HOUSE HEALTH COMMITTEE

VOTING MEETING

Tuesday, April 30, 2024

9:30 am

140 Main Capitol Building

Harrisburg, PA

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1. Call to Order

2. Attendance

3. **HB2208 PN2930 (Frankel)**
   An Act amending the act of April 17, 2016 (P.L.84, No.16), known as the Medical Marijuana Act, in medical marijuana controls, further providing for laboratory; and, in Medical Marijuana Advisory Board, further providing for advisory board.
   A04176 (Frankel) Provides for definitions and updated terminology throughout the bill. Provides for fees and timelines of regulations. Provides for research and development testing, audit testing, and clarifies inspections and corrective actions.

   SB721 PN1147 (Schwank)
   An Act establishing the Women, Infants and Children State Advisory Board.

   HR397 PN2949 (Oberlander)
   A Resolution recognizing the week of May 6 through 12, 2024, as "Women's Lung Health Week" in Pennsylvania.

4. Any other business that may come before the Committee

5. Adjournment

HOUSE OF REPRESENTATIVES
DEMOCRATIC COMMITTEE BILL ANALYSIS

Bill No:	HB2208 PN2930	**Prepared By:**	Dylan Lindberg (717) 705-1875,6240
Committee:	Health		
Sponsor:	Frankel, Dan	**Executive Director:**	Erika Fricke
Date:	1/8/2024		

A. Brief Concept

Improves oversight of Medical Marijuana testing laboratories.

C. Analysis of the Bill

House Bill 2208 amends the Medical Marijuana Act to improve oversight of approved testing laboratories.

Two Lab System

Removes the requirement that a grower/processor utilize a different lab for harvest testing and finished product testing (aka two-lab rule).

Standard Operating Procedures

Requirements

Laboratories are required to maintain standard operating procedures for validity of results testing, quality control, and sampling and testing procedures.

Labs must submit their standard operating procedures to the department at application for approval (or within 120 days if they are already approved before this act), renewal, and within 30 days of any substantial change.

DOH is required to inspect approved labs at least once a year to ensure they are adhering to their standard operating procedures. DOH can utilize an accreditation body to fulfill this requirement.

Penalties

If DOH finds the lab is not adhering to the approved standard operating procedure, the department must submit the findings to the lab. If the lab does not adhere to actions, it faces civil penalties as determined by the department.

The department maintains its ability to revoke or suspend a license if they find cause during the inspection.

Validity of Results Testing

Requirements

DOH is required, at least once a year, to ensure test results reported by labs are accurate using an established method. DOH can utilize an accredited proficiency test provider to fulfill this requirement. Any testing under this section must be separate from testing required as part of the accreditation process.

If a result is found invalid, the department is required to review the lab's standard operating procedures, conduct additional testing to understand any anomalies or unanticipated errors, and ensure the lab adheres to corrective actions.

Penalties

If a lab does not adhere to corrective actions or does not participate, the lab is subject to civil penalties as determined by the department. The department maintains its ability to suspend or revoke a license for failure to maintain proper standards of accuracy, dishonest reporting, or repeated errors in conducting the required testing as prescribed in Title 28 Chapter 1171a.24.

Trend Analysis

DOH can utilize the seed-to-sale tracking system to conduct trend analysis as part of the lab oversight.

Addition to the Board

This legislation adds a member with expertise in laboratory science to the Medical Marijuana Advisory Board.

Accreditation

DOH is required to determine the level of accreditation labs must meet. If the department requires additional accreditation than what the lab has already achieved, they must give reasonable time to gain the new accreditation.

State Lab

DOH may establish their own reference lab or enter into a memorandum of understanding with the Department of Agriculture to use an existing lab as a MMJ reference lab.

The reference lab may be used to create a reference library to develop testing methodologies and standard operating procedures, conduct compliance and proficiency testing, and remediate problems.

Regulations and Staff

DOH is required to issue regulations to oversee labs and to hire a sufficient staff with expertise in this subject matter to carry out the oversight.

Effective Date:

90 days.

G. Relevant Existing Laws

The Medical Marijuana Act of 2016 provides for approved testing labs.

Title 28 Chapter 1171a provides for regulation of approved testing labs.

E. Prior Session (Previous Bill Numbers & House/Senate Votes)

n/a

HOUSE OF REPRESENTATIVES
DEMOCRATIC COMMITTEE AMENDMENT REPORT

HB2208 - PN2930 (Frankel, Dan)

Improves oversight of Medical Marijuana testing laboratories.

A-04176 (Frankel, Dan)

Provides definitions and replaces terminology throughout the bill.

Provides for an initial application fee of $250 and an annual fee of $125.

Allows labs to conduct testing for research and development.

Allows the department to perform audit testing, such as requiring a third-party lab or another approved lab to retest a product and compare results.

Requires labs to submit proposed modifications to SOPs within 30 days.

Specifies the department can conduct announced and unannounced inspections and require corrective actions to be approved by the department. The department must approve or deny a corrective action plan within 30 days. If a plan is denied, the department must state the reasons and the lab can resubmit a revised corrective action plan.

Clarifies violations are subject to civil penalties and the department can revoke or suspend a license.

Specifies trend analysis may be used for: compliance, the functionality of testing standards, to release de-identified data, and to post testing data on the departments website.

Requires the department to submit temporary regulations within 6 months of the effective date and provide updated guidance along with the regs.

Ensures the additional member of the board is not affiliated with an approved lab.

LEGISLATIVE REFERENCE BUREAU

AMENDMENTS TO HOUSE BILL NO. 2208

Sponsor: Frankel #23

Printer's No. 2930

Amend Bill, page 1, lines 12 through 15, by striking out "in medical" in line 12 and all of lines 13 through 15 and inserting

in preliminary provisions, further providing for definitions; in medical marijuana controls, further providing for electronic tracking and for laboratory; and, in Medical Marijuana Advisory Board, further providing for advisory board.

