## SENATE BILL 6265

State of Washington 62nd Legislature 2012 Regular Session

By Senators Kohl-Welles, Delvin, Keiser, Pflug, and Regala

Read first time 01/16/12. Referred to Committee on Health & