

To: New York State Office of Cannabis Management (OCM)
Cc: SBS Commissioner Kenny Minaya; John Kagia, Acting Executive Director – OCM
From: Tosin Ajayi, Senior Policy and Research Analyst – Cannabis NYC
Re: NYC Comments on NYS Proposed Regulation of Part 113- Cannabis Showcase Events

Dear OCM Team:

Please find enclosed New York City’s comments on the [Proposed Amendments to Part 113- Medical Cannabis Regulations](#).

Cannabis NYC coordinated this interagency submission as part of the City’s ongoing commitment to supporting a safe, equitable, and well-regulated cannabis market in New York State.

We appreciate the opportunity to provide feedback on the proposed amendments and remain committed to continued collaboration with OCM as the State’s medical cannabis framework evolves. The City shares OCM’s goal of supporting a transparent and accessible Medical Cannabis Program that advances patient access, public health, and equitable participation across the cannabis industry.

The agencies contributing to these comments are:

- Cannabis NYC, Department of Small Business Services (Cannabis NYC)
- NYC Department of Health & Mental Hygiene (DOHMH)

We appreciate OCM’s consideration of these comments and look forward to continued collaboration in supporting the growth and long-term sustainability of New York’s cannabis industry.

Respectfully,



Tosin Ajayi
Senior Policy and Research Analyst, Cannabis NYC

Contents

§ 113.1 Definitions	3
113.2 Practitioner Eligibility.....	4
113.3 Practitioner Issuance of Certification	4
Section 113.7 Consideration of Registered Organization Applications	5
Section 113.8. Applications for Renewal of Registration as Registered Organization	5
Section 113.10. Failure to Operate	6
Section 113.13. Requirements for Dispensing Sites	6
Section 113.19. Requirements for Dispensing Sites	7
Cannabis NYC Comments on Overall Package of Proposed Amendments for Part 113 – Medical Cannabis Regulations	7
NYC Department of Health and Mental Hygiene Comments on Overall Package of Proposed Amendments for Part 113 – Medical Cannabis Regulations	7

Please note: Page numbers in **purple** text throughout pages 3-8 of this document reference OCM's publications of [Proposed Amendments to Part 113- Medical Cannabis Regulations](#), cited on page 1 of this document.

§ 113.1 Definitions

(Page 4)

Subdivision (q) reads as follows: *Designated caregiver facility* means a facility that registers with the office to assist one (1) or more certified patients with the acquisition, possession, delivery, transportation or administration of medical cannabis and is a: general hospital or residential health care facility operating pursuant to article 28 of the Public Health Law; an adult care facility operating pursuant to title 2 of article 7 of the Social Services Law; a community mental health residence established pursuant to section 41.44 of the Mental Hygiene Law; a hospital operating pursuant to section 7.17 of the Mental Hygiene Law; a mental hygiene facility operating pursuant to article 31 of the Mental Hygiene Law; an inpatient or residential treatment program certified pursuant to article 32 of the Mental Hygiene Law; a residential facility for the care and treatment of persons with developmental disabilities operating pursuant to article 16 of the Mental Hygiene Law; a residential treatment facility for children and youth operating pursuant to article 31 of the Mental Hygiene Law; a private or public school; research institution with an internal review board; or any other facility as determined by the office.

Cannabis NYC recommends that OCM consider expanding the definition of “designated caregiver facility” to include additional residential and institutional settings that may serve individuals with limited mobility, disabilities, chronic health conditions, or other barriers to independently obtaining medical cannabis. Such facilities could include adult group homes, assisted living facilities, and certain correctional or reentry-related healthcare settings, where appropriate and consistent with applicable law.

Cannabis NYC also encourages OCM to preserve flexibility within this definition through the existing “any other facility as determined by the office” language. This flexibility may help accommodate community-based or culturally specific support settings that assist certified patients who rely on caregivers to access or administer medical cannabis, including patients participating in faith-based or sacramental practices involving cannabis use where otherwise permitted by law.

