



Alabama Medical Cannabis Commission
comment@amcc.alabama.gov

RE: Draft Rules Released on February 27, 2026

Trulieve appreciates the opportunity to provide comments on the Commission's proposed draft rules. We support the Commission's efforts to implement a safe, regulated medical cannabis program consistent with the intent of the Compassion Act and with best practices from other regulated markets.

Our comments focus specifically on:

- 538-X-4-.08: Duty to Notify or Seek Approval
- 538-X-4-.24: Agent Registration
- 538-X-6-.5: Labeling and Packaging by Processors

538-X-4-.08 – Duty to Notify or Seek Approval

As drafted, Section (1)(a) requires Commission approval for changes involving “any director, officer, or other individual with responsibilities for the licensee’s day-to-day operations.” The inclusion of “other individual with responsibilities for day-to-day operations” substantially broadens the scope beyond executive or officer-level leadership and would capture routine operational staffing changes (e.g., General Managers, Area Managers, State Directors of Operations).

As written:

(1)(a) A change in the licensee’s management, including any director, officer, or other individual with responsibilities for the licensee’s day-to-day operations, but not resulting in a change of ownership;

Suggested edit:

(1)(a) A change in the licensee’s senior management, including any director or officer with responsibilities for the licensee’s operation, but not resulting in a change of ownership;

Section (2) of the rule makes a significant change from “notify” to “seek” approval specifically in reference to real estate and change in location. Existing state regulations and local zoning ordinances are in place to dictate where an operator may locate. Adding additional notification requirements is duplicative and creates a burden on the regulator. Retaining change of location as a notification requirement, rather than a pre-approval condition, will preserve commission awareness and avoid duplicative review.



538-X-4.24 – Agent Registration

Section (5), expiration and renewal of registered agent status, creates unnecessary and burdensome reporting for both the operator and the commission.

The requirement to immediately notify the Commission of the termination of any registered agent imposes a high-frequency reporting obligation. In retail and production environments, workforce turnover among non-executive staff can be quite regular. Because registered agents are not senior leadership and do not hold ownership or governance authority, immediate reporting of every separation creates a substantial unintended administrative burden.

An additional opportunity to reduce administrative burden on the Commission is to extend the duration of Registered Agent status from one year to two years. Permitting biennial renewal would meaningfully decrease recurring administrative workload while preserving the Commission's ability to effectively track and oversee registered agents within the program.

538-X-6.05 – Labeling and Packaging by Processors

Section (2)(i) states that the universal symbol must be one-half inch by one-half inch. Although one half inch may seem insignificant on its face, many marijuana products come in packaging that is very small, specifically in the tincture and capsule categories. Reducing the minimum size requirement to one-quarter inch by one-quarter inch would, in practice, ensure the universal symbol can be appropriately and consistently affixed to all approved medical cannabis packaging. This revised standard would align with the sizing requirements utilized in Florida's medical marijuana program administered by the Florida Department of Health Office of Medical Marijuana Use pursuant to [Rule: 64ER20-32](#).

Trulieve appreciates the Commission's continued engagement with stakeholders and its commitment to implementing an evidence-based regulatory framework. We respectfully request the Commission's consideration of these proposed revisions.



[Redacted]

From: Roger Holmes [Redacted]
Sent: Saturday, March 14, 2026 4:18 PM
To: AMMC Comment
Subject: OFFICIAL PUBLIC COMMENT: Medical Necessity and the Failure of Non-Herbal

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To the Alabama Medical Cannabis Commission,

I am submitting this formal public comment as a 60-year-old Marine veteran, a 30-year resident of Alabama, and a lifelong Republican. I have lived on disability for 20 years due to chronic pain and diabetic neuropathy. I am writing to urge the Commission to amend its current rules to allow for **raw plant material (flower)** to ensure patients have access to medicine that actually works for their biology.

A Life-Long Struggle and Biological Necessity: My physical battle began at birth with a clubbed foot, followed by Osgood-Schlatter disease at age 10 and a severe knee dislocation at 14. My service in the Marine Corps in the 1980s aggravated these injuries, leading to a medical discharge. Fifteen years ago, a prescribed narcotic regimen nearly killed me; I was found unresponsive and revived by doctors at 3:00 PM. I refuse to return to "prescription poison," yet I am currently left with unacceptable pain.

The Failure of Distillates and Lab-Made Formulations: I have found that "distillate" products—the same formulations used in the state's proposed inhalers—are harsh, chemically "nasty," and medically ineffective. By stripping the plant down to a single molecule, you remove the **"Entourage Effect"** (the synergy of THC, CBD, and natural terpenes) that is required to treat my refractory neuropathy. Furthermore, as a physician-led Commission, you understand that oral delivery (pills/gummies) is ineffective for many patients due to "first-pass" liver metabolism. My system requires the natural, whole plant to reach the nerves that lab-made "synthetics" cannot touch.

