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LEGISLATIVE ANNUAL REPORT



ALABAMA
MEDICAL
CANNABIS
COMMISSION

2025: Annual Report

On May 17, 2021, Governor Kay Ivey signed into law the Darren Wesley “Ato” Hall Compassion Act (Alabama Act 2021 – 450). The Act establishes the Alabama Medical Cannabis Commission and authorizes the Commission to implement the Act by making medical cannabis derived from cannabis grown in Alabama available to registered qualified patients, by licensing facilities that process, transport, test, or dispense medical cannabis, and to administer and enforce the Act and all rules adopted pursuant to the Act (Section 20-2A-22, Code of Alabama 1975).

During the 2024 legislative session, the Act was amended to remove medical cannabis licensing and regulatory responsibilities of the Alabama Department of Agriculture and Industries (ADAI). AMCC has amended its rules to be consistent with changes to the law and coordinated with ADAI on the transfer of regulatory responsibilities.

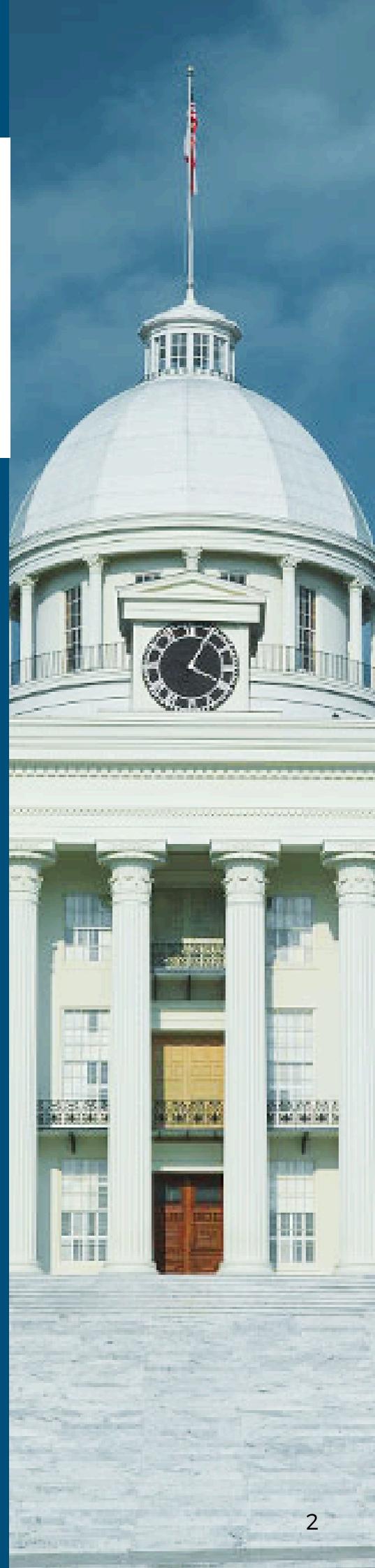


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Commission Appointments

The Act provides the appointing authority for members of the Alabama Medical Cannabis Commission and directed that initial appointments be made no later than July 1, 2021.



- (1) Three members appointed by the Governor, one of whom is a physician licensed to practice medicine in Alabama; one of whom is a licensed pharmacist; and one of whom has experience in agricultural lending or banking.
- (2) Three members appointed by the Lt. Governor, one of whom is a physician licensed to practice medicine in Alabama and certified in the specialty of pediatrics; one of whom is licensed to practice law in Alabama who specializes in health law; and one of whom is a biochemist.
- (3) Two members appointed by the President Pro Tempore of the Senate, one of whom is licensed to practice medicine in Alabama and certified in the specialty of oncology; and one of whom has experience in multiple crop development and agricultural practices.
- (4) Two members appointed by the Speaker of the House of Representatives, one of whom has a background and experience in mental health or substance abuse counselling and treatment; and one of whom has professional experience in agricultural systems management.
- (5) One member appointed by the Commissioner of Agriculture and Industries who is experienced in agricultural production or agronomic or other horticultural practices.
- (6) One member appointed by the State Health Officer.
- (7) One member appointed by the Attorney General (nonvoting)
- (8) One member appointed by the Secretary of the Alabama State Law Enforcement Agency (nonvoting).

Commission Members



Dr. Sam Blakemore
Pharmacist
Birmingham, Alabama



Dr. William Saliski
Pulmonologist
Montgomery, Alabama



Dr. Jimmie Harvey
Oncologist
Birmingham, Alabama



Dr. Angela Martin
Pediatrician
Anniston, Alabama



Dr. Mac Barnes
Oncologist
Montgomery, Alabama



Taylor Hatchett
Farmer
Chilton Co., Alabama



Judge Charles Price
Circuit Judge
Montgomery, Alabama



Dr. Eric Jensen
Biochemist
Brownsboro, Alabama



Loree Skelton
Healthcare Attorney
Birmingham, Alabama



Dwight Gamble
Banker
Headland, Alabama



Rex Vaughn
Farmer
Huntsville, Alabama



James Harwell
Nursery/Landscaper
Montgomery, Alabama



Dion Robinson
AL Dept. of Corrections
Tuskegee, Alabama



Vacant
Attorney General Appointee

Letter from the Director

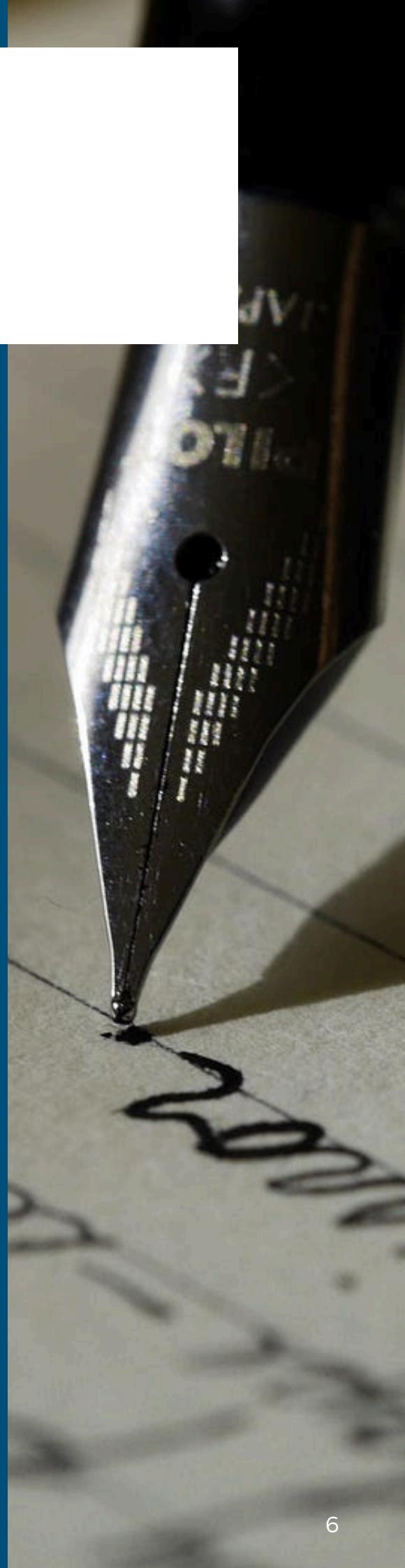
JOHN MCMILLAN

The Alabama Medical Cannabis Commission (AMCC) is pleased to submit its 2025 annual report to the Alabama legislature as required by Section 20-2A-9, Code of Alabama 1975.

The AMCC is required by the Darren Wesley “Ato” Hall Compassion Act to submit an annual written report to the Alabama Legislature. The purpose of the report is to track the implementation of the Act. The 2025 Annual Report highlights the progress of the Alabama’s medical cannabis program.

We did not achieve a completely operational medical cannabis program in 2025, as we had hoped. However, through AMCC’s efforts, including Commissioners and AMCC staff, we are very near our legislative mandate of providing medical cannabis to Alabama patients who meet one or more of the qualifying medical conditions and who have been recommended for medical cannabis by a certified Alabama physician. Additionally, we have heard from hundreds of Alabama citizens about their interest in medical cannabis and its potential to positively impact their health and quality of life.

The AMCC is tremendously grateful for the unwavering support from Governor Ivey’s office and members of the Alabama Legislature. We are also indebted to our state agency partners, including the Alabama Law Enforcement Agency, Alabama Office of Information and Technology, Alabama Attorney General’s Office, State of Alabama Personnel Department and the Alabama Board of Medical Examiners.