Expanding clarity around eligible caregiver facilities may help improve continuity of care and equitable access for patients who are underage, disabled, medically vulnerable, institutionalized, or otherwise unable to independently acquire or administer medical cannabis products. (Cannabis NYC)

(Page 5)

Subdivision (aa) reads as follows: (2) *Medical cannabis product* is the final manufactured product of medical cannabis, as defined in section 3 of article 1 of the Cannabis Law, delivered to the patient that represents a specific phytocannabinoid concentration and form and active and inactive ingredients, prepared in a specific dosage and form, to be administered as recommended by the practitioner.

Cannabis NYC recommends that OCM provide additional clarity regarding the scope of products encompassed within the definition of “medical cannabis product,” particularly as federal policy discussions related to the rescheduling of medical cannabis continue to evolve.

Additional clarity may help avoid future regulatory ambiguity regarding product classification, manufacturing standards, inventory tracking, and the distinction between medical and adult-use cannabis supply chains. (Cannabis NYC)

113.2 Practitioner Eligibility

(Page 9)

Paragraph (4) of subdivision (a) reads as follows: (4) has completed [at a minimum a two (2) hour]a course approved by the Office as set forth in subdivision (b) of this section.

Cannabis NYC recommends that OCM provide additional clarity regarding the minimum educational standards for Office-approved practitioner courses if the two-hour training requirement is removed. Cannabis NYC encourages OCM to ensure that approved coursework remains sufficiently rigorous and directly related to the recommendation and certification of medical cannabis in order to support practitioner competency, patient safety, and program integrity. (Cannabis NYC)

113.3 Practitioner Issuance of Certification

(Page 15)

Paragraph (j) reads as follows: Provision of Electronic Code. The practitioner shall provide a quick response (QR) code to the certified patient or their designated caregiver to present to a registered organization to obtain medical cannabis or medical cannabis products from a registered organization. The QR code shall link to the Medical Cannabis Data Management System, or any successor state database.

Cannabis NYC recommends that OCM clarify whether patients will also receive a direct website link or alternative access instructions in addition to the QR code. Providing multiple access options may help improve accessibility for patients with limited technological literacy or devices that do not readily support QR code functionality, including some older adults and vulnerable populations. (Cannabis NYC)

Section 113.7 Consideration of Registered Organization Applications

(Page 28-32)

Paragraph (7) reads as follows: (7) it is in the public interest that such registration be granted including:

Cannabis NYC recommends that OCM consider incorporating, equity-related criteria into considerations for reduced registration fees or other incentives for registered organizations. As the medical cannabis market continues to evolve, Cannabis NYC encourages OCM to support pathways for greater participation by social and economic opportunity applicants and applicants from communities disproportionately impacted by cannabis prohibition.

Cannabis NYC further encourages OCM to consider whether applicants demonstrate cultural, linguistic, and medical competency in serving underserved communities, consistent with the public interest considerations already outlined in this section. Supporting a more representative and community-responsive registered organization landscape may help improve equitable access to medical cannabis services across New York State. (Cannabis NYC)

Section 113.8. Applications for Renewal of Registration as Registered Organization

(Page 32)

Paragraph (c) reads as follows: (c) The application for renewal shall include such information prepared in the 33 manner and detail as the Board may require, including but not limited to:

Cannabis NYC recommends that OCM consider requiring registered organizations to provide updated community impact plans as part of the registration renewal process. Periodic updates may help demonstrate continued community engagement, community reinvestment efforts, and commitments to serving disproportionately impacted communities. (Cannabis NYC)

Section 113.10. Failure to Operate

(Page 35)

Paragraph (a) reads as follows: (a) A registration shall be surrendered to the Board upon written notice and demand if the registered organization fails to begin operations, to the satisfaction of the Board, of a manufacturing or dispensing site within the six (6) months of the date of issuance of the registration.