Amend Bill, page 1, lines 18 through 24; pages 2 through 9, lines 1 through 30; page 10, lines 1 through 11; by striking out all of said lines on said pages and inserting

Section 1. Section 103 of the act of April 17, 2016 (P.L.84, No.16), known as the Medical Marijuana Act, is amended by adding definitions to read:

Section 103. Definitions.

The following words and phrases when used in this act shall have the meanings given to them in this section unless the context clearly indicates otherwise:

"Accreditation body." An organization which meets all of the following criteria:

(1) Certifies the competency, expertise and integrity of a laboratory and operates in conformance with the most recent version of International Organization for Standardization ISO/IEC 17011 adopted by the department through publication in the Pennsylvania Bulletin after review.

(2) Determines a laboratory's compliance with and conformance to the relevant standards established by the International Organization for Standardization, including ISO/IEC 17025.

(3) Is a signatory to the International Accreditation Cooperation Mutual Recognition Arrangement for Testing.

(4) Is not affiliated with a laboratory applicant for which it has or will issue a certificate of accreditation.

(5) Is not affiliated with, owned by, operated by or financed by a medical marijuana organization.

* * *

"Approved laboratory." An independent laboratory approved by the department, in accordance with section 704, to identify, collect, handle and conduct tests on medical marijuana samples from a grower/processor, as part of the quality assurance testing and on medical marijuana samples from the department.

* * *

"Cooperative laboratory." A public or private independent laboratory that identifies, collects, handles and conducts tests on medical marijuana samples on behalf of the department. The term does not include an approved laboratory.

* * *

"Independent laboratory." A laboratory that:

(1) Is not owned, operated or affiliated with a medical marijuana organization.

(2) Does not employ a principal, financial backer, operator or employee of a medical marijuana organization.

(3) Is recognized by an accreditation body to test and evaluate products to an established product safety standard free from commercial, financial or other pressures that may influence the results of the testing and evaluation process.

* * *

Section 2. Sections 701(c) and 704 of the act are amended to read:

Section 701. Electronic tracking.

* * *

(c) Access.--[Information] Except as provided in section 704(1), information maintained in electronic tracking systems under subsection (a) shall be confidential and not subject to the act of February 14, 2008 (P.L.6, No.3), known as the Right-to-Know Law.

* * *

Section 704. [Laboratory.] Laboratories.

[(a) General testing.--A grower/processor shall contract with one or more independent laboratories to test the medical marijuana produced by the grower/processor. The department shall approve a laboratory under this subsection and require that the laboratory report testing results in a manner as the department shall determine, including requiring a test at harvest and a test at final processing. The possession by a laboratory of medical marijuana shall be a lawful use.

(b) Stability testing.--A laboratory shall perform stability testing to ensure the medical marijuana product's potency and purity. A grower/processor shall retain a sample from each medical marijuana product derived from a harvest batch and request that a sample be identified and collected by a laboratory approved under subsection (a) from each process lot to perform stability testing under the following conditions:

(1) The medical marijuana product is still in inventory at a dispensary in this Commonwealth as determined by the seed-to-sale system.

(2) The stability testing is done at six-month intervals

for the duration of the expiration date period as listed on the medical marijuana product and once within six months of the expiration date.]

(a) Application and approval.--The following apply:

(1) An owner or operator of an independent laboratory may apply, in the form and manner prescribed by the department, for approval to test medical marijuana in accordance with the medical marijuana program.

(2) A nonrefundable initial application fee in the amount of $250 shall be paid by certified check or money order.

(3) The department may designate the laboratory as an approved laboratory under this subsection if the department determines that an independent laboratory is financially and professionally suitable to conduct testing required under this act. Nothing in this subsection shall be deemed to require the department to issue an approval to an independent laboratory.

(4) An approval issued by the department to an independent laboratory is valid:

(i) For two years from the date of issuance.

(ii) Only for the location specified in the application and approval notice.

(5) An annual registration fee of $125 shall be paid by each approved laboratory.

(6) Fees payable under this section shall be deposited into the fund.

(b) Compliance testing.--A grower/processor shall contract with approved laboratories as required by the department to test the medical marijuana produced by the grower/processor. The following shall apply:

(1) The department shall establish uniform medical marijuana testing standards and require that the approved laboratory report testing results in a manner as the department shall determine, including:

(i) Requiring a test at harvest and a final processing.

(ii) Retesting of failed test results.

(2) A grower/processor may engage a single approved laboratory to perform both the harvest lot and finished product testing, or a grower/processor may engage more than one approved laboratory to complete the harvest testing and final product testing.

(c) Stability testing.--An approved laboratory shall perform stability testing to ensure the medical marijuana product's potency and purity. A grower/processor shall retain a sample from each medical marijuana product derived from a harvest batch and request that a sample be identified and collected by an approved laboratory from each process lot to perform stability testing under the following conditions:

(1) The medical marijuana product is still in inventory

at a dispensary in this Commonwealth as determined by the seed-to-sale system.

(2) The stability testing is done at six-month intervals for the duration of the expiration date period as listed on the medical marijuana product and once within six months of the expiration date.

(3) The stability testing results shall be reported to the department.

(d) Research and development testing.--An approved laboratory may collect samples from a grower/processor for research and development if requested. Test results for research and development shall be reported to the department. Testing for research and development shall not be a replacement for compliance testing.

(e) Audit testing.--The department, in its sole discretion, may conduct audit testing of medical marijuana samples collected from a grower/processor facility and medical marijuana products found at a dispensary facility using a cooperative laboratory or approved laboratory to identify, collect, handle and test the medical marijuana on the department's behalf.