To date, the AMCC has issued a total of 18 licenses to cultivators (9), secure transporters (4), processors (4), and a state testing laboratory (1). These licensees are at varying levels of business development and are preparing for their operations. In fact, licensed cultivators have grown and harvested cannabis plants. Processors are preparing to convert raw plant material into Alabama-permitted medical products. Transporters are on standby to deliver the product from cultivators to processors and ultimately to dispensaries. Finally, the licensed state testing laboratory is anxious to provide the lab work to make certain Alabama's medical cannabis products are safe and of excellent quality.

Alabama's medical cannabis program will be fully operational with the issuance of at least one dispensary license. That will not only provide retail locations for products, but under the rules of the Alabama Board of Medical Examiners, Alabama Medical Cannabis Certification Permits may be issued to physicians once the AMCC has issued at least one license each for a cultivator, a processor, a secure transporter, and a dispensary.

A favorable ruling by the Alabama Court of Civil Appeals permitted the Commission to proceed with investigative hearings for dispensary and integrated facility applicants. Following contested hearings in the dispensary category, an administrative law judge issued a recommended order, and the Commission considered that recommended order at its meeting on December 11. The Commission adopted the Administrative Law Judge's Recommended Order and awarded four dispensary licenses. Three out of the four awarded licenses are scheduled to issue on January 8, 2026. The fourth dispensary license was temporarily stayed by the Commission. The Commission will meet on January 26, 2026, to review the status of the temporary stay.

The investigative hearings in the Integrated Facility category are on a separate track from dispensaries but the process is underway, and we expect it to conclude in the first half of 2026.

The regulatory activities of the Commission have ramped up during this year. AMCC staff continues inspections of all licensed facilities. The numbers of inspections, non-compliance measures, and disciplinary actions taken by the Commission are noted later in this annual report.

If our optimism proves correct, Alabama will soon have a long-overdue fully operational medical cannabis program. The Commission expects that the Alabama Legislature's goal of establishing a program to provide a safe and beneficial product for Alabama patients will finally be achieved. We are pleased that qualified patients in Alabama will have medical cannabis products that promise tremendous benefits for their health and wellbeing.



John McMillan
Director

Report Sections

Section 20-2A-9, Code of Alabama 1975, requires the Commission to provide “annual written reports to the Legislature, with the first one no later than January 1, 2022, tracking the implementation of this chapter.” As required by law, the annual report to the Alabama Legislature will be publicly available and posted on the Commission’s website. The report is to include information and data in the following eleven (11) areas:

1. The number of patients applying for and receiving medical cannabis cards. *
2. The qualifying medical conditions identified to obtain the medical cannabis cards. *
3. Comments from physicians and other health care providers and from pharmacists.
4. Revenues and expenses of card issuance and licensing of medical cannabis facilities.
5. Relevant development in other states’ cannabis laws.
6. Relevant scientific research.
7. Applicable tax revenue. *
8. The commission’s annual operating expenses and revenues.
9. The number of total applicants for each type of license under Article 4 and the number of veterans, minorities, and women who applied and the number of these applicants who were denied a license.
10. Any other information available to the commission that would inform public officials of how this chapter affects the public. *
11. Any suggested legislative changes to this chapter or other state laws.

* = information not applicable for 2025 report



Relevant Scientific Research

The medical cannabis program established under the Darren Wesley “Ato” Hall Compassion Act was created to ensure that qualified patients in Alabama have access to cannabis-based therapies under a regulated, clinically supervised system. The Commission has completed essential regulatory groundwork: final rulemaking for all license categories; development of seed-to-sale tracking, secure transport, standardized labeling and testing protocols; and physician guidance materials to support safe, medically appropriate use when the program becomes active.

At the same time, the passage of House Bill 445 significantly reshaped Alabama’s CBD/hemp environment — restricting smokable or inhalable hemp products and limiting THC content in consumable hemp products. This legislative change underscores the importance of providing patients with access to regulated, quality-controlled medical cannabis, rather than unregulated hemp or consumer-grade products whose potency and safety vary widely.



