



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Bureau of Health Care Safety and Quality
Medical Use of Marijuana Program
99 Chauncy Street, 11th Floor, Boston, MA 02111

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

MONICA BHAREL, MD, MPH
Commissioner

Tel: 617-660-6370
www.mass.gov/medicalmarijuana

September 7, 2017



Re: Request for Information



This letter is to inform you that the Department of Public Health ("Department") has reviewed Brighton Health Advocates, Inc.'s *Management and Operations Profile* (Application 2 of 3). The *Management and Operations Profile* requires the following information before the Department may complete its evaluation:

1. Applicant has not yet submitted an Employment and Education Form for [REDACTED], the individual responsible for the RMD security plan and security operations. Please submit an Employment and Education Form for [REDACTED].
2. Applicant has not submitted the background check authorization forms and fee as required under the application instructions. Please submit the background check authorization forms and fee as outlined in the application instructions.
3. In its response to Question C.11, the applicant describes a proposed agreement with Pharmacann Mass, LLC. Please submit a copy of the agreement. Please also submit an independent legal opinion that the agreement is in compliance with the non-profit requirements of 105 CMR 725.100(A)(1) and the Guidance for Registered Marijuana Dispensaries Regarding Non-Profit Compliance (<http://www.mass.gov/eohhs/docs/dph/quality/medical-marijuana/applications/non-profit-compliance-guidance.pdf>). If this agreement has already been submitted to the Department, please confirm that no changes have been made to the agreement since the date of its submission. Please be advised that the applicant will need to submit this information as soon as possible, but prior to receiving a Provisional Certificate of Registration. An application will not be deemed complete until all materials requested by the Department are submitted.

4. In its response to Question C.12, the applicant describes proposed agreements. Please submit copies of these agreements. Please also submit an independent legal opinion that the agreements are in compliance with the non-profit requirements of 105 CMR 725.100(A)(1) and the Guidance for Registered Marijuana Dispensaries Regarding Non-Profit Compliance (<http://www.mass.gov/eohhs/docs/dph/quality/medical-marijuana/applications/non-profit-compliance-guidance.pdf>). If the agreements have already been submitted to the Department, please confirm that no changes have been made to the agreements since the date of their submission. Please be advised that the applicant will need to submit this information as soon as possible, but prior to receiving a Provisional Certificate of Registration. An application will not be deemed complete until all materials requested by the Department are submitted.
5. In its response to Question E.22, applicant states, "MIPs will be produced in compliance with 105 CMR 725.100..." This regulation pertains to the registration of RMDs, not the production of MIPs. Applicant must resubmit a completed response to Question E.22 that identifies the correct section of the Regulations.
6. In its response to Question E.25, the applicant states, "All medicine must be rendered unusable prior to transport to prevent off-site diversion. This will be carried out using composting, incineration or approved chemical destruction techniques." It is unclear whether marijuana will be made unusable prior to disposal or prior to some other situation. It is also unclear whether the applicant intends for composting, incineration or the use of chemical destruction techniques to occur on site at the RMD or off-site. Please note that pursuant to 105 CMR 725.105(J), composting, incineration or the use of chemical destruction techniques may only occur off-site by a facility holding a valid permit. Please resubmit a complete response to Question E.25 that clarifies this information.
7. In its response to Question E.30, applicant does not provide detail regarding its operating procedures for maintaining confidentiality of dispensary agents, as required by the question. Please resubmit a complete response to Question E.30 that includes this information.
8. In its response to Question E.40, it is unclear whether the applicant intends to obtain product liability coverage at the minimum levels that are required under 105 CMR 725.105(Q)(1), as well as the maximum deductible per occurrence that is required for both general and product liability insurance. Please resubmit a complete response to Question E.40 clarifying this information.

If the applicant has been requested to resubmit their response to a question, please do so using the page on the application form for that particular question, and include an initialed attestation at the bottom of the page. The applicant need not resubmit the entire application and may submit only the page for the particular question that needs to be submitted.

Please remember to type all responses in the information or materials resubmitted to the Department, other than any required signatures, as well as include the name of the Applicant Non-Profit Corporation *and* the number of the application (e.g., Application 1 of 1) at the top of each page of the resubmitted information or materials.

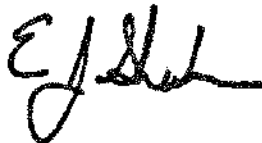
Please resubmit the additional or revised information as outlined above, via U.S. mail or hand-delivery,
to:

Department of Public Health
Medical Use of Marijuana Program
RMD Applications
99 Chauncy Street, 11th Floor
Boston, MA 02111

Upon receipt, the Department will review the information and will notify the applicant if it is invited to submit a *Siting Profile* or if further information is required before the applicant may proceed.

If you have questions or need assistance, you may contact the Department at 617-660-5370 or RMDapplication@state.ma.us.

Sincerely,

A handwritten signature in black ink, appearing to read 'E. Sheehan', written over a horizontal line.

Eric Sheehan, J.D.
Bureau Director
Bureau of Health Care Safety and Quality
Massachusetts Department of Public Health