(f) Standard operating procedures.--The following shall apply:

(1) An approved laboratory shall maintain written standard operating procedures for each of the following:

(i) All sampling and testing procedures, including compliance testing, stability testing, research and development testing and quality assurance testing.

(ii) Quality control.

(iii) Any other operation as determined by the department.

(2) An independent laboratory applying to be an approved laboratory under subsection (a) shall submit the laboratory's standard operating procedures to the department as part of the independent laboratory's application.

(3) An approved laboratory shall, within 30 days of the effective date of this paragraph, submit its standard operating procedures to the department.

(4) An approved laboratory shall notify the department in writing of any modifications to its standard operating procedures no less than 30 days prior to the modification.

(g) Enforcement procedures.--The department shall conduct announced and unannounced inspections or investigations to determine an approved laboratory's compliance with its standard operating procedures and this act. The department may require the approved laboratory to submit and adhere to a corrective action plan following an inspection.

(h) Accreditation body.--The department may engage with an accreditation body to fulfill the requirements under this section.

(i) Quality assurance testing.--The following shall apply:

(1) The department shall coordinate testing for quality

assurance purposes related to the department and compliance by each approved laboratory no less than once a year beginning January 1 after the effective date of this paragraph.

(2) The quality assurance testing may be announced or unannounced.

(3) Any fees for conducting tests as part of the quality assurance testing shall be the responsibility of each approved laboratory. The fees associated with the cost of the medical marijuana samples submitted as part of the testing shall be waived.

(4) A test issued by an accreditation body as required solely to maintain accreditation shall not fulfill the requirements of this subsection.

(5) Nothing shall prohibit the department from coordinating quality assurance testing more than once within a calendar year.

(6) If the department determines that an approved laboratory's test results are unsatisfactory, the department shall initiate an investigation which may include the following:

(i) Additional testing, as needed, to understand the causes for the anomalies and unanticipated errors.

(ii) A review of the approved laboratory's standard operating procedures.

(iii) An inspection of the approved laboratory's facility, transportation vehicles, equipment, instruments, tools and physical or electronic materials.

(iv) Interviews with the personnel, staff, directors or other responsible parties of the approved laboratory.

(v) The approved laboratory submitting a corrective action plan to the department for review. The following shall apply:

(A) The department shall approve or deny a corrective action plan within 30 days of receipt of the plan.

(B) The department may, in its sole discretion, allow the approved laboratory to submit a revised corrective action plan based on the reasons for the denial of the plan.

(C) The department shall approve or deny a revised corrective action plan within 30 days.

(D) The plan shall be implemented within 30 days of the approval of the department.

(j) Lawful possession.--The possession of medical marijuana by an approved laboratory or cooperative laboratory to conduct compliance testing, stability testing, audit testing and quality assurance testing shall be lawful use.

(k) Violations.--In addition to any other requirements, the following shall be considered to be violations of this section and may result in penalties under section 1308(b):

(1) Failure to comply with the department as part of an inspection or investigation.

(2) Failure to submit a corrective action plan as required by the department.

(3) Failure to implement a corrective action plan within 30 days of approval by the department.

(4) Failure to participate in the required quality assurance testing.

(5) Failure to produce:

(i) Test results.

(ii) Satisfactory test results as part of the quality assurance testing.

(l) Sanctions.--The department may revoke or suspend the approval to test medical marijuana of an approved laboratory found to be in violation of this act or a regulation promulgated under this act, violation of an order issued under this act or a regulation promulgated under this act or for conduct or activity which would have disqualified the approved laboratory from receiving approval to test medical marijuana.

(m) Testing data and trend analysis.--The following shall apply:

(1) An owner or operator of each approved laboratory shall ensure that the laboratory enters all of the following testing results into the seed-to-sale tracking system:

(i) Compliance testing.

(ii) Stability testing.

(iii) Research and development testing.

(iv) Quality assurance testing.

(2) The department may utilize the test results entered by the approved laboratory for the following purposes:

(i) To conduct trend analysis for laboratory oversight and compliance.

(ii) To review functionality of testing standards and methods.

(iii) To ensure compliance of medical marijuana products.

(iv) To ensure compliance by grower/processors.

(v) To release de-identified data to academic clinical research centers for research purposes only.

(vi) To compile and aggregate testing information to post on the department's publicly accessible Internet website.

(vii) To aid the department in any aspect of its regulatory efforts, including administrative action.

(n) Accreditation.--The department shall determine the scope of the accreditation an approved laboratory must receive and maintain. The department shall provide an approved laboratory reasonable time to receive any additional accreditation beyond the laboratory's most recent certificate of accreditation.

(o) State testing laboratory.--The department may establish and maintain a State testing laboratory. A State testing

laboratory under this section shall be responsible for all of the following:

(1) Developing and maintaining a medical marijuana laboratory reference library that contains testing methodologies, including all of the following:

(i) Potency.

(ii) Homogeneity.

(iii) Detection of contaminants and the quantity of those contaminants.

(iv) Solvents.

(2) Establishing standard operating procedures for sample collection, preparation and analysis of medical marijuana by approved laboratories.

(3) Conducting proficiency testing of approved laboratories.

(4) Remediation of problems with approved laboratories.

(5) Conducting compliance testing and audit testing on medical marijuana samples analyzed by approved testing laboratories.

(p) Materials.--Approved laboratories shall provide materials to the State testing laboratory reference library.

(q) Powers and duties of department.--The department shall:

(1) Hire sufficient staff with the proper expertise to conduct the requirements of this section.

(2) Within 90 days of the effective date of this paragraph, promulgate temporary regulations in accordance with the following:

(i) In order to facilitate the prompt implementation of this section, the department shall have the authority to promulgate temporary regulations which shall expire not later than two years following the publication of the temporary regulations in the Pennsylvania Bulletin under subparagraph (iii) and on the department's publicly accessible Internet website.

