

ARIZONA HOUSE OF REPRESENTATIVES
Fifty-fourth Legislature - First Regular Session

COMMITTEE ON HEALTH & HUMAN SERVICES

Report of Special Meeting
Friday, March 29, 2019
House Hearing Room 4 -- 9:00 A.M.

MINUTES RECEIVED
CHIEF CLERK'S OFFICE
3-29-19

Convened 9:03 A.M.
Adjourned 11:21 A.M.

Members Present

Mr. Allen
Ms. Butler
Ms. Griffin
Ms. Nutt
Ms. Powers Hannley
Mr. Shah
Mr. Lawrence, Vice-Chairman
Mrs. Barto, Chairman

Members Absent

Ms. Hernandez

Agenda

Original Agenda – Attachment 1

Request to Speak

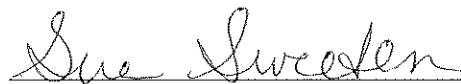
Report – Attachment 2

Committee Attendance

Report – Attachment 3

Committee Action

<u>Bill</u>	<u>Action</u>	<u>Vote</u>	<u>Attachments</u>
SB1156	DP	8-0-0-1	4, 5, 6
SB1494	DP	8-0-0-1	7, 8, 9
SB1246	DP	8-0-0-1	10, 11
SB1306	DP	8-0-0-1	12, 13
SB1538	DPA	8-0-0-1	14, 15, 16
SB1402	DP	8-0-0-1	17, 18
SCR1021	DP	5-3-0-1	19, 20



Sue Sweeten, Committee Secretary
March 29, 2019

(Original attachments on file in the Office of the Chief Clerk; video archives available at <http://www.azleg.gov>)

Convened 9:03 a.m.
Adjourned 11:21 a.m.

ARIZONA HOUSE OF REPRESENTATIVES
Fifty-fourth Legislature - First Regular Session

SPECIAL MEETING AGENDA

COMMITTEE ON HEALTH & HUMAN SERVICES

DATE Friday, March 29, 2019

ROOM HHR 4

TIME 9:00 A.M.

Members:

Mr. Allen J
Ms. Butler
Ms. Griffin

Ms. Hernandez A
Ms. Nutt
Ms. Powers Hannley

Mr. Shah
Mr. Lawrence, Vice-Chairman
Mrs. Barto, Chairman

With permission of the Speaker pursuant to House Rule 9(C)(7)

Bills	Short Title	Strike Everything Title
① SB1156	<u>DP</u> water protection; technical correction(now: trauma treatment services; grants; appropriation) (Gowan) <u>800-1</u> HHS, APPROP, RULES	
③ SB1246	<u>DP</u> behavioral health; foster children (Brophy McGee: Carter) <u>800-1</u> HHS, APPROP, RULES	
④ SB1306	<u>DP</u> kinship foster care; TANF monies (Brophy McGee) <u>800-1</u> HHS, APPROP, RULES	
⑥ SB1402	<u>DP</u> controlled substances; schedule designations (Carter) <u>800-1</u> HHS, RULES	
② SB1494	<u>DP</u> marijuana; testing; advisory council; library (Gowan) <u>800-1</u> HHS, RULES	
⑤ SB1538	<u>DPA</u> adult protective services (Brophy McGee) <u>800-1</u> HHS, RULES	

Bills	Short Title	Strike Everything Title
⑦ SCR1021	<u>DP</u> medical marijuana; fingerprinting; enforcement (Borrelli)	
	<u>5-30-1</u> HHS, RULES	

ORDER OF BILLS TO BE SET BY THE CHAIRMAN

sas
3/22/19

People with disabilities may request reasonable accommodations such as interpreters, alternative formats, or assistance with physical accessibility. If you require accommodations, please contact the Chief Clerk's Office at (602) 926-3032 or through Arizona Relay Service 7-1-1.

Information Registered on the Request to Speak System

House Health & Human Services (3/29/2019)

SB1156, water protection; technical correction (NOW: trauma treatment services; grants; appropriation)

Testified in support:

Brett Mecum, DEHP, LLC

Support:

Gibson McKay, Forever 46

All Comments:

Gibson McKay, Forever 46: thanks

SB1246, behavioral health; foster children

Testified in support:

Magdalena Jorquez, ARIZONA DEPARTMENT OF CHILD SAFETY

Support:

Beth Rosenberg, CHILDREN'S ACTION ALLIANCE; Chanetta Curtis, ARIZONA DEPARTMENT OF CHILD SAFETY; Bahney Dedolph, Arizona Council Of Human Service Providers; Kyle Sawyer, AZ HEALTH CARE COST CONTAINMENT SYSTEM

All Comments:

Bahney Dedolph, Arizona Council Of Human Service Providers: Truly integrated physical and behavioral health care results in improved health outcomes and reduces costs by addressing concerns before they become life long problems.

SB1306, kinship foster care; TANF monies

Testified in support:

Kelli Appling, representing self

Testified as neutral:

Kathy Ber, DES Director of Legislative Services, Arizona Department Of Economic Security

Support:

Eddie Sissons, NATIONAL ASSOCIATION OF SOCIAL WORKERS, ARIZONA CHAPTER; Rivko Knox, representing self; Beth Rosenberg, CHILDREN'S ACTION ALLIANCE; Bahney Dedolph, Arizona Council Of Human Service Providers;

Jennifer Kaderlik, representing self; Dianne Post, representing self; Rebecca Beebe, ASSN OF ARIZONA FOOD BANKS; Elizabeth Goff, representing self; Rebecca Olsen McHood, representing self; steven moortel, Childrens Action Alliance

All Comments:

Rivko Knox, Self: A very investment in 'our' children!!; Jennifer Kaderlik, Self: Kinship care should be encouraged and funded, with accessible information and supports. This keeps children with family!

SB1402, controlled substances; schedule designations

Testified in support:

Kam Gandhi - Arizona State Board of Pharmacy, Arizona State Board Of Pharmacy, Self

SB1494, marijuana; testing; advisory council; library

Testified in support:

mikel weisser, representing self; John Mendibles, representing self; Tory Roberg, MITA-AZ; Brett Mecum, ARIZONA CANNABIS LABORATORY ASSOCIATION; Jessica Crozier, representing self; Jim Morrison, representing self; Blake Neri, representing self; Ryan Treacy, representing self; Tabitha Hauer, representing self

Testified as neutral:

Jeff Taylor, MATFORCE; Shannon Whiteaker, AZ DEPT OF HEALTH SERVICES

Support:

Theresa Ulmer, ULMER CONSULTING LLC; Gibson McKay, Forever 46; Michael Robinette, representing self; erol guvenoz, representing self

Oppose:

Jason Barraza, Associate Director, HARVEST INC.; Douglas Cole, Copperstate Farms LLC; Wendy Briggs, HARVEST INC.; Pele Fischer, Arizona Dispensaries Association

