

PO BOX 360 TRENTON, N.J. 08625-0360 www.nj.gov/health

PHILIP D. MURPHY Governor

SHEILA Y. OLIVER Lt. Governor JUDITH M. PERSICHILLI, RN, BSN, MA Acting Commissioner

<u>Alternative Treatment Center Reviewer Scoresheet - Team 2</u>

Reviewer Number:/		
Applicant Name: NT HOLISTIC HE	ALTH, LLC	
Application Control Number: 19-007/ App	lication Type 🔑	:XOR
	<u>Total</u> Possible	.Assign <u>ed</u>
Measure/Criterion	Points	Score
Criterion 6		
Measure 1: Cultivation plan		
6.1.1: Overall practices, policies and procedures related to the cultivation of medical cannabis.	20	·
6.1.2: Experience in botany, horticulture, and phytochemistry and the application of those		
sciences in the cultivation of medicinal marijuana.	20	
6.1.3: Methods to control insects that do not include the application of pesticides.		
morado dio appressione i persona	20	
6.1.4: Methods to prevent and minimize and test for plant disease and other contamination.	20	
6.1.5: Methods and practices related to odor mitigation, sanitation and airflow, and employee		
safety in cultivation environments.	20	

Measure 2: Manufacturing plan

6.2.1: Overview of practices, policies and procedures for manufacturing medicinal cannabis products.	20
6.2.2: Experience/education in biochemisty, laboratory science, engineering and cannabinoid extraction methods.	20
6.2.3: Description of the products the applicant intends to manufacture, including information on ingredients (both active and inactive), cannabinoid profile, and dosing and administration method.	20
6.2.4: Methods to prevent and test for contamination in extracted products.	20
6.2.5: Health and safety standards for lab employees.	20

Measure 3: Dispensary plan

6.3.1: Overview of practices, policies and procedures for dispensing medical cannabis to qualified patients.	20	5
6.3.2: Experience/education in the treatment of patients with qualifying health conditions.	20	18
6.3.3: Patient education and counseling methods.	15	12
6.3.4: Employee education procedures for patient-facing staff members.	15	ġ.
6.3.5: Plans to recruit and educate health care professionals regarding the dispensing of medical cannabis to qualified patients.	15	10
6.3.6: Explanation of how the proposed dispensary location expands access to patients and caregivers.		11.
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<u>Alternative Treatment Center Reviewer Scoresheet - Team 1</u>

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Reviewer Number:	· · · · · · · · · · · · · · · · · · ·	
Applicant Name: Hollshic	Health	
Application Control Number: 19 \sim 0	XXX Application Type	(C, V, D):
Measure/Criterion	Total Possible Points	Assigned Score
Criterion 1		
Measure 1: Security Plan	10	4
Measure 2. Environmental impact plan	10	4
Measure 3. Quality control and quality assurance plan	10	Same Same
Criterion 2		
Measure 1: Background of principals, board members, and owners:	20	18
Criterion 3		
Measure 1, Financing plan:	20	10

Criterion 4.

Measure 1, Ties to the local community:	20	16
Criterion 5.		
Measure 1, Research contributions:	10 .	2
Total (add up all assigned scores)	100	62



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<u> Alternative Treatment Center Reviewer Scoresheet – Scorer 3-2</u>

Please refer to the scoring instructions for each measure. Only score the measures which you are assigned, and are applicable to each application. Once you are done scoring all the applications, scan the scoresheets and upload to sharepoint. Retain hard copies to be collected by DOH.

Reviewer Number: 3 Applicant Name: NS HoListic Application Control Number: 19-0071 Measure/Criterion Criterion 7	Health LLC Application Type (C Total Possible Points	, V, (D): Assigned Score
Measure 3: Minority-owned, women- owned or veteran-owned business certification	3	0



State of New Jersey

DEPARTMENT OF HEALTH

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<u> Alternative Treatment Center Reviewer Scoresheet – Scorer 3-3</u>

Please refer to the scoring instructions for each measure. Only score the measures which you are assigned, and are applicable to each application. Once you are done scoring all the applications, scan the scoresheets and upload to sharepoint. Retain hard copies to be collected by DOH.

Reviewer Number:		,
Applicant Name: NJ HOUSTIC HE	ALTH LLC	
Application Control Number: 19-6071	Application Type (C,	v, p).
Measure/Criterion	<u>Total Possible Points</u>	Assigned Score
Criterion 7		
Measure 4: Workforce and job-creation plan	20	14



State of New Jersey

DEPARTMENT OF HEALTH

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completed of 10/8/21

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<u>Alternative Treatment Center Reviewer Scoresheet - Team 1</u>

Please refer to the scoring instructions for each measure. Only score the measures which you are assigned, and are applicable to each application. Once you are done scoring all the applications, scan the scoresheets and upload to sharepoint. Retain hard copies to be collected by DOH.

Reviewer Number: 5

Applicant Name: NJ Holistic Health, LLC

Application Control Number: /9-007/

Application Type (C, V, 0):

Measure/Criterion

Criterion 1

Measure 1: Security Plan	10	8
Measure 2. Environmental impact plan	10	8
Measure 3. Quality control and quality assurance plan	10	8

Criterion 2

Measure 1: Background of	20	
principals, board members, and		20
owners:		

Criterion 3

Measure 1, Financing plan:	20	18

Criterion 4.

Measure 1, Ties to the local community:	20	17
Criterion 5.		
Measure 1, Research contributions:	10	9
Total (add up all assigned scores)	100	



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Alternative Treatment Center Reviewer Scoresheet - Team 1

Please refer to the scoring instructions for each measure. Only score the measures which you are assigned, and are applicable to each application. Once you are done scoring all the applications, scan the scoresheets and upload to sharepoint. Retain hard copies to be collected by DOH.

