

2025 Medical Cannabis Policy Advisory Board recommendations

To: Medical Cannabis Policy Advisory Board

From: Desiree Hennessy

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This document compiles every recommendation the Medical Cannabis Policy Advisory Board made to lawmakers after the end of the 2025 General Session on March 7, 2025.

11/18/25 meeting

1. Expanding qualifying conditions.

- a. The board voted for recommending that:
 - i. Lawmakers remove the requirements that minors, adults 18-20, and adults 21+ without a qualifying condition go through the Compassionate Use Board process to gain approval to access medical cannabis as required under Utah Code section [26B-1-421](#), and replace the current Utah Code section [26B-4-203](#)(2)(q) with the language below:

(q) any other medical condition not otherwise specified in this section for which the potential benefits of using medical cannabis would, in the recommending medical provider's professional judgment and opinion, likely outweigh the potential health risks for the patient.
- b. The board wishes to clarify the intent of the proposed language. The board supports aligning medical cannabis with the prescription of other controlled substances by allowing Utah-licensed recommending medical providers the full and complete ability to exercise professional judgment to recommend medical cannabis for medical conditions not explicitly enumerated in [26B-4-203](#). Additionally, the board supports allowing recommending medical providers to recommend medical cannabis, after thorough clinical evaluation consistent with the requirements of [26B-4-213](#)(4)(c), to minors, patients 18-20 years old, and individuals diagnosed with a medical condition not listed in [26B-4-203](#) without approval from the Compassionate Use Board.

10/21/25 meeting

1. Medical cannabis education.

- a. The board voted for recommending the following statutory changes:
 - i. To [UCA 4-41\(a\)-104](#):
 - (4) The department may only use money in the fund to:

- (a) fund the department's implementation of this chapter; and
- (b) educate medical cannabis production establishment licensees, medical cannabis pharmacy licensees, medical cannabis courier licensees, and the public regarding topics related to cannabis as determined by the department.

- ii. To [UCA 4-41a-110](#):

- (3) consult with the advisory board regarding:

- (a) fees set by the department that pertain to the medical cannabis program; and
 - (b) the education described in Section 4-41a-104; and

2. Medical cannabis THC potency.

- a. The board voted **for** recommending that Utah's existing purchase limits – 113 grams of usable cannabis flower and 20 grams of THC in composite form per 28-day period – remain unchanged and not be lowered unless credible, science-based evidence shows a need to protect patient safety or public health. The board opposes any additional limitations on cannabinoid potency or form factors without evidence-based justification. Any concerns regarding dosage should continue to be managed through the existing limits.

9/16/25 meeting

1. Patient purchasing limit expansion by recommending medical provider.

- a. The board voted **for** recommending establishing a process allowing recommending medical providers (RMPs) to authorize patient purchasing limit increases, provided:
 - i. The RMP submits an attestation to the Department of Health and Human Services acknowledging the medical necessity of the increase.
 - ii. Adjustments may apply to flower (in 50 gram increments) and/or composite products (in 10 gram increments) and may be repeated as often as clinically appropriate.
 - iii. Increases expire at card renewal unless refiled and may be lowered at any time by the RMP.
 - iv. Following any increase, the patient must meet with a pharmacy medical provider (PMP) for review and care coordination.

8/19/25 meeting

1. Combustion of medical cannabis.

- a. The board voted **for** recommending that:
 - i. The Legislature remove the potential for a controlled substance charge for a medical cannabis patient who combusts cannabis.

5/20/25 meeting

1. Private sector job protections for medical cannabis patients.

a. The board voted **for** recommending that:

i. The legislature adopt the language proposed in [the memorandum from Desiree Hennessy](#) regarding private sector anti-discrimination of medical cannabis cardholders. It will replace [UCA 34A-5-115\(6\)](#) with the amended subsection (6) as set forth in the memorandum and below.

(6) ~~Nothing in this section requires a private employer to accommodate the use of medical cannabis or affects the ability of a private employer to have policies restricting the use of medical cannabis by applicants or employees.~~

(a) Except as set forth in this Subsection 6, no private employer may discharge, threaten, refuse to hire or otherwise discriminate or retaliate against an employee regarding an employee's compensation, terms, conditions, location or privileges solely on the basis of such employee's status as an individual who is certified to use medical cannabis.

(b) A private employer may refuse to hire, otherwise discriminate against an applicant, or take an adverse employment action against an employee for:

(i) failing a drug test for the use of medical cannabis obtained and used in accordance with state law, only if the employer would take the same action for the use of a prescribed controlled substance used in accordance with state law; or

(ii) the sole reason that the individual is a medical cannabis cardholder, only if the employer would take the same action against an individual for the sole reason of having a prescription for a controlled substance.

(d) A private employer that would refuse to hire or otherwise discriminate against an applicant or take an adverse employment action under Subsection (6)(a),(b), or (c) shall have a written policy that:

(i) is comprehensive in nature regarding when the employer may refuse to hire or otherwise discriminate against an applicant or when an employee would be disciplined; and

(ii) does not treat medical cannabis any differently than another controlled substance.

(e) Subsection (6) does not apply:

(i) where the application of Subsection (6)(a),(b), or (c) would jeopardize federal funding, a federal security clearance, or any other federal background determination required for the employee's position; or

(ii) if the employee's position is dependent on a license or certification subject to federal regulations.

(f) Before refusing to hire or otherwise discriminating against an applicant or taking an adverse employment action against an employee solely because the employee is a medical cannabis cardholder or holds a prescription for another controlled substance, a private

employer shall:

consult with legal counsel, if one is employed or contracted with to provide services to the employer.

(g) An employee described in this subsection:

- (i) may file a complaint in accordance with Section 34A-5-107 with the commission; and
- (ii) is entitled to any remedies under this chapter for an employer's violation of Subsection (6).

4/15/25 meeting

- 1. Removal of requirement for caregiver/guardian background check and card application fee.**
 - a. The board voted **for** recommending that:
 - i. The background check for medical cannabis caregivers and guardians required by [UCA 26B-4-215](#) be repealed;
 - ii. The background check be replaced with a self-attestation that, under penalty of perjury, an applicant has not been convicted of a disqualifying felony or misdemeanor as enumerated in [UCA 26B-4-246](#)(2)(a) and (b), unless the individual completes any imposed sentence two or more years before the day on which the individual submits an application for a caregiver or guardian card; and
 - iii. The application fees for caregivers and guardians, required in [UCA 26B-4-214](#)(4)(c) and [26B-4-213](#)(2)(b)(i)(E) respectively, be repealed.
- 2. Removal of requirement for a medical cannabis cardholder to publicly transport medical cannabis in an opaque bag or box.**
 - a. The board voted **for** recommending removal of the requirement that a medical cannabis cardholder, when transporting medical cannabis in public, do so within an opaque bag or box that contains the original medical cannabis container/packaging, as required by [UCA 4-41a-1102](#)(3)(b).