All Comments:

mikel weisser, Self: Multiple reasons to support 1494: public health & safety, quality reassurance, program legitimacy + public outcry. AZ is the only state in the nation w/out testing. This is the 3rd year program has been proposed. It's business friendly public safety.; John Mendibles, Self: The testing of Medical marijuana is of vital importance to the State of Arizona, for the sole purpose of the patients and those who are responsible for providing a true medicine.; Jessica Crozier, Self: I am the mom of a medically fragile child.; Jim Morrison, Self: I am in support of testing for medical marijuana in Arizona. Our company does the events in Arizona and currently test dispensaries for mold, pesticides and other harmful elements and have over 1600 test performed. We need testing; Blake Neri, Self: Clean medicine is a right we all enjoy when taking Tylenol, it should be the same with cannabis.; Ryan Treacy, Self: Ryan with ACLA; Tabitha Hauer, Self: Owner of Desert Valley Testing-lab owner credentials, education, experience in the industry; Theresa Ulmer, ULMER CONSULTING LLC: The legislature should consider taking an additional step to reduce card fees. ADHS has accumulated more than the necessary funds to administer the program. Per 36-2803 section 5(a); Gibson McKay, Forever 46: Thanks!; Michael Robinette, Self: As

a patient in the AMMA, I urge you to pass SB1494 to protect patients from purchasing tainted medication in dispensaries. Testing is necessary for this protection and SB1494 will allow for that testing to occur.; erol guvenoz, Self: Arizona's, APAAC, is violating Tax Paying Cannabis Patients rights with their recent Brief & statements submitted to the Supreme Court. This is resulting in law enforcement & healthcare discrimination in all counties and needs to be addressed.; Douglas Cole, Copperstate Farms LLC: While we strongly support testing, SB1494 still needs amendments to assure all MMJ products are tested. Hopefully that will happen in COW and the sponsor will concur.; Pele Fischer, Arizona Dispensaries Association: The ADA is supportive of a medical marijuana testing requirement. The ADA believes that a testing program must be comprehensive, reliable, and valid in order to ensure patient safety. SB 1494 in its current form does not achieve those goals.; Jeff Taylor, MATFORCE: C

SB1538, adult protective services

Testified in support:

Kathy Ber, DES Director of Legislative Services, Arizona Department Of Economic Security

SCR1021, medical marijuana; fingerprinting; enforcement

Testified in support:

Brett Mecum, representing self

Neutral:

Shannon Whiteaker, AZ DEPT OF HEALTH SERVICES

Oppose:

Wendy Briggs, HARVEST INC.; Jason Barraza, Associate Director, HARVEST INC.; Theresa Ulmer, ULMER CONSULTING LLC; Pele Fischer, Arizona Dispensaries Association; Tory Roberg, MITA-AZ

All Comments:

Tory Roberg, MITA-AZ: We support testing of medical cannabis, however we do not support the program housed under the Dept of Agriculture, the testing program belongs with Health Services.

PLEASE COMPLETE THIS FORM FOR THE PUBLIC RECORD



HOUSE OF REPRESENTATIVES

Please PRINT Clearly

Committee on Health & Human Services Bill Number 1156
 Date 3/29/19 Support Oppose Neutral
 Name Tom Simpson Need to Speak? Yes No
 Representing Soul Sanctuary VETS house Are you a registered lobbyist? NO
 Complete Address 2204 E. Dawson Drive Phoenix AZ 85016
 E-mail Address Tom602783@gmail Phone Number 6027836635
 Comments: _____

FIVE-MINUTE SPEAKING LIMIT

PLEASE COMPLETE THIS FORM FOR THE PUBLIC RECORD



HOUSE OF REPRESENTATIVES

Please PRINT Clearly

Committee on Health and Human Services Bill Number 1156
 Date 3-29-2019 Support Oppose Neutral
 Name Joseph Sullins Need to Speak? Yes No
 Representing dehpuc Are you a registered lobbyist? NO
 Complete Address 3707 N. 7th Street #310 Phoenix AZ 85014
 E-mail Address Admin@dehpuc.com Phone Number 480-225-0555
 Comments: _____

FIVE-MINUTE SPEAKING LIMIT

PLEASE COMPLETE THIS FORM FOR THE PUBLIC RECORD



HOUSE OF REPRESENTATIVES

Please PRINT Clearly

Committee on HEALTH + HUMAN SERVICES Bill Number 1156

Date 3/29/19 Support Oppose Neutral

Name JACK WALLACE Need to Speak? Yes No

Representing SOUL SANCTUARY VETERANS Are you a registered lobbyist? No

Complete Address 414 N. 28th St, Phoenix

E-mail Address JACK@SOUL-SANCTUARY.ORG Phone Number 480-250-1992

Comments: _____

FIVE-MINUTE SPEAKING LIMIT

ARIZONA STATE LEGISLATURE
Fifty-fourth Legislature - First Regular Session

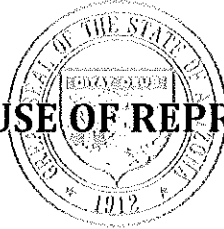
COMMITTEE ATTENDANCE RECORD

COMMITTEE ON HEALTH & HUMAN SERVICES

CHAIRMAN: Nancy K. Barto VICE-CHAIRMAN: Jay Lawrence

DATE	03/29/19	/19	/19	/19	/19
CONVENED	9:03 a.m	m	m	m	m
RECESSED					
RECONVENED					
ADJOURNED	11:21 AM				
MEMBERS					
Allen J	✓				
Butler	✓				
Griffin	✓				
Hernandez A	exc				
Nutt	✓				
Powers Hannley	✓				
Shah	✓				
Lawrence, Vice-Chairman	✓				
Barto, Chairman	✓				

✓ Present --- Absent exc Excused



ARIZONA HOUSE OF REPRESENTATIVES

SB 1156: trauma treatment services; grants; appropriation

PRIME SPONSOR: Senator Gowan, LD 14

BILL STATUS: Health and Human Services
Appropriations

Overview

Appropriates \$450,000 to the Department of Veterans' Services (DVS) to provide grants for trauma treatment services training.

History

The trauma treatment services program is a multidisciplinary outpatient program that is designed to teach veterans coping skills and to help veterans learn about how trauma has impacted their lives (U.S. Department of Veteran Affairs). DVS is charged with assisting veterans and their families in claiming privileges, rights and benefits they are entitled to under federal, state or local law, informing them of any federal, state and local laws enacted to benefit veterans and their families and collecting information relating to services and facilities available to veterans (A.R.S. § 41-603).

DVS has established a state home for veterans' trust fund for the purpose of operating and maintaining state operated nursing and domiciliary homes for Arizona veterans. The trust fund consists of monies generated through the operation of the Arizona veterans' home and is subject to annual appropriation by the legislature (A.R.S. § 41-608.01). The state veterans' cemetery fund is established consisting of monies appropriated by the state legislature and federal monies (A.R.S. § 41-608.02). The hyperbaric oxygen therapy for military veterans fund is established consisting of private donations, grants, bequests and any other monies and are continuously appropriated to be used to provide financial assistance to veterans for hyperbaric oxygen therapy (A.R.S. § 41-610.01).

Provisions

1. Appropriates \$450,000 from the state GF in FY 2020 to DVS to provide grants to contractors who provide trauma treatment service training to any of the following health professionals:
 - a. A licensed physician;
 - b. A licensed registered nurse practitioner;
 - c. A licensed physician assistant;
 - d. A licensed psychologist;
 - e. A licensed behavioral health professional who is:
 - i. Licensed for independent practice; or
 - ii. Is supervised by a licensed health professional who is licensed for independent practice.

(Sec. 1)

<input type="checkbox"/> Prop 105 (45 votes)	<input type="checkbox"/> Prop 108 (40 votes)	<input type="checkbox"/> Emergency (40 votes)	<input type="checkbox"/> Fiscal Note
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ARIZONA HOUSE OF REPRESENTATIVES
Fifty-fourth Legislature - First Regular Session

ROLL CALL VOTE


COMMITTEE ON Health & Human Services BILL NO. SB 1156

DATE March 29, 2019 MOTION: DP

	PASS	AYE	NAY	PRESENT	ABSENT
Allen J		✓			
Butler		✓			
Griffin		✓			
Hernandez A					✓
Nutt		✓			
Powers Hannley		✓			
Shah		✓			
Lawrence, Vice-Chairman		✓			
Barto, Chairman		✓			
		8	0	0	1

Sue Sweeten
 COMMITTEE SECRETARY

APPROVED:


 NANCY K. BARTO, Chairman
 JAY LAWRENCE, Vice-Chairman

ATTACHMENT 5



dēhp® Integrative Care Evidence-based Study Results

dēhp® Team

- Josette Sullins, Founder and CEO
- Bob Bohanske, Ph.D., Chief of Clinical Services, Southwest Behavioral & Health Services
- John F. Wallace III, External and Governmental Affairs
- Dr. Maria Navarro, DBH, LPC, Clinical Supervisor

Address

3707 N. 7th St. Suite #310
Phoenix, AZ 85014

Contact

(602) 566-7627
admin@dehpcare.com

Website

www.dehpcare.com

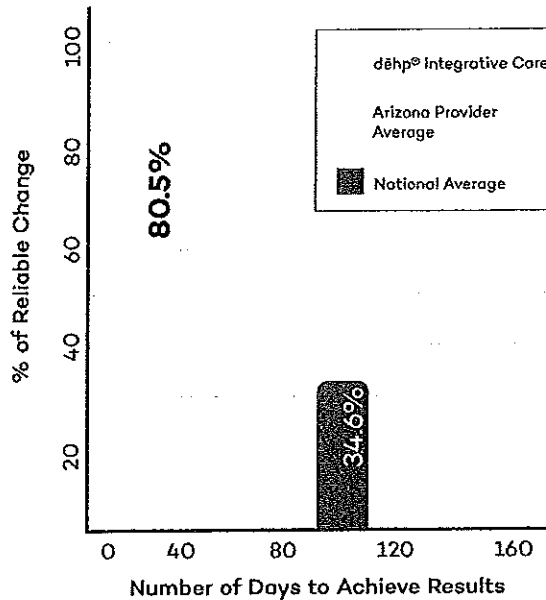
What Does dēhp® Do Differently?

dēhp® Treatment has a proven effectiveness and efficiency that exceeds other traditional forms of PTSD and trauma treatment. The data collected from dēhp® Integrative Care’s Evidence-based Study shows rapid and effective results for patients experiencing trauma, PTSD, and even physical disability.

Efficient

The Study results determined that the dēhp® Therapeutic Therapy had an 80.5% Reliable Change Index, (compared with an Arizona provider average of 53.9% and a National provider average of 34.6%). The dēhp® treatment was effective in 5.6 sessions conducted over 39.5 days (compared with an Arizona and National provider average of 15-30 sessions over 80-160 days.)

Outcome Rating Scale:
Reliable Change and Number of Days to Achieve Results

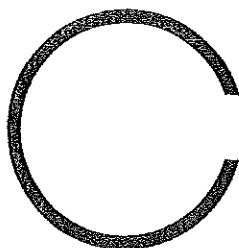


The Gold Standard rating forms that dēhp® Integrative Care used were the ORS, PHQ-9, WHODAS 2.0, SF-9, and SRS. These forms measure the patient’s feelings and growth, as well as their health and physical activity, during the treatment period.

Chairman of Institutional Review Board:
Bob Bohanske, PhD, FNAP
Southwest Behavioral & Health Services
(602) 257-9339

Investigator:
Maria Navarro, DBH, LPC
dēhp® Therapeutic
(602) 566-7627

SB+HS IRB Approved: 04/04/2016



integrative
care

dēhp® Integrative Care Evidence-based Study Results

Pre-dēhp® treatment, 72.5% of participants experienced Moderate to Severe Symptoms of mental illness.

Post-dēhp® treatment, 70% of participants ended up with Mild to No Symptoms at all.

Only 7.5% of participants reported Severe Symptoms after treatment

		Pre-dēhp®	%	Post-dēhp®	%
0-4	No Symptoms	0	0.0	16	40.0
5-9	Mild	11	27.5	12	30.0
10-14	Moderate	11	27.5	7	17.5
15-19	Mod/Severe	6	15.0	2	5.0
20-17	Severe	12	30.0	3	7.5

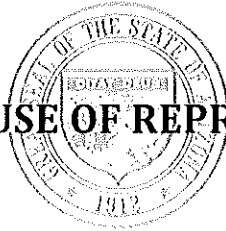
(As measured by the PHQ-9 (Patient Health Questionnaire, an Evidence based psychometric tool))

The World Health Organization Disability Assessment Schedule 2.0 is a health metric used to determine physical disability showed similar results with a **31.6% decrease in physical disability after dēhp® treatment.**

Pre-dēhp®		Post-dēhp®	
29	76.3%	17	44.7%

Research Approval

This research project was reviewed and approved by the Institutional Review Board for the Protection of Human Subjects at the Southwest Behavioral & Health Services. The Research Compliance Coordinator for this study is available for inquiry at (602) 257-9339.



ARIZONA HOUSE OF REPRESENTATIVES

SB1494: marijuana; testing; advisory council; library

PRIME SPONSOR: Senator Gowan, LD 14

BILL STATUS: Health & Human Services

Overview

Establishes the Medical Marijuana Testing Reference Library and the Medical Marijuana Testing Advisory Council (Council).

History

In 2010, Proposition 203 an initiative measure that was approved by the voters established the Arizona Medical Marijuana Act (Act). The Act established the regulatory requirements for the Department of Health Services (DHS) including: rulemaking, registration and certification of a dispensary and dispensary agents, registration of qualifying patients and designated caregivers, issuance of registry identification cards, and finger printing requirements (Title 36, Chapter 28.1).

Provisions

1. Requires DHS to adopt rules regarding independent third-party laboratory certificates. (Sec. 1)
2. States that the total amount of fees may not exceed an amount that is sufficient to implement and administer the Act. (Sec. 1)
3. Prohibits independent third-party laboratory application fees to exceed \$5,000 and renewal fees may not exceed \$1,000. (Sec. 1)
4. Provides that the total amount of revenue generated from nonprofit medical marijuana dispensary application and renewal fees, registry identification card fee for nonprofit medical marijuana dispensary agents and independent third-party laboratory fees may not exceed an amount sufficient to implement and administer the nonprofit medical marijuana dispensary provisions. (Sec. 1)
5. Requires DHS to adopt rules for testing marijuana for medical use from nonprofit medical marijuana dispensaries before selling or dispensing marijuana to cardholders to determine unsafe levels of microbial contamination, pesticides, herbicides, fungicides, growth regulators and residual solvents and confirming the potency of the marijuana to be dispensed beginning July 2, 2020. The rules must:
 - a. Include process requirements for collecting, storing and testing samples of marijuana for medical use;
 - b. Establish potency standards with the standard variance allowance;
 - c. Establish remediation requirements for nonprofit medical marijuana dispensaries if testing identifies unsafe levels of microbial contamination, pesticides, herbicides, fungicides, growth regulators or residual solvents in the marijuana. Remediation may include destroying contaminated medical marijuana products, imposing fines and suspending or revoking a dispensary's license; and
 - d. Establish standards for reporting test results to DHS and the designated caregiver or nonprofit medical marijuana dispensary that cultivates the marijuana. DHS must make the test results available to the general public. (Sec. 1)

