# Rules of Department of Health and Senior Services

Division 30—Division of Regulation and Licensure
Chapter 95—Medical Marijuana

<table>
<thead>
<tr>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>19 CSR 30-95.010 Definitions</td>
<td>3</td>
</tr>
<tr>
<td>19 CSR 30-95.020 General Provisions</td>
<td>5</td>
</tr>
<tr>
<td>19 CSR 30-95.025 Generally Applicable Provisions</td>
<td>5</td>
</tr>
<tr>
<td>19 CSR 30-95.028 Additional Licensing Procedures</td>
<td>11</td>
</tr>
<tr>
<td>19 CSR 30-95.030 Qualifying Patient/Primary Caregiver</td>
<td>11</td>
</tr>
<tr>
<td>19 CSR 30-95.040 Medical Marijuana Facilities Generally</td>
<td>16</td>
</tr>
<tr>
<td>19 CSR 30-95.050 Cultivation Facility</td>
<td>25</td>
</tr>
<tr>
<td>19 CSR 30-95.060 Infused Products Manufacturing Facility</td>
<td>25</td>
</tr>
<tr>
<td>19 CSR 30-95.070 Testing Facility</td>
<td>26</td>
</tr>
<tr>
<td>19 CSR 30-95.080 Dispensary Facility</td>
<td>29</td>
</tr>
<tr>
<td>19 CSR 30-95.090 Seed-to-Sale Tracking</td>
<td>30</td>
</tr>
<tr>
<td>19 CSR 30-95.100 Transportation Facility</td>
<td>31</td>
</tr>
<tr>
<td>19 CSR 30-95.110 Physicians</td>
<td>32</td>
</tr>
</tbody>
</table>
Chapter 95—Medical Marijuana

19 CSR 30-95.010 Definitions

PURPOSE: This rule defines terms used in Chapter 95.

(1) “Administer” means the direct application of marijuana to a qualifying patient by any of the following methods:
   (A) Ingestion of capsules, teas, oils, and other marijuana-infused products;
   (B) Vaporization or smoking of dried flowers, buds, plant material, extracts, or oils;
   (C) Application of ointments or balms;
   (D) Transdermal patches and suppositories;
   (E) Consuming marijuana-infused food products; or
   (F) Any other method recommended by a qualifying patient’s physician.

(2) “Affiliate” means any entity effectively controlling or controlled by another entity or associated with other entities under common ownership or control, including a parent or subsidiary.

(3) “Batch” means a specifically identified quantity of medical marijuana, from immature plant stage to harvest, that is uniform in strain and cultivated utilizing the same growing practices.

(4) “Canopy space” means a space measured from the outermost point of a mature flowering plant in a designated growing area and continuing around the outside of all mature flowering plants in that designated growing area but not including space allocated for walkways or ancillary equipment. This space may be spread over a single level or multiple levels.

(5) “Church” means a permanent building primarily and regularly used as a place of religious worship.

(6) “Daycare” means a child-care facility, as defined by section 210.201, RSMo, that is licensed by the state of Missouri.

(7) “Department” means the Department of Health and Senior Services, or its successor agency.

(8) “Disqualifying felony offense” means a violation of, and conviction of or guilty plea to, state or federal law that is, or would have been, a felony under Missouri law, regardless of the sentence imposed, unless the department determines that—
   (A) The person’s conviction was for the medical use of marijuana or assisting in the medical use of marijuana;
   (B) The person’s conviction was for a non-violent crime for which he or she was not incarcerated and that is more than five (5) years old; or
   (C) More than five (5) years have passed since the person was released from parole or probation, and he or she has not been convicted of any subsequent criminal offenses.

(9) “Dried, unprocessed marijuana or its equivalent” means the marijuana flower after it has been cured and trimmed or its equivalent amount of marijuana concentrate or tetrahydrocannabinol (THC). For purposes of purchase and possession limitations, one (1) ounce of dried, unprocessed marijuana is equivalent to eight (8) grams of medical marijuana concentrate or eight hundred (800) milligrams of THC in infused products.

(10) “Economic interest” means rights to either the capital or profit interests therein, or a combination thereof; or, in the case of a corporation, rights to some portion of all classes of outstanding stock of the corporation.

(11) “Elementary or secondary school” means any public school as defined in section 160.011, RSMo, or any private school giving instruction in a grade or grades not higher than the twelfth grade, including any property owned by the public or private school that is regularly used for extracurricular activities, but does not include any private school in which education is primarily conducted in private homes.

(12) “Enclosed, locked facility” means—
   (A) An indoor stationary closet, room, garage, greenhouse, or other comparable fully enclosed space equipped with locks or other functioning security devices that permit access to only the qualifying patient(s) or primary caregiver(s) who have informed the department that this is the space where they will cultivate marijuana; or
   (B) An outdoor stationary structure—
      1. That is enclosed on all sides, except at the base, by chain-link fencing, wooden slats, or a similar material that is anchored, attached, or affixed to the ground and that cannot be accessed from the top; and
      2. In which the plants are not visible to the unaided eye from an adjacent property when viewed by an individual at ground level or from a permanent structure at any level; and
   3. That is equipped with locks or other security devices that restrict access to only the qualifying patient(s) or primary caregiver(s) who have informed the department that this is the space where they will cultivate marijuana.

(13) “Employment rate” means the percent of the civilian labor force that is employed.

(14) “Entity” means a natural person, corporation, professional corporation, nonprofit corporation, cooperative corporation, unincorporated association, business trust, limited liability company, general or limited partnership, limited liability partnership, joint venture, or any other legal entity.

(15) “Flowering plant” means a marijuana plant from the time it exhibits the first signs of sexual maturity through harvest.

(16) “Harvest lot” means a specifically identified quantity of marijuana that is uniform in strain, cultivated utilizing the same growing practices, harvested within a seventy-two (72)-hour period at the same location, and cured under uniform conditions.

(17) “Identification card” means a document, whether in paper or electronic format, issued by the department that authorizes a qualifying patient, primary caregiver, or employee or contractor of a licensed facility to access medical marijuana as provided by law.

(18) “Liquid Capital” means any asset in the form of cash or that can be converted into cash quickly with little or no loss in value, including stocks and marketable securities, government bonds, mutual funds, money-market funds, and certificates of deposit.

(19) “Majority owned” means more than fifty percent (50%) of the economic interests of an entity, including any parent and subsidiary entities.

(20) “Marijuana” or “Marihuana” means Cannabis indica, Cannabis sativa, and Cannabis ruderalis, hybrids of such species, and any other strains commonly understood within the scientific community to constitute marijuana, as well as resin extracted from the plant and marijuana-infused products. “Marijuana” or “Marihuana” does not include industrial hemp containing a crop-wide average tetrahydrocannabinol concentration that...
does not exceed three-tenths of one percent (0.3%) on a dry weight basis, or commodities or products manufactured from industrial hemp.

(21) “Marijuana-Infused Products” means products that are infused with marijuana or an extract thereof and are intended for use or consumption other than by smoking, including, but not limited to, edible products, ointments, tinctures, and concentrates.

(22) “Medical Marijuana Cultivation Facility” means a facility licensed by the department, to acquire, cultivate, process, store, transport, and sell marijuana to a medical marijuana dispensary facility, medical marijuana testing facility, or to a medical marijuana-infused products manufacturing facility.

(23) “Medical Marijuana Dispensary Facility” means a facility licensed by the department, to acquire, store, sell, transport, and deliver marijuana, marijuana-infused products, and drug paraphernalia used to administer marijuana as provided for in this section to a qualifying patient, a primary caregiver, another medical marijuana dispensary facility, a medical marijuana testing facility, or a medical marijuana-infused products manufacturing facility.

(24) “Medical Marijuana-Infused Products Manufacturing Facility” means a facility licensed by the department, to acquire, store, manufacture, transport, and sell marijuana-infused products to a medical marijuana dispensary facility, a medical marijuana testing facility, or to another medical marijuana-infused products manufacturing facility.

(25) “Medical Marijuana Testing Facility” means a facility certified by the department to acquire, test, certify, and transport marijuana.

(26) “Medical Marijuana Transportation Facility” means a facility certified by the department to transport marijuana to a qualifying patient, a primary caregiver, a medical marijuana cultivation facility, a medical marijuana dispensary facility, a medical marijuana testing facility, or another medical marijuana-transportation facility.

(27) “Medical use” means the production, possession, delivery, distribution, transportation, or administration of marijuana or a marijuana-infused product, or drug paraphernalia used to administer marijuana or a marijuana-infused product, for the benefit of a qualifying patient to mitigate the symptoms or effects of the patient’s qualifying medical condition.

(28) “Non-emancipated qualifying patient” means a qualifying patient under the age of eighteen (18) who has not been emancipated under Missouri law.

(29) “Physician” means an individual who is licensed and in good standing to practice medicine or osteopathy under Missouri law.

(A) A license is in good standing if it is registered with the Missouri Board of Healing Arts as current, active, and not restricted in any way, such as by designation as temporary or limited.

(B) Practice of medicine or osteopathy means practice by persons who hold a physician and surgeon license pursuant to Chapter 334, RSMo, including those who are admitted to practice in Missouri by reciprocity pursuant to 334.043, RSMo.

(30) “Physician certification” means a document, whether handwritten, electronic or in another commonly used format, signed by a physician and stating that, in the physician’s professional opinion, the patient suffers from a qualifying medical condition.

(31) “Primary caregiver” means an individual twenty-one (21) years of age or older who has significant responsibility for managing the well-being of a qualifying patient and who is designated as such on the primary caregiver’s application for an identification card under this section or in other written notification to the department.

(32) “Principal officers or managers” means persons who, regardless of title, have responsibility for supervising the management, administration, or operation of an entity, including, but not limited to: presidents, vice presidents, or general counsels; chief executive, financial, or operating officers; general partners, managing partners, or controlling partners; managing-members; or trustees.

(33) “Process lot” means, once production is complete, any amount of medical marijuana concentrate or extract of the same type and processed using the same extraction methods, standard operating procedures, and harvest lots; or any amount of medical marijuana infused product of the same type and processed using the same ingredients, standard operating procedures, and harvest lots.

(34) “Public place” means any public or private property, or portion of public or private property, that is open to the general public, including but not limited to, sidewalks, streets, bridges, parks, schools, and businesses. However, for purposes of designating a non-public place within a public place, the owner or entity with control of any such property may, but is not required to, provide one (1) or more enclosed, private spaces where one (1) qualifying patient and, if required by the owner or entity with control of any such property, a representative of such owner or entity, may congregate for the qualifying patient to consume medical marijuana. The qualifying patient may be accompanied by the family of the qualifying patient, the qualifying patient’s primary caregiver, and/or the qualifying patient’s physician. The owner or entity with control of any such property may provide such a space by individual request or designate such a space for ongoing use and may limit use of medical marijuana in that space to uses that do not produce smoke. Any such permission shall be given in writing and provided to the qualifying patient or publicly posted prior to a qualifying patient’s use of medical marijuana in that space.

(35) “Qualifying medical condition” means the condition of, symptoms related to, or side-effects from the treatment of—

(A) Cancer;

(B) Epilepsy;

(C) Glaucoma;

(D) Intractable migraines unresponsive to other treatment;

(E) A chronic medical condition that causes severe, persistent pain or persistent muscle spasms, including, but not limited to, those associated with multiple sclerosis, seizures, Parkinson’s disease, and Tourette’s syndrome;

(F) Debilitating psychiatric disorders, including, but not limited to, post-traumatic stress disorder, if diagnosed by a state licensed psychiatrist;

(G) Human immunodeficiency virus or acquired immune deficiency syndrome;

(H) A chronic medical condition that is normally treated with a prescription medication that could lead to physical or psychological dependence, when a physician determines that medical use of marijuana could be effective in treating that condition and would serve as a safer alternative to the prescription medication;

(I) Any terminal illness; or

(J) In the professional judgment of a physician, any other chronic, debilitating or other medical condition, including, but not limited to, hepatitis C, amyotrophic lateral sclerosis, inflammatory bowel disease, Crohn’s disease, Huntington’s disease, autism, neuropathies,
sickle cell anemia, agitation of Alzheimer’s disease, cachexia, and wasting syndrome.

(36) “Qualifying Patient” means a Missouri resident diagnosed with at least one (1) qualifying medical condition.

(37) “Seed-to-sale tracking system” means a software system designed to perform functions necessary to fulfill a licensed or certified facility’s responsibilities in tracking medical marijuana from either the seed or immature plant stage until the medical marijuana is sold to a qualifying patient or primary caregiver.

(38) “Signature” means a handwritten or electronic signature.

(39) “Statewide track and trace system” means the system the department uses to track medical marijuana from either the seed or immature plant stage until the medical marijuana is sold to a qualifying patient or primary caregiver to ensure that all medical marijuana sold in Missouri was cultivated or manufactured in Missouri, that all medical marijuana cultivated or manufactured in Missouri is sold only by dispensaries and only to individuals in possession of a valid qualifying patient or primary caregiver identification card, and that any given qualifying patient or primary caregiver is only purchasing the amount of medical marijuana he or she is approved to purchase at any given time.

(40) “Substantially common control, ownership, or management” means—

(A) The possession, directly or indirectly, of the power to direct or cause the direction of the management and policies of an entity, by any means, including ownership, contract, financing, or otherwise;

(B) The legal or beneficial ownership, directly or indirectly through ownership of an affiliate entity, of ten percent (10%) or more of an entity’s outstanding voting stock or other ownership interest;

(C) The ownership, directly or indirectly through the ownership of an affiliate entity, of a majority of the capital assets, real property assets, or leasehold interests; or

(D) The ability to make policy decisions, operating decisions, or decisions regarding the allocation of income and expenses for the entity, whether directly or by a management agreement.

AUTHORITY: sections 1.3(1)(b), 1.3(2), 1.3(3), and 1.3(4) of Article XIV, Mo. Const. Emergency rule filed May 24, 2019, effective June 3, 2019, expired Feb. 27, 2020.


19 CSR 30-95.020 General Provisions

PURPOSE: This rule explains where and when licensing application fees may be pre-filed with the Department of Health and Senior Services and provides the form for pre-filing licensing application fees.

PUBLISHER’S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

(1) Application Fee.

(A) The department shall charge each applicant seeking a license a nonrefundable fee as authorized by Article XVI, Section 1, Subsection 3 of the Missouri Constitution. The department shall publish the current fees, including any adjustments, on its medical marijuana program website at https://health.mo.gov/safety/medical-marijuana/index.php

(B) All pre-filed application fees submitted to the department are nonrefundable.

(C) All pre-filed application fees shall be accompanied by a completed Pre-Filed License Application Fee form, promulgated as of December 2018 and incorporated by reference in this rule. As published by the Missouri Department of Health and Senior Services, PO Box 570, Jefferson City, MO 65102-0570 and available at https://health.mo.gov/safety/medical-marijuana/forms.php. This rule does not incorporate any subsequent amendment or addition.

(D) The submittal of a pre-filed application fee does not guarantee a license shall be issued. An applicant who submits a pre-filed application fee and a completed Pre-Filed License Application Fee form shall not be considered for licensure until the applicant also submits a completed application for licensure.

(E) The department will only accept pre-filed application fees made by personal or certified check, cashier’s check, or money order made payable to the Missouri Department of Health and Senior Services.

(F) An applicant may deliver their completed form and pre-filed application fee—

1. By mail to the Missouri Department of Health and Senior Services, FEE RECEIPT UNIT, PO Box 570, Jefferson City, MO 65102-0570; or

2. By hand or by special courier to the physical street address of FEE RECEIPT UNIT, at the Missouri Department of Health and Senior Services, 920 Wildwood Drive, Jefferson City, MO 65109.

(G) Applicants submitting pre-filed application fees shall identify the type of license anticipated and the general location of the anticipated facility, should a license be granted. The facility location information is for department tracking purposes only. The facility location may change prior to a license being granted.