The Moral and Political Crossroads: It is a grave hypocrisy that Alabama permits the legal sale of alcohol and tobacco—substances with zero medical benefit and high lethality—while treating veterans like criminals for seeking a natural plant. I do not agree with the political direction of "the other side" in this country, yet my own party is forcing me to choose between my health and my political home.

I am tired of being treated like a criminal for seeking a quality of life that the current law denies me. I urge the Commission to lead with common sense and allow the only product that has successfully restored my physical functions: the natural flower.

Respectfully,

Roger Holmes

[Redacted]

Florence, AL 35630

[Redacted]

From: Southern Hemp Industries [REDACTED]
Sent: Sunday, March 15, 2026 8:51 PM
To: AMMC Comment
Subject: Public Comment – Darren Wesley 'Ato' Hall Compassion Act.



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To the Commissioners and Staff of the Alabama Medical Cannabis Commission,

Thank you for the opportunity to submit comments regarding the proposed amendments to the rules implementing the Darren Wesley 'Ato' Hall Compassion Act.

The Commission's proposed revisions expanding ownership disclosure and broadening the definition of "material change" represent an important step toward strengthening the integrity and stability of Alabama's medical cannabis program. Two additional clarifications would further support these objectives.

1. Pending Litigation Should Constitute a Material Change

The proposed rules appropriately expand the circumstances requiring disclosure of material changes. However, the rules would benefit from explicitly including **pending or reasonably anticipated litigation involving licensees, controlling parties, or key operational partners** where such disputes may affect:

- Ownership interests
- Operational control
- Intellectual property or proprietary manufacturing processes
- Contractual rights related to licensed activities

In emerging regulated industries such as medical cannabis, disputes involving intellectual property, technology licensing, or trade secrets can materially affect a licensee's ability to operate and maintain regulatory compliance. These disputes may also affect which parties ultimately control or benefit from licensed operations.

Requiring disclosure of **known litigation or disputes reasonably expected to lead to litigation** would allow the Commission to evaluate potential impacts on license stability, operational control, and compliance.

2. Separation of Hemp and Medical Cannabis Processing to Prevent Market Inversion

The Commission should also consider adopting an explicit prohibition on **co-location of hemp-derived cannabinoid processing and medical cannabis production within the same licensed facility.**

Although hemp and medical cannabis are derived from the same plant species, they operate under **distinct regulatory systems with different supply chain controls, product limitations, and consumer protections.**

Allowing these two regulatory systems to operate within the same facility may introduce the risk of **supply chain inversion**, where materials originating from the regulated medical cannabis supply chain are diverted, re-labeled, or otherwise introduced into the hemp-derived cannabinoid market.

This risk arises because:

- Hemp products often operate under **less restrictive product format and dosage limits** than medical cannabis programs.
- Hemp products may move through **different distribution and retail channels**.
- Traceability and reporting systems governing medical cannabis may not extend to hemp-derived products.

If the same facility processes both hemp-derived cannabinoids and regulated medical cannabis, it may become difficult to ensure that materials produced under the medical program remain exclusively within the regulated medical supply chain.

Maintaining **clear physical separation between hemp-derived cannabinoid processing and medical cannabis manufacturing** would reduce the risk of such inversion/diversion and simplify regulatory oversight of both systems.

Several regulated cannabis programs (Colorado, Oregon, Washington, Alaska, Michigan, California) have adopted similar separation requirements to ensure that medical cannabis products remain within the regulated program from cultivation through dispensing.

Alabama has the opportunity to establish a stable and transparent medical cannabis regulatory framework from the outset. Clarifying that **pending or expected litigation affecting operational control or proprietary manufacturing technologies constitutes a material change**, and ensuring **clear separation between hemp and medical cannabis processing facilities**, would further strengthen oversight, protect the integrity of the program, and maintain public confidence in the licensing process.

Thank you for your consideration of these comments.

Sent with [Proton Mail](#) secure email.

From: Michelle Gibbs [REDACTED]
Sent: Wednesday, April 1, 2026 1:45 PM
To: AMMC Comment
Subject: Public Comment Rule Changes



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To Whom It May Concern:

Public Comment on Proposed AMCC Rules

A review of capital formation trends in the cannabis industry indicates that a significant majority of financing transactions utilize structured debt instruments, including equity-linked features such as warrants or conversion rights.

Regulatory frameworks that require pre-approval of such instruments at issuance introduce delays and uncertainty into time-sensitive transactions. This is particularly relevant in emerging markets, where access to traditional banking services remains constrained.