(ii) The department may promulgate temporary regulations not subject to:

(A) Sections 201, 202, 203, 204 and 205 of the act of July 31, 1968 (P.L.769, No.240), referred to as the Commonwealth Documents Law.

(B) Section 204(b) of the act of October 15, 1980 (P.L.950, No.164), known as the Commonwealth Attorneys Act.

(C) The act of June 25, 1982 (P.L.633, No.181), known as the Regulatory Review Act.

(iii) Within 90 days of the effective date of this paragraph, the department shall transmit the temporary regulations to the Legislative Reference Bureau for publication in the next available issue of the Pennsylvania Bulletin.

(iv) The board's authority to adopt temporary regulations under subparagraph (i) shall expire two years

after publication of the temporary regulations. Regulations adopted after this period shall be promulgated as provided by law.

(3) Within 90 days of submitting the temporary regulations to the Legislative Reference Bureau, the department shall issue guidance to accompany the temporary regulations.

Section 3. Section 1201(b), (d), (e), (g), (h) and (i) of the act is amended and subsection (a) is amended by adding a paragraph to read:

Section 1201. Advisory board.

(a) Establishment.--The Medical Marijuana Advisory Board is established within the department. The advisory board shall consist of the following members:

* * *

(10) One member appointed by the Governor, who shall have experience and expertise in laboratory science and shall not be affiliated with, contracted with, owned by, operated by or financed by an approved laboratory or medical marijuana organization.

(b) Terms.--Except as provided under subsection (g), the members appointed under subsection (a)(8) [and], (9) and (10) shall serve a term of four years or until a successor has been appointed and qualified, but no longer than six months beyond the four-year period.

* * *

(d) Voting; quorum.--The members under subsection (a)(1), (2), (3), (4), (5), (6) and (7) shall serve ex officio and all members shall have voting rights. A majority of the members shall constitute a quorum for the purpose of organizing the advisory board, conducting its business and fulfilling its duties. A vote of the majority of the members present shall be sufficient for all actions of the advisory board unless the bylaws require a greater number.

(e) Attendance.--A member of the advisory board appointed under subsection (a)(8) [or], (9) or (10) who fails to attend three consecutive meetings shall forfeit his seat unless the secretary, upon written request from the member, finds that the member should be excused from a meeting for good cause. A member who cannot be physically present may attend meetings via electronic means, including video conference.

* * *

(g) Initial terms.--The initial terms of members appointed under subsection (a)(8) [and], (9) and (10) shall be for terms of one, two, three or four years, the particular term of each member to be designated by the secretary at the time of appointment. All other members shall serve for a term of four years.

(h) Vacancy.--In the event that any member appointed under subsection (a)(8) [or], (9) or (10) shall die or resign or otherwise become disqualified during the member's term of

office, a successor shall be appointed in the same way and with the same qualifications as set forth in this section and shall hold office for the unexpired term. An appointed member of the advisory board shall be eligible for reappointment.

(i) Expenses.--A member appointed under subsection (a)(8) [or], (9) or (10) shall receive the amount of reasonable travel, hotel and other necessary expenses incurred in the performance of the duties of the member in accordance with Commonwealth regulations, but shall receive no other compensation for the member's service on the board.

* * *

Section 4. This act shall take effect in 90 days.

PRINTER'S NO. 2930

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 2208 Session of 2024

INTRODUCED BY FRANKEL, MADDEN, HILL-EVANS, HADDOCK, PARKER, SANCHEZ, KHAN, MAYES, CONKLIN AND OTTEN, APRIL 15, 2024

REFERRED TO COMMITTEE ON HEALTH, APRIL 15, 2024

AN ACT

Amending the act of April 17, 2016 (P.L.84, No.16), entitled "An act establishing a medical marijuana program; providing for patient and caregiver certification and for medical marijuana organization registration; imposing duties on the Department of Health; providing for a tax on medical marijuana organization gross receipts; establishing the Medical Marijuana Program Fund; establishing the Medical Marijuana Advisory Board; establishing a medical marijuana research program; imposing duties on the Department of Corrections, the Department of Education and the Department of Human Services; and providing for academic clinical research centers and for penalties and enforcement," in medical marijuana controls, further providing for laboratory; and, in Medical Marijuana Advisory Board, further providing for advisory board.

The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

Section 1. Section 704 of the act of April 17, 2016 (P.L.84, No.16), known as the Medical Marijuana Act, is amended to read:

Section 704. Laboratory.

(a) General testing.--A grower/processor shall contract with one or more independent laboratories to test the medical marijuana produced by the grower/processor. The department shall approve a laboratory under this subsection and require that the

laboratory report testing results in a manner as the department shall determine, including requiring a test at harvest and a test at final processing. A grower/processor may engage a single approved laboratory to perform both the harvest lot and finished product testing or a grower/processor may engage more than one approved laboratory to complete the harvest testing and final product testing. The possession by a laboratory of medical marijuana shall be a lawful use.

(b) Stability testing.--A laboratory shall perform stability testing to ensure the medical marijuana product's potency and purity. A grower/processor shall retain a sample from each medical marijuana product derived from a harvest batch and request that a sample be identified and collected by a laboratory approved under subsection (a) from each process lot to perform stability testing under the following conditions:

(1) The medical marijuana product is still in inventory at a dispensary in this Commonwealth as determined by the seed-to-sale system.

(2) The stability testing is done at six-month intervals for the duration of the expiration date period as listed on the medical marijuana product and once within six months of the expiration date.

(c) Standard operating procedures.--

(1) An approved testing laboratory shall maintain written standard operating procedures for each of the following:

(i) Confirmation of the validity of results of testing.

(ii) Quality control.

(iii) All sampling and testing procedures, including

required safety tests.

(iv) Any other operation as determined by the department.