<input checked="" type="checkbox"/> Prop 105 (45 votes)	<input checked="" type="checkbox"/> Prop 108 (40 votes)	<input type="checkbox"/> Emergency (40 votes)	<input type="checkbox"/> Fiscal Note
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6. Mandates that DHS adopt rules to certify independent third-party laboratories that analyze marijuana cultivated for medical use. Additionally, DHS must establish certification fees for laboratories. In order to be certified as an independent third-party laboratory that is allowed to test marijuana for medical use, an independent third-party laboratory:
 - a. Must meet criteria established by DHS;
 - b. May not have any familial or financial relationship with or interest in a nonprofit medical marijuana dispensary or related medical marijuana business entity or management company, or any familial or financial relationship with a designated caregiver for which the laboratory is testing marijuana for medical use in this state;
 - c. Must have a quality assurance program and standards;
 - d. Must have an adequate chain of custody and sample requirement policies;
 - e. Must have an adequate records retention process to preserve records; and
 - f. Must establish procedures to ensure that results are accurate, precise and scientifically valid before reporting the results. (Sec. 1)
7. States that DHS is responsible for proficiency testing and remediating problems with independent third-party laboratories that are certified and regulated. Remediation may include imposing fines and suspending or revoking a laboratory's certification. (Sec. 1)
8. Specifies that , beginning June 1, 2020, registered nonprofit medical marijuana dispensaries are subject to product testing by certified independent third-party laboratories. (Sec. 2)
9. Provides that an employee of DHS or any employee of any certified independent third-party laboratory may not be charged with or prosecuted for possession of any amount of marijuana that is cultivated for medical use and that the employee is using as a sample for testing as required. (Sec. 2)
10. Prohibits a registered nonprofit medical marijuana dispensary or agent from dispensing, delivering, or otherwise transferring marijuana to another person other than a certified independent third-party laboratory. (Sec. 3)

Marijuana Laboratory Testing Reference Library

11. Requires DHS to develop and maintain a marijuana laboratory testing reference library. DHS must require a certified laboratory to provide materials for the reference library, except that a certified laboratory is not required to provide testing protocols. (Sec. 4)
12. Specifies that the reference library must contain a collection of methodologies for marijuana testing in the areas of potency, homogeneity, contaminants and solvents consistent with the laboratory requirements adopted by DHS in rule. (Sec. 4)
13. Allows DHS to include in the reference library standard sample attainment procedures and standards related to sample preparation and laboratory analysis. (Sec. 4)
14. Permits DHS to spend necessary monies from the medical marijuana fund to develop and implement the medical marijuana testing reference library. (Sec. 4)
15. Requires DHS, by January 1, 2021, to make reference library materials, including the methodologies, publicly available and may continuously update the reference library as new materials become available. (Sec. 4)

Medical Marijuana Testing Advisory Council (Council)

16. Requires the DHS director to establish a Council to assist and make recommendations to the director regarding administering and implementing the Act. The director or the director's

designee must be a member of the advisory council and must appoint eleven members to the council including:

- a. The president or executive director of a statewide association representing the marijuana dispensaries, or the person's designee;
- b. The president or executive director of a statewide cannabis testing association, or the person's designee;
- c. The president or executive director of a medical marijuana trade association that does not primarily consist of dispensaries or cannabis laboratory testing facility owners, or the person's designee;
- d. A board member of an Arizona-based medical marijuana dispensary that is primarily focused on cultivation;
- e. A board member of a medical marijuana dispensary that is focused on concentrate;
- f. A board member of an Arizona-based cannabis testing laboratory;
- g. A laboratory scientist who holds a doctorate or who has at least three years of experience in cannabis laboratory testing;
- h. A person with a finance background who is a certified public accountant and who has at least three years of experience in finance and the medical marijuana industry;
- i. A registered qualifying patient; and
- j. A resident of this state who is a veteran of the United States Armed Forces. (Sec. 4)

17. Requires the Council to:

- a. Make recommendations and consult with the director regarding testing marijuana for medical use;
- b. Advise the director regarding expenditures from the Medical Marijuana Fund; and
- c. Provide additional assistance as the director deems necessary. (Sec. 4)

18. Provides that members of Council are not eligible to receive compensation but are eligible for reimbursement of expenses. (Sec. 4)

19. Sunsets the Council on July 1, 2027. (Sec. 4)

20. Contains both a proposition 105 and 108 clause. (Sec. 5 and 6)

**ARIZONA HOUSE OF REPRESENTATIVES
Fifty-fourth Legislature - First Regular Session**

ROLL CALL VOTE

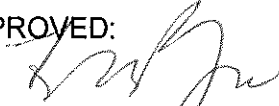
COMMITTEE ON Health & Human Services BILL NO. SB 1494

DATE March 29, 2019 MOTION: DP

	PASS	AYE	NAY	PRESENT	ABSENT
Allen J		✓			
Butler	✓	✓			
Griffin		✓			
Hernandez A					✓
Nutt		✓			
Powers Hannley		✓			
Shah		✓			
Lawrence, Vice-Chairman		✓			
Barto, Chairman		✓			
		8	0	0	1

Sue Sweden
COMMITTEE SECRETARY

APPROVED:

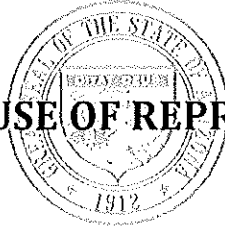

NANCY K. BARTO, Chairman
JAY LAWRENCE, Vice-Chairman

Attachment 8

Dispensary Name	Strain	microbials_yeast_and_m old	Type	Classificat ion
Valley Of The Sun	AZ Super Sky 9		999999 Flower - Cured	
OG Zonka Farms	Granddaddy Purple		999999 Flower - Cured	
OG Zonka Farms	Sunset Sherbert		999999 Flower - Cured	
OG Zonka Farms	Dosido		999999 Flower - Cured	
OG Zonka Farms	Cookies		999999 Flower - Cured	
CGA	Future		999999 Flower - Cured	
CGA	Golden Lemon		999999 Flower - Cured	
CGA	Wedding Cake		999999 Flower - Cured	
CGA	Mimosa		999999 Flower - Cured	
Abundant Organix	Crunch Berries		999999 Flower - Cured	
Abundant Organix	Star Lord		999999 Flower - Cured	
WAM	Gorilla Glue		999999 Flower - Cured	
WAM	Turquoise Jeep		999999 Flower - Cured	
WAM	707 Headband		999999 Flower - Cured	
WAM	Granddaddy Purple WamRock		999999 Moon Rock	
WAM	Gorilla Glue WamRock		999999 Moon Rock	
WAM	Black & Blue WamRock		999999 Moon Rock	
WAM	Black & Blue		999999 Flower - Cured	
Downtown Dispensary	Cornbread		999999 Flower - Cured	
Nature Med	Sweet Pink		999999 Flower - Cured	
Green Halo	Lemon Cake		999999 Flower - Cured	
SAINTS	Strawberry Cough		999999 Flower - Cured	
Desert Bloom	Desert Bloom OG		999999 Flower - Cured	
Purple Med	Platinum Purple		999999 Flower - Cured	
Bloom Dispensary	Blue Frost		999999 Flower - Cured	
Bloom Dispensary	Jamaican Gelato		999999 Flower - Cured	
Bloom Dispensary	Do-Si-Dos		999999 Flower - Cured	
Bloom Dispensary	TrainWreck		999999 Flower - Cured	
Bloom Dispensary	Orange Apircot		999999 Flower - Cured	
Bloom Dispensary	Wedding Cake		999999 Flower - Cured	
Downtown Dispensary	Cornbread		999999 Flower - Cured	
Downtown Dispensary	Conspiracy Kush		999999 Flower - Cured	
Downtown Dispensary	501st OG		999999 Flower - Cured	
Downtown Dispensary	White Buffalo		999999 Flower - Cured	
Mohave Cannabis Co.	Master Kush		999999 Flower - Cured	
Mohave Cannabis Co.	Jilly Bean		999999 Flower - Cured	
Mohave Cannabis Co.	Purple Urkle		999999 Flower - Cured	
Mohave Cannabis Co.	The White		999999 Flower - Cured	
Mohave Cannabis Co.	Wedding Cake		999999 Flower - Cured	
Mohave Cannabis Co.	Mendo Breath		999999 Flower - Cured	
Mohave Cannabis Co.	Afghani Bullrider		999999 Flower - Cured	

