NORTH CAROLINA

MEDICAL CANNABIS ACCESS STATE REPORT CARD 2015

Issue	Possible Points	
PATIENT RIGHTS & CIVIL PROTECTION (total)	**100**	**38**
Arrest protection	40	24
Affirmative defense	15	9
Child custody	10	0
DUID protections	5	0
Employment	5	0
Explicit privacy standards	7	0
Housing protections	5	0
Does not create new criminal penalties for patients	5	5
Organ transplants	5	0
Reciprocity	3	0
EASE OF NAVIGATION (total)	**100**	**46**
Comprehensive qualifying conditions	50	20
Adding new conditions (total)	10	0
Law/Regs allow for new conditions	5	0
System works for adding new conditions	5	0
Reasonable access for minors	10	6
Reasonable caregiver background check requirements	4	4
Number of caregivers	2	1
Patient/Practitioner focused task force/advisory Board	2	0
Reasonable fees (patients & caregivers)	10	9
Allows multiple-year registrations	2	0
Reasonable physician requirements	5	3
Does not classify cannabis as medicine of last resort	5	3
ACCESS TO MEDICINE (total)	**100**	**11**
Allows distribution programs (total)	40	0
Allows access to dried flowers	15	0
Allows delivery	5	0
No sales tax or reasonable sales tax	5	0
Reasonable number of dispensing facilities	5	0
Does not require vertical integration	2	0
Ownership/Employment restrictions	2	0
Provisions for labor standards	2	0
Environmental impact regulations	2	0
Unrestricted choice of dispensary	2	0
Non-commercial cultivation (total)	20	0
Personal cultivation	15	0
Collective gardens	5	0
Explicit right to edibles/concentrates/other forms	10	3
Does not impose limits or bans on THC	10	1
Does not impose minimum CBD requirements	10	7
Municipal bans/zoning	10	0
FUNCTIONALITY (total)	**100**	**25**
Patients are able to obtain medicine	50	0
Free of significant administrative or supply problems	15	8
Legal protections within reasonable time frame	10	7
Reasonable possession limit (ounces)	5	5
Reasonable purchase limits	5	0
Allows patients to medicate where they chose	5	3
Covered by insurance/state health aide	3	0
Financial hardship (fee waivers/discount medicine)	7	2
PRODUCT SAFETY (total - see back for details)	**100**	**n/a**
Dispensing	25	n/a
Cultivation	25	n/a
Manufacturing	25	n/a
Lab	25	n/a
Improvement Bonus		10
Total out of 400		150
Score percentage		38

Final Grade = F*

Areas for improvement: North Carolina made some minor improvements to the CBD-focused law it passed in 2014, but those improvements are still woefully short of creating safe and legal access for the patients of the state. The biggest problems that need to be addressed are the lack of in-state production and dispensing of medicine, no civil discrimination protections for patients in the areas of housing, employment, organ transplants, and child custody, denying all but one qualifying condition, and placing an arbitrary cap on the THC concentration in products that patients may use. A comprehensive bill that addresses all of these issues and includes product safety language are necessary improvements for North Carolina to make.

Background: In July 2014, North Carolina enacted HB 1220, known as North Carolina Epilepsy Alternative Treatment Act, creating a pilot program that allows medical use of CBD-rich oil only for registered patients diagnosed by a neurologist at one of four universities as having intractable epilepsy (that has not been responsive to at least three other treatment options). Access is to be only through a registered caregiver who must be a parent, guardian, or legal custodian and who must obtain the CBD oil in a state with reciprocity to purchase medical cannabis products. Most medical cannabis jurisdictions that honor reciprocity for other state registration cards do not allow patients/caregivers from out of state to purchase any medical cannabis products. The CBD-rich oil must contain at least 10% CBD, no more than 0.3% THC, and must have no other psychoactive components.

In July of 2015 House Bill 766 was signed by Gov. McCrory amending HB1220 to expand qualified physicians to include any doctor board certified in neurology and affiliated with any state-licensed hospital. The bill also changed the required THC/CBD percentages for medical cannabis from greater than 10% CBD and less than .3% THC to greater than 5% CBD and less than .9% THC. There were also changes to enhance patient privacy as well as the addition of a sunset clause, ending the medical cannabis program in 2021 if studies fail to show therapeutic relief from CBD.

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PRODUCT SAFETY point breakdown

(Point totals by section included in grade calculation on reverse)

Issue	Possible Points	
DISPENSING (total)	**25**	**0**
Dispensary training	5	0
Operating Procedures and Protocols	5	0
Facility sanitary conditions	Y or N	N
Storage protocols	Y or N	N
Reasonable security protocols	Y or N	N
Inventory control	Y or N	N
Recall protocol and adverse event reporting	5	0
Product Labeling	5	0
Product contents including source material ID	Y or N	Y
Allergens	Y or N	N
Potency/compound identification	Y or N	N
Required Testing	5	0
Active ingredient identification	Y or N	Y
Contaminants	Y or N	N
Potency	Y or N	Y
CULTIVATION (total)	**25**	0
Cultivation training	5	0
Standard Operating Procedures and Protocols	**5**	0
Facility and equipment sanitary conditions	Y or N	N
Workforce safety protocols	Y or N	N
Storage protocols (short and long term)	Y or N	N
Reasonable security protocols	Y or N	N
Batch and lot tracking	Y or N	N
Disposal/waste	Y or N	N
Water management	Y or N	N
Pesticide Guidance and Protocols	**5**	**0**
Pesticide guidance	Y or N	N
Product labeling	Y or N	N
Required testing	5	0
Active ingredient identification	Y or N	Y
Contaminants	Y or N	N
Potency	Y or N	Y
Sample retention	Y or N	N
Recall protocol and adverse event reporting	5	0
MANUFACTURING (total)	**25**	0
Manufacturing training	5	0
Standard Operating Procedures and Protocols	5	0
Facility and equipment sanitary conditions	Y or N	N
Workforce safety protocols	Y or N	N
Storage protocols	Y or N	N
Reasonable security protocols	Y or N	N
Batch and lot tracking	Y or N	N
Product Labeling	5	0
Product contents with source material ID	Y or N	Y
Allergens	Y or N	N
Potency/compound identification	Y or N	Y
Required Testing	5	0
Active ingredient identification	Y or N	N
Contaminants	Y or N	N
Potency	Y or N	N
Shelf life testing	Y or N	N
Sample retention	Y or N	N
Recall protocol and adverse event reporting:	5	0
LABORATORY (total)	**25**	**0**
Lab operations training	5	0
Method validation in accordance with AHP guidelines	5	0
Result reporting - disclose the type of testing used	5	0
Independent or third party certification	5	0
Standard Operating Procedures and Protocols	**5**	**0**
Equipment and instrument calibration	Y or N	N
Sample tracking	Y or N	N
Facility and equipment sanitary conditions	Y or N	N
Disposal/waste protocols	Y or N	N
Storage protocols	Y or N	N
Workforce safety protocols	Y or N	N
Total out of 100		**n/a**

Tools for Success:

Improving your state law has never been easier. In the appendix of this report you will find model legislation and regulators guides for product safety protocols. ASA staff are all also available to draft and/or review legislative and regulatory language. Our website has many resources online including access to our policy shop at http://www.safeaccessnow.org/policy_shop, information for regulators available at http://patientfocusedcertification.org/about/information-for-regulators/ and a breakdown of all the state laws at http://www.safeaccessnow.org/state_and_federal_law.

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