<u>SSB 6032</u> - S AMD 220 By Senators Kohl-Welles, Pflug

PULLED 03/14/2007

Strike everything after the enacting clause and insert the following:

"NEW SECTION. Sec. 1. The legislature intends to clarify the law 3 4 on medical marijuana so that the lawful use of this substance is not 5 impaired and medical practitioners are able to exercise their best 6 professional judgment in the delivery of medical treatment, qualifying 7 patients may fully participate in the medical use of marijuana, and 8 designated providers may assist patients in the manner provided by this act without fear of state criminal prosecution. 9 This act is also intended to provide clarification to law enforcement and to all 10 11 participants in the judicial system.

12 **Sec. 2.** RCW 69.51A.005 and 1999 c 2 s 2 are each amended to read 13 as follows:

14 The people of Washington state find that some patients with 15 terminal or debilitating illnesses, under their physician's care, may benefit from the medical use of marijuana. Some of the illnesses for 16 17 which marijuana appears to be beneficial include chemotherapy-related 18 nausea and vomiting in cancer patients; AIDS wasting syndrome; severe 19 muscle spasms associated with multiple sclerosis and other spasticity 20 disorders; epilepsy; acute or chronic glaucoma; and some forms of 21 intractable pain.

The people find that humanitarian compassion necessitates that the decision to authorize the medical use of marijuana by patients with terminal or debilitating illnesses is a personal, individual decision, based upon their physician's professional medical judgment and discretion.

Therefore, the people of the state of Washington intend that:Qualifying patients with terminal or debilitating illnesses who, in

1 the judgment of their physicians, ((would)) may benefit from the 2 medical use of marijuana, shall not be found guilty of a crime under 3 state law for their possession and limited use of marijuana;

Persons who act as ((primary caregivers)) designated providers to
such patients shall also not be found guilty of a crime under state law
for assisting with the medical use of marijuana; and

7 Physicians also be excepted from liability and prosecution for the 8 authorization of marijuana use to qualifying patients for whom, in the 9 physician's professional judgment, medical marijuana may prove 10 beneficial.

11 Sec. 3. RCW 69.51A.010 and 1999 c 2 s 6 are each amended to read 12 as follows:

13 The definitions in this section apply throughout this chapter 14 unless the context clearly requires otherwise.

(1) <u>"Designated provider" means a person who:</u>

15 16

6 <u>(a) Is eighteen years of age or older;</u>

17 (b) Has been designated in writing by a patient to serve as a 18 designated provider under this chapter; and

19 (c) Is the designated provider to only one patient at any one time.

20 (2) "Medical use of marijuana" means the production, possession, or 21 administration of marijuana, as defined in RCW 69.50.101(q), for the 22 exclusive benefit of a qualifying patient in the treatment of his or 23 her terminal or debilitating illness.

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(((2) "Primary caregiver" means a person who:

25 (a) Is eighteen years of age or older;

26 (b) Is responsible for the housing, health, or care of the patient;
27 (c) Has been designated in writing by a patient to perform the

28 duties of primary caregiver under this chapter.))

(3) <u>"Production" means the manufacturing, planting, cultivating,</u> growing, harvesting, and other steps reasonably related to the provision of medical marijuana individually by one patient, or by or with the assistance of his or her designated provider, for the exclusive benefit of the qualifying patient in the treatment of terminal or debilitating medical conditions.

35 (a) By January 1, 2008, the department of health shall adopt rules
 36 defining the presumptive quantity of marijuana that could reasonably be