Green Gem	Blueberry	999999 Flower - Cured
Green Gem	Lemon Meringue	999999 Flower - Cured
The Green Halo	Grape Stomper	999999 Flower - Cured
Korova	Gelato	999999 Flower - Cured
Korova	Mendo Breath	999999 Flower - Cured
Korova	Super Silver Haze	999999 Flower - Cured
	NLBB Hot Rod Loaded	
Sublime Brands	Premium Roll	999999 Enhanced Preroll
Zeppy'z Craft	Orangeade	999999 Flower - Cured
Grow Sciences	Forbidden Fruit	999999 Flower - Cured
Hi-Klas	Purple Larry	999999 Flower - Cured
Hi-Klas	Lemon OG	999999 Flower - Cured
Hi-Klas	Gelato	999999 Flower - Cured
Hi-Klas	Pineapple Chunk	999999 Flower - Cured
Hi-Klas	Purple Punch	999999 Flower - Cured
Hi-Klas	Wedding Cake	999999 Flower - Cured
	Blueberry Muffin	
Hi-Klas	(Candyland Pheno)	999999 Flower - Cured
Hi-Klas	Slowtown Cookies	999999 Flower - Cured
Hi-Klas	Kryptonite	999999 Flower - Cured
Hi-Klas	Do-si-dos	999999 Flower - Cured
Hi-Klas	Savage Mendo	999999 Flower - Cured
Oxlong Farms	The D's	999999 Flower - Cured
Oxlong Farms	U2 Kush	999999 Flower - Cured
Oxlong Farms	Lemon Skunk	999999 Flower - Cured
Oxlong Farms	Blue Dream	999999 Flower - Cured
Rhizo Research	5 Alive	999999 Flower - Cured
Rhizo Research	Breath Work	999999 Flower - Cured
Rhizo Research	Rocky Dennis	999999 Flower - Cured
Rhizo Research	Jelly Breath	999999 Flower - Cured
Rhizo Research	Purple Punch	999999 Flower - Cured
Rhizo Research	Sophies Breath	999999 Flower - Cured
Dicot Farms	OG 18	999999 Flower - Cured
Dicot Farms	Grape Jelly	999999 Flower - Cured
Dicot Farms	Sour Bannana Sherbert	999999 Flower - Cured
Dicot Farms	Koffee Cake	999999 Flower - Cured
Dicot Farms	Grandpas OG	999999 Flower - Cured
Dicot Farms	Dawg Cookies	999999 Flower - Cured
High Grade	Grease Monkey	999999 Flower - Cured
High Grade	Dr Who	999999 Flower - Cured
High Grade	Harlox	999999 Flower - Cured
High Grade	Mendo Breath	999999 Flower - Cured
High Grade	Dosidos	999999 Flower - Cured
High Grade	Sweet Pink Grapefruit	999999 Flower - Cured
Phoenix Cannabis Co	Bear Candy #6	999999 Flower - Cured

Phoenix Cannabis Co	Dosidos #12/#9 B7238	999999 Flower - Cured
Phoenix Cannabis Co	Rem #10	999999 Flower - Cured
AZ Natural Selections	Ooze	999999 Flower - Cured
Tru Med	Valley Girl	999999 Flower - Cured
AZ Natural Selections	Clown Shoes	36000 Flower - Cured
Item 9	Dosido #22	33000 Flower - Cured
Monarch	Master Kush	32000 Flower - Cured
Green Pharms	Jigga Cookies	32000 Flower - Cured
Phoenix Relief	RBK	28000 Flower - Cured
Zeppy'z Craft	Gods Gift	26000 Flower - Cured
AZ Natural Selections	Lime OG	24000 Flower - Cured
Omni Potent Farms	DollFace 12	23000 Flower - Cured
Arizona Organix	Majin Buu	22000 Flower - Cured
Hi Klas	McDaddy Purple	15000 Flower - Cured
Phoenix Cannabis Co	Dosidos #12 B#0415	11000 Flower - Cured
Item 9	Charlottes Web #9	11000 Flower - Cured
The Holistic Center	Gelato	10000 Flower - Cured
Vapen Clear	Phoenix OG	10000 Flower - Cured



ARIZONA HOUSE OF REPRESENTATIVES

SB 1246: behavioral health; foster children

PRIME SPONSOR: Senator Brophy McGee, LD 28

BILL STATUS: Health and Human Services

Overview

Requires the Arizona Department of Child Safety (DCS) to provide behavioral health services to eligible children if certain conditions are met.

History

The Comprehensive Medical and Dental Program (CMDP) is the health plan responsible for ensuring, in partnership with foster care providers, the provision of appropriate and quality health care services for the well-being of Arizona's children in foster care.

A.R.S. § 8-512 requires DCS to provide CMDP services for each child who is: in a voluntary placement; in the custody of DCS in an out-of-home placement; and in the custody of a probation department and placed in foster care. CMDP consists of those benefits provided by the Arizona Health Care Cost Containment System (AHCCCS) and as set forth in the approved Medicaid state plan.

Provisions

1. Removes outdated provisions related to the CMDP program. (Sec. 1)
2. Requires DCS to provide CMDP, *including behavioral health services*, for each child that meets the requirements (conditional enactment date). (Sec. 2)
3. Eliminates a provision that allows a provider that has an agreement registration to be employed through the CMDP program by the foster parent, relative, certified adoptive parent, agency or department having responsibility for the child. (Sec. 2)
4. Exempts services provided by AHCCCS as set forth in the state Medicaid plan from contracts entered into by DCS to procurement requirements. (Sec. 3)
5. Contains a conditional enactment clause for DCS to provide behavioral health services to eligible members for the CMDP program that does not become effective unless by January 1, 2024 funding is made available by the federal government and this state. (Sec. 4)
6. Requires DCS to notify, in writing, the director of the Arizona Legislative Council by February 1, 2024:
 - a. Of the date on which the condition was met; or
 - b. That the condition was not met. (Sec. 4)
7. Contains an effective date for behavioral health services conditioned on available federal funding. (Sec. 5)

<input type="checkbox"/> Prop 105 (45 votes) <input type="checkbox"/> Prop 108 (40 votes) <input type="checkbox"/> Emergency (40 votes) <input type="checkbox"/> Fiscal Note
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ARIZONA HOUSE OF REPRESENTATIVES
Fifty-fourth Legislature - First Regular Session

ROLL CALL VOTE

COMMITTEE ON Health & Human Services BILL NO. SB 1246

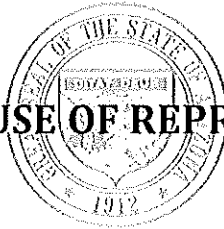
DATE March 29, 2019 MOTION: DP

	PASS	AYE	NAY	PRESENT	ABSENT
Allen J		✓			
Butler		✓			
Griffin		✓			
Hernandez A					✓
Nutt		✓			
Powers Hannley		✓			
Shah		✓			
Lawrence, Vice-Chairman		✓			
Barto, Chairman		✓			
		8	0	0	1

Sue Sweeten
 COMMITTEE SECRETARY

APPROVED: *[Signature]*
 NANCY K. BARTO, Chairman
 JAY LAWRENCE, Vice-Chairman

Attachment 11



ARIZONA HOUSE OF REPRESENTATIVES

SB 1306: kinship foster care; TANF monies

PRIME SPONSOR: Senator Brophy McGee, LD 28

BILL STATUS: Health and Human Services
Appropriations

Overview

Appropriates \$5,000,000 from the federal Temporary Assistance for Needy Families Block Grant (TANF Block Grant) in FY 2020 to the Department of Child Safety (DCS) for the costs of Temporary Assistance for Needy Families (TANF) provided to kinship foster care parents.