(H) If an applicant desires to seek multiple licenses and/or different types of licenses, the applicant must submit a separate Pre-Filed License Application Fee form and fee for each license.

(I) A pre-filed application fee shall only be applicable to a license application submitted by such applicant, or their designee as provided in subsection (2)(J), to the department within one (1) year of the date on which the department begins accepting applications for licenses authorized under Article XVI, Section 1 of the Missouri Constitution.

(J) An applicant who submits a pre-filed application fee, as an individual, may provide written notice to the department that such pre-filed application fee should be used for the license application of a business which they have an ownership interest in.

(K) A pre-filed application fee is considered submitted, for the purposes of this rule, on the date on which it is received by the department with a completed Pre-Filed License Application Fee form.

Senior Services has the authority to promulgate rules for the enforcement of Article XIV, Section 1 of the Missouri Constitution. This rule explains what general provisions are necessary for the enforcement of the Article.

PUBLISHER’S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

(1) Patient Registry Access. Qualifying patient and primary caregiver information collected by the department shall not be released to anyone outside the department except for purposes authorized by federal law or Article XIV, Section 1 of the Missouri Constitution, including:

(A) Upon request and for purposes of verifying whether a particular individual is lawfully in possession of a qualifying patient, primary caregiver, or patient cultivation identification card or lawfully in possession of a particular amount of marijuana, state and local law enforcement personnel shall have access to patient and caregiver information such as names, addresses, dates of birth, and purchase limitations; and

(B) For the purposes of verifying whether a particular qualifying patient or primary caregiver may purchase an amount of medical marijuana or medical marijuana seeds or plants, dispensary facilities shall have access to patient and primary caregiver names and purchase limitations.

(2) Variances.

(A) The department may waive, for good cause, provisions of this chapter on its own initiative or by request.

(B) Requests for variance from the requirements of any provision of this chapter shall be made in writing and will be granted or denied by the director of the department’s medical marijuana program. Requests shall include:

1. A list of each requirement for which a variance is requested, with citation to the specific rule in which the requirement can be found; and

2. An explanation for why the requirement cannot be met or why meeting the requirement would impose an undue burden on the applicant.

(C) Denial of variance requests shall be issued by the department in writing and shall include the specific reasons for the denial.

(3) Complaints. All complaints against licensed or certified medical marijuana facilities must be submitted through the department’s website at http://medicalmarijuana.mo.gov. Complaints shall include the name and address of the facility against which the complaint is made and a clear description of what violation the complainant believes the facility has committed.

(A) Upon complaint against a facility, the department will determine whether an inspection is warranted to investigate the allegations in the complaint.

(B) If the department conducts an inspection, the facility will receive a copy of the complaint.

(C) Employees of a facility who report potential violations by a facility to the department may not be subjected to retaliation of any kind, including termination, because of their report.

(4) Facility Evaluation Criteria. All applicants for cultivation, dispensary, manufacturing, testing, or transportation licenses or certifications will be evaluated for whether they meet minimum standards as described in subsection (A) of this section. During application time periods where more qualified applicants apply for cultivation, dispensary, manufacturing, or testing licenses or certifications than there are licenses or certificates available in that category, the department will use a system of numerically scoring ten (10) additional evaluation criteria to rank the applications in each such license or certification category against each other.

(A) The minimum standards for licenses and certifications can be met by providing all material required by 19 CSR 30-95.040(2) in order to show, as applicable—

1. Authorization to operate as a business in Missouri;

2. That the entity is majority owned by natural persons who have been residents of Missouri for at least one (1) year;

3. That the entity is not under substantially common control as another entity or a combination of other entities in violation of 19 CSR 30-95.040(3)(C)-(D);

4. That the entity is not within one thousand (1000) feet of an existing elementary or secondary school, daycare, or church, or, if a local government allows for closer proximity to schools, daycares, and churches, that the entity complies with the local government’s requirements;

5. That the entity can comply with any local government zoning laws specific to the entity’s type of facility other than applicable local government requirements regarding proximity to schools, daycares, or churches; and

6. That the entity will not be owned, in whole or in part, or have as an officer, director, board member, or manager, any individual with a disqualifying felony offense.

(B) The additional evaluation criteria, which will be numerically scored, are—

1. The character, veracity, background, qualifications, and relevant experience of principal officers or managers;

2. The business plan proposed by the applicant, which in the case of cultivation facilities and dispensaries shall include the ability to maintain an adequate supply of medical marijuana, plans to ensure safety and security of qualifying patients and the community, procedures to be used to prevent diversion, and any plan for making medical marijuana available to low-income qualifying patients;

3. Site security;

4. Experience in a legal cannabis market;

5. In the case of testing facilities, the experience of the facility’s personnel with the health care industry and with testing marijuana, food, or drugs for toxins and/or potency;

6. The potential for the facility to have a positive economic impact in the site community;

7. In the case of cultivation facilities, capacity or experience with agriculture, horticulture, and health care;

8. In the case of dispensary facilities, capacity or experience with health care, the suitability of the proposed location, and its accessibility for patients;

9. In the case of infused products manufacturing facilities, capacity or experience with food and beverage manufacturing; and


(C) When applicable, numerical scoring of evaluation criteria will be conducted as follows:

1. Applications will be separated from their identifying information, including facility business names, and names, addresses, and Social Security numbers of individuals, and assigned a numerical identifier for use during scoring;

2. Applications will be scored based on responses to evaluation criteria questions. Responses may take the form of written answers or written answers with attachments.

A. Each type of facility or certification application will be scored and ranked against the other applications of the same...
type. For dispensaries, applications will be scored and ranked against other dispensary applications in the same congressional district.

B. Applications will be scored without regard to the identities of the facilities or of individuals named in an application. Written responses to evaluation criteria questions should not refer to facility business names, either legal or fictitious, and should refer to all individuals by title and initials only, e.g. “Owner A.E.M.” or “Principal Officer R.W.M.” If it is necessary to refer to facility business names or to any individuals in order to properly answer evaluation criteria questions, the facility business names and any names, addresses, or social security number of individuals must be redacted from the evaluation criteria question response. Unredacted versions of those same documents will be submitted separately in a section of the application designated for this purpose.

C. Responses to evaluation criteria questions in which a business or individual is identified by name will not be scored;

3. Evaluation criteria questions and initial scoring shall be as delineated in the Evaluation Criteria Questions and Points table, the Evaluation Criteria Scoring table, and the Evaluation Criteria Topics and Values Table, which are incorporated by reference in this rule as published by the department and available on the department’s website at http://medicalmarijuana.mo.gov. This rule does not incorporate any subsequent amendments or additions;

4. The same evaluation criteria question in each application will be scored by the same individual, if possible, and scores that vary significantly from other scores for the same questions may be rescorded. If rescored, the first score will be discarded, and the second score will stand;

5. Once all applications have been assigned an initial rank and score, the department will reconnect the applications with their identifying information;

6. After evaluation criteria questions have been initially ranked and scored, and in order to award points to applicants that seek to locate in economically distressed areas, thereby supporting a potential for positive economic impact in the site community, the facility rankings will be further adjusted by awarding additional points as follows:

A. Any facility seeking a license to locate within a zip code area that has an employment rate of zero to eighty-four and nine tenths percent (0-84.9%) will receive a scoring increase of forty percent (40%) of the average initial score of all applicants of the same facility type within the evaluation criteria topic regarding potential for positive economic impact in the site community; and

B. Any facility seeking a license to locate within a zip code area that has an employment rate of zero to eighty-four and nine tenths percent (0-84.9%) will receive a scoring increase of forty percent (40%) of the average initial score of all applicants of the same facility type within the evaluation criteria topic regarding potential for positive economic impact in the site community; and

C. For the purposes of this paragraph, zip code employment data was obtained from the “U.S. Census Bureau, American Community Survey 2013-2017, Employment Status, Population 16 years and over,” published by the Missouri Census Data Center. The applicable zip codes are listed in the table included herein.

7. For cultivation, manufacturing, and testing facilities, the score following any adjustments under paragraph 6. of this subsection is the final score;

8. For dispensary facilities, after evaluation criteria questions have been initially scored and adjusted as applicable under paragraph 6. of this subsection, and in order to facilitate patient access to medical marijuana, the rankings of dispensary facilities will be further adjusted by awarding additional points due to geographic location as follows:

A. First, the highest scoring dispensary facility in each of the one hundred sixty-three (163) Missouri House of Representatives districts as drawn and in effect on December 6, 2018, will receive an increase to its score pursuant to subparagraph C. of this paragraph, and all dispensary facility applicants’ rankings will then be reordered. A map of the state of Missouri showing the applicable boundary lines of Missouri’s house districts is available on the department’s website;

B. Finally, any dispensary facility applicant with a location more than twenty-five (25) miles, measured in a straight line, from any other dispensary facility applicant or existing dispensary facility will receive an additional increase to its score pursuant to subparagraph C. of this paragraph, and all dispensary facility applicants’ rankings will again be reordered. The resulting rank and score will be each dispensary facility’s final rank and score;

C. Scoring increases due to geographic location will be equal to five percent (5%) of the average initial score of the top twenty-four (24) ranked facilities in each congressional district that has at least twenty-four (24) dispensary facility applicants; and

D. In cases where a house district is segmented by the boundary lines of two (2) or more congressional districts, for purposes of the adjustments in this paragraph, only the segment of that house district with the highest population, as of the 2010 United States Population Census, will be utilized; and

9. In the case of a tie for the last available license or certification in any category, the license or certification will go to—

A. The facility with the highest score in the topic specifically relating to that facility type;

B. If a tie remains, then the facility with the highest score in the business plan topic;

C. If a tie remains, then the facility with the highest score in the business plan topic;

D. If a tie remains, then the facility with the highest score in the facility type;

E. If a tie remains, then the facility with the highest score in the economic impact topic;

F. If a tie remains, then the facility with the highest score in the legal cannabis market experience;

G. If a tie remains, then the facility will be chosen by lottery.

(D) Licenses and certifications will be issued as follows:

1. When the numerical scoring system is used, the highest ranked facilities for each type of facility and, for dispensaries, in each congressional district, will receive licenses or certifications, except in cases where an entity under substantially common control, ownership, or management has applied for more than three (3) cultivation, three (3) manufacturing, or five (5) dispensary licenses. In those cases, the department will only issue licenses to the highest ranked facilities associated with that entity, up to the maximum number allowable in each category of license;

2. When the numerical scoring system is not used, all facilities that meet the minimum standards for licenses or certifications will be issued licenses or certifications, except in cases where an entity under substantially common control, ownership, or management has applied for more than five (5) dispensary licenses and some of those dispensaries are located in congressional districts that were numerically scored. In those cases, the department will first issue licenses to the dispensaries associated with that entity in congressional districts that were not numerically scored. Any remaining dispensaries associated with that entity will be issued licenses according to that dispensary’s rank and score; and

3. All facilities that are issued a license
or certification will be given forty-eight (48) hours to confirm they accept the license or certification. If a facility does not accept issuance of a license or certification, the license or certification will be offered to the next ranked facility, as applicable, until all available licenses and certifications are issued and accepted.

(5) The department will impose penalties as follows:

(A) For possessing marijuana in amounts between the possessor’s legal limit and twice the possessor’s legal limit, in addition to revocation of identification card(s) pursuant to 19 CSR 30-95.030(3)(B)1.D., the possessor will incur a penalty of two hundred dollars ($200);

(B) For failure to package medical marijuana consistent with 19 CSR 30-95.040(4)(K), a facility will incur a penalty of five thousand dollars ($5,000) for each category of improperly packaged product, and the improperly packaged medical marijuana will be recalled for repackaging or disposal, at the department’s discretion; and

(C) Any person or facility that extracts resins from marijuana using combustible gases or other dangerous materials without a manufacturing facility license, shall incur a penalty.

1. In addition to revocation of identification cards pursuant to 19 CSR 30-95.030(3)(B)1.I., any patients or primary caregivers who extract resins in this manner will incur a penalty of one thousand dollars ($1000).

2. In addition to suspension of license, pursuant to 19 CSR 30-95.040(1)(F)7., facilities that extract resins in this manner will incur a penalty of ten thousand dollars ($10,000).

(6) Appeals.

(A) The following department decisions shall be appealable to the administrative hearing commission:

1. Denial, revocation, or suspension of licenses or certifications; and

2. Denial or revocation of patient, primary caregiver, patient cultivation, or facility agent identification cards.

(B) Any person or entity entitled to appeal to the administrative hearing commission under this rule must file a petition with the administrative hearing commission within thirty (30) days after the date the department decision is sent to the person or entity. An untimely appeal will not be considered.

(C) Notwithstanding the limits on licenses and certifications set forth in 19 CSR 30-95.050(1)(A), 19 CSR 30-95.060(1)(A), 19 CSR 30-95.070(1), and 19 CSR 30-95.080(1)(A)-(B), the department may grant additional facility licenses or certifications as a remedy to timely appeals when:

1. Ordered to do so by the administrative hearing commission or a court of competent jurisdiction; or

2. The department determines doing so in settlement of such an appeal best serves implementation of Article XIV, Section 1 of the Missouri Constitution.

(7) Statewide Track and Trace System.

(A) No entity holding a contract with the state of Missouri for a statewide track and trace system or any affiliates of that entity may sell seed-to-sale tracking services or services related to compliance with seed-to-sale tracking regulations to a licensed or certified facility.

(B) Unless otherwise addressed or prohibited by contract or law, an entity holding a contract with the state of Missouri for a statewide track and trace system and any affiliates of that entity may charge a price to a licensed or certified facility for plant/product tracking labels, but no such price shall exceed the cost of producing the label in an amount that would create more than thirty percent (30%) net profit on each label.

(8) Unless otherwise stated, any reference to days in Chapter 95 will mean calendar days.
US Census Bureau 2013-2017 American Community Survey 5-Year Estimates
Missouri Employment Data by Zip Code Tabulation

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19 CSR 30-95.028 Additional Licensing Procedures

PURPOSE: The Department of Health and Senior Services has the authority to promulgate rules for the enforcement of Article XIV. This rule explains what provisions are necessary for ensuring an efficient facility licensing/certification process after the initial process of scoring and ranking applications is complete.

(1) Confirmation and Acceptance of License/Certification. All facilities that are issued a license or certification will be given five (5) days from department notification of issuance to confirm they accept the license or certification. Notification shall be made via the email address and phone number of the applicant’s designated primary contact and will include the deadline for accepting. If a facility does not affirmatively accept issuance of a license or certification within the five (5) days following notification, the license or certification will be offered to the next ranked facility, as applicable, until all available licenses and certifications are issued and accepted.

(2) Conditional Denials. All cultivation, dispensary, manufacturing, and testing facility applications that meet minimum standards as described in 19 CSR 30-95.040(4)(A) but are denied due to the results of numerical scoring shall be regarded as “conditionally denied” for a period of three hundred ninety-five (395) days for the purpose of maintaining eligibility for any licenses or certifications that become available within that time period. Conditionally denied applications will be eligible for licenses or certifications as follows:

(A) For each available license or certification of a particular facility type that may become available during a time period when there are applications that have been conditionally denied, the department will issue the license or certification to the highest ranked applicant of that facility type or, in the case of dispensaries, of that facility type and in the applicable congressional district, subject to applicable limits regarding facilities under substantially common control.

(B) Facilities issued a license or certification under this section shall be subject to all regulations and laws applicable to any other licensed or certified facilities of the same type.

(C) A conditional denial will be considered a denial for purposes of appeal under 19 CSR 30-95.025.


19 CSR 30-95.030 Qualifying Patient/Primary Caregiver

PURPOSE: Under Article XIV, Section 1 of the Missouri Constitution, patients with qualifying medical conditions have the right to discuss freely with their physicians the possible benefits of medical marijuana use and the right to use medical marijuana for treatment under the supervision of a physician. Pursuant to the same article, the Department of Health and Senior Services is tasked with ensuring patient access to medical marijuana, subject to reasonable restrictions. This rule explains how the department will implement provisions of Article XIV related to Qualifying Patients and Primary Caregivers.

