WHEREAS, it is beyond dispute that patients suffering from debilitating medical conditions deserve to live in dignity with as little suffering as possible; and
WHEREAS, medical decisions must be based on science and health, not ideology or social policy; and
WHEREAS, scientific studies demonstrate that the medical use of marijuana has proven to be an effective treatment for patients suffering from painful, debilitating, and often chronic medical conditions; and
WHEREAS, New Jersey amended its state law to allow for the authorized medical use of marijuana with the passage of the New Jersey Compassionate Use Medical Marijuana Act in 2010; and
WHEREAS, 29 states have recently allowed the use of marijuana for medical purposes; and
WHEREAS, even a Republican-controlled Congress has repeatedly renewed the Rohrabacher-Farr Amendment, prohibiting the U.S. Department of Justice from using funds to interfere with state medical marijuana laws; and
WHEREAS, implementation of the New Jersey Compassionate Use Medical Marijuana Act was a lengthy process marked by significant delays, resulting in far fewer patients being served by the program than anticipated when the law was enacted; and
WHEREAS, there are currently five medical marijuana alternative treatment centers (ATCs) in operation in New Jersey; and
WHEREAS, only one additional ATC has been able to obtain a permit and is scheduled to begin operations in the foreseeable future; and
WHEREAS, of New Jersey’s nine million residents, only approximately 15,000 are able to participate in the State’s medical marijuana program; and

WHEREAS, in contrast, the medical marijuana program in Michigan, a state with a similar population to New Jersey, currently serves over 218,000 patients, and the program in Arizona, a state with a smaller population than New Jersey, serves over 136,000 patients; and

WHEREAS, the need for medical marijuana in New Jersey currently far exceeds the supply that the existing licensed ATCs in operation are able to provide; and

WHEREAS, giving patients a greater opportunity to obtain medical marijuana in accordance with State law will ensure that they are receiving a product tailored to their medical needs, and make them less likely to turn to potentially more harmful and less medically appropriate drugs such as opioids, the use of which was declared a public health crisis in Executive Order No. 219 (2017); and

WHEREAS, one study conducted by researchers at the Johns Hopkins Bloomberg School of Public Health and the Philadelphia Veterans Affairs Medical Center found that the annual number of deaths from prescription drug overdose is 25 percent lower in states where medical marijuana is legal than in states where it is illegal; and

WHEREAS, my administration is committed to fulfilling the intent, promise, and potential of the New Jersey Compassionate Use Medical Marijuana Act by providing patients in New Jersey with a well-functioning and effectively administered medical marijuana program that best serves their medical needs;
NOW, THEREFORE, I, PHILIP D. MURPHY, Governor of the State of New Jersey, by virtue of the authority vested in me by the Constitution and by the Statutes of this State, do hereby ORDER and DIRECT:

1. The Department of Health ("Department") and the Board of Medical Examiners ("Board") shall undertake a review of all aspects of New Jersey’s medical marijuana program, with a focus on ways to expand access to marijuana for medical purposes. This review should include, but not be limited to:

   a. An evaluation of the current rules regulating the operations and siting of dispensaries and cultivation facilities, particularly focusing on whether the rules should be revised to remove unwarranted obstructions to expansion;

   b. A review of the current process for obtaining a license to operate a medical marijuana dispensary, including recommendations to expedite that process;

   c. An examination of conditions for participating physicians in the program to ensure that any such requirements are not needlessly onerous;

   d. An analysis of the current list of debilitating medical conditions for which medical marijuana may be authorized pursuant to N.J.S.A. 24:61-3, and a recommendation as to whether doctors should be given flexibility to make these determinations on their own;

   e. An assessment of the methods through which patients or their primary caregivers are obtaining medical marijuana and a recommendation of whether rules should be amended to approve additional methods that could facilitate patient access;
f. A review of regulations that govern the forms in which medical marijuana can be ingested, taking into consideration the needs for different methods for different patients; and

g. Any other aspect of the program within the Department or the Board’s discretion that hinders or fails to effectively achieve the statutory objective of ensuring safe access to medical marijuana for patients in need.

2. This review shall conclude within 60 days of this Order, at which time the Department and Board shall initiate the rulemaking process for appropriate regulatory reforms consistent with this Order.

3. This Order shall take effect immediately.

GIVEN, under my hand and seal this 23rd day of January, Two Thousand and Eighteen, and of the Independence of the United States, the Two Hundred and Forty-Second.

/s/ Philip D. Murphy
Governor

Attest:

/s/ Matthew J. Platkin
Chief Counsel to the Governor