History

The TANF Block Grant's main purpose is to increase the flexibility of states in operating a program designed to: 1) provide assistance to needy families so that children may be cared for in their own homes or in the homes of relatives; 2) end dependency of needy parents on government benefits by promoting job preparation, work and marriage; 3) prevent and reduce out-of-wedlock pregnancies; and 4) encourage the formation and maintenance of two-parent families. No individual or family is entitled to assistance under TANF (P.L. 104-193, § 401).

The Department of Child Safety (DCS) was appropriated \$157,279,300 for FY 2019. The DCS operating budget showed \$2 million estimated usage for Kinship Care placements (JLBC Report).

A licensed kinship foster care parent may be eligible to receive full foster care benefits. An unlicensed kinship foster care parent may be eligible to receive TANF monies, for a child-only case, and supplemental financial support (A.R.S. § 8-514.03).

Provisions

1. Specifies that a kinship foster parent is eligible to receive full foster care benefits, including payment if they become a licensed foster care home. (Sec. 1)
2. Stipulates that if the kinship foster care parent is not licensed as a foster care home, they must be provided child-only TANF cash and supplemental financial support on behalf of an eligible dependent child without filing an application. (Sec. 1)
3. Eliminates the requirements for the DCS biannual performance evaluations of the kinship foster care program and the reporting requirements to the legislature. (Sec. 1)
4. Repeals a double enactment of A.R.S. § 8-514.03 relating to kinship foster care. (Sec. 2)
5. States that DCS must file an amendment request to the state plan to waive the application requirement for relative caregivers to receive TANF for a child only case. (Sec. 3)
6. Appropriates \$5 million from the TANF Block Grant in FY 2020 to DCS for the costs for TANF provided to kinship foster care parents. (Sec. 4)

<input type="checkbox"/> Prop 105 (45 votes)	<input type="checkbox"/> Prop 108 (40 votes)	<input type="checkbox"/> Emergency (40 votes)	<input type="checkbox"/> Fiscal Note
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ARIZONA HOUSE OF REPRESENTATIVES
Fifty-fourth Legislature - First Regular Session

ROLL CALL VOTE

COMMITTEE ON Health & Human Services BILL NO. SB 1306

DATE March 29, 2019 MOTION: DP

	PASS	AYE	NAY	PRESENT	ABSENT
Allen J		✓			
Butler		✓			
Griffin		✓			
Hernandez A					✓
Nutt		✓			
Powers Hannley		✓			
Shah		✓			
Lawrence, Vice-Chairman		✓			
Barto, Chairman		✓			
		8	0	0	1

APPROVED: 

NANCY K. BARTO, Chairman
 JAY LAWRENCE, Vice-Chairman



 COMMITTEE SECRETARY

Attachment 13



ARIZONA HOUSE OF REPRESENTATIVES

SB1538: adult protective services

PRIME SPONSOR: Senator Brophy McGee, LD 28

BILL STATUS: Health and Human Services

Overview

Updates the Adult Protective Services (APS) statutes.

History

Adult Protective Services (APS) is a program under the Department of Economic Security (DES) responsible for investigating allegations of abuse, exploitation and neglect of vulnerable adults. *Exploitation* is the illegal or improper use of a vulnerable adult or their resources for another person's profit or advantage. A *vulnerable adult* is an individual who is eighteen years of age or older and who is unable to protect himself from abuse, neglect or exploitation by others because of a physical or mental impairment or is incapacitated (A.R.S. § 46-451).

An *eligible person* in any county may request that the general public be prohibited from accessing their residential address and telephone number contained in certain documents maintained by the county recorder, county assessor and county treasurer. Statute outlines what an eligible person must include in their affidavit request for confidentiality on an application form developed by the administrative office of the courts in agreement with an association of counties, an organization of peace officers and the Motor Vehicle Division of the Arizona Department of Transportation (ADOT) (A.R.S. §§ 11-483 and 11-484).

Eligible person is currently defined as a former public official, peace officer, spouse of a peace officer, spouse or minor child of a deceased peace officer, justice, judge, commissioner, public defender, prosecutor, code enforcement officer, adult or juvenile corrections officer, corrections support staff member, probation officer, member of the Board of Executive Clemency, law enforcement support staff member, Department of Child Safety, national guard member when acting in support of a law enforcement agency, a person who is protected under an order of protection or injunction against harassment, a participant in the Address Confidentiality Program or a firefighter assigned to the Arizona Counterterrorism Center (A.R.S. §§ 11-483 and 11-484).

Provisions

1. Protects the identity of an APS worker. (Sec. 1-7)
2. States it is unlawful for a person to knowingly make available on the worldwide web the personal information of an employee of APS and makes it a class 5 felony to do so. (Sec. 3)
3. Adds an employee of APS to the definition of *eligible person* as it relates to protecting their personal information. (Sec. 4-6)
4. Removes unneeded language. (Sec. 8)
5. Allows employees of DES, the Department of Law and the court to release confidential information to a tribal government. (Sec. 8)
6. Creates a definition for *adult protective services central intake unit*. (Sec. 9)

Prop 105 (45 votes) Prop 108 (40 votes) Emergency (40 votes) Fiscal Note

7. Adds the following professionals to the duty to report abuse, neglect, and exploitation of vulnerable adults:
 - a. Physician assistant;
 - b. Licensed practical or registered nurse;
 - c. Certified nursing assistant;
 - d. Emergency medical technician;
 - e. Home health provider;
 - f. Psychiatrist;
 - g. Pharmacist;
 - h. Speech, physical or occupational therapist;
 - i. Long-term care provider;
 - j. Medical examiner;
 - k. Guardian;
 - l. Conservator;
 - m. Fire protection personnel;
 - n. Developmental disabilities provider; and
 - o. Employee of DES. (Sec. 10)
8. Requires the guardian or conservator of a vulnerable adult to immediately report or cause reports to be made of such reasonable basis to the adult protective services intake unit. (Sec. 10)
9. Removes the requirement for a written follow-up report and allows for an online report. (Sec. 10)
10. Provides that an employee or agent of the health care institution is deemed to have met the reporting requirements by reporting or causing a report to be made to the health care institution. (Sec. 10)
11. Deletes public fiduciary language. (Sec. 10)
12. Requires reporting to APS intake unit by outlined persons. (Sec. 10)
13. Prohibits retaliation against a person who in good faith reports abuse, neglect or exploitation and prohibits retaliation against a vulnerable adult who is the subject of a report. Any adverse action taken against a person who reports abuse, neglect or exploitation or a vulnerable adult who is the subject of the report within 90 days after the report is filed is presumed to be retaliation. (Sec. 10)

Adult Protective Services Information

14. Specifies that all personally identifying information concerning any person involved in an APS program, including the reporting source's identity, other than a perpetrator against whom an allegation of abuse, neglect or exploitation has been substantiated, and all information that is gathered or created by APS that is contained in adult protective services records is confidential and may only be released as specified. (Sec. 11)
15. States that employees of DES, the Department of Law and the court may obtain the information described in the performance of their duties as authorized by rule and adopted by the director of DES. (Sec. 11)
16. Permits employees of DES to release any information that is otherwise held confidential, including the identity of the person who makes a report of suspected abuse, neglect or exploitation, to the following or under any of the following circumstances:
 - a. Pursuant to a superior court order;
 - b. To law enforcement to be used only for purposes of conducting investigations;