(1) Physician Certification. A qualifying patient must obtain a new physician certification at least annually. In every application for which a physician certification is required, the physician certification must be less than thirty (30) days old at the time the application is submitted.

(2) Identification Card Applications. Qualifying patients and primary caregivers shall obtain identification cards from the department, which will include unique, identifying numbers for each patient and each caregiver-patient relationship. A qualifying patient or his or her primary caregivers may also obtain an identification card to cultivate up to six (6) flowering marijuana plants for the exclusive use of that qualifying patient. The department will receive applications for qualifying patients, primary caregivers, and patient cultivation electronically through a department-provided, web-based application system. In the event of application system unavailability, the department will arrange to accept applications in an alternative, department-provided format and will notify the public of those arrangements through its website at http://medicalmarijuana.mo.gov.

(A) All applications for qualifying patient identification cards and renewal of such identification cards shall include at least the following information:

1. The qualifying patient’s name, date of birth, and Social Security number;
2. The qualifying patient’s residence address and mailing address or, if the qualifying patient has no residence or mailing address, an address where the qualifying patient can receive mail;
3. A statement that the qualifying patient resides in Missouri and does not claim resident privileges in another state or country, as well as proof of current Missouri residency, which shall be shown by—
   A. A copy of a valid Missouri driver’s license, a Missouri Identification Card, a current Missouri motor vehicle registration, or a recent Missouri utility bill; or
   B. If none of these proofs are available, some other evidence of residence in Missouri, which shall be approved or denied by the director of the medical marijuana program as sufficient proof of residency;
4. The qualifying patient’s e-mail address;
5. A statement confirming that—
   A. One (1) physician certification, which is less than thirty (30) days old, has been submitted on behalf of the qualifying patient; or
   B. Two (2) physician certifications, which are less than thirty (30) days old, have been submitted on behalf of the qualifying patient in order to authorize possession limits other than those established by section (5) of this rule;
6. A legible copy of the qualifying patient’s photo identification issued by a state or federal government entity;
7. If the qualifying patient is a non-emancipated qualifying patient, the name, Social Security number, and a Parental/Legal Guardian Consent Form, included herein, completed by a parent or legal guardian who will serve as primary caregiver for the qualifying patient;
8. A clear, color photo of the applicant’s face taken within the prior three (3) months;
9. At the option of the applicant, a statement indicating whether the applicant is currently receiving assistance from any Missouri programs for low-income individuals, and if so, which programs;
10. If the patient is seeking authority to cultivate medical marijuana—
   A. The address of the facility in which the qualifying patient will cultivate marijuana;
   B. A description of the security arrangements and processes that will be used to restrict access to only qualifying patients and their primary caregivers;
   C. The name and Patient License Number or Caregiver License Number, if applicable, of one (1) other qualifying patient
or primary caregiver with whom the cultivating facility will be shared;

D. A statement affirming the applicant’s agreement to immediately make available access to the patient cultivation facility upon request from the department. Such access will be only for purposes of confirming compliance with this rule and will be limited to the enclosed locked facility and any areas necessary to reach and enter the facility on a path of the patient’s or primary caregiver’s choosing;

11. An attestation that the information provided in the application is true and correct;

12. The signature of the qualifying patient and date the qualifying patient signed, or, in the case of a non-emancipated qualifying patient, the signature of the parent or legal guardian who will serve as primary caregiver for the qualifying patient and the date the parent or legal guardian signed; and

13. All applicable fees.

(B) All applications for primary caregiver identification cards and renewal of such identification cards shall include at least the following information:

1. The primary caregiver’s name, date of birth, and Social Security number;
2. The primary caregiver’s residence address and mailing address;
3. The primary caregiver’s e-mail address;
4. The name and Patient License Number of the qualifying patient for whom the applicant seeks to serve as primary caregiver;
5. A legible copy of the primary caregiver’s photo identification issued by a state or federal government entity;
6. If the qualifying patient is a non-emancipated qualifying patient, a statement that the primary caregiver is the qualifying patient’s parent or legal guardian and—
   A. A copy of a birth certificate or adoption record showing the primary caregiver as the qualifying patient’s parent; or
   B. A copy of documentation establishing legal guardianship of the primary caregiver over the qualifying patient;
7. A clear, color photo of the applicant’s face taken within the prior three (3) months;
8. If the primary caregiver is seeking authority to cultivate medical marijuana on behalf of the patient—
   A. The address of the facility in which the primary caregiver will cultivate marijuana;
   B. A description of the security arrangements and processes that will be used to restrict access to only qualifying patients and their primary caregivers;

C. The name and Patient License Number or Caregiver License Number, if applicable, of one (1) other qualifying patient or primary caregiver with whom the cultivating facility will be shared; and

D. A statement affirming the applicant’s agreement to immediately make available access to the patient cultivation facility upon request from the department. Such access will be only for purposes of confirming compliance with this rule and will be limited to the enclosed locked facility and any areas necessary to reach and enter the facility on a path of the patient’s or primary caregiver’s choosing;

9. An attestation that the information provided in the application is true and correct;

10. The signature of the primary caregiver and date the primary caregiver signed;

11. Except in the case of a non-emancipated qualifying patient, a Patient Authorization Form, included herein, completed by the qualifying patient who the primary caregiver will serve; and

12. All applicable fees.

(3) Application Processes.

(A) Upon receiving an application for a qualifying patient identification card, primary caregiver identification card, or patient cultivation identification card, the department shall, within thirty (30) days, either approve the application or provide a written explanation for its denial.

1. In the case of qualifying patient and patient cultivation identification cards, if the department fails to deny or fails to approve an application within thirty (30) days, a card will be issued that will be valid for one (1) year and will serve all the same functions as would a card issued after application approval.

2. An application for a qualifying patient or patient cultivation identification card will be considered approved when an application is submitted to the department that includes all information required by section (2) of this rule. The department will notify an applicant once if an application is incomplete and will specify in that notification what information is missing.

(B) Denial and revocation.

1. Qualifying patient, primary caregiver, and patient cultivation identification cards may be denied or revoked.

A. If an applicant provides false or misleading information in an application, the identification card for which the applicant is applying will be denied.

B. If an applicant fails to provide a complete application within ten (10) days of being notified that an application is incomplete, the identification card for which the applicant is applying will be denied.

I. An applicant will be considered notified on the date the department sends a written explanation of how the application is incomplete to a mailing or e-mail address provided by the applicant.

II. If an applicant fails to provide either a mailing or e-mail address, the department will not issue notice but will hold the application for thirty (30) days before denying it.

C. If a card holder violates any provision of this rule, any medical marijuana identification cards currently held by that individual may be revoked.

D. If a card holder is found to be in possession of an amount of marijuana greater than the medical marijuana legal limit applicable to that individual, any medical marijuana identification cards currently held by that individual will be revoked. In such a case, the identification card may be revoked for up to one (1) year.

E. If a card holder is convicted of, pleads guilty to, or receives a suspended imposition of sentence for a violation of section 579.020, 579.065, or 579.068, RSMo, or for a violation of a similar law of another state, any medical marijuana identification cards currently held by that individual will be revoked. In such a case, the revocation shall be permanent, absent a gubernatorial pardon or expungement.

F. If an applicant has applied for a qualifying patient, primary caregiver, or qualifying patient cultivation identification card and received two (2) denials within a twelve- (12-) month period, has any of these types of identification cards revoked twice within a twenty-four- (24-) month period, or applied for any of these types of identification cards and been denied once and also had any of these types of identification cards revoked once within a twenty-four- (24-) month period, the identification card for which the applicant is applying will be denied.

G. If a patient cultivation identification card holder fails to immediately make available access to his or her patient cultivation facility upon request from the department, the patient cultivation identification card will be revoked.

H. If medical marijuana is stolen or lost, is identifiable as medical marijuana purchased by a particular qualifying patient or primary caregiver, is discovered in the possession of an individual who is not the qualifying patient or primary caregiver authorized to possess that medical marijuana, and was not timely reported as stolen or lost by the qualifying patient or primary caregiver
authorized to possess that medical marijuana, the qualifying patient’s or primary caregiver’s identification card may be revoked.

I. If a qualifying patient or primary caregiver uses combustible gases or other dangerous materials to extract resins from marijuana, the qualifying patient’s or primary caregiver’s identification card may be revoked for up to one (1) year.

J. If the department determines there is good cause to do so, an application for a patient cultivation identification card may be denied.

2. Any denial or revocation shall be issued by the department in writing to the qualifying patient or, in the case of a primary caregiver, to the qualifying patient and the primary caregiver, and shall include the specific reasons for the denial or revocation and the process for requesting review of the department’s decision.

C. Renewal. Qualifying patient, primary caregiver, and patient cultivation identification cards are valid for twelve (12) months from their date of issuance and shall be renewable by submitting, prior to expiration by at least thirty (30) days but no sooner than sixty (60) days, a new or updated application, which shall include any information required by section (2) that has changed since the date of the previous application, including a new physician certification.

D. The department shall charge a fee for medical marijuana identification card applications.

1. There will be a separate fee for each application to be a qualifying patient, each application to be a primary caregiver on behalf of a specific qualifying patient, and each application to cultivate medical marijuana on behalf of a specific qualifying patient.

2. Requests for authority to cultivate medical marijuana on behalf of a qualifying patient may be made within a qualifying patient or primary caregiver application or may be made separately at a later time. However, a later authorization to cultivate will be added to the qualifying patient or primary caregiver identification card and will only remain valid as long as the qualifying patient or primary caregiver’s identification card is still valid. The cultivation application fee will be the same for all cultivation applications no matter how much time remains on the validity of the patient or caregiver’s identification card. The cultivation authorization must be renewed at the time the patient or caregiver identification card is renewed.

3. Current fees, including any adjustments, will be posted on the department’s website at http://medicalmarijuana.mo.gov.

E. If the name or address of a qualifying patient or primary caregiver changes after an identification card is issued, the qualifying patient or primary caregiver shall notify the department within ten (10) days of the change.

4. Qualifying Patient Cultivation.

A. All qualifying patient cultivation shall take place in an enclosed, locked facility, as defined in 19 CSR 30-95.010.

B. One (1) qualifying patient may cultivate up to six (6) flowering marijuana plants, six (6) nonflowering marijuana plants (over fourteen (14) inches tall), and six (6) clones (plants under fourteen (14) inches tall) at any given time in a single, enclosed locked facility. Two (2) qualifying patients, who both hold valid qualifying patient cultivation identification cards, may share one (1) enclosed, locked facility. No more than twelve (12) flowering marijuana plants, twelve (12) nonflowering plants, and twelve (12) clones may be cultivated in a single, enclosed locked facility, except when one (1) of the qualifying patients, as a primary caregiver, also holds a patient cultivation identification card for a third qualifying patient, in which case that primary caregiver may cultivate six (6) additional flowering marijuana plants, six (6) additional nonflowering marijuana plants, and six (6) additional clones for a total of eighteen (18) flowering marijuana plants, eighteen (18) nonflowering marijuana plants, and eighteen (18) clones in a single, enclosed locked facility.

C. Under no circumstance will a qualifying patient be entitled to cultivate, or have cultivated on his or her behalf, more than six (6) flowering marijuana plants.

D. Nothing in this section shall convey or permit the cultivation or use of more than the legal limit for each qualifying patient, as defined in this section.

E. All cultivated flowering marijuana plants in the possession of a qualifying patient or primary caregiver shall be clearly labeled with the qualifying patient’s name.

F. The department shall provide each qualifying patient or primary caregiver who receives a qualifying patient cultivation identification card with a cultivation authorization, which shall be clearly displayed within the enclosed cultivation area and in close proximity to the marijuana plants. The authorization shall list the name of the qualifying patient or primary caregiver and the address of the facility in which that qualifying patient or primary caregiver is authorized to cultivate marijuana.

G. Only one individual in a patient-caregiver relationship may be authorized for patient cultivation.

H. Non-Emancipated Qualifying Patient.

A. A physician shall not issue a certification for the medical use of marijuana for a
non-emancipated qualifying patient under the age of eighteen (18) without the written consent of a parent or legal guardian of the qualifying patient.

(B) The department shall not issue a qualifying patient identification card on behalf of a non-emancipated qualifying patient under the age of eighteen (18) without the written consent of a parent or legal guardian of the qualifying patient. Such card shall be issued to the parent or guardian and not directly to the patient.

(C) Only a parent or guardian may serve as a primary caregiver for a non-emancipated qualifying patient under the age of eighteen (18).

(D) Only the qualifying patient’s parent or guardian who holds a primary caregiver identification card shall purchase or possess medical marijuana for a non-emancipated qualifying patient under the age of eighteen (18).

(E) A parent or guardian who holds a primary caregiver identification card shall supervise the administration of medical marijuana to a non-emancipated qualifying patient under the age of eighteen (18).

(7) Qualifying Patient Responsibilities.

(A) No qualifying patient shall consume marijuana for medical use in a public place, unless provided by law.

(B) No qualifying patient who is under the care of a primary caregiver may serve as the primary caregiver for another qualifying patient.

(C) If a qualifying patient is no longer entitled to medical marijuana or no longer wishes to hold a medical marijuana identification card, he or she must notify the department within ten (10) days of that change. The department will confirm in writing that the qualifying patient has voluntarily surrendered the identification card and that the identification card is no longer valid.

(D) If medical marijuana in possession of a primary caregiver is stolen or lost, the primary caregiver must notify the department within two (2) days.

(9) Disposal of Qualifying Patient Medical Marijuana.

(A) In any case where a qualifying patient is no longer entitled to medical marijuana under any provision of state law or is deceased, any excess medical marijuana or marijuana plants in the possession of the qualifying patient or the patient’s primary caregiver or discovered by a third party shall be turned over to a licensed dispensary for disposal within thirty (30) days of the event that makes the qualifying patient ineligible.

1. Before delivering the excess medical marijuana to a dispensary, the individual in possession of the excess medical marijuana must contact the department, and the department will coordinate delivery arrangements between the individual and a dispensary.

2. The individual in possession of excess medical marijuana shall receive from the department written, temporary authorization to transport medical marijuana, which shall include details regarding the delivery arrangements approved by the department.

(B) The possession and transportation of medical marijuana under this section shall not subject the possessor to arrest, criminal or civil liability, or sanctions under Missouri law, provided that the possessor produces on demand to the appropriate authority a copy of the temporary authorization for transport or evidence of communication with the department regarding delivery arrangements.
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
SECTION FOR MEDICAL MARIJUANA REGULATION  
MEDICAL MARIJUANA REGULATORY PROGRAM  
PARENT / LEGAL GUARDIAN CONSENT FORM

A Parental/Legal Guardian Consent Form is required by 19 CSR 30-95.030 as proof of consent by a parent or legal guardian for a minor’s use of marijuana for medical use and must be submitted with any Patient Registration Application for a non-emancipated qualifying patient. Please ensure information provided is consistent with the applicable Patient Registration Application and the applicable Primary Caregiver Application.

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<th>PATIENT NAME:</th>
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<td>LAST NAME:</td>
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<th>PATIENT / LEGAL GUARDIAN WHO WILL SERVE AS PRIMARY CAREGIVER NAME:</th>
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<td>LAST NAME:</td>
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<td>SOCIAL SECURITY NUMBER:</td>
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I, ____________________________, affirm I am the parent or legal guardian of _______________________, and this is my written consent for the Department of Health and Senior Services to issue a Patient Identification Card for his/her medical use of marijuana under my supervision.

| PARENT / LEGAL GUARDIAN SIGNATURE: | DATE: |

MO 580-3272 (5-19)
PURPOSE: Under Article XIV, Section 1 of the Missouri Constitution, the Department of Health and Senior Services is authorized to regulate and control the operations of Cultivation, Infused Product Manufacturing, Dispensary, Testing, and Transportation facilities, and to grant, refuse, suspend, fine, restrict, or revoke the licenses and certifications for such facilities. This rule explains how this authority will be exercised.

