



Summary of the South Carolina Compassionate Care Act



Qualifying for the Program: To qualify, patients must have at least one qualifying debilitating medical condition and a written recommendation issued by a physician with whom they have a bona-fide relationship. Patients must apply to the health department (DHEC) for a registration card that will allow access to dispensaries and provide legal protections. Cards must be renewed annually.

Debilitating Medical Conditions:

- The bill's qualifying conditions are: cancer, multiple sclerosis, a neurological disease or disorder, sickle cell anemia, glaucoma, PTSD, a condition causing a person to be home-bound that includes severe or persistent nausea, or a chronic medical condition causing either severe and persistent muscle spasms or for which an opioid is currently or could be prescribed by a physician based on generally acceptable standards of care.
- The bill would also create a Medical Cannabis Review Board, which would consider petitions to add other serious conditions to the program.
- If the patient is expected to recover within a year, or no longer needs cannabis, the physician must make a notation so their ID expires earlier.

Designated Caregivers:

- Patients could apply to the department to designate a caregiver to assist a qualifying patient with the medical use of cannabis, such as by picking up their cannabis from a dispensary. DHEC would issue caregivers a registration card.
- If the patient's age, medical condition, or location requires more than one caregiver, they can submit evidence that one or more additional caregivers are necessary.
- Caregivers are limited to one patient, unless they are related to each patient by marriage or blood or if they are healthcare professionals. In those cases, they may assist no more than five patients.
- A healthcare facility, residential care facility, or home health aide service may serve as a caregiver for any of their patients who are enrolled in the medical cannabis program and who designate it as their caregiver. Those entities must abide by additional rules.

Limitations:

- Patients may not smoke cannabis. Doing so would be punishable by a \$150 fine.
- Patients may not drive, operate a boat, train, or aircraft, or undertake any task that would be negligent or professional malpractice while under the influence of cannabis.
- Patients and caregivers are not allowed to grow their own cannabis.
- A patient or caregiver may purchase or possess no more than two ounces of dried cannabis per patient, per 14-day period. DHEC will determine limits for an equivalent amount of cannabis products, such as oils.
- Cardholders who violate the law can have their ID cards revoked or suspended and, where applicable, face criminal penalties.
- Medical cannabis establishment agents who violate the act will be subject to penalties as determined by the department and criminal penalties where applicable.

Legal Protections:

- The bill protects patients, caregivers, medical cannabis establishment agents, state-chartered banks, attorneys, accountants, doctors, and anyone who associates with them from arrest, prosecution, or penalties for actions allowed by the bill.
- Registered patients are protected from discrimination in child custody disputes and eligibility for organ transplants. In addition, employers are to treat off-site, off-hours medical cannabis use as they would pharmaceutical medication, unless federal law,

regulations, or contracts require otherwise. Employers may continue to prohibit employees from working under the influence or using cannabis at or during work.

Visiting Patients: Patients who aren't South Carolina residents — but who are certified to use medical cannabis in another state — qualify for legal protections if they have a letter from a physician certifying they have a medical condition included in South Carolina's law.

Medical Cannabis Establishments:

- After a merit-based, scored application process, DHEC will license and regulate 15 cultivation centers, 30 processing facilities, and one dispensary for every 20 pharmacies in the state, in addition to five independent testing laboratories. The application process will consider location, background and qualifications, security plans (and SLED's input on them), and localities' preferences.
- Processing facilities will make products such as oils, consumable medicines, and salves.
- Testing laboratories will identify the amount of cannabinoids in cannabis and test for pesticides, bacteria, or other contaminants.

Safeguards and Security:

- DHEC will create regulations, including for oversight, seed-to-sale tracking, recordkeeping, security, health and safety, transportation, employee training, capital requirements, and safe packaging and labeling. It will also restrict advertising and signage. Cultivation centers' security must include perimeter intrusion detection systems and a 24-hour surveillance system accessible to law enforcement and DHEC.
- Cannabis could only be grown and processed by licensees in a secure, enclosed facility, using a seed-to-sale tracking system. DHEC and SLED must approve the plans.
- Medical cannabis businesses may not be located within 1,000 feet of a school, unless it is demonstrated that an exception is needed to provide adequate access.
- Law enforcement may inspect anywhere marijuana is grown, packaged, or processed.
- A 24-hour secure verification system will enable law enforcement to verify ID cards.

Physicians:

- Physicians who recommend medical cannabis must take a three-hour continuing medical education course approved by the state.

Local Role:

- Local governments may regulate the location, hours of operation, and number of medical cannabis establishments in the locality.
- Local governments may not completely prohibit dispensaries from operating in them.

Taxation and Fees:

- DHEC will determine application and registration fees for cardholders and medical cannabis establishments. The fees must be enough to cover the cost of regulating the program.
- Cannabis will be taxed at the same rate as non-prescription medications, 6%. The revenue will be distributed as follows: 50% to SLED, 20% to drug safety education, 10% to medical cannabis research, and 20% to the General Fund.