NMAC Transmittal Form



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Issuing agency nam	Agency DFA code:									
Department of H	665									
Contact person's na	ime:		Phone number	<i>h</i>	E-mail add	ress:				
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Type of rule action: (ALD Use Only)										
New Amendment Repeal Emergency Renumber 6/11/2020										
Title number:	Title name:	300000000000000000000000000000000000000	FIG. 1							
7	HEALTH									
Chapter number: Chapter name:										
34 MEDICAL USE OF CANNABIS										
Part number: Part name:										
4	LICENSING REQUIREMENTS FOR PRODUCERS, COURIERS, MANUFACTURERS AND LABORATORIES									
Amendment description (If filing an amendment): Amendment's NMAC citation (If filing an amendment):										
Amending (1) Section Section 28 of 7.34.4 NMAC										
Are there any mate	rials incorpora	ated by reference?	Please list att	achments or Inte	ernet sites if	applicable.				
Yes No X										
If materials are attached, has copyright permission been received? Yes No Public domain										
Specific stat	utory or c	ther authority	authorizii	ng rulemak	ing:					
		Secretary of the ections 9-7-6, 20					e with the			
Notice date(s):		Hearing date(s):		Rule adoption o	date:	Rule et	fective date:			
10/03/2021		11/12/2021		2/09/2022		2/22/	2022			

WENT TO CONTEST VIEW

Concise Explanatory Statement For Rulemaking Adoption:

2022 FED 10 FM 3: 0.5

Findings required for rulemaking adoption:

Findings MUST include:

- Reasons for adopting rule, including any findings otherwise required by law of the agency, and a summary of any independent analysis done by the agency;
- Reasons for any change between the published proposed rule and the final rule; and
- Reasons for not accepting substantive arguments made through public comment.

The findings in support of this amendment are as stated in the attached Statement of Reasons for Adoption of the rule, which is hereby incorporated by reference.						
Issuing authority (If delegated, authority letter must be on file with ALD): Name:	Check if author	rity has been delegated				
Chris D. Woodward	X					
Title:						
Assistant General Counsel						
Signature: (BLACK ink only)		Date signed:				
Chris D. Woodward Digitally signed by Chris D. Woodward Date: 2022.02.09 14:03:28 -07'00'		2/09/2022				



STATE OF NEW MEXICO BEFORE THE SECRETARY OF HEALTH

IN THE MATTER OF AMENDMENTS TO 7.34.2.7 NMAC, 7.34.4 NMAC, AND SECTIONS OF 7.34.3 NMAC

STATEMENT OF REASONS FOR ADOPTION OF RULE AMENDMENTS

The Acting Cabinet Secretary for the New Mexico Department of Health ("Department"), David Scrase, M.D., hereby adopts amendments to the following rule sections:

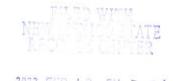
- 1. 7.34.2.7 NMAC ("Definitions");
- 2. 7.34.3.7 NMAC ("Definitions");
- 3. 7.34.3.8 NMAC ("Qualifying Medical Conditions");
- 4. 7.34.3.9 NMAC ("Quantity of Usable Cannabis That May Be Possessed by a Qualified Patient or Primary Caregiver");
- 5. 7.34.3.10 NMAC ("Qualified Patient and Primary Caregiver Registry Identification Card Application Card Requirements");
- 6. 7.34.3.11 NMAC ("Registry Identification Cards");
- 7. 7.34.3.13 NMAC ("Possession of Usable Cannabis");
- 8. 7.34.3.19 NMAC ("Disposal of Unused Cannabis");
- 9. 7.34.3.22 NMAC ("Reciprocity"); and
- 10. 7.34.4.28 NMAC ("Reciprocity").

The Acting Cabinet Secretary has familiarized himself with the rulemaking record, and finds as follows:

- 1. The Department of Health is authorized to promulgate rules as may be necessary to carry out the duties of the Department and its divisions. NMSA 1978, § 9-7-6(E).
- 2. The Department is also authorized to promulgate rules to implement the purpose of the Lynn and Erin Compassionate Use Act, including but not limited to rules to govern the manner in which the Department will consider applications for registry identification cards and for the renewal of identification cards for qualified patients and primary caregivers, and rules to define the amount of cannabis that is necessary to constitute an "adequate supply", including amounts for topical treatments. NMSA 1978, § 26-2b-7.