		1
Reviewer	Number:	Q

Applicant Name: NJ Holistic Health LLC

Application Control Number: \(\(\lambda - \(\partial \) \) Application Type (C, V, \(\partial \) \)

Measure/Criterion

Total Possible Points Assigned Score

Criterion 1

Measure 1: Security Plan	10	9	
Measure 2. Environmental impact plan	10	7	
Measure 3. Quality control and quality assurance plan	10	8	

Criterion 2

Measure 1: Background of	20	
		10
principals, board members, and		
owners:		
		·

Criterion 3

Measure 1, Financing plan:	20	17

Criterion 4.

Measure 1, Ties to the local community:	20	/8
Criterion 5.		
Measure 1, Research contributions:	10	9
Total (add up all assigned scores)	100	87



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represent my work alone.

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<u> Alternative Treatment Center Reviewer Scoresheet – Scorer 3-1</u>

Reviewer Number:		
Applicant Name: Not Holistic Application Control Number:	Hen/th, CCC	
Application Control Number:	Application Type (C	, v , D):
Measure/Criterion	Total Possible Points	Assigned Score
Criterion 7		
Measure 1: Labor Peace Agreement	30	30
Measure 2: Labor Compliance Plan	20	14
By checking this box, I hereby certification of the assigned measures in this	y that I, Reviewer <u>7</u> , c	ompleted a full



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Alternative Treatment Center Reviewer Scoresheet - Team 2

Please refer to the scoring instructions for each measure. Only score the measures which you are assigned, and are applicable to each application. Once you are done scoring all the applications, scan the scoresheets and upload to sharepoint. Retain hard copies to be collected by DOH.

		\bigcirc
Reviewer	Number:	-0

Applicant Name: NJ Holistic Health

Application Control Number: 9-00 Application Type (C, V, D):

TotalPossibleAssignedMeasure/CriterionPointsScore

Criterion 6

Measure 1: Cultivation plan

•	
6.1.1: Overall practices, policies and procedures related to the cultivation of medical cannabis.	20
6.1.2: Experience in botany, horticulture, and phytochemistry and the application of those sciences in the cultivation of medicinal marijuana.	20
6.1.3: Methods to control insects that do not include the application of pesticides.	20
	20
6.1.4: Methods to prevent and minimize and test for plant disease and other contamination.	20
6.1.5: Methods and practices related to odor mitigation, sanitation and airflow, and employee safety in cultivation environments.	
	20

Measure 2: Manufacturing plan

6.2.1: Overview of practices, policies and procedures for manufacturing medicinal cannabis products.	20
6.2.2: Experience/education in biochemisty, laboratory science, engineering and cannabinoid extraction methods.	20
6.2.3: Description of the products the applicant intends to manufacture, including information on ingredients (both active and inactive), cannabinoid profile, and dosing and administration method.	20
6.2.4: Methods to prevent and test for contamination in extracted products.	20
6.2.5: Health and safety standards for lab employees.	20

Measure 3: Dispensary plan

6.3.1: Overview of practices, policies and procedures for dispensing medical cannabis to qualified patients.	20	15
6.3.2: Experience/education in the treatment of patients with qualifying health conditions.	20	16
6.3.3: Patient education and counseling methods.	15	12
6.3.4: Employee education procedures for patient-facing staff members.	15	12
6.3.5: Plans to recruit and educate health care professionals regarding the dispensing of medical cannabis to qualified patients.	15	12
6.3.6: Explanation of how the proposed dispensary location expands access to patients and caregivers.	15	10



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<u>Alternative Treatment Center Reviewer Scoresheet - Team 2</u>

Reviewer Number:		
Applicant Name: NT HOLISTIC	HEALTE	-1
Application Control Number: 19-007/ App	lication Type (C	;, v,(D):
Measure/Criterion	Total Possible Points	Assigned Score
Criterion 6		
Measure 1: Cultivation plan		-
6.1.1: Overall practices, policies and procedures related to the cultivation of medical cannabis.	20	
6.1.2: Experience in botany, horticulture, and phytochemistry and the application of those		
sciences in the cultivation of medicinal marijuana.	20	
6.1.3: Methods to control insects that do not include the application of pesticides.	20	
6.1.4: Methods to prevent and minimize and test	20	
for plant disease and other contamination.	20	
6.1.5: Methods and practices related to odor mitigation, sanitation and airflow, and employee safety in cultivation environments.		
•	20	

Measure 2: Manufacturing plan

6.2.1: Overview of practices, policies and procedures for manufacturing medicinal cannabis		
products.	20	
6.2.2: Experience/education in biochemisty, laboratory science, engineering and cannabinoid		
extraction methods.	20	
6.2.3: Description of the products the applicant intends to manufacture, including information on ingredients (both active and inactive), cannabinoid profile, and dosing and		
administration method.	20_	
6.2.4: Methods to prevent and test for contamination in extracted products.	20	
6.2.5: Health and safety standards for lab employees.	20	

Measure 3: Dispensary plan

6.3.1: Overview of practices, policies and procedures for dispensing medical cannabis to qualified patients.	20	7
6.3.2: Experience/education in the treatment of patients with qualifying health conditions.	20	10
6.3.3: Patient education and counseling methods.	15	9
6.3.4: Employee education procedures for patient-facing staff members.	15	7
6.3.5 : Plans to recruit and educate health care professionals regarding the dispensing of medical cannabis to qualified patients.	15	9
6.3.6: Explanation of how the proposed dispensary location expands access to patients and caregivers.	15	7