(2) A laboratory applying for approval as a testing laboratory shall submit its standard operating procedures to the department as part of the laboratory's application.

(3) An approved testing laboratory shall submit its standard operating procedures to the department at the following time periods:

(i) for laboratories approved prior to the effective date of this paragraph, within 30 days of the effective date of this paragraph;

(ii) at each renewal of approval; and

(iii) within 30 days of a substantial change to the standard operating procedures.

(4) The department shall enter and conduct a reasonable inspection of an approved testing laboratory to ensure adherence to the standard operating procedures at least annually. The following shall apply:

(i) If the inspection results in the department identifying gaps in the standard operating procedure, the department shall submit its findings to the approved testing laboratory.

(ii) Failure to adhere to corrective actions within a reasonable time shall constitute a violation of this act and may result in penalties under section 1308(b) or (c). Nothing shall limit the department's ability to suspend or revoke an approval issued to a laboratory as prescribed in 28 Pa. Code Ch. 1171a (relating to laboratories).

(5) The department may engage with an independent accreditation body to fulfill the requirements under this subsection.

(d) Validity of results testing.--

(1) The department, in coordination with the Bureau of Laboratories, shall ensure that approved testing laboratories' results are valid no less than once a year beginning on January 1 after the effective date of this paragraph. The following apply:

(i) The department shall require approved testing laboratories to participate in an established method used to determine validity of results.

(ii) The department may engage an accredited proficiency testing provider to fulfill subparagraph (i).

(iii) Nothing shall prohibit the department from ensuring validity of results more than once within a calendar year.

(iv) A test issued by an accredited proficiency testing provider as required solely to maintain accreditation shall not fulfill the requirements of this subparagraph.

(2) If the results from an approved testing laboratory are found to be invalid, the following actions shall be taken by the department:

(i) A review of the approved testing laboratory's standard operating procedures.

(ii) Additional testing, as needed, to understand the cause for the anomalies and unanticipated errors.

(iii) The department may enter the approved testing laboratory for further investigation and shall issue its

findings. The department may engage with an independent accreditation body to fulfill the requirements under this subparagraph.

(3) Failure to participate or failure to adhere to corrective actions shall constitute a violation of this act and may result in penalties under section 1308(b) or (c). Nothing shall limit the department's ability to suspend or revoke an approval issued to a laboratory as prescribed in 28 Pa. Code Ch. 1171a.

(e) Trend analysis.--The department may utilize the seed-to-sale tracking system to conduct trend analysis for laboratory oversight.

(f) Accreditation.--The department shall determine the scope of accreditation an approved laboratory must receive and maintain. The department shall provide an approved laboratory reasonable time to receive any additional accreditation beyond the laboratory's most recent certificate of accreditation.

(g) State testing laboratory.--The department may establish and maintain a State testing laboratory. A State testing laboratory under this subsection shall be responsible for:

(1) Developing and maintaining a medical marijuana laboratory reference library that contains testing methodologies in the areas of:

(i) Potency.

(ii) Homogeneity.

(iii) Detection of contaminants and the quantity of those contaminants.

(iv) Solvents.

(2) Establishing standard operating procedures for sample collection, preparation and analysis of medical

marijuana by approved testing laboratories.

(3) Conducting proficiency testing of approved testing laboratories.

(4) Remediation of problems with approved testing laboratories.

(5) Conducting compliance testing on medical marijuana samples analyzed by approved testing laboratories.

(h) Materials.--Approved testing laboratories shall provide materials to the State testing laboratory reference library.

(i) Memorandum of understanding.--The department may enter into a memorandum of understanding with the Department of Agriculture to test medical marijuana at an existing State-run laboratory if doing so would be a more economic and efficient alternative to establishing a State testing laboratory under subsection (g).

(j) Powers and duties of department.--The department shall:

(1) Hire sufficient staff with the proper expertise to conduct the requirements of this act.

(2) Promulgate regulations to facilitate the implementation of this act and oversight of laboratories.

Section 2. Section 1201 of the act is amended to read:

Section 1201. Advisory board.

(a) Establishment.--The Medical Marijuana Advisory Board is established within the department. The advisory board shall consist of the following members:

(1) The secretary or a designee.

(2) The Commissioner of the Pennsylvania State Police or a designee.

(3) The chairman of the State Board of Pharmacy or a designee.

(4) The Commissioner of Professional and Occupational Affairs or a designee.

(5) The Physician General or a designee.

(6) The president of the Pennsylvania Chiefs of Police Association or a designee.

(7) The president of the Pennsylvania District Attorneys Association or a designee.

(8) One member to be appointed by each of the following, which members shall be knowledgeable and experienced in issues relating to care and treatment of individuals with a serious medical condition, geriatric or pediatric medicine or clinical research:

(i) The Governor.

(ii) The President pro tempore of the Senate.

(iii) The Majority Leader of the Senate.

(iv) The Minority Leader of the Senate.

(v) The Speaker of the House of Representatives.

(vi) The Majority Leader of the House of Representatives.

(vii) The Minority Leader of the House of Representatives.

(9) One member appointed by the Governor, who shall be a patient, a family or household member of a patient or a patient advocate.

(10) One member appointed by the Governor, who shall have experience and expertise in laboratory science.

(b) Terms.--Except as provided under subsection (g), the members appointed under subsection (a)(8) [and], (9) and (10) shall serve a term of four years or until a successor has been appointed and qualified, but no longer than six months beyond

the four-year period.

(c) Chair.--The secretary, or a designee, shall serve as chair of the advisory board.

(d) Voting; quorum.--The members under subsection (a)(1), (2), (3), (4), (5), (6) and (7) shall serve ex officio and shall have voting rights. A majority of the members shall constitute a quorum for the purpose of organizing the advisory board, conducting its business and fulfilling its duties. A vote of the majority of the members present shall be sufficient for all actions of the advisory board unless the bylaws require a greater number.

