### **DISCLAIMER**

Electronic versions of the exhibits in these minutes may not be complete.

This information is supplied as an informational service only and should not be relied upon as an official record.

Original exhibits are on file at the Legislative Counsel Bureau Research Library in Carson City.

Contact the Library at (775) 684-6827 or library@lcb.state.nv.us.

#### STATE OF NEVADA

PAUL IVERSON Director



Carson City Office: 251 Jeanell Drive, Suite 3 Carson City, NV 89703 Telephone (775) 684-5333 Fax (775) 882-5121

Las Vegas Office: 2300 McLeod Street Las Vegas, NV 89104-4314 (702) 486-4690 Fax (702) 486-4695

#### DEPARTMENT OF AGRICULTURE

350 Capitol Hill Avenue

Reno, Nevada 89502-2923

Telephone (775) 688-1180 • Fax (775) 688-1178

Website: http://agri.state.nv.us

Elko Office: 1351 Elm Street Elko, NV 89801-3364 (775) 738-8076 Fax (775) 738-2639

Winnemucca Office: 1200 E. Winnemucca Blvd. Winnemucca, NV 89445-2999 (775) 623-6502 Fax (775) 625-1200

# MEDICAL MARIJUANA PROGRAM STATISTICS OCTOBER 1, 2001 TO MARCH 31, 2003

ADOPTED REGULATIONS:

AUGUST 30, 2001

PROGRAM STARTED:

**OCTOBER 1, 2001** 

AS OF MARCH 31, 2003:

**TOTAL # OF MAILED APPLICATIONS:** 

1,351

**# OF RECEIVED APPLICATIONS:** 

290

% OF MAILED APPLICATIONS:

21.5%

# OF APPROVED APPLICATIONS:

287

% OF RECEIVED APPLICATIONS:

99%

# OF RENEWALS MAILED:

185

# OF RENEWALS RETURNED:

119

% RENEWED:

64.3%

ASSEMBLY HEALTH AND HUMAN SERVICES
DATE: 04/02 ROOM: 3138 EXHIBIT N1-5
SUBMITTED BY: Don Henderson

#### AB 503 NEVADA MEDICAL MARIJUANA PROGRAM

#### **EXPLANATION OF CHANGES**

Section 1 (Page 1, Lines 3-7):

Provides a definition for a propagation facility to accommodate the addition of program requirements found in section 5, subsection 4.

Section 3 (Page 1, Lines 15-19):

**Defines attending physician.** The omission of Osteopathic Physicians was an oversight in the original bill. The addition of physicians licensed under NRS 633 corrects this oversight.

Section 3 (Page 1, Line 20):

Omitting the requirements for a primary physician and changing it to attending physician. Sometimes the physician signing the Physician's Statement is not the primary physician for the patient because the physician is treating only one illness of the patient's. For example, an Ophthalmologist, who is a medical doctor licensed under NRS 630, may be treating a patient for glaucoma. This physician will likely not be the primary physician of the patient.

Section 4 (Page 1, Lines 26-27):

Includes the seeds of the plant as usable marijuana. Seeds are needed to grow marijuana plants. As a grow your own program it was thought marijuana seeds should be considered as part of the usable plant.

Section 5, subsection 4 (Page 2, Lines 24-44; Page 3, Lines 1-9):

Stipulates that no more than 2 program registrants can grow medical marijuana at each propagation facility. Limiting a propagation facility to growing no more than the amount of marijuana required for two cardholders is an effort to prevent a number of cardholders gathering together and growing marijuana at one site. Allowing two or more growers at one site could lead to the cannabis house problem California is currently facing.

Section 6 (Page 3, Line 27):

Applicant must be a resident of Nevada. Per the preamble in AB 453, this program was intended for residents of the State of Nevada but this was not put into the law.

Because there have been problems with people from other states getting the card to use for a few weeks while they are in Nevada, or because they live near the stateline and are sometimes in Nevada, this needs to be defined in the law. To have a card because you go back and forth between two states would lead to the assumption that a person is traveling "under the influence" and this was not the intent of the original act.

#### Section 7 (Page 6, Line 39-40):

Change in information listed on registry card to accommodate DMV's new cards. The reason for this request is to accommodate the new driver's license program. There is not enough room to put the patient information and the caregiver information on the front of the registry cards. To date, we have been putting the additional information on the back of the card and laminating the card. The new system does not allow that process. Since any needed information can be readily accessed through the identifying patient and caregiver numbers, this number can be used as identification.

The caregiver card will have the caregiver's name, address, birth date, assigned number, vital statistics, date of issuance, date of expiration, and the patient's assigned number on the front of the card. In contrast, the patient's registration card will contain an identification number for the designated caregiver.

#### Section 11 (Page 10, Line 27-31):

Request to charge fees. The request to charge a fee is because it costs, at present time, approximately \$100 and over 3 hours of time to process an application. This does not include the costs to renew. There are many requests for packets that have not been returned for processing (there is a 21.5% return rate at the present time). A reasonably placed charge for the application packet could perhaps eliminate some of the frivolous requests that have come in.

The program fees proposed in Section II represent caps or not to exceed amounts. Actual fees will be based on occurred program costs, as set by the State Board of Agriculture through a public hearing and regulation process.

3/31/2003 N Page 3-5

## COST ESTIMATE TO PROCESS AN APPLICATION

Packet Checklist	0.07
Important Notice	0.09
Warning Notice	0.09
Registration Explanation (2 pages)	0.14
Flowchart (black & white)	0.07
Program Facts (2 pages)	0.14
Physician Information Page	0.07
Registration Application	0.70
Physician's Statement	0.70
Waiver Form	0.07
Acknowledgement Form	0.07
Fingerprint Card	N/C
Registry Card Pick-Up Designation	0.02
Employer Information Page	0.07
Minor Release Form	0.07
Caregiver Application	0.70
Waiver Form	0.07
Acknowledgement Form	0.07
Fingerprint Card	N/C
Registry Card Pick-up Designation	0.02
Packet Postage	1.26
Employee Cost	<u>4.00</u>
TOTAL:	\$8.49

3/31/2003

## COST ESTIMATE TO PROCESS AN APPLICATION

TOTAL.	<b>\$05.44</b>
Employee Time	<u>30.00</u>
Set Up File System	1.06
Certified Postage	4.86
Weekly Report to DMV	0.75
Certified Postage (to mail DMV cards)	4.86
Letter to DMV	0.25
Certified Postage (to mail fingerprint card)	4.86
Letter to Records with Fingerprint Cards	0.25
Packet Postage	1.26
Minimum of 4 letters	1.00
Minimum of 3 certified letters	11.85
Applicant Information Pages	0.14
Registry Card Pick-up Designation	0.02
Fingerprint Card	N/C
Acknowledgement Form	0.07
Waiver Form	0.07
Caregiver Application	0.70
Minor Release Form	0.07
Employer Information Page	0.07
Registry Card Pick-Up Designation	0.02
Fingerprint Card	N/C
Acknowledgement Form	0.07
Waiver Form	0.07
Physician's Statement	0.70
Registration Application	0.70
Physician Information Page	0.07
Program Facts (2 pages)	0.14
Flowchart (black & white)	0.07
Registration Explanation (2 pages)	0.14
Warning Notice	0.09
Important Notice	0.09
Packet Checklist	0.07

TOTAL: \$82.44