(1) Application Processes. The department will begin accepting applications for licensing and certification of cultivation, infused products manufacturing, dispensary, testing, and transportation facilities on August 3, 2019.

(A) The department will receive applications for facility licenses or certifications electronically through a department-provided, web-based application system. In the event of application system unavailability, the department will arrange to accept applications in an alternative, department-provided format and will notify the public of those arrangements through its website.

(B) For cultivation, manufacturing, dispensary, and testing facilities, the department will publish, on its website, time periods during which it will accept applications in an alternative, department-provided format and will notify the public of those arrangements through its website.

All complete applications received by the department that are submitted during the application time periods will be approved or denied within one hundred fifty (150) days of that application’s submission.

1. Any application fees submitted before or during the first application time period and during any subsequent application period are nonrefundable.

2. After the first application time period, any application fees submitted outside of an application time period will not be accepted.

3. If licenses or certifications are available after a time period for accepting applications has passed, the department will determine when to publish, on its website, a new time period during which it will accept applications and will publish that new time period on its website at least six (6) months prior to the beginning of that time period.

4. Applications will be considered complete if they include all information required for applications by this rule and by 19 CSR 30-95.025(4). The department will notify an applicant if an application is incomplete and will specify in that notification what information is missing. Applicants will be given seven (7) days to provide missing information.
(C) For transportation facilities, all complete applications received by the department that are submitted on or after August 3, 2019, will be approved or denied within one hundred fifty (150) days of that application’s submission. Applications will be considered complete if they include all information required for applications by this rule. The department will notify an applicant if an application is incomplete and will specify in that notification what information is missing. Applicants will be given seven (7) days to provide missing information.

(D) The issuance of a facility license or certification does not authorize the facility to begin cultivating, manufacturing, dispensing, testing, or transporting medical marijuana. A facility will be granted final approval to operate upon passing a commencement inspection.

(E) The department will not license or certify a cultivation, dispensary, manufacturing, transportation, or testing facility that is owned by or affiliated with an entity that currently holds a contract with the state of Missouri for any product or service related to the department’s medical marijuana program.

(F) Licenses and certification for facilities may be suspended, denied, or revoked.

1. If a facility provides false or misleading information in an application, its application may be denied, or if the information is later discovered to have been false or misleading, its license or certification may be revoked. Plans, assurances, and projections offered in answers to 19 CSR 30-95.025(4) evaluation criteria questions may be considered false or misleading if, upon application for license renewal, the department determines the facility has not made a reasonable effort to implement or follow-through on those plans, assurances, or projections.

2. If a facility violates any provision in this chapter or fails to comply with a corrective action plan, its license or certification may be suspended or revoked.

3. If an applicant fails to provide a complete application within seven (7) days of being notified that an application is incomplete, the license or certification for which the applicant is applying will be denied.

4. If a facility is granted a license or certification but has not passed a commencement inspection within one (1) year of the department issuing the license or certification, the license or certification may be revoked.

5. If a facility fails to comply with a department order to immediately suspend all or a part of its operations, the license or certification shall be revoked.

6. If an application does not meet the minimum standards for licenses and certifications pursuant to 19 CSR 30-95.025(4), the license or certification for which the applicant is applying will be denied.

7. If a facility uses combustible gases or other dangerous materials to extract resins from marijuana without a manufacturing facility license, the facility’s license may be suspended for up to one (1) year.

8. If a facility packages medical marijuana in a false or misleading manner, or in any manner designed to cause confusion between a marijuana product and any product not containing marijuana, the facility’s license may be suspended or revoked.

9. If a facility or a facility employee fails to comply with seed-to-sale tracking requirements or intentionally misuses or falsifies seed-to-sale tracking data, the facility’s license may be revoked.

(G) Cultivation, infused product manufacturing, and dispensary licenses and testing and transportation certifications are valid for three (3) years from the date the license or certification is issued and shall, except for good cause, be renewable by submitting, prior to expiration by at least one hundred fifty (150) days but no sooner than two hundred fifty (250) days, an updated application, which shall include any information required by section (2) of this rule or section (4) of 19 CSR 30-95.025 that has changed since the date of the previous application.

(H) The department shall charge an application or renewal fee for a facility license or certification and also an annual fee once a license or certification is granted. The first annual fee will be due thirty (30) days after a license or certification is issued and shall be due annually on that same date as long as the facility’s license or certification remains valid. The department shall publish the current fees, including any adjustments, on its website. The amount of fees due for each facility will be the amount that is effective as of that facility’s due date.

(2) Application Requirements. Facilities must obtain a license or certification to cultivate, manufacture, dispense, test, and transport medical marijuana in Missouri. All applications for facility licenses or certifications and for renewals of licenses or certifications shall include at least the following information:

(A) Name and address of the primary contact for the applicant facility;

(B) Legal name of the facility, including fictitious business names, and a certificate of good standing from the Missouri Office of the Secretary of State;

(C) A completed Ownership Structure Form, included herein, which must show the applicant entity is majority owned by Missouri residents, and a written description or visual representation of the facility’s ownership structure including all entities listed on the Ownership Structure Form;

(D) For each owner claiming Missouri residence for purposes of subsection (C) of this section, a statement that the owner has resided in Missouri for at least one (1) year and does not claim resident privileges in another state or country, as well as proof of current Missouri residency, which shall be shown by—

1. A copy of a valid Missouri driver’s license, a Missouri Identification Card, a current Missouri motor vehicle registration, or a recent Missouri utility bill; or

2. If none of these proofs are available, some other evidence of residence in Missouri which shall be approved or denied at the discretion of the director of the medical marijuana program as sufficient proof of residency;

(E) A list of all facilities licensed or certified or applying for licensure or certification in Missouri to cultivate, manufacture, dispense, or test medical marijuana that are or will be under substantially common control, ownership, or management as the applicant. For each facility listed, a written explanation of how the facility is under substantially common control, ownership, or management as the applicant, with supporting documentation;

(F) Proposed address of the facility and—

1. A map of the surrounding area that shows compliance with the facility location requirements of subsection (4)(B) of this rule or 19 CSR 30-95.100(2)(C); or

2. Documentation showing a local government requirement different than the requirement in subsection (4)(B) of this rule or 19 CSR 30-95.100(2)(C) and a map of the surrounding area that shows compliance with the facility location requirements of the local government; and

3. An attestation that the proposed address of the facility complies with the facility location requirements of subsection (4)(B) of this rule or 19 CSR 30-95.100(2)(C);

(G) Descriptions, schematics, or blueprints for the facility;

(H) If the city, town, or county in which the facility will be located has enacted zoning or other land use restrictions applicable to the facility, the text of the restrictions and a description of how the facility plans to comply with those restrictions;

(I) An attestation that no individual who owns the facility, in whole or in part, has a disqualifying felony offense;

(J) A statement confirming that all owners
who hold any portion of the economic or voting interest of the facility who will also have access to medical marijuana or the medical marijuana facility, and all officers, directors, board members, managers, and employees identified in the application, have submitted fingerprints within the previous six (6) months for a state and federal fingerprint-based criminal background check to be conducted by the Missouri State Highway Patrol;

(K) All facility evaluation information required by 19 CSR 30-95.025(4); and

(L) All applicable fees or proof that all applicable fees have already been paid.

(3) Facility Ownership and Employment.

(A) Cultivation, infused products manufacturing, dispensary, testing, and transportation facilities shall not be owned by, in whole or in part, or have as an officer, director, board member, manager, or employee, any individual with a disqualifying felony offense.

(B) Cultivation, infused products manufacturing, dispensary, testing, and transportation facilities shall be held by entities that are majority owned by natural persons who have been citizens of the state of Missouri for at least one (1) year prior to applying for a facility license or certification. For the purposes of this requirement, citizen means resident.

(C) No more than three (3) cultivation, no more than three (3) manufacturing, and no more than five (5) dispensary licenses shall be issued to any entity under substantially common control, ownership, or management. Any entity under substantially common control, ownership, or management that has applied for more than three (3) cultivation, three (3) manufacturing, or five (5) dispensary licenses shall contact the department at the time of application submission to identify for the department the applications associated with that entity. The department will use this information, once application scoring is complete pursuant to 19 CSR 30-95.025(4), solely for determining how many licenses the department may issue any particular entity.

(D) No testing facility shall be owned by an entity under substantially common control, ownership, or management as a cultivation, manufacturing, or dispensary facility.

(E) Facility Agent Identification Cards. Each owner, officer, manager, contractor, employee, and other support staff of a licensed or certified cultivation, dispensary, manufacturing, testing, or transportation facility shall obtain an agent identification card, which shall be assigned and display a unique, identifying number. For all such individuals associated with an entity at the time it is licensed or certified, any work they are performing for that entity may continue, but application for an agent identification card must be made within thirty (30) days of a license or certification being granted. For all other such individuals, applications for agent identification cards will be accepted only after an individual receives an offer of employment from a licensed or certified facility, and for those individuals, agent identification cards must be granted before they may begin employment with a licensed or certified entity.

1. All applications for agent identification cards and renewals of agent identification cards shall include at least the following information in a department-approved format:
   A. Name, address, and Social Security number of the applicant;
   B. A statement confirming that the applicant has submitted fingerprints within the previous six (6) months for a state and federal fingerprint-based criminal background check to be conducted by the Missouri State Highway Patrol;
   C. A copy of a written offer of employment from a licensed or certified facility; and
   D. All applicable fees.

2. Agent identification cards shall be valid for three (3) years.

3. If arrested for a disqualifying felony offense, agent identification card holders must notify the department within thirty (30) days of the arrest.

4. For purposes of this section, a contractor is a person or company that undertakes a contract with a licensed or certified facility to perform work that would include access to medical marijuana or related equipment or supplies for a time period greater than fourteen (14) days.

5. For purposes of this section, an owner is a person who holds any portion of the economic or voting interests of a facility and who will have access to medical marijuana or a medical marijuana facility.

6. Agent identification card holders must have their cards and a government-issued photo ID accessible to them at all times while working in or on behalf of a facility.

7. The department shall charge an administration and processing fee for identification cards, which shall be due at the time of application or renewal. This fee shall be seventy-five dollars ($75) on the effective date of this rule but shall increase or decrease each year by the percentage of increase or decrease from the end of the previous calendar year of the Consumer Price Index, or successor index as published by the U.S. Department of Labor, or its successor agency. The department shall publish the current fees, including any adjustments, on its website at http://medicalmarijuana.mo.gov.

(4) Facility Operation, Policies, and Procedures.

(A) Each cultivation, infused product manufacturing, or dispensary facility in operation must obtain a separate license, but multiple licenses may be utilized in a single facility. All licenses shall be displayed at all times within twenty feet (20') of the main entrance to a facility.

(B) Unless expressly allowed by the local government, no new cultivation, infused products manufacturing, dispensary, or testing facility shall be sited, at the time of application for license or for local zoning approval, whichever is earlier, within one thousand feet (1,000') of any then-existing elementary or secondary school, daycare, or church.

1. In the case of a freestanding facility, the distance between the facility and the school, daycare, or church shall be measured from the external wall of the facility structure closest in proximity to the school, daycare, or church to the closest point of the property line of the school, daycare, or church. If the school, daycare, or church is part of a larger structure, such as an office building or strip mall, the distance shall be measured to the entrance or exit of the school, daycare, or church closest in proximity to the facility.

2. In the case of a facility that is part of a larger structure, such as an office building or strip mall, the distance between the facility and the school, daycare, or church shall be measured from the property line of the school, daycare, or church to the facility’s entrance or exit closest in proximity to the school, daycare, or church. If the school, daycare, or church is part of a larger structure, such as an office building or strip mall, the distance shall be measured to the entrance or exit of the school, daycare, or church closest in proximity to the facility.

3. Measurements shall be made along the shortest path between the demarcation points that can be lawfully traveled by foot.

(C) All licensed or certified cultivation, dispensary, manufacturing, testing, and transportation facilities must seek and obtain the department’s approval before they may—

1. Assign, sell, give, lease, sublicense, or otherwise transfer its license to any other entity.

A. If the entity to which the license or certification will be transferred is owned by the same entities as was the entity to which the department originally issued the license or certification, the request may be submitted
Chapter 95—Medical Marijuana

19 CSR 30-95

after the facility at issue has been granted a license and must include at least the following:

A. Name of each new owner, if any;
B. An updated Ownership Structure Form, included herein, which must show the applicant entity is majority owned by Missouri residents, and a written description or visual representation of the facility’s ownership structure including all entities listed on the Ownership Structure Form;
C. For each owner claiming Missouri residency for purposes of subparagraph B of this paragraph, a statement that the owner has resided in Missouri for at least one (1) year and does not claim resident privileges in another state or country, as well as proof of current Missouri residency, which shall be shown by—

(I) A copy of a valid Missouri driver’s license, a Missouri Identification Card, a current Missouri motor vehicle registration, or a recent Missouri utility bill; or

(II) If none of these proofs are available, some other evidence of residence in Missouri, which shall be approved or denied at the discretion of the director of the medical marijuana program as sufficient proof of residency;

D. A list of all facilities licensed or certified or applying for licensure or certification in Missouri to cultivate, manufacture, dispense, or test medical marijuana that are or will be under substantially common control, ownership, or management as the applicant. For each facility listed, an explanation of how the facility is under substantially common control, ownership, or management as the applicant, with supporting documentation;

E. An attestation that no individual who owns the facility, in whole or in part, has a disqualifying felony offense; and

F. A statement confirming that all owners who hold any portion of the economic or voting interest of a facility who will also have access to medical marijuana or a medical marijuana facility, and all officers, directors, board members, managers, and employees identified in the application have submitted fingerprints within the previous six months for a state and federal fingerprint-based criminal background check to be conducted by the Missouri State Highway Patrol;

2. Make any changes to ten percent (10%) or more of the ownership interests of the facility. Such requests may be submitted after the facilities at issue have been granted a license and must include at least the following:

A. New or updated descriptions, schematics, or blueprints for the facility;
B. An attestation that the proposed changes to the facility comply with the facility location requirements of subsection (4)(B) of this rule or 19 CSR 30-95.100(2)(C) and any facility location requirements of the local government;
C. If the city, town, or county in which the facility will be located has enacted zoning restrictions applicable to the facility, the text of the restrictions and a description of how the changes to the facility comply with those restrictions; and
D. For location change requests, an explanation for why the changes to the facility comply with those restrictions; and
E. An atestation that no individual who owns the facility, in whole or in part, has a disqualifying felony offense; and
F. A statement confirming that all owners who hold any portion of the economic or voting interest of a facility who will also have access to medical marijuana or a medical marijuana facility, and all officers, directors, board members, managers, and employees identified in the application have submitted fingerprints within the previous six months for a state and federal fingerprint-based criminal background check to be conducted by the Missouri State Highway Patrol;

3. Materially deviate from the proposed physical design or make material changes to the current physical design of the facility, including its location. Such requests may be submitted after the facilities at issue have been granted a license and shall include at least the following:

A. New or updated descriptions, schematics, or blueprints for the facility;
B. An attestation that the proposed changes to the facility comply with the facility location requirements of subsection (4)(B) of this rule or 19 CSR 30-95.100(2)(C) and any facility location requirements of the local government;
C. If the city, town, or county in which the facility will be located has enacted zoning restrictions applicable to the facility, the text of the restrictions and a description of how the changes to the facility comply with those restrictions; and
D. For location change requests, an explanation for why the changes to the facility comply with those restrictions; and
E. An atestation that no individual who owns the facility, in whole or in part, has a disqualifying felony offense; and
F. A statement confirming that all owners who hold any portion of the economic or voting interest of a facility who will also have access to medical marijuana or a medical marijuana facility, and all officers, directors, board members, managers, and employees identified in the application have submitted fingerprints within the previous six months for a state and federal fingerprint-based criminal background check to be conducted by the Missouri State Highway Patrol;

4. Combine licensed facilities at a single location. Such requests may be submitted after the facilities at issue have been granted a license and shall include at least the following:

A. Descriptions, schematics, or blueprints for the combined facilities;
B. An attestation that the proposed combination of facilities complies with the facility location requirements of subsection (4)(B) of this rule or 19 CSR 30-95.100(2)(C) and any location requirements of the local government;
C. If the city, town, or county in which the combined facilities will be located has enacted zoning restrictions applicable to the combined facilities, the text of the restrictions and a description of how the combined facilities will comply with those restrictions; and
D. If the combination of facilities is between two (2) or more entities with different ownership, documents showing the agreements between the entities concerning their respective roles and their relationship in regard to management, operation, and maintenance of the combined facility. Such agreements shall include an acknowledgment that all entities sharing management, operations, or maintenance of the combined facility shall be jointly responsible for compliance with the applicable department regulations for the shared spaces of the combined facility; or

5. Begin construction on a warehouse located at a location other than the approved location of the facility. Such requests may be submitted after the facility at issue has been granted a license and shall include at least the following:

A. Descriptions, schematics, or blueprints for the warehouse;
B. An attestation that the proposed location for the warehouse complies with the facility location requirements of subsection (4)(B) of this rule or 19 CSR 30-95.100(2)(C) and any location requirements of the local government that would apply to the facility for which the warehouse is being constructed;
C. If the city, town, or county in which the warehouse will be located has enacted zoning restrictions applicable to the facility for which the warehouse is being constructed, the text of the restrictions and a description of how the warehouse will comply with those restrictions; and
D. An attestation that the warehouse will comply with all other rules applicable to the facility for which the warehouse is being constructed.