Clinical evidence supports a cautious, medical-use framework. The 2025 Journal of the American Medical Association, (JAMA) review of cannabis and cannabinoids concludes that evidence remains insufficient to recommend cannabis for most medical indications (such as acute pain or insomnia) and highlights increased risk of cardiovascular events (heart disease, myocardial infarction, stroke) in frequent inhaled users.

The review emphasizes the need for careful clinical judgment, dosing control, and harm-reduction conversations when considering cannabis for therapeutic use.

Given this landscape, the Commission's priorities remain:

- Patient safety and product quality, through rigorous testing, consistent labeling, and secure distribution.
- Clinical oversight, ensuring physicians have the guidance and information needed to weigh risks, benefits, and contraindications.
- Clear public communication, distinguishing regulated medical cannabis from unregulated hemp/CBD products.
- Evidence-based implementation, including data collection and collaboration with clinical and academic research partners to track real-world outcomes.
- Steady, responsible rollout — licensing, physician certification, patient registry activation, and support of first operational facilities.

Alabama has an opportunity to implement a medical cannabis program grounded in scientific evidence, clinical accountability, and public health safeguards. The Commission remains committed to fulfilling that vision.

Contributed by:

DR. JIMMIE HARVEY, AMCC COMMISSIONER





Comments from Physicians, Health Care Providers, and Pharmacists.

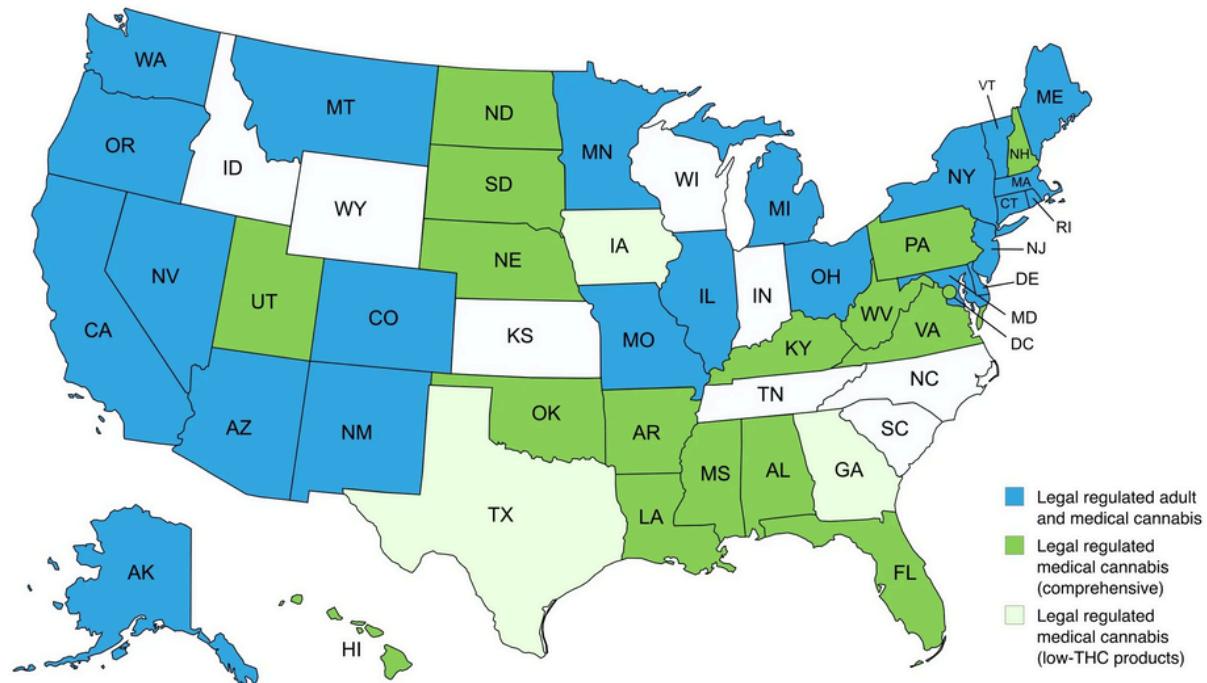
Pursuant to the provisions of the Darren Wesley “Ato” Hall Compassion Act, the Board of Medical Examiners approved rules to regulate the physician recommendation of medical cannabis in November 2021. These regulations are codified in Ala. Admin. Code r. 540-X-25. In 2024, after hearing from interested parties, the Board reviewed and amended several provisions of these rules to better protect and ensure the safety of unborn children who might inadvertently be harmed by medical cannabis consumption.