(e) Attendance.--A member of the advisory board appointed under subsection (a)(8) [or], (9) or (10) who fails to attend three consecutive meetings shall forfeit his seat unless the secretary, upon written request from the member, finds that the member should be excused from a meeting for good cause. A member who cannot be physically present may attend meetings via electronic means, including video conference.

(f) Governance.--The advisory board shall have the power to prescribe, amend and repeal bylaws, rules and regulations governing the manner in which the business of the advisory board is conducted and the manner in which the duties granted to it are fulfilled. The advisory board may delegate supervision of the administration of advisory board activities to an administrative secretary and other employees of the department as the secretary shall appoint.

(g) Initial terms.--The initial terms of members appointed under subsection (a)(8) [and], (9) and (10) shall be for terms of one, two, three or four years, the particular term of each member to be designated by the secretary at the time of

appointment. All other members shall serve for a term of four years.

(h) Vacancy.--In the event that any member appointed under subsection (a)(8) [or], (9) or (10) shall die or resign or otherwise become disqualified during the member's term of office, a successor shall be appointed in the same way and with the same qualifications as set forth in this section and shall hold office for the unexpired term. An appointed member of the advisory board shall be eligible for reappointment.

(i) Expenses.--A member appointed under subsection (a)(8) [or], (9) or (10) shall receive the amount of reasonable travel, hotel and other necessary expenses incurred in the performance of the duties of the member in accordance with Commonwealth regulations, but shall receive no other compensation for the member's service on the board.

(j) Duties.--The advisory board shall have the following duties:

(1) To examine and analyze the statutory and regulatory law relating to medical marijuana within this Commonwealth.

(2) To examine and analyze the law and events in other states and the nation with respect to medical marijuana.

(3) To accept and review written comments from individuals and organizations about medical marijuana.

(4) To issue written reports to the Governor, the Senate and the House of Representatives.

(5) The written reports under paragraph (4) shall include recommendations and findings as to the following:

(i) Whether to change the types of medical professionals who can issue certifications to patients.

(ii) Whether to change, add or reduce the types of

medical conditions which qualify as serious medical conditions under this act.

(iii) Whether to change the form of medical marijuana permitted under this act.

(v) How to ensure affordable patient access to medical marijuana.

(6) The written reports under this section shall be adopted at a public meeting. The reports shall be a public record under the act of February 14, 2008 (P.L.6, No.3), known as the Right-to-Know Law.

Section 3. This act shall take effect in 90 days.

HOUSE OF REPRESENTATIVES
DEMOCRATIC COMMITTEE BILL ANALYSIS

Bill No:	SB0721 PN1147	**Prepared By:**	Erika Fricke (412) 422-1774
Committee:	Health		
Sponsor:	Schwank, Judy	**Executive Director:**	Erika Fricke
Date:	4/17/2024		

A. Brief Concept

Creates the Women, Infants and Children (WIC) State Advisory Board.

C. Analysis of the Bill

Recognizing the urgent need to reverse the decline in participation in the Women, Infant and Children federal nutrition program, Senate Bill 721 creates the Women, Infant and Children (WIC) state advisory board to advise the Department of Health (DOH) on strengthening the program. Details of the board are as follows:

Departmental advisory role:

The WIC Advisory Board, in addition to other topics related to the program, shall advise the department on:

- Program enhancements to increase the number of people enrolled in and using their WIC benefits and improve the connection between WIC benefits and other health and social and education benefits.
- Outreach initiatives to reach underserved parents who are eligible for the program, but not utilizing it.
- Technology to enhance program operations. This must include technology for reloading WIC cards remotely, telehealth for program participants, service coordination, fraud prevention and identity protection,
- Increasing the awareness and support around breastfeeding support services
- Increasing the number of stores that accept WIC in the Commonwealth.

Other duties of the board include:

- Reviewing the data on the number of eligible Pennsylvanians enrolled in WIC, and the number actually utilizing the benefit.
- Become knowledgeable about the WIC state plan and policy manual.
- Advise on best practices from other states.
- Consult with those other agencies or groups that work with DOH to fulfill the goals of the WIC program.

Board make-up and meetings:

The Secretary of Health will appoint 15 voting board members, each serving terms of three years. Members can serve only 6 months after their term expires and vacancies must be filled within 45 days.

The board members must include:

- (2) a pediatrician and another medical professional with expertise related to maternal health in underserved populations.
- (2) two advocates focused on food insecurity
- (2) two child or maternal health advocates
- (3) three WIC participants, each from a different region of the Commonwealth

- (2) two representatives from stores accepting WIC, ideally from an urban area and a rural area
- (3) three representatives from WIC agencies, each from a different region.
- (1) a breastfeeding expert

The Secretary of Health and the Director of the WIC program or designees, as well as two subject matter experts identified by DOH, shall be non-voting members of the board.

The Secretary or designee is Chair of the Board, but the vice-chair, selected by voting board members, will set the agenda.

Ten voting members are needed to achieve a quorum.

The board must meet monthly for the first six months of existence, and after that must meet quarterly.

Board members will not receive compensation but can be reimbursed for travel-related expenses.

If a conflict of interest occurs, a board member can't vote on that issue.

Effective Date:

60 days

G. Relevant Existing Laws

The Women, Infants and Children Nutrition Act of 1986 allowed state funds, administered by the Department of Health, to be added to the federal funds provided to the WIC program, in order to increase program participation. The administrative funds from the state must be used in part for an outreach program.