- c. To agencies that are responsible for investigating a report of abuse, neglect or exploitation when the investigation is authorized by statute or by an agreement with DES;
 - d. In any judicial or administrative proceeding involving an APS client if the director considers the information pertinent to the proceeding; and
 - e. To agencies of the federal government, any state, any political subdivision of any state for official purposes or any tribal government. All information received by a governmental agency must be maintained as confidential, except where pertinent to a criminal investigation. (Sec. 11)
17. Allows employees of DES to release any information that is otherwise held confidential except the reporting source's identity, to the following or under any of the following circumstances:
- a. The client when a request is made in writing specifically requesting information that directly relates to the person requesting information;
 - b. When necessary for purposes that are directly connected with the administration of adult protective services, including:
 - i. To protect against a clear and substantial risk of imminent serious injury to a client or to others;
 - ii. In oral and written communications with the minimal necessary release of information needed to conduct an investigation of allegations of abuse, neglect or exploitation;
 - iii. In oral and written communications to arrange specific services for a vulnerable adult;
 - iv. To a person that has the legal responsibility or authorization to care for, evaluate, treat or supervise a vulnerable adult; and
 - v. To the extent necessary to make claims on behalf of a client for public or private assistance, insurance or health or medical assistance to which the client may be entitled;
 - c. Pursuant to the consent of the client who is receiving services;
 - d. Persons identified by the client pursuant to one of the following:
 - i. If the client is present or otherwise available and has the capacity to make decisions, an APS worker may disclose the information if one of the following applies:
 - The client agrees orally or in writing by signing a consent form that authorizes disclosure; and
 - The client is given an opportunity to object and does not express an objection;
 - ii. If the client is not present or the opportunity to agree or object to the disclosure of information cannot practicably be provided because of the client's incapacity or an emergency circumstance, the APS worker may disclose the information if the disclosure of the information is in the best interests of the client;
 - e. Any statutorily created team that is mandated to review APS and the clients served in the completion of the official duties;
 - f. To disclose statistics or other summary information if personally identifiable information is not revealed by the disclosure;
 - g. To confirm, clarify, correct or supplement information concerning an allegation or actual instance of vulnerable adult abuse, neglect or exploitation that has been made public by a source or sources outside DES; and
 - h. Any person who is engaged in bona fide research, if no personally identifying information is made available, unless it is essential to the research and the director or the director's designee gives prior approval. If the researcher wants to contact a subject of a record, the subject's consent must be obtained by DES before the contact. (Sec. 11)
18. Permits DES to adopt rules to implement. (Sec. 11)
19. Assigns a class 2 misdemeanor to anyone who violates the provisions related to adult protective services information. (Sec. 11)

Multidisciplinary Adult Protection Team

20. Permits APS to establish a multidisciplinary adult protection team consisting of employees of the APS program, the county attorney or the county attorney's designee and representatives of law enforcement, behavioral health, domestic violence and sexual assault or other appropriate human service agencies. Representatives from local tribal governments and adult disability and advocate groups may be added to the multidisciplinary adult protection team. (Sec. 11)
21. Allows APS to make available to members of the multidisciplinary adult protection team all information or records that are necessary for the official duties without the designation of the client's name unless the client's name is required for the official purposes. The case information received by members of the multidisciplinary adult protection team must be maintained as confidential unless a consent to release has been given pursuant to this section or pursuant to a court order in this state or another state. Any member of the multidisciplinary adult protection team may share information that is acquired in the team members' professional capacity with other members of the multidisciplinary adult protection team to assist the multidisciplinary adult protection team in its function. (Sec. 11)
22. Provides that case consultation may be performed by a committee of the team consisting of the team members representing social services, law enforcement, the county attorney, health care and persons directly involved in an individual case as determined by the case consultation committee. (Sec. 11)
23. Prohibits a person who is released information from using or releasing the information except in the proper performance of the person's official duties unless a consent to release has been given or pursuant to a court order or grand jury subpoena. (Sec. 11)
24. Defines *case consultation*. (Sec. 11)

PROPOSED

HOUSE OF REPRESENTATIVES AMENDMENTS TO S.B. 1538
(Reference to Senate engrossed bill)

- 1 Page 22, line 1, after "means" strike remainder of line
- 2 Line 2, strike "informed consent resulting in" insert "THE"
- 3 Line 3, after "shelter," insert "SUPERVISION,"
- 4 Line 4, after "maintain" insert "A VULNERABLE ADULT'S"
- 5 Page 23, line 17, after "36-401" insert "AND THE HEALTH CARE INSTITUTION'S
- 6 PROCEDURES REQUIRE THAT ALL SUSPECTED ABUSE, NEGLECT AND EXPLOITATION BE
- 7 REPORTED TO ADULT PROTECTIVE SERVICES AS REQUIRED BY LAW"
- 8 Amend title to conform

NANCY K. BARTO

1538BARTO
03/27/2019
04:25 PM
H: IG/1s

Attachment 15

Adopted <input checked="" type="checkbox"/>	# of Verbals _____
Failed _____	Withdrawn _____
Not Offered _____	Analysts Initials <u>SS</u>

ARIZONA HOUSE OF REPRESENTATIVES
Fifty-fourth Legislature - First Regular Session

ROLL CALL VOTE

COMMITTEE ON Health & Human Services BILL NO. SB 1538

DATE March 29, 2019 MOTION: DPA

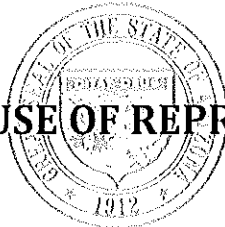
	PASS	AYE	NAY	PRESENT	ABSENT
Allen J		✓			
Butler		✓			
Griffin		✓			
Hernandez A					✓
Nutt		✓			
Powers Hannley		✓			
Shah		✓			
Lawrence, Vice-Chairman		✓			
Barto, Chairman		✓			
		8	0	0	1

APPROVED:

Nancy K. Barto
 NANCY K. BARTO, Chairman
 JAY LAWRENCE, Vice-Chairman

Sue Sweden
 COMMITTEE SECRETARY

ATTACHMENT 16



ARIZONA HOUSE OF REPRESENTATIVES

SB 1402: controlled substances; schedule designations

PRIME SPONSOR: Senator Carter, LD 15

BILL STATUS: Health and Human Services

Overview

Requires the Arizona State Board of Pharmacy (Board) to adopt the federal regulations regarding scheduled controlled substances.

History

The Board adopts rules to protect the public regarding the practice of pharmacy including: the manufacturing and supplying of drugs or hazardous substances; investigating the compliance as to the quality and labeling of all drugs; license pharmacists and pharmacy interns; and outline the conduct of pharmacy professionals (A.R.S. § 32-1904).

The Controlled Substances Act places all substances regulated under federal law into one of five schedules. The classification is based on the substance's medical use, potential for abuse and safety or dependency liability. The process to add, delete, or change the schedule of a substance may be initiated by the Drug Enforcement Agency, the Department of Health and Human Services or by a petition from an interested party (21 U.S.C. § 812).