The Medical Association of the State of Alabama launched the mandatory training course for physicians seeking to become Registered Certifying Physicians in May 2023. Thus far, over 65 physicians have successfully completed the training. The Medical Association is preparing to launch a campaign to increase physician awareness of the course once the Cannabis Commission completes its licensure process.

Pursuant to Ala. Admin. Code r. 540-X-25-.04(5), the Board is prepared to begin accepting applications and issuing Alabama Medical Cannabis Certification Permits to qualified physicians once the Alabama Medical Cannabis Commission issues its initial licenses to dispensaries and/or integrated facilities.

- Mr. William M. Perkins
Executive Director
State of Alabama Board of Medical Examiners

Developments in Other States' Cannabis Laws.



TOTALS

Medical-Use: 42 states and the District of Columbia

Adult-Use: 23 states and the District of Columbia

CBD/Low-THC: 3 states

No Cannabis Program: 8 states



Adjacent states

Florida

Florida Senate Bill 2514 mandates that the Florida Department of Health cannabis division revoke the medical cannabis registration of patients and caregivers who have a drug related offense. This includes, “trafficking, sale, manufacture, delivery, or possession with intent to sell, manufacture, or deliver controlled substances under Chapter 893, Florida Statute”.

A ballot initiative in the State has enlisted over 660,000 signatures aimed at creating legislation for recreational use of cannabis. The state has yet to pass this initiative.



Mississippi

Medical cannabis legislation was signed into law in 2022 and is administered by the Mississippi Department of Health. There is no limit on the number of business licenses. Sales of medical cannabis began in 2023. Mississippi allows for the sale of cannabis flower. This has led to a successful market that now accounts for 180 dispensaries and 40,000 registered patients in the state. Total sales are nearly 120 million dollars in fiscal year 2025.

Mississippi allows physicians, nurse practitioners, physician assistants, and optometrists to write recommendations for cannabis. In 2025, the legislation was amended to provide for the dispensing of concentrates and infused products.

Tennessee

Tennessee legislators introduced legislation to enact the Tennessee Medical Cannabis Act. Bills were introduced in both the Tennessee House and Senate. Both bills died in committee.

Georgia

As of November 2024, Georgia has over 25,000 active patients in their cannabis program. Currently the Georgia program only allows for the sale of low-THC oil. New legislation passed out of the Georgia Senate in 2025, which allows for the expansion of the cannabis products available to patients. However, the bill died in the House.

The growth of the program has led to greater dialogue between regulators, legislators, patients, and advocacy groups to look for positive ways to grow the program so that patients can gain relief from the medicine. Advocates continue to lobby the Georgia legislature to allow patients to purchase smokable flower.

Of note, Georgia allows pharmacies to sell low-THC oil under the supervision of the Georgia Board of Pharmacy. These pharmacies are known as Low-THC pharmacies. There are 60 pharmacies, primarily independently owned pharmacies, that have taken the lead in offering these products.

The Drug Enforcement Administration sent a letter to the Board of Pharmacy stating that pharmacies selling products that have greater than 0.3% THC could be out of compliance with their DEA license, as cannabis is still considered to be a Schedule I controlled substance.



National

Nationally, more adults than ever feel that cannabis should be a treatment option for themselves and others who suffer from debilitating disease. The rescheduling of cannabis has been a point of conversation for many years, and it may occur under President Trump's administration.

Rescheduling cannabis would acknowledge on the federal level, that the plant has an established medical benefit. This acknowledgement would unlock new revenue streams for academic institutions seeking to research cannabis flower. For pharmaceutical companies, this would likely begin a new phase of establishing partnerships with state-funded academic institutions to create novel cannabinoid products in the U.S. market.

For example, Sativex is an oromucosal spray of CBD and THC used for the treatment of movement disorders and neuropathic pain associated with multiple sclerosis. Epidiolex is a pharmaceutical grade CBD product used for the treatment of seizure disorder. Both products are manufactured by Jazz Pharmaceuticals. Sativex is available in 25 countries but is not currently available in the United States market due to current restrictions on THC. Epidiolex is available in 35 countries, including the United States. Revenues generated for both products have steadily increased year after year. Sativex generated \$20 million in fiscal year 2024, and Epidiolex generated well over \$900 million in fiscal year 2024.