said to be a sixty-day supply for any qualifying patient; this 1 2 presumption may be overcome with evidence of the qualifying patient's actual use. 3 (b) As used in this chapter, "sixty-day supply" means that amount 4 of marijuana that a qualifying patient would reasonably be expected to 5 need over a period of sixty days for his or her personal medical use. 6 (c) By July 1, 2008, the department of health shall make 7 recommendations to the legislature addressing the efficient provision 8 of access to an adequate, safe, consistent, and secure source of 9 medical marijuana for qualifying patients. Recommendations may be 10 based on but not limited to a review of available medical and 11 scientific literature, consultation with experts, surveys of other 12 13 states' best practices, and public input. 14 (4) "Qualifying patient" means a person who: (a) Is a patient of a physician licensed under chapter 18.71 or 15 16 18.57 RCW; 17 (b) Has been diagnosed by that physician as having a terminal or debilitating medical condition; 18 (c) Is a resident of the state of Washington at the time of such 19 20 diaqnosis; 21 (d) Has been advised by that physician about the risks and benefits 22 of the medical use of marijuana; and (e) Has been advised by that physician that they may benefit from 23 24 the medical use of marijuana. (((++))) (5) "Terminal or debilitating medical condition" means: 25 (a) Cancer, human immunodeficiency virus (HIV), multiple sclerosis, 26 27 epilepsy or other seizure disorder, or spasticity disorders; or (b) Intractable pain, limited for the purpose of this chapter to 28 mean pain unrelieved by standard medical treatments and medications; or 29 (c) Glaucoma, either acute or chronic, limited for the purpose of 30 31 this chapter to mean increased intraocular pressure unrelieved by 32 standard treatments and medications; or (d) Crohn's disease with debilitating symptoms unrelieved by 33 standard treatments or medications; or 34 35 (e) Hepatitis C with debilitating nausea or intractable pain unrelieved by standard treatments or medications; or 36 37 (f) Diseases, including anorexia, which result in nausea, vomiting,

1 wasting, appetite loss, cramping, seizures, muscle spasms, or
2 spasticity, when these symptoms are unrelieved by standard treatments

3 <u>or medications; or</u>

4 (g) Any other medical condition duly approved by the Washington
5 state medical quality assurance ((board [commission])) commission in
6 consultation with the board of osteopathic medicine and surgery as
7 directed in this chapter.

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(((5))) <u>(6)</u> "Valid documentation" means:

9 (a) A statement signed by a qualifying patient's physician, or a 10 copy of the qualifying patient's pertinent medical records, which 11 states that, in the physician's professional opinion, the ((potential 12 benefits of the medical use of marijuana would likely outweigh the 13 health risks for a particular qualifying)) patient may benefit from the 14 medical use of marijuana; ((and))

(b) Proof of identity such as a Washington state driver's license or identicard, as defined in RCW 46.20.035; and

17 (c) A copy of the physician statement described in (a) of this
 18 subsection shall have the same force and effect as the signed original.

19 Sec. 4. RCW 69.51A.030 and 1999 c 2 s 4 are each amended to read 20 as follows:

A physician licensed under chapter 18.71 or 18.57 RCW shall be excepted from the state's criminal laws and shall not be penalized in any manner, or denied any right or privilege, for:

(1) Advising a qualifying patient about the risks and benefits of medical use of marijuana or that the qualifying patient may benefit from the medical use of marijuana where such use is within a professional standard of care or in the individual physician's medical judgment; or

(2) Providing a qualifying patient with valid documentation, based upon the physician's assessment of the qualifying patient's medical history and current medical condition, that the ((potential benefits of the)) medical use of marijuana ((would likely outweigh the health risks for the)) may benefit a particular qualifying patient.

34 Sec. 5. RCW 69.51A.040 and 1999 c 2 s 5 are each amended to read 35 as follows:

36 (1) If a law enforcement officer determines that marijuana is being

possessed lawfully under the medical marijuana law, the officer may document the amount of marijuana, take a representative sample that is large enough to test, but not seize the marijuana. A law enforcement officer or agency shall not be held civilly liable for failure to seize marijuana in this circumstance.

(2) If charged with a violation of state law relating to marijuana, б 7 any qualifying patient who is engaged in the medical use of marijuana, or any designated ((primary caregiver)) provider who assists a 8 qualifying patient in the medical use of marijuana, will be deemed to 9 have established an affirmative defense to such charges by proof of his 10 or her compliance with the requirements provided in this chapter. Any 11 person meeting the requirements appropriate to his or her status under 12 13 this chapter shall be considered to have engaged in activities 14 permitted by this chapter and shall not be penalized in any manner, or denied any right or privilege, for such actions. 15

16 (((2) The)) (3) A qualifying patient, if eighteen years of age or 17 older, or a designated provider shall:

18 (a) Meet all criteria for status as a qualifying patient <u>or</u>
 19 <u>designated provider</u>;

(b) Possess no more marijuana than is necessary for the patient's personal, medical use, not exceeding the amount necessary for a sixtyday supply; and

(c) Present his or her valid documentation to any law enforcement official who questions the patient <u>or provider</u> regarding his or her medical use of marijuana.