E. Prior Session (Previous Bill Numbers & House/Senate Votes)

N/A

PRIOR PRINTER'S NO. 808 PRINTER'S NO. 1147

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 721 Session of 2023

INTRODUCED BY SCHWANK, BROOKS, COSTA, AUMENT, HUGHES, KEARNEY, TARTAGLIONE, FONTANA, KANE, HAYWOOD, COMITTA, LAUGHLIN, CAPPELLETTI, BAKER, J. WARD, COLLETT, BREWSTER AND MUTH, JUNE 2, 2023

SENATOR BROOKS, HEALTH AND HUMAN SERVICES, AS AMENDED, OCTOBER 3, 2023

AN ACT

Establishing the Women, Infants and Children State Advisory Board.

The General Assembly finds and declares as follows:

(1) The Commonwealth intends to maximize the Federal funding available for the Pennsylvania Special Supplemental Nutrition Program for Women, Infants and Children by maximizing participation and enrollment in the program to support healthier pregnancies, maternal outcomes, births and birth outcomes, improving health in pregnant women, postpartum women, children and infants in this Commonwealth and coordinating with other programs that support women, infants and children.

(2) Immediate action is needed to halt the steady decline in WIC participation and enrollment and the resultant decrease in Federal funding and nutritional assistance for Pennsylvania's lower-income women, infants and children, by

increasing the use of technology and administrative organization and by greater transparency in operation and use of Federal funding.

(3) It is necessary to steadily increase participation and enrollment in programs that support women, infants and children, eliminate enrollment barriers, coordinate and connect with related programs and maximize technology to improve maternal and infant birth outcomes and the health of children eligible for participation in the program.

The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

Section 1. Short title.

This act shall be known and may be cited as the WIC State Advisory Board Act.

Section 2. Definitions.

The following words and phrases when used in this act shall have the meanings given to them in this section unless the context clearly indicates otherwise:

"Board." The Women, Infants and Children State Advisory Board established in section 3.

"Department." The Department of Health of the Commonwealth.

"Enrollment." The number of active WIC participants who are eligible to receive food benefits.

"Food instrument." A voucher, check, electronic benefits transfer (EBT) card, coupon or other document that is used by a participant to obtain supplemental foods.

"Participation." The number of individuals who have received WIC food benefits on a food instrument.

"WIC." The Pennsylvania Special Supplemental Nutrition Program for Women, Infants and Children.

Section 3. Establishment.

The Women, Infants and Children State Advisory Board is established in the department.

Section 4. Topics.

(a) Advising.--The board shall advise the department on the following topics:

(1) The operation of the programs, to:

(i) Increase enrollment and utilization of the programs.

(ii) Improve the quality of services to support connections between WIC and comprehensive services to address the social, health, educational and other needs of pregnant individuals, mothers, infants and children.

(2) Outreach initiatives to increase participation and enrollment in the program, including any underserved populations.

(3) Technology improvements or enhancements for program operations, efficacy and efficiency, including:

(i) Incorporating the use of technology and modernization tools that remove barriers for program participants, including the potential to load benefits remotely and purchase WIC benefits online.

(ii) Developing and maximizing the use of telehealth technology for the increased convenience of program participants.

(iii) Coordinating and collating services to improve efficiency and effectiveness of those services.

(iv) Establishing security measures to protect WIC participants' personal information and prevent fraudulent activity in the use of WIC benefits.

(4) INCREASING AWARENESS AND SUPPORT OF WIC BREASTFEEDING SERVICES FOR WIC PARTICIPANTS. <--

(5) INCREASING ACCESS TO WIC-AUTHORIZED STORES FOR WIC PARTICIPANTS.

(b) Other topics.--The board may advise the department on other topics bearing on the program.

Section 5. Duties.

The board shall have the following duties:

(1) Review current aggregate data on WIC eligibility and participation and enrollment at the State level from the department.

(2) Become familiar with the WIC Policy Manual and WIC State plan.

(3) Advise on best practices that are used in other states.

(4) Consult with organizations and other agencies that work with WIC participants in fulfilling duties under this act.

(5) Advise the department on the topics enumerated in section 4.

Section 6. Membership and meetings.

(a) Membership.--The board shall consist of the following members:

(1) The following individuals shall be ex officio members of the board:

(i) The Secretary of Health or a designee who shall be an employee of the department.

(ii) The Director of WIC or a designee who shall be an employee of the department with specialized knowledge of WIC.

(iii) Two subject matter experts, as determined by the Secretary of Health or a designee.

(2) Remaining members of the board shall include the number of representatives from each of the following categories as indicated, for a total of ~~14~~ 15 remaining members: <--

(i) Two medical professionals with expertise in serving women and children from underserved populations, ONE OF WHOM IS A PEDIATRIC PHYSICIAN. <--

(ii) Two advocates focused on addressing food insecurity.

(iii) Two child or maternal advocates.

(iv) Three WIC participants, each representing a different region of this Commonwealth.

(v) One representative from two different WIC-authorized stores or representatives or designees of WIC-authorized stores, for a total of two, with preference being for one representative from a store located in an urban area and one representative from a store located in a rural area, as determined by the Secretary of Health.

(vi) One representative from each of three different WIC local agencies, for a total of three representatives, each representing a different region of this Commonwealth.

(VII) ONE INDIVIDUAL WHO IS AN EXPERT ON BREASTFEEDING. <--

(b) Chair.--The Secretary of Health or the Secretary of Health's designee shall serve as chair of the board. The following apply:

(1) At the first board meeting, board members shall

self-select a vice chair and secretary.

(2) The vice chair shall assist in the agenda creation and meeting organization.

(3) The Secretary of Health shall select a board member to fill the vice chair's obligations in the vice chair's absence.

(4) The secretary of the board shall capture and distribute meeting minutes.

(c) Quorum.--Ten board members under subsection (a)(2) shall constitute a quorum.

(d) Voting.--Only board members under subsection (a)(2) shall have voting rights. The vote of the majority of the quorum of board members shall prevail.

