

**BILL SUMMARY**  
1<sup>st</sup> Session of the 57<sup>th</sup> Legislature

<b>Bill No.:</b>	<b>SB1030</b>
<b>Version:</b>	<b>Engrossed</b>
<b>Request Number:</b>	
<b>Author:</b>	<b>Rep. Bush and Sen. Paxton</b>
<b>Date:</b>	<b>4/8/2019</b>
<b>Impact:</b>	<b>\$50,000+ from revenues into OMMA fund</b>

**Research Analysis**

SB1030 allows any person charged by law enforcement with possession of up to 1.5 ounces of marijuana but not in possession of their medical marijuana license at the time of contact with law enforcement, to later produce proof they had a valid license at time of contact with law enforcement and be dismissed of charge.

The measure also directs the State Department of Health to maintain all records contained in a medical marijuana license application.

Medical marijuana license revocation hearings are required to be recorded by the measure. A party may request a copy of the recording of the proceedings and copies of the proceedings shall be forwarded to law enforcement if the revocation was based on criminal activity. The State Department of Health is directed to forward all information displayed on medical marijuana licenses to law enforcement via the Oklahoma Law Enforcement Telecommunications System. The Department must make available a list showing the location of licensed entities to the public.

The measure allows municipalities to pass ordinances restricting the smoking of medical marijuana in public places, and prohibits the smoking of medical marijuana within 50 feet of a street, alley or sidewalk.

SB1030 clarifies that no city or local municipality may prevent marijuana establishments from operating within municipal boundaries as a matter of law. SB1030 also clarifies that any tax on medical marijuana levied by municipalities shall not exceed the rate levied by a municipality for other sales.

Lastly, the measure authorizes any court in the state to access the medical marijuana use registry for the purposes specified in subsection B of Section 420 of Title 63 of the Oklahoma Statutes.

Prepared By: Emily Wendler

**Fiscal Analysis**

The State Department of Health estimates the cost of creating a shared communication system to be approximately \$50,000 and annual maintenance of the system to be \$7,000.

Prepared By: Stacy Johnson

**Other Considerations**

None.

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