

DHHS Cannabis Medical Provider Quarterly Meeting

July 10, 2025

Meeting Minutes

Attendees

DHHS/UDAF staff attending: Clover Meaders, Cody James, Rebecca Brown, Richard Oborn, Sara Lealos, Shannon Thoman-Black, and Trevor Eckhoff.

Welcome and announcements

- Department of Health and Human Services (DHHS) Cannabis Medical Provider Quarterly Meetings are held the 2nd Thursday of each quarter.
 - The next meeting will be Oct 9 at 8 a.m.
 - Registration link will be sent out soon.
 - Webpage for the Medical Provider Quarterly Meeting:
<https://medicalcannabis.utah.gov/providers/quarterly-medical-provider-meeting/>

Program statistics as of June 30, 2025

- Active patients: 102,633
- Total Qualified Medical Providers (QMPs): 986
- Total Limited Medical Providers (LMPs): 200
- Total Pharmacy Medical Providers (PMPs): 87
- QMP patient limit: 1,539
- Active patients with LMPs: 653

Patient purchase reports

- DHHS was asked to create more reports that would help a provider review their patient's purchases or lack of purchases of medical cannabis. Providers expressed wanting to see if patients have not purchased at a Utah medical cannabis pharmacy, or if the patient is buying up to the state limit each month. Providers can use this report to decide if further followup with a patient is needed.

- If providers have ideas on how they would like this report to be presented or what fields they would like to be included, they can email medicalcannabis@utah.gov.

CMC internal policy for accessing information in the EVS

- Center for Medical Cannabis (CMC) can only release information to the patient/guardian, caregiver, recommending medical provider (RMP), RMP Proxy, pharmacy medical provider (PMP), or pharmacy agent.
- Before releasing information, CMC will need to confirm 3 fields of identification about the applicant and the caller.
- Identifiers include:
 - name; date of birth;
 - address, work facility;
 - phone number;
 - email address; or
 - EVS registration number.

Recommendation verbiage

- When entering a recommendation, providers are able to restrict what a patient can purchase at a medical cannabis pharmacy. The dosage forms were combined into groups last year. Below are the details of each of the groups:
 - No flower:
 - No unprocessed flower.
 - No vaping:
 - No concentrate vaping: cartridges or pens.
 - No inhalation: (includes items from “no vaping”)
 - No waxes, resins, other concentrates, or vapes.
 - No edibles:
 - No gummies, lozenges, or confections.
 - No oral preparations: (includes items from “no edibles”)
 - No syringes, oil, liquid suspension, capsules, pills, tinctures, oral sprays, aerosols, or edibles.
 - No topical or transdermal:
 - No balms, bath products, lotions, salves, or patches.
 - No suppositories:
 - No suppositories.

2025 Legislative Updates

Patient updates

- Patient Product Information Insert, mandated by S.B. 64, was created as a webpage: medicalcannabis.utah.gov/info/.
- Fee reductions went into effect on July 1, 2025:
 - Uniform transaction fee collected when purchasing products: \$3.00 to \$1.50.
 - Medical cannabis card application fee to DHHS: \$15.00 to \$8.00.

Education updates

- RMPs are required to complete 4 hours of formal or informal training every 2 years. This acknowledgement can be completed in the electronic verification system (EVS).
- RMP proxies who access the EVS must complete 1 hour of health information privacy law training every 2 years. There is a health information privacy laws training document that proxies will need to read at the time of registration or renewal. There will be an interactive training available in the future.
- PMPs must still complete 4 hours of formal continuing education every 2 years and acknowledge it in the EVS. This acknowledgement can be completed in the EVS.

RMP registration updates

- The terms limited medical provider (LMP) and qualified medical provider (QMP) have been replaced with recommending medical provider (RMP), as mandated by H.B. 357, to refer to any provider that recommends medical cannabis.
- RMPs do not have a registration fee, but if they would like to continue to use the EVS, they will still complete registration and renewal applications within the EVS.
- If an RMP chooses not to certify patients in EVS, they can complete a medical provider recommendation form for medical cannabis. The provider would complete the form and send it digitally or with their patient to a Utah medical cannabis pharmacy. The medical cannabis pharmacy would verify the document and then enter the certification into EVS on the provider's behalf. The form can be found here: <https://medicalcannabis.utah.gov/providers/submit-paper-certification/>
- RMPs are not required to, but can voluntarily, report their patient fee for recommending medical cannabis to DHHS. If they choose to report their fees, there are required fields that must be collected:
 - name;
 - clinic name;

- address;
 - fees charged; and
 - if they bill insurance.
- RMPs were asked to review their information in their EVS application to ensure reported fees and contact information are correct.

New Electronic Verification System (EVS) enhancements

RMP contact information and patient fee for recommending medical cannabis reporting

- If an RMP would like DHHS to publish their information on DHHS' website (<https://medicalcannabis.utah.gov/find-a-provider/>), they can update this in the EVS. Information can be added on the "address" tab in EVS.
- RMPs will also be able to add their fees and if they bill insurance in this same area.