Hence, if cannabis is rescheduled at the federal level, new opportunities for pharmaceutical research of cannabis in the US market should develop. These new research opportunities could have a positive impact on disease management for millions of people around the world.

Contributed by: Dr. Sam Blakemore, PharmD, MBA
Vice Chair Alabama Medical Cannabis Commission



Suggested Legislative Changes

At this time, the Commission does not propose or suggest any specific legislative changes to Alabama's medical cannabis law. However, the Commission supports any legislative effort that, without further costly delays, delivers medical cannabis to Alabama patients and maintains the integrity and stringency of the current law.



Alabama Medical Cannabis Licensees



CULTIVATOR LICENSEES

- CRC of Alabama, LLC
⑨ Goshen, AL
- Greenway Botanicals, LLC
⑨ Centre, AL
- Gulf Shore Remedies, LLC
⑨ Fairhope, AL
- Native Black Cultivation
⑨ Bessemer, AL
- Creek Leaf Wellness Inc.
⑨ Birmingham, AL
- Twisted Herb Cultivation, LLC
⑨ Georgianna, AL
- I AM FARMS
⑨ Knoxville, AL
- Pure by Sirmon Farms, LLC
⑨ Daphne, AL
- Blackberry Farms, LLC
⑨ Northport, AL



PROCESSOR LICENSEES

- Organic Harvest Lab, LLC
⑨ Bessemer, AL
- Coosa Medical Manufacturing
⑨ Centreville, AL
- 1819 Labs, LLC
⑨ Anniston, AL
- Jasper Development Group Inc.
⑨ Jasper, AL



SECURE TRANSPORTER LICENSEES

- Alabama Secure Transport, LLC
⑨ Montgomery, AL
- Tyler Van Lines, LLC
⑨ Troy, AL
- Pick Up My Things
⑨ Dothan, AL
- International Communications, LLC
⑨ Birmingham, AL