(e) Appointment and terms.--

(1) The Secretary of Health shall appoint members of the board under subsection (a)(2) for staggered three-year terms, as determined by the Secretary of Health, for a term not to exceed three consecutive years.

(2) A board member whose term has expired shall continue as a member of the board until a replacement has been appointed. The member shall have full voting rights and count for purposes of establishing a quorum. In no event shall a member continue to serve on the board beyond six months from the date of term expiration.

(3) Ex officio members or their designees shall serve so long as the official continues to serve in an official position.

(f) Vacancies.--Vacancies in the membership of the board shall be filled within 45 days of the vacancy in the same manner as provided for the original appointments.

(g) Staffing.--The board shall be staffed in collaboration with individuals from the department.

(h) Subcommittees.--The board may create subcommittees of the board members to carry out specific tasks or research. Subcommittees are to be created on an ad hoc basis and are not to replace or interfere with the efforts of the board.

(i) Meetings.--The board shall meet in accordance with the following:

(1) Members shall meet no fewer than four times per year, on a quarterly basis, except that the board shall meet every month for the first six months after the establishment of the board and, thereafter for the remainder of the first year, the board shall meet on a quarterly basis.

(2) The agenda for each meeting and all meeting minutes shall be posted to the department's publicly accessible Internet website.

(3) Meetings must comply with the following:

(i) The act of February 14, 2008 (P.L.6, No.3), known as the Right-to-Know Law.

(ii) 65 Pa.C.S. Ch. 7 (relating to open meetings).

Section 7. Compensation and reimbursement.

Board members shall not be entitled to compensation for their services as board members. Board members shall be entitled to reimbursement in accordance with Commonwealth guidelines for reasonable travel, lodging and other necessary expenses incurred in the performance of their duties as board members.

Section 8. Conflict of interest.

Board members shall recuse themselves from discussions and actions if a conflict of interest may exist.

Section 9. Effective date.

This act shall take effect in 60 days.

HOUSE OF REPRESENTATIVES
DEMOCRATIC COMMITTEE BILL ANALYSIS

Bill No:	HR0397 PN2949	**Prepared By:**	Patrick O'Rourke (717) 787-4296,6711
Committee:	Health		
Sponsor:	Oberlander, Donna	**Executive Director:**	Erika Fricke
Date:	4/29/2024		

A. Brief Concept

House Resolution 397 recognizes the week of May 6-12, 2024 as "Women's Lung Health Week."

C. Analysis of the Bill

Lung cancer is a leading cause of cancer deaths in the United States:

- Accounts for 1 in 5 of all cancer deaths.
- More individuals die of lung cancer than colon, breast, and prostate cancers combined.
- Both small cell and non-small cell lung cancers combine for the second most common cancer in women in the United States.
- The lung cancer death rate in women has almost doubled over the past 40 years.
- Per American Cancer Society, the estimate for diagnosis of new lung cancer in U.S. women is approximately 118,270 cases resulting in 59,280 deaths.
- About 1 in 17 women will develop lung cancer in their lifetime, including for both smokers and nonsmokers.
- White women are 16% more likely to develop lung cancer than Black women.
- Black women are less likely to be diagnosed with lung cancer at an early stage when survival rates are the highest.
- In 2024, the American Lung Association celebrates 120 years of impact and leads the national initiative to defeat lung cancer.
- Public support for research funding results in new treatments and better methods of early detection.
- Lung cancer screening saves lives and advocacy and increased awareness will result in more high-risk individuals getting screened.

Effective Date:

N/A.

G. Relevant Existing Laws

N/A.

E. Prior Session (Previous Bill Numbers & House/Senate Votes)

N/A.

PRINTER'S NO. 2949

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE RESOLUTION

No. 397 Session of 2024

INTRODUCED BY OBERLANDER, ROWE, McNEILL, HEFFLEY, PICKETT, KINSEY, MALAGARI, SCHLOSSBERG, CURRY, CAUSER, CERRATO, NEILSON AND CONKLIN, APRIL 16, 2024

REFERRED TO COMMITTEE ON HEALTH, APRIL 16, 2024

A RESOLUTION

Recognizing the week of May 6 through 12, 2024, as "Women's Lung Health Week" in Pennsylvania.

WHEREAS, Lung cancer is by far the leading cause of cancer deaths in the United States, accounting for about one in five of all cancer deaths; and

WHEREAS, Each year, more people die of lung cancer than of colon, breast and prostate cancers combined; and

WHEREAS, Lung cancer, both small cell and non-small cell, is the second most common cancer in women in the United States; and

WHEREAS, The lung cancer death rate in women has almost doubled over the past 40 years; and

WHEREAS, For 2024, the American Cancer Society's estimate for the diagnosis of new lung cancer in women in the United States is approximately 118,270, with lung cancer resulting in 59,280 deaths of women in the nation; and

WHEREAS, The chance that a woman will develop lung cancer in her lifetime is about 1 in 17, including both smokers and

nonsmokers; and

WHEREAS, White women are about 16% more likely to develop lung cancer than Black women; and

WHEREAS, Black women are less likely to be diagnosed with lung cancer at an early stage when survival rates are the highest; and

WHEREAS, While women have lower rates of lung cancer than men, the lung cancer rate among women has been dropping only during the past decade; and

WHEREAS, The American Lung Association celebrates 120 years of impact in 2024 and leads the national initiative to defeat lung cancer; and

WHEREAS, Public support for research funding will result in new treatments and better methods of early detection; and

WHEREAS, Lung cancer screening saves lives and advocacy and increased awareness will result in more high-risk individuals getting screened; therefore be it

RESOLVED, That the House of Representatives recognize the week of May 6 through 12, 2024, as "Women's Lung Health Week" in Pennsylvania; and be it further

RESOLVED, That the House of Representatives encourage all residents of this Commonwealth to learn more about the detection and treatment of lung cancer.