Additionally, governance-related approvals for minor ownership or board-level changes may increase administrative workload without a corresponding increase in regulatory benefit.

Aligning review thresholds with material ownership changes and focusing regulatory scrutiny on exercised or realized interests would better reflect actual risk while improving market efficiency.

Thank You

From: John Bowles [REDACTED]
Sent: Thursday, April 2, 2026 12:41 PM
To: AMMC Comment
Subject: Public Comment on Proposed AMCC Rules



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This public comment is submitted to express concern regarding several proposed provisions that may unintentionally limit business growth, investment, and patient access within Alabama’s medical cannabis program. These comments are intended to support the Commission’s goals of maintaining program integrity while ensuring that licensees can access capital, operate efficiently, and deliver consistent patient access.

Chapter 1: Section 13 – De Minimis Change

The proposed threshold for what constitutes a de minimis change is too low and should be increased to 10%. Requiring regulatory approval for routine matters—such as appointing a new board member—creates unnecessary delays and administrative burden. As drafted, the current threshold captures changes that do not implicate control or present meaningful regulatory risk, resulting in review of transactions that are unlikely to affect compliance, ownership integrity, or program objectives.

This approach not only burdens licensees but also diverts Commission resources toward low-risk transactions, potentially slowing review of changes that do warrant closer scrutiny. Businesses should be able to manage their own governance structures efficiently. Streamlining this provision would allow companies to operate more effectively while still maintaining appropriate oversight.

Chapter 4: Section 4C – Controlling Interest Change

Requiring a public hearing for transactions involving a change in controlling interest raises concerns about confidentiality and practicality. These transactions often involve sensitive financial and strategic information that, if disclosed, could harm the parties involved and discourage investment.

While oversight of controlling interest changes is appropriate, a more balanced approach would allow the Commission to protect confidential commercial information through procedures such as confidential filings, limited disclosures, or in camera review, while still preserving transparency as to the identity and qualifications of the acquiring parties.

Expanding the process to include public hearings may discourage investment and slow down important business activity. Providing procedural flexibility would better align regulatory oversight with the practical realities of private capital transactions while maintaining the Commission’s ability to evaluate suitability and compliance.

Chapter 4: Section 8 – Attribution of Ownership Interests

The requirement to obtain prior approval for warrants, options, or convertible debt could significantly limit access to capital. In the cannabis industry, traditional financing options are already very limited, and in 2025 95% of all capital was raised through debt instruments that include equity-linked features as a condition of lending. Lenders frequently require these instruments, such as warrants or conversion features, as standard risk-mitigation tools.

Requiring Commission at the time such instruments are issued, rather than when and if they are exercised, effectively subjects contingent, future ownership interests to immediate regulatory review. This approach introduces uncertainty and delay into financing transactions that are often time-sensitive and may never result in an actual change of ownership. In practice, many lenders are unlikely to accept these conditions, which could reduce access to capital for Alabama licensees.

These restrictions could also make it more difficult for companies to attract and retain qualified employees. Equity-based compensation—such as stock options or warrants—is commonly used to recruit talent, especially in emerging industries where cash compensation may be constrained. Many experienced professionals expect some form of equity participation as part of their compensation package. Requiring prior approval before offering these incentives may delay hiring decisions and place Alabama operators at a competitive disadvantage relative to businesses in other states.

A more practical approach would allow companies to issue these instruments without prior approval, while requiring Commission review at the point of actual ownership change, such as upon exercise, conversion, or transfer resulting in a non-de minimis ownership interest. This would preserve regulatory oversight of real changes in ownership and control while avoiding unnecessary review of contingent interests that may never materialize. Such an approach would maintain regulatory visibility while reducing barriers to capital formation and operational flexibility.

Conclusion

In each of the areas described above, modest adjustments to the proposed rules would better align regulatory oversight with actual ownership risk, reduce unnecessary administrative burden, and improve access to capital and talent. These changes would support a more stable and well-capitalized industry, which in turn advances the Commission's core objectives of ensuring safe, reliable, and consistent access to medical cannabis for patients in Alabama.

From: Beth Forti [REDACTED]
Sent: Thursday, April 2, 2026 3:13 PM
To: AMMC Comment
Subject: Cannabis Program



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Hello,

Happy Thursday! I am writing as someone who depends on this program—not as a businessperson, but as a potential patient.

When policies make it harder for businesses to operate, patients feel it first. We feel it when products are out of stock. We feel it when companies don't open. We feel it when access becomes uncertain.

The rules being considered may seem administrative, but they have real-world consequences. If companies struggle to raise money, hire staff, or make decisions quickly, that instability reaches patients.

For many of us, this is not optional care. It is necessary. I ask that you consider how these decisions affect people who rely on consistent, reliable access to their medicine.

Sincerely,
Beth Forti