Cannabis NYC recommends that OCM consider extending the six-month operational requirement or providing a pathway for extensions where applicants demonstrate good-faith progress toward becoming operational. Due to the significant capital, real estate, construction, and compliance challenges associated with launching a registered organization, six months may not be sufficient for some applicants.

Cannabis NYC further encourages OCM to consider the disproportionate barriers that minority-owned and social equity applicants may face in securing financing, property, and operational resources when evaluating extension eligibility or future social equity considerations for registered organizations. (Cannabis NYC)

Section 113.13. Requirements for Dispensing Sites

(Page 58)

Subsection (ii) of subdivision (1) of paragraph (h) reads as follows: (h) When dispensing medical cannabis, the dispensing site shall: (1) not dispense any medical cannabis to a certified patient, unless the certified patient presents the dispensing site with: (ii) a valid government-issued photo identification, which the dispensing site shall use to validate that such patient is eighteen (18) years of age or older and capable of consent as documented on the certification, provided that, such government-issue photo identification, is issued by: (a) the New York State commissioner of motor vehicles; (b) the federal government of the United States; (c) any United States territory; (d) the District of Columbia; (e) a state, commonwealth, or local government within the United States; (f) a post-secondary educational institution regulated by the New York State Department of Education or another state; or (g) or a provincial government of the dominion of Canada;

Cannabis NYC recommends that OCM consider whether additional forms of internationally issued government identification may be accepted for purposes of patient verification, particularly for lawful out-of-state or reciprocal medical cannabis patients temporarily residing in or visiting New York. Providing additional clarity regarding acceptable forms of identification may help support accessibility while maintaining appropriate verification and compliance safeguards. (Cannabis NYC)

Section 113.19. Prohibition on the use of Medical Cannabis Products in Certain Places

(Page 84)

Paragraph (b) reads as follows: (b) Consumption of medical cannabis products shall not be permitted in any motor vehicle, either public or private, as defined in section 125 of the Vehicle and Traffic Law

Cannabis NYC encourages OCM to add a clarifying cross reference to Vehicle and Traffic Law 1227(1) (“The drinking of alcoholic beverages or consumption of cannabis, or the possession of an open container containing an alcoholic beverage, in a motor vehicle located upon the public highways or right-of-way public highway is prohibited. Any operator or passenger violating this section shall be guilty of a traffic infraction.”). Cannabis NYC recognizes the important public safety rationale underlying restrictions on cannabis consumption in motor vehicles, particularly as it relates to impaired driving and public safety. However, it is important that the language is consistent with current restrictions in the Vehicle and Traffic Law. (Cannabis NYC)

Cannabis NYC Comments on Overall Package of Proposed Amendments for Part 113 – Medical Cannabis Regulations

(Page 1-99)

Cannabis NYC encourages OCM to monitor demographic disparities among medical cannabis patients, focusing especially on access issues faced by patients from communities disproportionately impacted by cannabis prohibition. (Cannabis NYC)

NYC Department of Health and Mental Hygiene Comments on Overall Package of Proposed Amendments for Part 113 – Medical Cannabis Regulations

(Page 1-99)

The NYC Health Department appreciates the opportunity to comment on the proposed medical cannabis rules. The Department agrees with the provisions to extend certification periods from 1 to 2 years and establish reciprocity with other states’ medical cannabis programs. Extending patients’ certification reduces administrative burden, and establishing reciprocity with other states enables out-of-state patients to continue their therapeutic regimen without the risk of gaps in care during their travels.

The Department also understands that the updated dispensing limits and expanded home cultivation age limit are mandated by Chapter 544 of 2025. In comments submitted by New York City in May 2024 regarding OCM's proposed rule on Personal Home Cultivation of Medical & Adult-Use Cannabis, we urged OCM to engage in educational initiatives to prevent health risks and fire hazards associated with home cultivation. We continue to recommend that OCM expand such efforts in light of these serious risks. (DOHMH)