6. All requests for department approval described in this subsection must be accompanied by an administration and processing fee, due at the time of the request. This fee shall be two thousand dollars ($2000) on the effective date of this rule but shall increase or decrease each year by the percentage of increase or decrease from the end of the previous calendar year of the Consumer Price Index, or successor index as published by the U.S. Department of Labor, or its successor agency. The department shall publish the current fees, including any adjustments, on its website at http://medicalmarijuana.mo.gov

(D) All marijuana for medical use, including plants, flowers, and infused products, sold in Missouri shall be cultivated in a licensed cultivation facility located in Missouri. After
December 31, 2020, marijuana for medical use shall be grown from seeds or plants obtained from a Missouri licensed cultivation or dispensary facility.

(E) Any excess or unusable medical marijuana or medical marijuana byproduct of a cultivation, manufacturing, dispensary, testing, or transportation facility shall be disposed of in the following manner, as applicable:

1. Solid and liquid wastes generated during medical marijuana production and processing must be stored, managed, and disposed of in accordance with applicable state, tribal, local, and municipal laws and regulations. Facilities must keep records of the final disposal destinations of all such wastes for at least five (5) years;
2. Wastewater generated during medical marijuana production and processing must be disposed of in compliance with applicable state, tribal, local, and municipal laws and regulations;
3. Wastes from the production and processing of medical marijuana plants must be evaluated against state hazardous waste regulations to determine if those wastes qualify as hazardous waste. It is the responsibility of each waste generator to properly evaluate their waste to determine if it is a hazardous waste per 40 CFR 262.11. If a generator’s waste does qualify as a hazardous waste, then that waste is subject to the applicable hazardous waste management standards.
   A. All solid waste, as defined by 40 CFR 261.2, must be evaluated under the hazardous waste regulations, including:
      (I) Waste from medical marijuana flowers, trim, and solid plant material used to create an extract;
      (II) Waste solvents, pesticides, and other similar materials used in the cultivation, manufacturing, or testing process;
      (III) Discarded plant waste, spent solvents, and laboratory wastes from any medical marijuana processing or quality assurance testing; and
      (IV) Medical marijuana extract that fails to meet quality testing.
   B. Medical marijuana flowers, trim, and solid plant material are not in themselves considered hazardous waste unless they have been treated or contaminated with a hazardous waste constituent;
   4. Medical marijuana waste that does not qualify as hazardous waste per 40 CFR 262.11 must be rendered unusable prior to leaving a facility, including plant waste, such as roots, stalks, leaves, and stems;
   5. Medical marijuana plant waste that does not qualify as hazardous may be rendered unusable by grinding and incorporating the medical marijuana plant waste with other nonhazardous ground materials so the resulting mixture is at least fifty percent (50%) nonmarijuana waste by volume. Material used to grind with the medical marijuana may be either compostable waste or noncompostable waste. Other methods to render medical marijuana waste unusable must be approved by the department before implementation.
   A. Compostable mixed waste: Medical marijuana waste to be disposed as compost feedstock or in another organic waste method (for example, anaerobic digester) may be mixed with the following types of waste materials:
      (I) Food waste;
      (II) Yard waste; or
      (III) Vegetable based grease or oils.
   B. Noncompostable mixed waste: Medical marijuana waste to be disposed in a landfill or another disposal method (for example, incinerator) may be mixed with the following types of waste materials:
      (I) Paper waste;
      (II) Cardboard waste;
      (III) Plastic waste; or
      (IV) Soil.
   6. Medical marijuana waste that has been rendered unusable may be delivered to a permitted solid waste facility for final disposition. Examples of acceptable permitted solid waste facilities include:
      A. For compostable mixed waste: Compost, anaerobic digester, or other facility with approval of the local health department; and
      B. For noncompostable mixed waste: Landfill, incinerator, or other facility with approval of the local health department;
5. All facility waste of any type must be stored securely before final disposition, which can be done within the facility in areas designated for disposal activities or, if necessary, outside the facility in a locked, tamper-resistant receptacle.
   (F) All cultivation, manufacturing, dispensary, testing, and transportation facilities must establish and follow procedures to ensure medical marijuana remains free from contaminants. The procedures must address, at a minimum:
   1. The flow through a facility of any equipment or supplies that will come in contact with medical marijuana including receipt and storage;
   2. Employee health and sanitation;
   3. Environmental factors, such as:
      A. Floors, walls, and ceilings made of smooth, hard surfaces that are easily cleaned;
      B. Temperature and humidity controls;
   C. A system for monitoring environmental conditions;
   D. A system for cleaning and sanitizing rooms and equipment;
   E. A system for maintaining any equipment used to control sanitary conditions; and
   F. For cultivation and manufacturing facilities, an air supply filtered through high-efficiency particulate air filters under positive pressure.
   (G) All cultivation, infused products manufacturing, dispensary, testing, and transportation facilities shall implement inventory control systems and procedures as follows:
   1. Each facility shall designate in writing a facility agent who is generally responsible for the inventory control systems and procedures for that facility;
   2. All weighing and measuring of medical marijuana required by this rule must be conducted with a National Type Evaluation Program approved scale, which shall be capable of weighing and measuring accurately at all times and recalibrated at least yearly;
   3. Each facility shall use a department-certified seed-to-sale tracking system to track medical marijuana from seed or immature plant stage until the medical marijuana is purchased by a qualifying patient or primary caregiver or destroyed. Records entered into the seed-to-sale tracking system must include each day’s beginning inventory, harvests, acquisitions, sales, disbursements, remediations, disposals, transfers, ending inventory, and any other data necessary for inventory control records in the statewide track and trace system;
   4. Each infused product manufacturing facility shall—
      A. Establish and maintain a perpetual inventory system that documents the flow of materials through the manufacturing process;
      B. Establish procedures to reconcile the raw material used to the finished product on the basis of each process lot. Significant variances must be documented, investigated by management personnel, and reported to the department and to the facility that ordered the infused product within twenty-four (24) hours of discovering the variances; and
      C. Provide for quarterly physical inventory counts to be performed by facility employees who do not participate in the manufacturing process, which shall be reconciled to the perpetual inventory records. Significant variances must be documented, investigated by management personnel, and reported to the department within twenty-four (24) hours of discovering the variances; and
      D. Each dispensary facility shall be responsible for ensuring that every amount of
medical marijuana sold or disbursed to a qualifying patient or primary caregiver is recorded in the seed-to-sale tracking system as a purchase by or on behalf of the applicable qualifying patient. Amounts of medical marijuana shall be recorded—

A. For dried, unprocessed marijuana, in ounces or grams;
B. For concentrates, in grams; or
C. For infused products, by milligrams of THC;

6. If a facility identifies a reduction in the amount of medical marijuana in the inventory of the facility, the facility must document where in the facility's processes the loss has occurred, if possible, and take and document corrective action. If the reduction in the amount of medical marijuana in the inventory of the facility is due to suspected criminal activity by a facility agent, the facility shall report the facility agent to the department and to the appropriate law enforcement agencies within twenty-four (24) hours of discovering the suspected criminal activity;

7. A medical marijuana facility shall maintain all records required by this subsection for at least five (5) years; and

8. In case of seed-to-sale system failure or loss of connection to the statewide track and trace system, the facility may continue performing for up to five (5) hours all actions that are required to be tracked, except sales of medical marijuana or transfers of medical marijuana from the facility, as long as the facility records all necessary tracking information and enters that information into its seed-to-sale tracking system upon restoration of the system or into the statewide track and trace system upon restoration of the connection.

(H) All cultivation, infused products manufacturing, and dispensary facilities shall ensure the security of medical marijuana and facility employees by taking at least the following measures:

1. Facilities shall install and maintain security equipment designed to prevent unauthorized entrance into limited access areas and to prevent diversion and invasion of medical marijuana including:

   A. Devices or a series of devices to detect unauthorized intrusion, which may include a signal system interconnected with a radio frequency method, such as cellular or private radio signals, or other mechanical or electronic devices;
   B. Except in the case of outdoor cultivation, exterior lighting to facilitate surveillance, which shall cover the exterior and perimeter of the facility;
   C. Electronic video monitoring, including:

      (I) At least one (1) call-up monitor that is nineteen inches (19”) or more;
      (II) A printer capable of immediately producing a clear still photo from any video camera image;
      (III) Video cameras with a recording resolution of at least 1920 x 1080, or the equivalent, at a rate of at least fifteen (15) frames per second, that operate in such a way as to allow identification of people and activities in the monitored space, in all lighting levels, that are capable of being accessed remotely by the department or a law enforcement agency in real time upon request, and that provide coverage of—

         (a) All entrances and exits of the facility, including windows, and all entrances and exits from limited access areas;
         (b) The perimeter and exterior areas of the facility, including at least twenty feet (20’) of space around the perimeter of an outdoor grow area;
         (c) Each point-of-sale location;
         (d) All vaults or safes; and
         (e) All medical marijuana, from at least two (2) angles, where it is cultivated, cured, trimmed, processed, rendered unusable, and disposed;
      (IV) A method for storing recordings from the video cameras for at least sixty (60) days in a secure on-site or off-site location or through a service or network that provides on-demand access to the recordings and that allows for providing copies of the recordings to the department upon request and at the expense of the facility;
      (V) A failure notification system that provides an audible and visual notification of any failure in the electronic monitoring system; and
      (VI) Sufficient battery backup for video cameras and recording equipment to support at least sixty (60) minutes of recording in the event of a power outage;
   D. Controlled entry to limited access areas, which shall be controlled by electronic card access systems, biometric identification systems, or other equivalent means, except that, in addition to these means, all external access doors shall be equipped with a locking mechanism that may be used in case of power failure. Access information shall be recorded, and all records of entry shall be maintained for at least one (1) year;
   E. A method of immediate, automatic notification to alert local law enforcement agencies of an unauthorized breach of security at the facility; and
   F. Manual, silent alarms at each point-of-sale, reception area, vault, and electronic monitoring station with capability of alerting local law enforcement agencies immediately of an unauthorized breach of security at the facility;
   G. For identifying facility agents responsible for inventory control activities;
   H. For identifying persons authorized to be in the areas of the facility that contain medical marijuana;
   I. For identifying facility agents responsible for inventory control activities;
   J. D. For limiting the amount of money available in any retail areas of the facility and for notifying the public that there is a minimal amount of money available, including by posting of a sign;
   K. For electronic monitoring;
   L. For the use of the automatic or electronic notification and manual, silent alarms to alert local law enforcement agencies of an unauthorized breach of security at the facility, including designation of on-call facility personnel to respond to, and to be available to law enforcement personnel who respond to, any alarms; and
   M. For keeping local law enforcement updated on whether the facility employs armed security personnel and how law enforcement can identify such personnel on sight;

3. Facilities with outdoor cultivation shall construct an exterior barrier around the perimeter of the marijuana cultivation area that consists of a fence that is—

   A. Constructed of six (6) gauge metal or stronger chain link;
   B. Topped with razor wire or similar security wire;
   C. At least eight feet (8’) in height; and
   D. Screened such that the cultivation area is not easily viewed from outside the fence;

4. Facilities with windows in a limited access area must ensure either that the window cannot be opened and is designed to prevent intrusion or that the window is otherwise inaccessible from the outside;

