## SB118 & HB166 Highlights & Points of Interest

- Provides qualifying patients the choice, freedom, or liberty to try cannabis without fear of prosecution
- Creates, "Department Medical Cannabis Administration" within the Public Protection Cabinet responsible for:
  - Public safety
  - Administrative regulations
  - Licensing of patients & caregivers
  - Licensing of canna-businesses
- ❖ Localities opt in to having canna-business licensing within their district
  - Localities opting into program receive 20% of excise tax & revenue from canna business licensing to be used for (\*mentions of taxing are only in HB166)
    - 1. Hiring new drug recognition experts (DRE's)
    - 2. Local enforcement of the medical cannabis law
    - 3. Science based drug rehabilitation programs
- Patients must have:
  - Qualifying condition
  - Qualifying practitioner
  - Certification from qualifying practitioner
  - Approval from "Department Medical Cannabis Administration"
  - Abide by rules & regulations or loose the freedom
- Rules & Regs
  - Everyone in program must have department approved license
  - $^{\circ}$  No public consumption smoking or otherwise
  - **DWI/DUI** remain prohibited. Funding for local DRE's used to curb offenses
  - **No advertising** (billboards, radio, or tv)
  - KASPER like program for patient consumption monitoring
  - Product inventory & monitoring of canna-businesses
  - Practitioner can not recommend a compassion center or vice versa
  - All cultivation of cannabis must be in locked enclosed facility
  - 10mg per serving for oral consumption products
    - Must have state approved identifiable mark on product
    - Not resemble a recognizable product (gummy bear...)
    - Must be in childproof container
    - Sold in opaque containers