Provisions

1. Requires the Board to adopt by rule the schedule I, II, III, IV and V controlled substances listed in 21 CFR sections 1308.11 – 1308.15 and amend the rules to reflect any changes in the controlled substance designations. (Sec. 13-17)
2. Removes certain schedule I-V controlled substances currently listed in statute. (Sec. 13-17)
3. Makes technical and conforming changes. (Sec. 1-19)

Prop 105 (45 votes) Prop 108 (40 votes) Emergency (40 votes) Fiscal Note

**ARIZONA HOUSE OF REPRESENTATIVES
Fifty-fourth Legislature - First Regular Session**

ROLL CALL VOTE

COMMITTEE ON Health & Human Services BILL NO. SB 1402

DATE March 29, 2019 MOTION: DP

	PASS	AYE	NAY	PRESENT	ABSENT
Allen J		✓			
Butler		✓			
Griffin		✓			
Hernandez A					✓
Nutt		✓			
Powers Hannley		✓			
Shah		✓			
Lawrence, Vice-Chairman		✓			
Barto, Chairman		✓			
		8	0	0	1

APPROVED

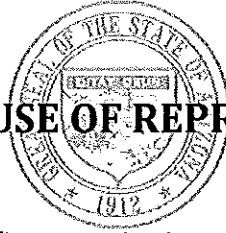


 NANCY K. BARTO, Chairman
 JAY LAWRENCE, Vice-Chairman



 COMMITTEE SECRETARY

Attachment 18



ARIZONA HOUSE OF REPRESENTATIVES

SCR 1021: medical marijuana; fingerprinting; enforcement

PRIME SPONSOR: Senator Borrelli, LD 5

BILL STATUS: Health and Human Services

Overview

Requires a valid fingerprint clearance card (FPCC) for specified members associated with a nonprofit medical marijuana dispensary (dispensary). Outlines the regulatory requirements for the Department of Agriculture (DOA) and the Department of Health Services (DHS) regarding medical marijuana.

History

In 2010, Proposition 203, an initiative measure that was approved by the voters, established the Arizona Medical Marijuana Act (Act). The Act established the regulatory requirements for DHS including: rulemaking, registration and certification of a dispensary and dispensary agents, registration of qualifying patients and designated caregivers, issuance of registry identification cards and fingerprinting requirements (Title 36, Chapter 28.1).

Statute requires personnel in certain professions to have an active FPCC prior to or as a condition of licensure, certification or employment. The Fingerprinting Division under the Department of Public Safety receives applications and reviews state and federal criminal records to determine if the applicant is eligible to receive a FPCC. Regular FPCC precluding offenses are listed in A.R.S. § 41-1758.03 and Level 1 FPCC precluding offenses are listed in A.R.S. § 41-1758.07.

Provisions

1. Specifies that marijuana cultivated for medical use (medical marijuana) by a dispensary or a designated caregiver is an agricultural commodity as defined in rule by DOA. (Sec. 2)
2. Regulates medical marijuana under Title 3 and adopted rules beginning June 1, 2021. (Sec. 2)
3. Allows the director of DOA to adopt any rule necessary relating to cultivating medical marijuana and required testing by independent third-party laboratories or marijuana that a dispensary or a designated caregiver cultivates for medical use. (Sec. 2)
4. Provides that only pesticide products that are exempt from federal regulation under the minimum risk exemption regulations in 40 CFR 152.25(f) may be used in cultivating medical marijuana. (Sec. 2)
5. Requires a person that provides laboratory analysis of medical marijuana to apply for a certification from the state agricultural laboratory. (Sec. 3)
6. Requires the director of DOA to adopt rules for certifying laboratories that analyze medical marijuana, including the required sampling and testing of marijuana. (Sec. 3)
7. Specifies that a laboratory that is certified to analyze marijuana:
 - a. Must report the test results only to the dispensary or designated caregiver that cultivates the marijuana, DHS and the state agricultural laboratory; and
 - b. May not have any familial or financial interest in the dispensary. (Sec. 3)

<input type="checkbox"/> Prop 105 (45 votes)	<input type="checkbox"/> Prop 108 (40 votes)	<input type="checkbox"/> Emergency (40 votes)	<input type="checkbox"/> Fiscal Note
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8. Exempts an employee of DOA or a third-party laboratory from being charged with or prosecuted for possession of any amount of medical marijuana that is being used as a sample for testing. (Sec. 3)
9. Authorizes the director of DOA to enter a private property where medical marijuana is cultivated at reasonable times to determine compliance with any rules or orders adopted and requires the director or the director's agent to notify the dispensary or a *designated caregiver* when entering the property if the notice is practicable. (Sec. 6)
10. Requires a dispensary to submit documentation that state and local tax deficiencies are paid or temporarily released with a renewal application. (Sec. 8)
11. Requires each of the principal officers or board members of a dispensary to have a valid FPCC. (Sec. 8)
12. Removes the ability of DHS to conduct a criminal record check regarding a registration and certification application for a dispensary or a dispensary agent. (Sec. 8, 9)
13. Prohibits a person without a valid FPCC from being a dispensary agent. (Sec. 9)
14. Provides that registry identification cards and registration certificates expire every two years rather than every year and establishes a \$100 renewal fee for a qualifying patient. (Sec. 10)
15. Allows DHS to inspect a dispensary during the dispensary's normal business hours to determine compliance. (Sec. 11)
16. Allows data to be used for public health research and the data must not be combined or linked in any manner with any other list or database. (Sec. 12)
17. Requires DHS to notify the public regarding inspection and compliance information for a dispensary, including the name, address and any complaints and enforcement actions against the dispensary. (Sec. 12)
18. Authorizes the director of DHS to deny, suspend or revoke any registration issued if the registered party or an officer, agent or employee of the registered party does either of the following:
 - a. Violates statute or any rule adopted; or
 - b. Has been, is or may continue to be in violation of the requirements for registration and as a result the health or safety of the public is in danger. (Sec. 13)
19. Adds a civil penalty in an amount not to exceed \$5,000 for each violation with a maximum amount of \$25,000 for any 30-day period in addition to any other penalties authorized.
 - a. Each day a violation occurs constitutes a separate violation. (Sec. 13)
20. Requires the director of DHS to issue a notice of assessment that includes the proposed amount of the assessment. In determining the amount of a civil penalty against a person DHS must consider all the following:
 - a. Repeated violations of adopted rules;
 - b. Patterns of noncompliance;
 - c. The types of violations;
 - d. The severity of the violations;
 - e. The potential for and occurrences of actual harm;
 - f. Threats to health and safety;
 - g. The number of violations and persons affected by the violations; and
 - h. The length of time the violations have been occurring. (Sec. 13)

21. Allows DOA to use monies in the Medical Marijuana Fund to regulate marijuana as an agricultural commodity. (Sec. 14)
22. Requires a valid FPCC for the following:
 - a. A designated caregiver;
 - b. A principal officer, agent or employee of a nonprofit medical marijuana dispensary; and
 - c. A nonprofit medical marijuana dispensary agent. (Sec. 9)
23. Requires the Fingerprint Division of the Department of Public Safety to conduct fingerprint background checks on persons and applicants that are required to possess and maintain a valid FPCC. (Sec. 16)
24. Removes the definition of *excluded felony offense*. (Sec. 7)
25. Modifies the definitions of *plant or crop*, *agricultural seed*, *noxious weed seed*, *designated caregiver*, and *a nonprofit medical marijuana dispensary agent*. (Sec. 4, 5, 7)
26. Defines *designated caregiver*, *nonprofit medical marijuana dispensary agent* and *person*. (Sec. 16)
27. Requires the Secretary of State to submit the proposition to the voters at the next general election. (Sec. 16)
28. Becomes effective if approved by the voters and on proclamation of the Governor.

ARIZONA HOUSE OF REPRESENTATIVES
Fifty-fourth Legislature - First Regular Session

ROLL CALL VOTE

COMMITTEE ON Health & Human Services BILL NO. SCR 1021

DATE March 29, 2019 MOTION: DP

	PASS	AYE	NAY	PRESENT	ABSENT
Allen J		✓			
Butler		✓	✓		
Griffin		✓			
Hernandez A					✓
Nutt		✓			
Powers Hannley			✓		
Shah			✓		
Lawrence, Vice-Chairman		✓			
Barto, Chairman		✓			
		5	3	0	1

APPROVED:



NANCY K. BARTO, Chairman
JAY LAWRENCE, Vice-Chairman



COMMITTEE SECRETARY

ATTACHMENT 20