5. Facilities shall ensure that each video camera used pursuant to this section—

   A. Includes a date and time generator which possesses the capability to accurately display the date and time of recorded events
on the recording in a manner that does not significantly obstruct the recorded view; and
   B. Is installed in a manner that will prevent the video camera from being readily obstructed, tampered with, or disabled;
6. A facility shall make a reasonable effort to repair any malfunction of security equipment within seventy-two (72) hours after the malfunction is discovered. A facility shall notify the department within twenty-four (24) hours after a malfunction is discovered and provide a plan of correction.
   A. If a video camera used pursuant this section malfunctions, the facility shall immediately provide alternative video camera coverage or use other security measures until video camera coverage can be restored, such as assigning additional supervisory or security personnel, to provide for the security of the facility. If the facility uses other security measures, the facility must immediately notify the department, and the department will determine whether the other security measures are adequate and for what amount of time those other security measures will be acceptable.
   B. Each facility shall maintain a log that documents each malfunction and repair of the security equipment of the facility. The log must state the date, time, and nature of each malfunction; the efforts taken to repair the malfunction and the date of each effort; the reason for any delay in repairing the malfunction; the date the malfunction is repaired and; if applicable, any alternative security measures that were taken. The log must also list, by date and time, all communications with the department concerning each malfunction and corrective action. The facility shall maintain the log for at least one (1) year after the date of last entry in the log;
7. Each facility shall employ a security manager who shall be responsible for—
   A. Conducting a semiannual audit of security measures to ensure compliance with this subsection and to identify potential security issues;
   B. Training employees on security measures, emergency response, and theft prevention and response within one (1) week of hiring and on an annual basis;
   C. Evaluating the credentials of any contractors who intend to provide services to the facility before the contractor is hired by or enters into a contract with the facility; and
   D. Evaluating the credentials of any third party who intends to provide security to the facility before the third party is hired by or enters into a contract with the facility; and
8. Each facility shall ensure that the security manager of the facility, any facility agents who provide security for the facility, and the employees of any third party who provides security to the facility have completed the following training:
   A. Training in theft prevention or a related subject;
   B. Training in emergency response or a related subject;
   C. Training in the appropriate use of force or a related subject that covers when the use of force is and is not necessary;
   D. Training in the protection of a crime scene or a related subject;
   E. Training in the control of access to protected areas of a facility or a related subject;
   F. Not less than eight (8) hours of training at the facility in providing security services; and
   G. Not less than eight (8) hours of classroom training in providing security services.
   (I) The department may issue public notice of a medical marijuana recall if, in its judgment, any particular medical marijuana presents a threat to the health and safety of qualifying patients. All facilities are responsible for complying with recall notices. Recalled items must be immediately pulled from production or inventory and held until such time as the department determines the item is safe, may be remediated, or must be destroyed.
   (J) Medical marijuana that fails testing or is subject to a recall must either be destroyed by any facility in possession of that medical marijuana or, at the election of the facility from which the failed test or recalled item originated, and with approval of the department, may be remediated, if possible.
   1. Remediated medical marijuana must pass all testing required by 19 CSR 30-95.070.
   2. Facilities may only elect to remediate any particular medical marijuana once.
   (K) All cultivation, infused products manufacturing, and dispensary facilities shall ensure that all medical marijuana is packaged and labeled in a manner consistent with the following:
   1. Facilities shall not manufacture, package, or label marijuana—
      A. In a false or misleading manner;
      B. In any manner designed to cause confusion between a marijuana product and any product not containing marijuana; or
      C. In any manner designed to appeal to a minor;
   2. Marijuana and marijuana-infused products shall be sold in containers clearly and conspicuously labeled with:
      A. “Marijuana” or a “Marijuana-infused Product” in a font size at least as large as the largest other font size used on the package; and
      B. “Warning: Cognitive and physical impairment may result from the use of Marijuana” in a font no smaller than seven- (7-) point type;
   3. Any marijuana or marijuana-infused products packaged for retail sale before delivery to a dispensary must be packaged in opaque, re-sealable packaging designed or constructed to be significantly difficult for children under five (5) years of age to open but not normally difficult for adults to use properly. Any marijuana or marijuana-infused products not packaged for retail sale before delivery to a dispensary must be packaged by the dispensary upon sale to a qualifying patient or primary caregiver in opaque, re-sealable packaging designed or constructed to be significantly difficult for children under five (5) years of age to open but not normally difficult for adults to use properly. All edible marijuana-infused products must be packaged for retail by the infused-products manufacturer before transfer to a dispensary;
   4. Marijuana and marijuana-infused products shall bear a label displaying the following information, in the following order:
   A. The total weight of the marijuana included in the package:
      (I) For dried, unprocessed marijuana, weight shall be listed in ounces or grams;
      (II) For concentrates, weight shall be listed in grams; or
      (III) For infused products, weight shall be listed by milligrams of THC;
   B. Dosage amounts, instructions for use, and estimated length of time the dosage will have an effect;
   C. The THC, tetrahydrocannabinol acid, cannabidiol, cannabidiol acid, and cannabiol concentration per dosage;
   D. All active and inactive ingredients, which shall not include groupings of ingredients that obscure the actual ingredients, such as “proprietary blend” or “spices”;
   E. In the case of dried, unprocessed marijuana, the name, as recorded with the Missouri Secretary of State, of the cultivating facility from which the marijuana in the package originated and, in the case of infused products, the name of the infused-product manufacturer, as recorded with the Missouri Secretary of State; and
   F. A “best if used by” date;
   5. No branding, artwork, or other information or design elements included on marijuana or marijuana-infused products shall be placed in such a way as to obscure any of the information required by this section;
   6. Marijuana and marijuana-infused product packaging shall not include claims of...
Chapter 95—Medical Marijuana

7. Marijuana and marijuana-infused products must, at all times, be tagged with traceability information generated by the statewide track and trace system.

(L) Cultivation, manufacturing, dispensary, and testing facilities that transport medical marijuana must also comply with 19 CSR 30-95.100(D) in doing so.

(M) Signage and advertising on facility premises must comply with the following:

1. A facility may not display marijuana, marijuana paraphernalia, or advertisements for these items in a way that is visible to the general public from a public right-of-way;

2. Outdoor signage and, if visible to the public, interior signage, must comply with any local ordinances for signs or advertising and—

   A. May not display any text other than the facility’s business name or trade name, address, phone number, and website; and

   B. May not utilize images or visual representations of marijuana plants, products, or paraphernalia, including representations that indicate the presence of these items, such as smoke.

(5) Facility Inspections.

(A) Submission of an application for a facility license or certification constitutes consent to inspection by the department. A department inspector conducting an inspection pursuant to this section need not give prior notice of the inspection and, during the inspection, must be given access to all areas and property of the facility, including vehicles, wherever located, without delay.

1. The department will enter and inspect at least annually, with or without notice, to ensure compliance with this chapter.

2. The department may also, at any time it determines an inspection is needed, conduct an inspection, including an inspection of any part of the premises, qualifications of personnel, methods of operation, records, and policies and procedures of a licensed or certified facility.

3. The department may also request to interview an owner, officer, manager, contractor, employee, or other support staff of a licensed or certified facility, and the facility shall arrange for the interview to occur as soon as possible but not later than five (5) days after the department makes the request.

(B) Once a licensed or certified facility believes it will, within a month, be ready to begin operations and meet all state and local requirements for its facility, it shall request that the department conduct a commencement inspection to confirm the facility is in compliance with all requirements of this chapter.

(C) Violations, Compliance Verification Inspections, and Suspension.

1. If the department determines, during an inspection or otherwise, that a facility is not in compliance with the department’s regulations, the department will issue an Initial Notice of Violation to the facility that explains how the facility has violated the department’s regulations and what remedial actions the department expects the facility to take to correct the violations.

2. Once a facility has been notified of violations, the facility shall correct the violations within fifteen (15) days, and the department will conduct a follow-up inspection within fifteen (15) to thirty (30) days to confirm the facility has corrected the violations. The facility shall notify the department if it believes it needs additional time to correct the violations, which the department may grant for good cause.

3. If the department’s follow-up inspection reveals the violations have not been corrected, the department will issue a Final Notice of Violation to the facility explaining how the facility continues to violate the department’s regulations, what remedial actions the department expects the facility to take, and notifying the facility that its license or certifications will be suspended if the specified remedial action is not taken and the violations corrected within thirty (30) days.

4. If the violations have not been corrected thirty (30) days after a Final Notice of Violation and no extension of this deadline has been granted by the department, the facility’s license or certification will be suspended, the facility will be required to cease operations, and the facility must sign a corrective action plan designed to bring the facility into compliance.

(D) If, at any time, the department determines a facility presents an immediate and serious threat to the health and safety of the public or of the facility’s employees, the department may order the facility to immediately suspend all or a part of its operations until the threat has been eliminated.
**OWNER INFORMATION** – Pursuant to 19 CSR 30-95.040, all entities that own any portion of the economic or voting interests of the applicant facility must be listed on this form. Natural persons whose ownership interest contributes to the facility’s claim that it is majority owned by Missouri residents must be listed on this form in their individual capacity and must include a residence address in the “Address” field as well as the name of the business entity in which he or she holds an economic or voting interest. Refer to 19 CSR 30-95.010 for applicable definitions. Use additional sheets as necessary.

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**NATURAL PERSON CLAIMING RESIDENCY FOR PURPOSES OF MAJORITY OWNERSHIP CALCULATION?**

- [ ] YES
- [ ] NO

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**NATURAL PERSON CLAIMING RESIDENCY FOR PURPOSES OF MAJORITY OWNERSHIP CALCULATION?**

- [ ] YES
- [ ] NO


19 CSR 30-95.050 Cultivation Facility

PURPOSE: Under Article XIV, Section 1 of the Missouri Constitution, the Department of Health and Senior Services has the authority to regulate and control Medical Marijuana Facilities. This rule explains what regulations apply only to Cultivation Facilities.

(1) Cultivation Facility Licenses.
   (A) The number of cultivation facility licenses will be limited to sixty (60) unless the department determines the limit must be increased in order to meet the demand for medical marijuana by qualifying patients.
   (B) A facility license will be issued for a single facility in a single location. Combinations of licenses at the same location must be approved pursuant to 19 CSR 30-95.040(4)(C).

(2) Cultivation Facility Requirements. In addition to the requirements for cultivation facilities in 19 CSR 30-95.040, cultivation facilities shall also comply with the following:
   (A) Cultivation facilities may cultivate medical marijuana in indoor, outdoor, or greenhouse facilities.
      1. Each indoor facility utilizing artificial lighting will be limited to no more than thirty thousand (30,000) square feet of flowering plant canopy space.
      2. Each outdoor facility utilizing natural lighting will be limited to no more than two thousand eight hundred (2,800) flowering plants.
      3. Each greenhouse facility using a combination of natural and artificial lighting will be limited to, at the election of the licensee, either no more than two thousand eight hundred (2,800) flowering plants or no more than thirty thousand (30,000) square feet of flowering plant canopy space.
   4. If a cultivation facility is operating with multiple cultivation licenses in the same location, the size limitations of the cultivation facility will be multiplied by the number of licenses;
   (B) Facilities must keep records, by month and by batch, of all pesticides, herbicides, fertilizers, and other agricultural chemicals applied to marijuana plants and growing medium during production and processing at its facility for at least five (5) years;
   (C) Facilities, except those in rural, unincorporated agricultural areas, must develop, implement, and maintain an odor control plan, which shall address odor mitigation practices including, but not limited to, engineering controls, such as system design and operational processes, which shall be reviewed and certified by a professional engineer or a certified industrial hygienist as sufficient to effectively mitigate odors for all odor sources;
   (D) Cultivation facilities must ensure all facility employees are trained in at least the following:
      1. The use of security measures and controls that have been adopted by the facility for the prevention of diversion, inversion, theft, or loss of marijuana;
      2. Proper use of the statewide track and trace system;
      3. Procedures for responding to an emergency, including severe weather, fire, natural disasters, and unauthorized intrusions;
      4. Standards for maintaining the confidentiality of information related to the medical use of marijuana, including, but not limited to, compliance with the Health Insurance Portability and Accountability Act of 1996;
      5. The methods of cultivation used by the facility; and
      6. The facility’s safety and sanitation procedures;
   (E) Cultivation facilities shall not transfer medical marijuana from the facility, except to a testing facility, until the medical marijuana has been tested by a testing facility, according to the provisions of 19 CSR 30-95.070, and the cultivation facility has received verification from the testing facility that the medical marijuana passed all required testing;
   (F) Cultivation facilities may only transport medical marijuana—
      1. That the facility cultivated;
      2. To a dispensary, testing, or manufacturing facility; and
      3. If the facility complies with the requirements of 19 CSR 30-95.100(2); and
   (G) Cultivation facilities shall store all medical marijuana—
      1. At the approved location of the facility; or
      2. In offsite warehouses that comply with the security requirements of 19 CSR 30-95.040(4)(B), the location requirements of 19 CSR 30-95.040(4)(B), and that have been approved pursuant to 19 CSR 30-95.040(3)(C).

19 CSR 30-95.060 Infused Products Manufacturing Facility

PURPOSE: Under Article XIV, Section 1 of the Missouri Constitution, the Department of Health and Senior Services has the authority to regulate and control Medical Marijuana Facilities. This rule explains what regulations apply only to Infused Products Manufacturing Facilities.

(1) Infused Products Manufacturing Facility Licenses.
   (A) The number of manufacturing facility licenses will be limited to eighty-six (86) unless the department determines the limit must be increased in order to meet the demand for medical marijuana by qualifying patients.
   (B) A facility license will be issued for a single facility in a single location. Combinations of licenses at the same location must be approved pursuant to 19 CSR 30-95.040(4)(C).

(2) Manufacturing Facility Requirements. In addition to the requirements for manufacturing facilities in 19 CSR 30-95.040, manufacturing facilities shall also comply with the following:
   (A) Facilities must ensure all facility employees are trained in at least the following:
      1. The use of security measures and controls that have been adopted by the facility for the prevention of diversion, inversion, theft, or loss of marijuana;
      2. Proper use of the statewide track and trace system;
      3. Procedures for responding to an emergency, including severe weather, fire, natural disasters, and unauthorized intrusions;
      4. The differences between the types of infused products manufactured at that facility and their methods of production; and
      5. The facility’s safety and sanitation procedures;
   (B) Facilities must develop, implement, and maintain an odor control plan, which shall address odor mitigation practices including, but not limited to, engineering controls, such as system design and operational processes, which shall be reviewed and certified by a professional engineer or a certified industrial
hygienist as sufficient to effectively mitigate odors for all odor sources;

(C) Manufacturing facilities shall not transfer medical marijuana from the facility, except to a testing facility, until the medical marijuana has been tested by a testing facility, according to the provisions of 19 CSR 30-95.070, and the manufacturing facility has received verification from the testing facility that the medical marijuana passed all required testing;

(D) Manufacturing facilities may only transport medical marijuana—
   1. That the facility manufactured;
   2. To a dispensary, testing, or other manufacturing facility; and
   3. If the facility complies with the requirements of 19 CSR 30-95.100(2);

(E) Manufacturing facilities that produce ingestible medical marijuana-infused products shall comply with the applicable food safety standards set forth in 19 CSR 20-1.025, 19 CSR 20-1.040, and 19 CSR 20-1.050, as applicable. Such facilities are prohibited from producing frozen desserts, as defined by 19 CSR 20-1.030, or acidified foods, as defined by 19 CSR 20-1.042;

(F) Manufacturing facilities shall store all medical marijuana—
   1. At the approved location of the facility; or
   2. In offsite warehouses that comply with the security requirements of 19 CSR 30-95.040(4)(H), the location requirements of 19 CSR 30-95.040(4)(B), and that have been approved pursuant to 19 CSR 30-95.040(3)(C); and

(G) Manufacturing facilities that use volatile solvents shall install air-handling systems and other controls designed to minimize the risks of explosions and fires. These controls should include systems to prevent ignition; plans for safe storage, use, and disposal of solvents; and policies for continuous staff monitoring of all processes involving volatile solvents.


19 CSR 30-95.070 Testing Facility

PURPOSE: Under Article XIV, Section 1 of the Missouri Constitution, the Department of Health and Senior Services has the authority to regulate and control Medical Marijuana Facilities. This rule explains what regulations apply only to Testing Facilities.

1. Access to Testing Facility Certifications. The number of testing facility certifications will be limited to ten (10) unless the department determines the limit must be increased in order to meet the demand for medical marijuana by qualifying patients.

2. Testing Facility Requirements. In addition to the requirements of 19 CSR 30-95.040, testing facilities shall also comply with the following:

   (A) Testing facilities must ensure all facility employees are trained in at least the following:
   1. The use of security measures and controls that have been adopted by the facility for the prevention of diversion, invasion, theft, or loss of marijuana;
   2. Proper use of the statewide track and trace system; and
   3. Procedures for responding to an emergency, including severe weather, fire, natural disasters, and unauthorized intrusions;

   (B) Testing facilities shall comply with International Organization for Standardization (ISO) 17025 standards for personnel at all times;

   (C) During any periods of time when a facility no longer complies with ISO 17025 standards for personnel, the facility shall not conduct testing of medical marijuana. Upon return to compliance, the facility shall not resume testing until the department conducts an inspection of the facility;

   (D) Testing facilities shall become fully accredited to the standard set forth by ISO 17025 by an International Laboratory Accreditation Cooperation recognized accreditation body. Testing facilities shall achieve such accreditation within one (1) year of the date the facility receives department approval to operate and shall maintain its accreditation as long the facility holds a certification.

   1. The scope of the accreditation shall include all medical marijuana testing performed at the facility.

   2. Loss of accreditation shall be reported to the department by the testing facility within twenty-four (24) hours of the testing facility receiving notice of the loss.

   3. Inspection and audit reports from the accrediting body shall be submitted to the department by the testing facility within ten (10) days of receipt;

   (E) Testing facilities shall participate in a proficiency testing program provided by an organization that operates in conformance with the requirements of ISO/IEC 17043 at least twice in a calendar year.

   1. The facility shall notify the department by the testing facility within ten (10) days of receipt;

   2. The facility shall analyze proficiency test samples using the same procedures and equipment as used for testing medical marijuana.