STATE TESTING LABORATORY LICENSEE

- Green Health Laboratories, LLC
⑨ Foley, AL

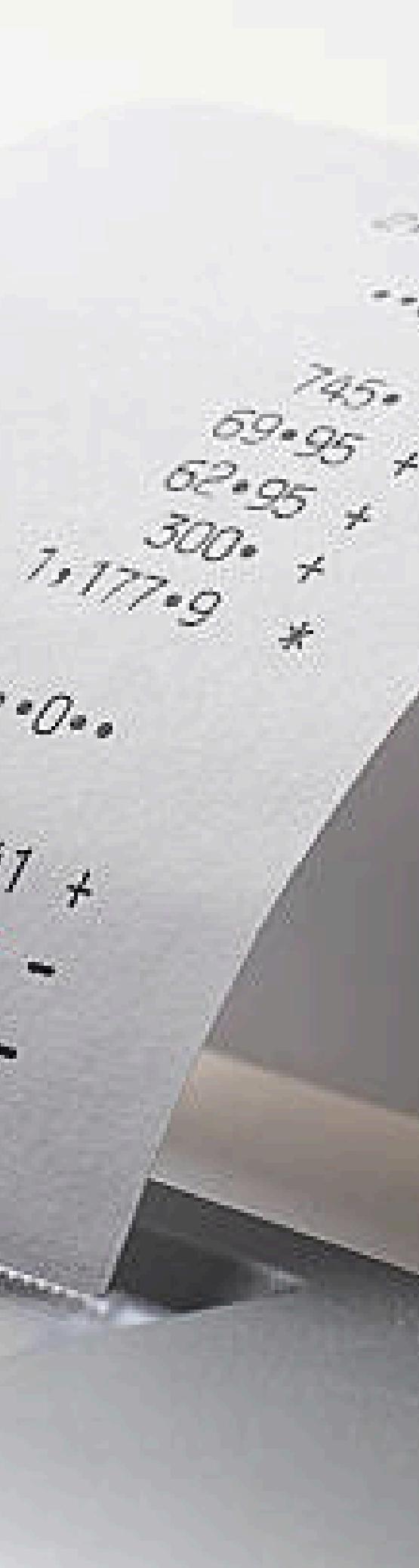
Compliance and Enforcement



2024 - 2025 Inspections

Cultivators	2024	2025
60 Day Commencement	7	2
Announced Inspections	14	24
Unannounced Inspections	0	0
Violations Observed	2	8
Processors	2024	2025
Pre-Commencement	0	1
Announced	0	1
Unannounced Inspections	0	0
Violations Observed	0	1
Secure Transporters	2024	2025
Pre-Commencement	1	0
Announced	1	1
Unannounced Inspections	0	0
Violations Observed	2	0
Testing Laboratory	2024	2025
Pre-Commencement	1	0
Announced	1	0
Unannounced Inspections	0	0
Violations Observed	2	1

- 624 Plants Actively Growing in Alabama Facilities
- 3091 Plants Harvested Since Program Inception
- 42 Registered Agents Working in Facilities



Revenues and Expenses

AMCC's Schedule of Fees, Penalties and Fines can be found at <https://amcc.alabama.gov/cannabis-business-applicants/#fees>

*The Commission approved a one-time 25% reduction of the license fees for licensees (cultivators, processors, secure transporters, and state testing laboratory) whose licenses expired in 2024. After the renewal period for those licenses, the license fees reverted back to the amounts previously established by the Commission.

Medical Cannabis Business Licensure

License-Related Fees Collected:

License Fees (FY 25): \$526,472.50

License Fees (Projected for FY 26): \$800,000

Patient/Caregiver Card Issuance

N/A

In Alabama, no physician is yet certified to recommend medical cannabis products to qualified patients. Under rules promulgated by the Alabama Board of Medical Examiners, no physician may be certified “until the AMCC has issued at least one license each for a cultivator, a processor, a secure transporter, and a dispensary or has issued at least one license for an integrated facility.” (Ala. Admin. Code r. 540-X-25-.04(5)).

Commission's Annual Operating Expenses and Revenues

Revenue and Expenses Through September 30, 2025

Category	Available	Expenditures	Encumbrances	Total Obligations
Personnel Costs	\$1,466,602.00	\$ 983,370.93	\$ -	\$ 983,370.93
Employee Benefit	\$ 482,456.00	\$ 295,574.16	\$ -	\$ 295,574.16
Travel, In-State	\$ 50,000.00	\$ 3,682.18	\$ -	\$ 3,682.18
Travel, Out-Of-State	\$ 54,000.00	\$ 4,848.89	\$ -	\$ 4,848.89
Repair And Maintenance	\$ 15,000.00	\$ 13,199.30	\$ -	\$ 13,199.30
Rentals And Leases	\$ 194,800.00	\$ 187,807.89	\$ 1,759.75	\$ 189,567.64
Utilities And Communication	\$ 15,000.00	\$ 11,375.02	\$ 536.20	\$ 11,911.22
Services	\$4,541,949.00	\$1,229,567.78	\$ 167,143.82	\$ 1,396,711.60
Supplies, Mat'l, And Operating	\$ 20,000.00	\$ 12,297.14	\$ 100.00	\$ 12,397.14
Transportation Equip Operation	\$ 7,500.00	\$ 2,203.26	\$ 885.13	\$ 3,088.39
Transportation Equipment Purch	\$ 50,000.00	\$ -	\$ -	\$ -
Other Equipment Purchases	\$ 45,000.00	\$ -	\$ -	\$ -
Total:	\$6,942,307.00	\$2,743,926.55	\$ 170,424.90	\$ 2,914,351.45

Financial Summary:

Fiscal year 2025:

\$6.9 million Budget for FY25

This budget allowed the Commission to operate at a limited capacity, generating minimal revenue, yet it remained fully operational and met all required regulatory responsibilities under the law.

Fiscal year 2026:

\$2.5 million Rollover funds from FY25

The \$5.5 million allocation will fund the development and maintenance of the patient registry and seed-to-sale tracking system; support legal services and business licensing systems; ensure regulation and compliance of licensees; and sustain continuing operations.

Fiscal year 2027:

The Commission is requesting a budget of \$1 million for the next fiscal year to cover operating costs, regulatory and compliance activities, and the development of new IT systems while maintaining its current existing systems.