- 3. A public rule hearing concerning the proposed amendments was held via the Cisco Webex online video conferencing platform on November 12, 2021 pursuant to NMSA 1978, § 9-7-6(E).
- 4. In accordance with NMSA 1978, Section 14-4-5.2, notice of the public hearing for the proposed rule changes was published in the New Mexico Register, the official publication for notices of all rulemaking in New Mexico, on October 13, 2021, as more fully described in the Affidavit at Exhibit 7 (Affidavit of Publication in the New Mexico Register).
- 5. In accordance with the Department of Health Act at NMSA 1978, Section 9-7-6(E), notice of the public hearing for the proposed rule changes was also published in the Albuquerque Journal, newspaper on October 13, 2021, as more fully described in the Affidavit at Exhibit 6 (Affidavit of Publication, Abq. Journal).
- 6. Notice of the rulemaking was also provided to the public in accordance with NMSA 1978, Section 14-4-5.2, as more fully described in the Affidavit at Exhibit 5 (Affidavit of Notice to the Public).
- 7. In accordance with NMSA 1978, § 26-2B-7(A), the Department of Health consulted the Medical Cannabis Advisory Board ("MCAB") concerning the proposed amendments to the Medical Cannabis Program rules. The Medical Cannabis Advisory Board reviewed the proposed amendments at its meeting on December 7, 2021, and unanimously recommended in favor of their adoption, as reflected in the MCAB Meeting Minutes at Exhibit 18.
- 8. By a letter dated September 30, 2021, the Acting Cabinet Secretary, David Scrase, M.D., designated Mr. Craig Erickson, Esq. to serve as hearing officer for the purpose of



conducting the hearing and submitting a recommendation regarding the proposed rule amendment.

- 9. Members of the public were afforded an opportunity to comment on the proposed rules at the hearing, and in writing prior to the hearing.
- 10. The Secretary finds that the Hearing Officer has appropriately considered the comments received, and finds that the recommendations of the Hearing Officer are appropriate; and, by this reference, the Secretary hereby adopts and incorporates all of the findings and recommendations of the Hearing Officer that are stated in Hearing Officer's Report, issued by the Hearing Officer on January 18, 2022 and received by the Secretary on January 20, 2022.
- 11. Virtually all of the public comments (both oral and written) in this rulemaking were submitted by representatives of the licensed medical cannabis producer Ultra Health. *See* Ex. 10, 14-16. Ultra Health primarily contended that NMDOH lacks authority to set regulatory standards concerning the "adequate supply" limit at 7.34.3.9 NMAC.
- 12. In a letter dated December 3, 2021, contained at Exhibit 17, Assistant General Counsel Chris D. Woodward responded to Ultra Health's comments on behalf of the Department's Medical Cannabis Program. The Acting Cabinet Secretary finds that that response is well taken, and accordingly, adopts the reasoning of that letter, which is hereby incorporated in its entirety by this reference.
- 13. Contrary to the legal contentions of Ultra Health's representatives, the New Mexico Department of Health continues to be charged by the Lynn and Erin Compassionate Use Act with setting the "adequate supply" limit, as well as setting a reciprocal participation limit. Those authorities were not transferred to the Regulation and Licensing Department (RLD) by the Cannabis Regulation Act (CRA) at NMSA 1978, § 26-2C-5, which concerned only the transfer



of "licensing duties". The "licensing duties" that were transferred to RLD under the CRA concerned only licensing of commercial cannabis establishments, and did not include the setting of the adequate supply limit.

- 14. The recent case of Jason Barker v. New Mexico Department of Health, Dr. Dominick Zurlo, Dr. David R. Scrase, New Mexico Regulation and Licensing Department, Linda Trujillo, John Blair, and Robert Sachs, case no. D-202-CV-2021-04058, involved legal contentions identical to those raised by Ultra Health in this rulemaking.
- 15. In the Jason Barker case, a petitioner sought a writ of mandamus from the NM Second Judicial District Court against the Department of Health, the Regulation and Licensing Department, and various representatives of those two agencies, to prohibit the enforcement of purchase and possession limitations on medical cannabis found at 7.34.3.9(A) NMAC and 7.34.4.8(L) NMAC, and to require that qualified patients and primary caregivers be allowed to purchase unlimited quantities of cannabis, tax-free, applying only the two-ounce per-transaction limit of the Cannabis Regulation Act at NMSA 1978, § 26-2C-25(A)(2).
- 16. In a December 16, 2021 "Order Quashing Alternative Writ of Mandamus", contained at Exhibit 19, the Bernalillo County District Court (Hon. Benjamin Chavez) rejected the Petitioner's reasoning and quashed the alternative writ, concluding in relevant part that the Department of Health continues to possess authority under the Lynn and Erin Compassionate Use Act to set the adequate supply limit by rule, and concluding that the Department's rules at 7.34.3.9(A) NMAC and 7.34.4.8(L) NMAC are not inconsistent with the Cannabis Regulation Act.
- 17. Accordingly, for the reasons stated, the Acting Cabinet Secretary finds that the rule amendments are within the Department of Health's statutory authority.