   3. Upon receipt of proficiency test results, the facility shall submit copies of those results to the department;

   (F) Testing facilities shall install and maintain security equipment designed to prevent unauthorized entrance into limited access areas, which shall include any area where medical marijuana is tested, stored, or disposed, and to prevent diversion and inversion of medical marijuana including:

   1. Devices or a series of devices to detect unauthorized intrusion, which may include a signal system interconnected with a radio frequency method, such as cellular or private radio signals, or other mechanical or electronic devices;

   2. Electronic monitoring, including:
      A. At least one (1) call-up monitor that is nineteen inches (19") or more;
      B. A printer capable of immediately producing a clear still photo from any video camera image;

   C. Video cameras with a recording resolution of at least 1920 x 1080, or the equivalent, at a rate of at least fifteen (15) frames per second, that operate in such a way as to allow identification of people and activities in the monitored space, and that provide coverage of—
      (I) All entrances and exits from limited access areas, including windows; and
      (II) All areas in which medical marijuana is tested, stored, or disposed, from at least two (2) angles;

   D. A method for storing recordings from the video cameras for at least sixty (60) days in the event of a power outage;

   E. A failure notification system that provides an audible and visual notification of any failure in the electronic monitoring system;

   F. Sufficient battery backup for video cameras and recording equipment to support at least sixty (60) minutes of recording in the event of a power outage;

   3. Controlled entry to limited access areas, which shall be controlled by electronic...
card access systems, biometric identification systems, or other equivalent means. Access information shall be recorded, and all records of entry to limited access areas shall be maintained for at least one (1) year;

(G) Testing facilities shall maintain all sampling and testing records for five (5) years; and

(H) Testing facilities may only transport medical marijuana—
1. That the facility intends to test;
2. From cultivation, dispensary, manufacturing, and other testing facilities;
3. If the facility complies with the requirements of 19 CSR 30-95.100(2).

(3) Sampling Requirements.
(A) Sampling and testing of medical marijuana shall be done at the lot level.

(B) Sampling and testing of each harvest lot or process lot shall be conducted with representative samples such that there is assurance that all lots are adequately assessed for contaminants and that the cannabinoid profile is consistent throughout.

1. In the case of dry, unprocessed marijuana, the maximum amount of marijuana from which a sample may be selected is fifteen pounds (15 lbs.), and a minimum of zero point five percent (0.5%) of a harvest lot will be sampled for testing.

2. In the case of concentrates and extracts, the amount of material required for sampling is—

<table>
<thead>
<tr>
<th>Process Lot Weight</th>
<th>Sample Increments Required (1±0.2 g)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pounds</td>
<td>Kilograms</td>
</tr>
<tr>
<td>0.50</td>
<td>0.023</td>
</tr>
<tr>
<td>0.51-1.5</td>
<td>0.24-0.68</td>
</tr>
<tr>
<td>1.51-3.00</td>
<td>0.69-1.36</td>
</tr>
<tr>
<td>3.01-6.00</td>
<td>1.37-2.72</td>
</tr>
<tr>
<td>6.01-10.00</td>
<td>2.73-4.58</td>
</tr>
<tr>
<td>10+</td>
<td>4.58+</td>
</tr>
<tr>
<td>10+</td>
<td>4.58+</td>
</tr>
<tr>
<td>10+</td>
<td>4.58+</td>
</tr>
<tr>
<td>10+</td>
<td>4.58+</td>
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<tr>
<td>10+</td>
<td>4.58+</td>
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<td>4.58+</td>
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<td>10+</td>
<td>4.58+</td>
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<tr>
<td>10+</td>
<td>4.58+</td>
</tr>
<tr>
<td>10+</td>
<td>4.58+</td>
</tr>
<tr>
<td>10+</td>
<td>4.58+</td>
</tr>
<tr>
<td>10+</td>
<td>4.58+</td>
</tr>
</tbody>
</table>

3. In the case of all other infused products, the amount of material required for sampling is—

<table>
<thead>
<tr>
<th>Units for Sale</th>
<th>Sample Increments</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-15</td>
<td>2</td>
</tr>
<tr>
<td>16-50</td>
<td>3</td>
</tr>
<tr>
<td>51-150</td>
<td>5</td>
</tr>
<tr>
<td>151-500</td>
<td>8</td>
</tr>
<tr>
<td>501-3,200</td>
<td>13</td>
</tr>
<tr>
<td>3,201 – 35,000+</td>
<td>20</td>
</tr>
</tbody>
</table>

(4) Testing Requirements.
(A) Testing facilities shall test all lots of medical marijuana produced by cultivation or infused products manufacturing facilities. Testing shall only be performed on the final medical marijuana product equivalent to what will be dispensed to the patient.

(B) Mandatory testing requirements may only be met through testing of samples collected by the testing facility according to section (3) of this rule.

(C) Upon request from a licensed cultivation, manufacturing, or dispensary facility, testing facilities may also test material received directly from the facility, including:
1. Medical marijuana plants at any stage of growth;
2. Infused products at any stage of production; and
3. Components used for the production of final medical marijuana product, such as water or growing materials.

(D) Within five (5) business days of collecting a sample, the testing facility shall file a report in the statewide track and trace system detailing all test results and stating whether the lot passed or failed each required test. Filing of this report must coincide with or precede any notice of test results to the originating facility.

(E) Testing of the cannabinoid profile of the final medical marijuana product shall include those analytes listed below, and the acceptable limits for each analyte will be a percentage deviation from the mean in concentration throughout the lot of fifteen percent (15%) or less:
1. Delta-9 tetrahydrocannabinol (THC), CAS number 1972-08-3;
2. Tetrahydrocannabinol acid (THCA), CAS number 23978-85-0;
3. Cannabidiol (CBD), CAS number 13956-29-1;
4. Cannabidiolic acid (CBDA), CAS number 1244-58-2; and
5. Cannabinol (CBN), CAS number 521-35-7.

(F) Testing for contaminants in the final medical marijuana product shall include, but shall not be limited to:
1. Microbial screening. A test will fail if it shows—
   A. A mycotoxin concentration, including aflatoxins and ochratoxin A, of greater than 20 micrograms per kilogram;
   B. Pathogenic E. coli or salmonella concentrations detectable in 1 gram; and
   C. Pathogenic Aspergillus species A. fumigatus, A. flavus, A. niger, or A. terreus detectable in 1 gram;
2. Chemical residue screening. A test will fail if it shows—
<table>
<thead>
<tr>
<th>Banned Analytes</th>
<th>Chemical Abstract Services (CAS) Registry number</th>
<th>Action Limit (ppm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abamectin</td>
<td>71751-41-2</td>
<td>&gt; 0.5</td>
</tr>
<tr>
<td>Acephate</td>
<td>30560-19-4</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Acequinocyl</td>
<td>57960-19-7</td>
<td>&gt; 2</td>
</tr>
<tr>
<td>Acetamiprid</td>
<td>135410-20-7</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Aldicarb</td>
<td>116-06-3</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Azoxystrobin</td>
<td>131860-33-8</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Bifenazate</td>
<td>149877-41-8</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Bifenthrin</td>
<td>82657-04-3</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Boscalid</td>
<td>188425-85-6</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Carbaryl</td>
<td>63-25-2</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Carbofuran</td>
<td>1563-66-2</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Chlorantraniliprole</td>
<td>500008-45-7</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Chlorfenapyr</td>
<td>122453-73-0</td>
<td>&gt; 1</td>
</tr>
<tr>
<td>Chloromequat Chloride</td>
<td>7003-89-6</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Chlorpyrifos</td>
<td>2921-88-2</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Clofentezine</td>
<td>74115-24-5</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Cyfluthrin</td>
<td>68359-37-5</td>
<td>&gt; 1</td>
</tr>
<tr>
<td>Cypermethrin</td>
<td>52315-07-8</td>
<td>&gt; 1</td>
</tr>
<tr>
<td>Daminozide</td>
<td>1596-84-5</td>
<td>&gt; 1</td>
</tr>
<tr>
<td>DDVP (Dichlorvos)</td>
<td>52645-53-1</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Diazinon</td>
<td>238261-41-3</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Ethoprophos</td>
<td>13194-48-4</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Etofenprox</td>
<td>80844-07-1</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Etoxazole</td>
<td>153233-91-1</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Fenoxycarb</td>
<td>72490-01-8</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Fenpyroximate</td>
<td>134096-61-6</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Fipronil</td>
<td>120068-37-3</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Flonicamid</td>
<td>158062-67-0</td>
<td>&gt; 1</td>
</tr>
<tr>
<td>Fludioxonil</td>
<td>131341-86-1</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Hexythiazox</td>
<td>78587-05-0</td>
<td>&gt; 1</td>
</tr>
<tr>
<td>Imazalil</td>
<td>35554-44-0</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Imidacloprid</td>
<td>138261-41-3</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Kresoxim-methyl</td>
<td>143390-89-0</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Malathion</td>
<td>121-75-5</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Metalaxyl</td>
<td>57837-19-1</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Methiocarb</td>
<td>2032-65-7</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Methomyl</td>
<td>16752-77-5</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Methyl parathion</td>
<td>298-00-0</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>MGK-264</td>
<td>113-48-4</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Myclobutanil</td>
<td>88671-89-0</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Naled</td>
<td>300-76-5</td>
<td>&gt; 0.5</td>
</tr>
<tr>
<td>Oxamyl</td>
<td>23135-22-0</td>
<td>&gt; 1</td>
</tr>
<tr>
<td>Paclorobutrazol</td>
<td>76738-62-0</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Permethrins*</td>
<td>52645-53-1</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Pallethrin</td>
<td>23031-36-9</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Phosmet</td>
<td>732-11-6</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Piperonyl butoxide</td>
<td>51-03-6</td>
<td>&gt; 2</td>
</tr>
<tr>
<td>Propiconazole</td>
<td>66207-90-1</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Propoxur</td>
<td>114-26-1</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Pyridaben</td>
<td>96489-71-3</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Pyrethrins+</td>
<td>8003-34-7</td>
<td>&gt; 1</td>
</tr>
<tr>
<td>Spinosad</td>
<td>168316-95-8</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Spiromesifen</td>
<td>283594-90-1</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Spirotetramat</td>
<td>20333-25-1</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Spiroxamine</td>
<td>118134-30-8</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Tebuconazole</td>
<td>80443-41-0</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Thiacloprid</td>
<td>111988-49-9</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Thiamethoxam</td>
<td>153719-23-4</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Trifloxystrobin</td>
<td>141517-21-7</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Spirotetramat</td>
<td>20333-25-1</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Spiroxamine</td>
<td>118134-30-8</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Tebuconazole</td>
<td>80443-41-0</td>
<td>&gt; 0.4</td>
</tr>
<tr>
<td>Thiacloprid</td>
<td>111988-49-9</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Thiamethoxam</td>
<td>153719-23-4</td>
<td>&gt; 0.2</td>
</tr>
<tr>
<td>Trifloxystrobin</td>
<td>141517-21-7</td>
<td>&gt; 0.2</td>
</tr>
</tbody>
</table>

* Permethrins cumulative residue of cis- and trans-permethrin isomers
+ Pyrethrins cumulative residues of pyrethrin 1, cinerin 1 and jasmolin 1
3. Heavy metal screening. A test will fail if it shows—

<table>
<thead>
<tr>
<th>Metal</th>
<th>Failure Level for Medical Marijuana (ppm)</th>
<th>Failure Level for Medical Marijuana-Infused Products (ppm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inorganic Arsenic</td>
<td>&gt; 0.2</td>
<td>&gt; 1.5</td>
</tr>
<tr>
<td>Cadmium</td>
<td>&gt; 0.2</td>
<td>&gt; 0.5</td>
</tr>
<tr>
<td>Total Chromium</td>
<td>&gt; 0.6</td>
<td>&gt; 2.0</td>
</tr>
<tr>
<td>Lead</td>
<td>&gt; 0.5</td>
<td>&gt; 0.5</td>
</tr>
<tr>
<td>Mercury</td>
<td>&gt; 0.1</td>
<td>&gt; 3.0</td>
</tr>
</tbody>
</table>

4. Residual solvents. A test will fail if it shows—

<table>
<thead>
<tr>
<th>Solvent</th>
<th>Chemical Abstract Services (CAS) Registry number</th>
<th>Failure Level for Medical Marijuana (Inhalation) (ppm)</th>
<th>Failure Level for Medical Marijuana-Infused Products (ppm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,2-Dichloroethane</td>
<td>107-06-2</td>
<td>&gt; 2</td>
<td>&gt; 5</td>
</tr>
<tr>
<td>Acetone</td>
<td>67-64-1</td>
<td>&gt; 750</td>
<td>&gt; 5000</td>
</tr>
<tr>
<td>Acetonitrile</td>
<td>75-05-8</td>
<td>&gt; 60</td>
<td>&gt; 410</td>
</tr>
<tr>
<td>Benzene</td>
<td>71-43-2</td>
<td>&gt; 1</td>
<td>&gt; 2</td>
</tr>
<tr>
<td>Butanes (all isomers)</td>
<td>106-97-8</td>
<td>&gt; 800</td>
<td>&gt; 5000</td>
</tr>
<tr>
<td>Chloroform</td>
<td>67-66-3</td>
<td>&gt; 2</td>
<td>&gt; 60</td>
</tr>
<tr>
<td>Ethanol</td>
<td>64-17-5</td>
<td>&gt; 1000</td>
<td>&gt; 5000</td>
</tr>
<tr>
<td>Ethyl acetate</td>
<td>141-78-6</td>
<td>&gt; 400</td>
<td>&gt; 5000</td>
</tr>
<tr>
<td>Ethyl ether</td>
<td>60-29-7</td>
<td>&gt; 300</td>
<td>&gt; 5000</td>
</tr>
<tr>
<td>Ethylene Oxide</td>
<td>75-21-8</td>
<td>&gt; 5</td>
<td>&gt; 50</td>
</tr>
<tr>
<td>Heptane</td>
<td>142-82-5</td>
<td>&gt; 300</td>
<td>&gt; 5000</td>
</tr>
<tr>
<td>Hexanes (all isomers)</td>
<td>11054-3</td>
<td>&gt; 50</td>
<td>&gt; 290</td>
</tr>
<tr>
<td>Isopropyl alcohol</td>
<td>67-63-0</td>
<td>&gt; 500</td>
<td>&gt; 5000</td>
</tr>
<tr>
<td>Methanol</td>
<td>67-56-1</td>
<td>&gt; 250</td>
<td>&gt; 3000</td>
</tr>
<tr>
<td>Methylene chloride</td>
<td>75-09-2</td>
<td>&gt; 125</td>
<td>&gt; 600</td>
</tr>
<tr>
<td>Pentanes (all isomers)</td>
<td>109-66-0</td>
<td>&gt; 750</td>
<td>&gt; 5000</td>
</tr>
<tr>
<td>Propane</td>
<td>74-98-6</td>
<td>&gt; 2100</td>
<td>&gt; 5000</td>
</tr>
<tr>
<td>Toluene</td>
<td>79-01-6</td>
<td>&gt; 150</td>
<td>&gt; 890</td>
</tr>
<tr>
<td>Trichloroethylene</td>
<td>108-88-3</td>
<td>&gt; 25</td>
<td>&gt; 80</td>
</tr>
<tr>
<td>Total Xylenes (ortho-, meta-, para-)</td>
<td>1330-20-7</td>
<td>&gt; 150</td>
<td>&gt; 2170</td>
</tr>
</tbody>
</table>

5. Water activity and moisture content screening. A test will fail if it shows, for dry, unprocessed marijuana, water activity that exceeds 0.65 Aw and moisture content that is not between 5.0% and 13.0%; and

6. Foreign matter screening. A test will fail if it shows—

A. More than 5.0% of stems 3 mm or more in diameter; or

B. More than 2.0% of other foreign matter (mites, hair, dirt, etc.).

5. Medical marijuana that fails mandatory testing shall not be retested and will be immediately placed on hold by the testing facility through the statewide track and trace system pending disposal or remediation.