(((3) The)) (4) A qualifying patient, if under eighteen years of 26 27 age at the time he or she is alleged to have committed the offense, shall ((comply)) demonstrate compliance with subsection (((2))) (3)(a) 28 and (c) of this section. However, any possession under subsection 29 $((\frac{2}{2}))$ (3)(b) of this section, as well as any production, acquisition, 30 31 and decision as to dosage and frequency of use, shall be the 32 responsibility of the parent or legal guardian of the qualifying patient, who shall not be arrested, prosecuted, or penalized in any 33 manner for meeting such responsibilities. 34

35 ((((4) The designated primary caregiver shall:

36 (a) Meet all criteria for status as a primary caregiver to a 37 qualifying patient; (b) Possess, in combination with and as an agent for the qualifying patient, no more marijuana than is necessary for the patient's personal, medical use, not exceeding the amount necessary for a sixtyday supply;

5 (c) Present a copy of the qualifying patient's valid documentation 6 required by this chapter, as well as evidence of designation to act as 7 primary caregiver by the patient, to any law enforcement official 8 requesting such information;

9 (d) Be prohibited from consuming marijuana obtained for the 10 personal, medical use of the patient for whom the individual is acting 11 as primary caregiver; and

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(e) Be the primary caregiver to only one patient at any one time.))

13 Sec. 6. RCW 69.51A.060 and 1999 c 2 s 8 are each amended to read 14 as follows:

(1) It shall be a misdemeanor to use or display medical marijuanain a manner or place which is open to the view of the general public.

17 (2) Nothing in this chapter requires any health insurance provider
 18 to be liable for any claim for reimbursement for the medical use of
 19 marijuana.

(3) Nothing in this chapter requires any physician to authorize theuse of medical marijuana for a patient.

(4) Nothing in this chapter requires any accommodation of any <u>on-</u>
 <u>site</u> medical use of marijuana in any place of employment, in any school
 bus or on any school grounds, ((or)) in any youth center, <u>or in any</u>
 <u>correctional facility</u>.

26 (5) It is a class C felony to fraudulently produce any record 27 purporting to be, or tamper with the content of any record for the 28 purpose of having it accepted as, valid documentation under RCW 29 $69.51A.010((\frac{5}{0}))$ <u>(6)</u>(a).

30 (6) No person shall be entitled to claim the affirmative defense 31 provided in RCW 69.51A.040 for engaging in the medical use of marijuana 32 in a way that endangers the health or well-being of any person through 33 the use of a motorized vehicle on a street, road, or highway.

34 **Sec. 7.** RCW 69.51A.070 and 1999 c 2 s 9 are each amended to read 35 as follows:

36 The Washington state medical quality assurance ((board

[commission])) commission in consultation with the board of osteopathic 1 2 medicine and surgery, or other appropriate agency as designated by the governor, shall accept for consideration petitions submitted ((by 3 physicians or patients)) to add terminal or debilitating conditions to 4 those included in this chapter. In considering such petitions, the 5 Washington state medical quality assurance ((board [commission])) б 7 commission in consultation with the board of osteopathic medicine and surgery shall include public notice of, and an opportunity to comment 8 in a public hearing upon, such petitions. The Washington state medical 9 quality assurance ((board [commission])) commission in consultation 10 with the board of osteopathic medicine and surgery shall, after 11 12 hearing, approve or deny such petitions within one hundred eighty days 13 of submission. The approval or denial of such a petition shall be 14 considered a final agency action, subject to judicial review."

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On page 1, line 1 of the title, after "marijuana;" strike the remainder of the title and insert "amending RCW 69.51A.005, 69.51A.010, 69.51A.030, 69.51A.040, 69.51A.060, and 69.51A.070; and creating a new section."

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