95.100(2).

(H) Dispensary facilities that sell ingestible medical marijuana-infused products shall comply with the applicable food safety standards set forth in 19 CSR 20-1.025.

(I) Dispensary facilities shall store all medical marijuana—
1. At the approved location of the facility; or
2. In offsite warehouses that comply with the security requirements of 19 CSR 30-95.040(4)(H), the location requirements of 19 CSR 30-95.040(4)(B), and that have been approved pursuant to 19 CSR 30-95.040(3)(C).

(J) Dispensary facilities shall only sell medical marijuana seeds acquired from cultivation facilities.

(K) Dispensary facilities shall not sell medical marijuana to a qualifying patient or primary caregiver in amounts greater than what that individual is currently authorized to purchase per the statewide track and trace system.

(L) Dispensary facilities shall not sell medical marijuana seeds to a qualifying patient or primary caregiver who is not currently authorized to cultivate medical marijuana.

(M) Dispensary facilities may accept returns and issue refunds or credits as needed except that medical marijuana that has been removed from the packaging in which it arrived at the dispensary, whether removed before sale by the dispensary or after sale by a patient or caregiver, may not be accepted as a return.

(N) Dispensary facilities shall not disburse medical marijuana as part of a promotional event. If a facility disburse medical marijuana free of charge for any other reason, the facility shall record that disbursement of product in its seed-to-sale system with all relevant entries, including the qualifying patient or primary caregiver information and the amount of medical marijuana disbursed to that qualifying patient or primary caregiver.

(O) Dispensary facilities shall not allow consumption of medical marijuana on their licensed premises.

(P) Dispensary facilities shall not allow physicians to meet with individuals on the dispensary’s premises for the purpose of certifying them as qualifying patients.

AUTHORITY: Sections 1.3.(1)(b) and 1.3.(2) of Article XIV, Mo. Const. Original rule filed May 24, 2019. Emergency rule filed May 24, 2019, effective June 3, 2019, expires February 27, 2020.

PUBLIC COST: This proposed rule will cost state agencies or political subdivisions less than five hundred dollars ($500) in the aggregate.

PRIVATE COST: This proposed rule has an estimated cost to private entities of at least $9,600,000 in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with Lyndall Fraker, PO Box 570, Jefferson City, MO 65102 or via email at MMPublicComment@health.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.