- 18. Ultra Health's representatives also argued that the 15-ounce adequate supply limit, specified in the amendment to 7.34.3.9 NMAC, lacks "substantial evidence". Ultra Health's argument on this subject contradicts its repeated requests over the years for the Department of Health to set a 15-ounce adequate supply limit, documented at Exhibits 11 and 13.
- 19. In those letters, Ultra Health's representatives petitioned the Department of Health and the Medical Cannabis Advisory Board, respectively, to increase the adequate supply limit to 420 units/grams, slightly less than the 425 units/grams limit specified in the pending amendment to 7.34.3.9 NMAC. Ultra Health claimed in those petitions that fifteen ounces of dried usable cannabis for a three-month period was a common industry standard; that it was adopted in several states, including Arizona, Arkansa, Illinois, Maine, and Nevada; and that this limit would be enough to ensure that patients can purchase, consistent with CDC guidance, a back-stock of medicine sufficient to allow them to keep a 30-day supply of medicine on-hand.
- 20. In an e-mail submitted by its counsel after the conclusion of the public hearing in this rulemaking, Ultra Health appeared to pivot away from its "substantial evidence" argument, claiming instead that "[a]ny cannabis-related events that occurred prior to June 29, 2021 are largely irrelevant, because the world of cannabis in New Mexico fundamentally changed on June 29, 2021 with the effectuation of the Cannabis Regulation Act." Ex. 16 at 1.
- 21. As explained, the Department of Health's authority to set the adequate supply limit is established by the Lynn and Erin Compassionate Use Act, and has been confirmed by the NM Second Judicial District Court. Furthermore, Ultra Health has not offered anything to demonstrate that changes resulting from the Cannabis Regulation Act will in some way impact consumption patterns among qualified patients or reciprocal participants, such that a larger limit



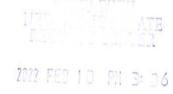
is necessitated, or that a larger limit would be medically appropriate. In fact, Ultra Health has not proposed any alternative limit at all, but has simply declared, without explanation, that its previous endorsement of 15-ounces is now erroneous and lacks "substantial evidence".

- 22. In his report, the Hearing Officer concluded that the proposed 15-ounce adequate supply limit was supported by substantial evidence, noting that "the basis for the 15-ounce adequate supply limit was articulated in written submissions from Ultra Health for the last two years, beginning in 2019." The Hearing Officer concluded that this limit "is an industry standard that has been applied in several states"; that it was unanimously approved by the Medical Cannabis Advisory Board; and that it was further supported by the fact that less and one percent of qualified patients in the Medical Cannabis Program have sought access to additional quantities of cannabis under the previous medical exception of the rule. Report at p.25. The Acting Cabinet Secretary finds that these conclusions are well taken, and adopts the Hearing Officer's reasoning.
- 23. With the coming of commercial cannabis sales in New Mexico, the adequate supply limit will no longer function as an acquisition limit for the vast majority of qualified patients and primary caregivers. When commercial cannabis sales begin (no later than April 1st of this year, per the CRA at NMSA 1978, § 26-2C-6(K)), any person 21 years of age or older will be able to purchase "commercial cannabis", above and beyond "medical cannabis" purchases, with the only acquisition limit for those purchases being a limit per each individual transaction.
- 24. Also, as of June 29, 2021, the CRA has made it legal for any person 21 years of age and older to possess up to six mature and six immature cannabis plants at any time, a fifty-



percent increase over the previous 4-mature-plant limit for personal production license holders under the previous NMDOH rule.

- 25. Based on these factors, and based on each of them individually, the Acting Cabinet Secretary finds that the Department's 15-ounce adequate supply and reciprocal participation limits will not prevent individuals from obtaining needed medicine, and that the 425-unit limit is reasonable and appropriate.
- 26. The Acting Cabinet Secretary finds that the amendments are in harmony with the agency's express statutory authorities and/or spring from those powers that may fairly be implied therefrom, and that the amendments are consistent with the statutory purposes of the Department of Health. *Rio Grande Chapter of Sierra Club v. New Mexico Mining Comm'n*, 2003-NMSC-005, ¶ 25, 133 N.M. 97, 106 (internal citations omitted).
- 27. The Acting Cabinet Secretary finds that the rule amendments fall within the scope of the rulemaking proceeding, that they are a logical outgrowth of the notice given and comment received, and that commenters were afforded a fair opportunity to present their views on the contents of the final plan. See 1.24.25.14(C) NMAC; see also N.M. Att'y Gen. Op. 87-59 (1987) (citing BASF Wyandotte Corp. v. Costle, 598 F.2d 637, 642 (1st Cir. 1979)).
- 28. The purpose of the amendments is to modify the rule requirements for the New Mexico Medical Cannabis Program, as detailed in Exhibits 1, 2 and 3, and in the Notice of Public Hearing at Exhibit 4.
- 29. The rule amendments are adopted in the exercise of police powers of the State of New Mexico, Department of Health, to regulate, promote, and protect public health and safety.