6. Testing facilities may acquire from cultivation, manufacturing, and dispensary facilities raw material, such as plant material, concentrates, extracts, and infused products, for testing method development.

7. Testing facilities shall retain any portion of a sample that was not used in the testing process for, at a minimum, forty-five (45) business days after testing is complete.

A. Excess sample material shall be securely stored in a manner that prohibits sample degradation, contamination, and tampering and available to the department upon request.

B. When no longer subject to retention, sample material shall be disposed pursuant to 19 CSR 30-90.070(4)(E).


19 CSR 30-95.080 Dispensary Facility

PURPOSE: Under Article XIV, Section 1 of the Missouri Constitution, the Department of Health and Senior Services has the authority to regulate and control Medical Marijuana Facilities. This rule explains what regulations apply only to Dispensary Facilities.

(1) Access to Dispensary Facility Licenses. (A) The number of dispensary facility licenses will be limited to one hundred ninety-two (192) unless the department determines the limit must be increased in order to meet the demand for medical marijuana by qualifying patients.

(B) Dispensary facility licenses will be limited to twenty-four (24) in each of the eight (8) United States congressional districts in the state of Missouri as drawn and in effect on December 6, 2018. A map of the state of Missouri showing the applicable boundary lines of Missouri’s congressional districts will be available on the department’s website at http://medicalmarijuana.mo.gov.

(C) A facility license will be issued for a single facility in a single location. Combinations of licenses at the same location must be approved pursuant to 19 CSR 30-95.040(4)(C).

(2) Dispensary Facility Requirements. In addition to the requirements of 19 CSR 30-95.040, dispensary facilities shall also comply with the following:

(A) Dispensary facilities must ensure all facility employees are trained in at least the following:

1. The use of security measures and controls that have been adopted by the facility for the prevention of diversion, inversion, theft, or loss of marijuana;

2. Proper use of the statewide track and trace system;

3. Procedures for responding to an emergency, including severe weather, fire, natural disasters, and unauthorized intrusions;

4. Standards for maintaining the confidentiality of information related to the medical use of marijuana, including, but not limited to, compliance with the Health Insurance Portability and Accountability Act;

5. Procedures for verifying the identity and purchase limitations of qualifying patients and primary caregivers;

6. The differences in the purported

JOHN R. ASHCROFT
Secretary of State

(6/30/20)

CODE OF STATE REGULATIONS 29
effects and effectiveness of the strains of medical marijuana available for purchase at that dispensary and the methods of their use; and

7. Recognizing signs of medical marijuana abuse in patients;

B) Dispensary facilities must make available to all customers patient education materials that include at least the following:

1. Local resources for concerns about addiction, as well as the phone number for the Substance Abuse and Mental Health Services Administration’s National Helpline;

2. Information about the different strains of medical marijuana available at that dispensary and the purported effects of the different strains;

3. Information about the purported effectiveness of various methods, forms, and routes of administering medical marijuana;

4. Information about potential risks and possible side effects of medical marijuana use, including risk of poisoning and the phone number for the closest poison control center; and

5. The prohibition on consuming marijuana for medical use in a public place, including the definition of what constitutes a public place pursuant to this rule;

C) Dispensary facilities must, for every transaction—

1. Receive the transaction order at the dispensary directly from the qualifying patient or primary caregiver in person, by phone, or via the internet, and not from a third party;

2. At the time of sale, verify through the statewide track and trace system that the qualifying patient or primary caregiver is currently authorized to purchase the amount of medical marijuana requested and, in the case of a seed purchase, that the patient or primary caregiver is currently authorized to cultivate medical marijuana;

3. In the case of a delivery order, receive payment before the medical marijuana leaves the dispensary, subject to refund if the delivery cannot be completed; and

4. At the time of sale or delivery, require production of a qualifying patient or primary caregiver identification card, a government-issued photo ID, and in the case of medical marijuana seed purchases, a patient cultivation identification card;

D) Dispensary facilities must report any incident of theft or attempted theft of medical marijuana to the department within twenty-four (24) hours of the incident;

E) Dispensary facilities must design their facility and staffing in such a way as to accomplish the following:

1. The general public, qualifying patients, and primary caregivers may only enter the facility through one (1) access point into an area where facility agents shall screen individuals for qualifying patient or primary caregiver status. No medical marijuana may be accessible in this area;

2. Only qualifying patients, primary caregivers, and, if requested by a qualifying patient, up to two (2) additional persons to support the qualifying patient, may enter any areas beyond the facility’s access point area; and

3. In any limited access area where medical marijuana is accessible, the facility shall allow access with the applicable food safety standards set forth in 19 CSR 20-1.025; and

4. In offsite warehouses that comply with the security requirements of 19 CSR 30-95.040(4)(H), the location requirements of 19 CSR 30-95.040(4)(B), and that have been approved pursuant to 19 CSR 30-95.040(3)(C);

J) Dispensary facilities shall only sell medical marijuana seeds or other cultivation facilities;

K) Dispensary facilities shall not sell medical marijuana to a qualifying patient or primary caregiver in amounts greater than what that individual is currently authorized to purchase per the statewide track and trace system;

L) Dispensary facilities shall not sell medical marijuana to a qualifying patient or primary caregiver who is not currently authorized to cultivate medical marijuana;

M) Dispensary facilities may accept returns and issue refunds or credits as needed except that medical marijuana that has been removed from the packaging in which it arrived at the dispensary, whether removed before sale by the dispensary or after sale by a patient or caregiver, may not be accepted as a return;

N) Dispensary facilities shall not disburse medical marijuana as part of a promotional event. If a facility disburses medical marijuana free of charge for any other reason, the facility shall record that disbursement of product in its seed-to-sale system with all relevant entries, including the qualifying patient or primary caregiver information and the amount of medical marijuana disbursed to that qualifying patient or primary caregiver;

O) Dispensary facilities shall not allow consumption of medical marijuana on their licensed premises; and

P) Dispensary facilities shall not allow physicians to meet with individuals on the dispensary’s premises for the purpose of certifying them as qualifying patients.


19 CSR 30-95.090 Seed-to-Sale Tracking

PURPOSE: Under Article XIV, Section 1 of the Missouri Constitution, the Department of Health and Senior Services has the authority to regulate and control Medical Marijuana Facilities. This rule explains what regulations apply to certification of seed-to-sale tracking systems.

1. Access to Seed-to-Sale Tracking System Certifications.

A) The department will not limit the number of certifications available for seed-to-sale tracking system entities.

B) The department will begin accepting applications for review on August 3, 2019. All complete applications received by the department that are submitted on or after that date will be approved or denied within one hundred fifty (150) days of that application’s submission. An application will be considered complete if it includes all information required for applications by this rule. The department will notify an applicant if an application is incomplete and will specify in that notification what information is missing. Applicants will be given seven (7) days to provide missing information. Failure to provide missing information may result in denial of the application.
(C) The department shall charge an application fee for a seed-to-sale certification and also an annual fee once a certification is granted. The first annual fee will be due thirty (30) days after a certification is issued and shall be due annually on that same date as long as the certification remains valid. The department shall publish the current fees, including any adjustments, on its website at http://medicalmarijuana.mo.gov. The amount of fees due will be the amount that is effective as of the due date for the fee.

(2) Application Requirements. All applications for seed-to-sale tracking system certifications shall include at least the following information:

(A) Name and address of the applicant;
(B) Legal name of the entity, including any fictitious business names, and a certificate of good standing from the Missouri Office of the Secretary of State;
(C) An attestation by an owner or principle of the entity that the seed-to-sale tracking system can and will comply with this rule; and
(D) All applicable fees or proof that all applicable fees have already been paid.

(3) Seed-to-Sale Tracking System Requirements. All seed-to-sale tracking systems used by cultivation, manufacturing, dispensary, testing, and transportation facilities shall be capable of—

(A) Interfacing with the statewide track and trace system such that a licensed or certified facility may enter and access information in the statewide track and trace system as required for inventory control and tracking by 19 CSR 30-95.040(4)(G) and for purchase limitations by 19 CSR 30-95.080(2)(C);
(B) Providing the department with access to all information stored in the system’s database;
(C) Maintaining the confidentiality of all patient data and records accessed or stored by the system such that all persons or entities other than the department may only access the information in the system that they are authorized by law to access; and
(D) Producing analytical reports to the department regarding—

1. Total quantity of daily, monthly, and yearly sales at the facility per product type;
2. Average prices of daily, monthly, and yearly sales at the facility per product type; and
3. Total inventory or sales record adjustments at the facility.

(4) Seed-to-Sale Tracking System Prohibitions.

(A) No certified seed-to-sale tracking system entities may begin operations before signing the department’s Medical Marijuana Application Programming Interface User Agreement.

(B) No seed-to-sale tracking system entity may sell seed-to-sale tracking services or services related to compliance with seed-to-sale tracking regulations to a licensed or certified facility if it is owned by or affiliated with an entity that holds a contract with the state of Missouri for any product or service related to the department’s medical marijuana program.

(5) Failure to comply with this rule and failure to abide by the department’s Medical Marijuana Application Programming Interface User Agreement may result in revocation of certification.


19 CSR 30-95.100 Transportation Facility

PURPOSE: Under Article XIV, Section 1 of the Missouri Constitution, the Department of Health and Senior Services has the authority to regulate and control Medical Marijuana Facilities. This rule explains what regulations apply only to Transportation Facilities.

(1) Access to Transportation Facility Certifications.

(A) The department will certify all transportation facilities that can demonstrate they meet minimum standards as described in 19 CSR 30-95.025(4)(A).

(B) A facility license will be issued for a single facility with a single, primary place of business. Combinations of licenses at the same location must be approved pursuant to 19 CSR 30-95.040(4)(C).

(2) Transportation Facility Requirements. In addition to the requirements for transportation facilities in 19 CSR 30-95.040, transportation facilities shall also comply with the provisions of this section.

(A) Transportation facilities must ensure all facility employees are trained in at least the following:

1. The use of security measures and controls that have been adopted by the facility for the prevention of diversion, inversion, theft, or loss of medical marijuana;
2. Proper use of the statewide track and trace system;
3. Procedures for responding to an emergency, including severe weather, fire, natural disasters, and unauthorized intrusions; and
4. Standards for maintaining the confidentiality of information related to the medical use of marijuana, including, but not limited to, compliance with the Health Insurance Portability and Accountability Act of 1996.

(B) Transportation facilities shall transport all medical marijuana from an originating facility to a destination within twenty-four (24) hours. When extenuating circumstances necessitate holding medical marijuana longer than twenty-four (24) hours, the transportation facility shall notify the department of the circumstances and the location of the medical marijuana.

(C) Unless expressly allowed by the local government, no new transportation facility shall be sited, at the time of application for certification or for local zoning approval, whichever is earlier, within one thousand feet (1,000') of any then-existing elementary or secondary school, daycare, or church.

1. In the case of a freestanding facility, the distance between the facility and the school, daycare, or church shall be measured from the external wall of the facility structure closest in proximity to the school, daycare, or church to the closest point of the property line of the school, daycare, or church. If the school, daycare, or church is part of a larger structure, such as an office building or strip mall, the distance shall be measured to the entrance or exit of the school, daycare, or church closest in proximity to the facility.

2. In the case of a facility that is part of a larger structure, such as an office building or strip mall, the distance between the facility and the school, daycare, or church shall be measured from the property line of the school, daycare, or church to the facility’s entrance or exit closest in proximity to the school, daycare, or church. If the school, daycare, or church is part of a larger structure, such as an office building or strip mall, the distance shall be measured to the entrance or exit of the school, daycare, or church closest in proximity to the facility.

3. Measurements shall be made along the shortest path between the demarcation points that can be lawfully traveled by foot.

(D) A transportation facility’s primary place of business shall meet the security requirements of 19 CSR 30-95.040(4)(H). In addition to those requirements, transportation facilities shall also comply with the following:

1. All vehicles used to transport medical marijuana shall not be marked in any way that indicates medical marijuana is being transported by that vehicle and shall be equipped...
with at least—

A. A secure lockbox or locking cargo area made of smooth, hard surfaces that are easily cleaned for storing medical marijuana during transit;

B. A secure lockbox for storing payments and video monitoring recording equipment during transit;

C. Video monitoring of the driver and passenger compartment in the vehicle and of any space where medical marijuana is stored during transit; and

D. GPS tracking;

2. Facility agents transporting medical marijuana shall—

A. Prior to transporting medical marijuana, print an inventory manifest for the trip generated from the statewide track and trace system and create a trip plan, which shall be provided to the facility from which the medical marijuana is transported, and which shall include:

(i) The name of the facility agent(s) transporting the medical marijuana;

(ii) The date and start time of transportation;

(iii) The anticipated delivery time; and

(iv) The anticipated route of transportation;

B. During transport—

(i) Have facility agent identification card(s) accessible at all times;

(ii) Keep a copy of the applicable inventory manifest and trip plan in the transportation vehicle, which shall be placed under the driver’s seat or in a compartment beside the driver’s seat for the duration of the trip;

(iii) Have a means of communication accessible at all times;

(iv) Immediately report any loss or theft of medical marijuana to a person designated by the transportation facility for this purpose; and

C. After transport, revise the trip plan to reflect the actual route taken and the end time of transportation and deliver the revised trip plan to a person designated by the transportation facility for this purpose;

3. Any incident of theft or attempted theft of medical marijuana shall be reported to the department within twenty-four (24) hours of the incident; and

4. All trip plans and revised trip plans shall be maintained by the transportation facility for at least five (5) years.

**AUTHORITY: sections 1.3.(1)(b) and 1.3.(2)**

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**19 CSR 30-95.110 Physicians**

**PURPOSE:** Under Article XIV, Section 1 of the Missouri Constitution, patients with qualifying medical conditions have the right to discuss freely with their physicians the possible benefits of medical marijuana use, and physicians have the right to provide professional advice concerning the same. This rule explains how the department will implement provisions of Article XIV, Section 1 related to Physicians.

(1) Physician Certification. Physicians will submit certifications electronically through a department-provided, web-based system. In the event of system unavailability, the department will arrange to accept physician certifications in an alternative, department-provided format and will notify the public of those arrangements through its website at http://medicalmarijuana.mo.gov.

(A) Physician certifications must include at least the following information:

1. The physician’s name, as it appears in the records of the Missouri Division of Professional Registration;

2. The physician’s licensee number;

3. Whether the physician is licensed to practice medicine or osteopathy;

4. The physician’s business address, telephone number, and email address;

5. The qualifying patient’s name, date of birth, and Social Security number;

6. The qualifying patient’s qualifying condition;

7. The physician’s recommendation for the amount of medical marijuana the qualifying patient should be allowed to purchase in a thirty- (30-) day period if the recommended amount is more than four (4) ounces of dried, unprocessed marijuana or its equivalent;

8. Statements confirming the following:

   A. In the case of a non-emancipated qualifying patient under the age of eighteen (18), before certifying the qualifying patient for use of medical marijuana, the physician received the written consent of a parent or legal guardian who asserts he or she will serve as a primary caregiver for the qualifying patient;

B. The physician met with and examined the qualifying patient, reviewed the qualifying patient’s medical records or medical history, reviewed the qualifying patient’s current medications and allergies to medications, discussed the qualifying patient’s current symptoms, and created a medical record for the qualifying patient regarding the meeting;

C. In the opinion of the physician, the qualifying patient suffers from the qualifying condition; and

D. The physician discussed with the qualifying patient risks associated with medical marijuana, including known contraindications applicable to the patient, risks of medical marijuana use to fetuses, and risks of medical marijuana use to breastfeeding infants; and

9. The signature of the physician and date on which the physician signed.

(2) The department may request to interview any physician who chooses to certify individuals as qualifying patients. If such a request is made, the physician shall arrange for the interview to occur as soon as possible but no later than thirty (30) days after the department makes the request.

**AUTHORITY: sections 1.3.(1)(b) and 1.3.(2)**

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