30. The Cabinet Secretary finds that the proposed rule amendments are appropriate and consistent with authorizing laws; and for each of the reasons stated, the rule amendments, as identified at Exhibits 1, 2, and 3, are hereby adopted.

NEW MEXICO DEPARTMENT OF HEALTH

David R. Scrase, M.D., Cabinet Secretary

2 |9 | 2022 Date



2012 FED 10 FN 3: 96

This is an amendment to 7.34.4 NMAC, Section 28 effective 2/22/2022.

7.34.4.28 RECIPROCITY: Beginning July 1, 2020, an individual who holds proof of authorization to	
participate in the medical cannabis program of another state of the United States, the District of Columbia, a	
territory or commonwealth of the United States or a New Mexico Indian nation, tribe or pueblo may lawfully	
purchase and possess cannabis, provided that the quantity of cannabis does not exceed the reciprocal limit identifi	ed
in this section. A qualified patient may not be registered or participate as a reciprocal participant in the New Mex	ice
medical cannabis program.	
A. Reciprocal participation:	
(1) General requirements: A reciprocal participant:	
(a) may participate in the medical cannabis program in accordance with department	m
rules;	
(b) shall not be required to comply with the registry identification card application	n
and renewal requirements established pursuant to this section and department rules;	
(c) shall at all times possess proof of authorization to participate in the medical	
cannabis program of another state, the District of Columbia, a territory or commonwealth of the United States or	ì
New Mexico Indian nation, tribe or pueblo and shall present proof of that authorization when purchasing cannabi	
from a licensee; and	â
(d) shall register with a licensed non-profit producer for the purpose of tracking	
sales to the reciprocal participant in an electronic system specified by the department.	
(2) Minors: In the event that a reciprocal participant is a minor, a licensed non-profit	
producer shall not sell or transfer cannabis to the minor, but may sell or transfer cannabis to a parent or legal	
guardian of the minor who holds proof of authorization to purchase cannabis on the minor's behalf that was issue	4
by another state of the United States, the District of Columbia, a territory or commonwealth of the United States	
New Mexico Indian nation, tribe or pueblo.	
(3) Residency requirements:	
(a) Non-residents: A person who is not a resident of New Mexico may participa	е
in the medical cannabis program as a reciprocal participant, provided that the reciprocal participant's place of	
residence is consistent with their place of enrollment. (For example: a Colorado resident shall not be registered o	F
otherwise participate as a reciprocal participant on the basis that he or she is enrolled in the medical cannabis	
program of a state or other jurisdiction other than Colorado.)	
(b) New Mexico residents: A New Mexico resident who is not a member of a N	ev
Mexico Indian nation, tribe, or pueblo shall not participate in the medical cannabis program as a reciprocal	
participant, but may pursue enrollment as a qualified patient in accordance with rule 7.34.3 NMAC. A member of	f t
New Mexico Indian nation, tribe or pueblo medical cannabis program may participate as a reciprocal participant,	
provided that the individual has proof of authorization to participate in the New Mexico Indian nation, tribe or	
pueblo's medical cannabis program.	
B. Reciprocal limit: A reciprocal participant may collectively possess within any three-month on	e
year period a quantity of usable cannabis no greater than 230 total units. For purposes of department rules, this	
quantity is deemed the reciprocal limit. (For ease of reference: 230 units is equivalent to 230 grams, or	
approximately eight ounces, of dried usable cannabis plant material.)	
C. Registration; verification; tracking: A licensed non-profit producer shall require the submitt	al
of a reciprocal participant's contact information for registration purposes, to include the individual's full name, de	ite
of birth, mailing address, and the enrollment number specified in the individual's medical cannabis program	
enrollment card (if applicable); and shall record that information in an electronic tracking system specified by the	à
department.	
(1) The licensed non-profit producer shall confirm the accuracy of a reciprocal participant	's
contact information prior to each transaction.	
(2) A licensed non-profit producer that registers a reciprocal participant or that sells or	
transfers cannabis or a cannabis product to a reciprocal participant shall first verify the reciprocal participant's	
identity by viewing comparing the individual's proof of authorization from the other state, territory or tribe, [and	
also viewing] to the reciprocal participant's government-issued photo identification card, and verifying that the	
information, including but not limited to place of residence, is consistent.	
(3) A licensed non-profit producer that sells or otherwise transfers cannabis or a cannabis	
product to a reciprocal participant shall track the sale or transfer using an electronic system specified for that	
purpose by the department.	
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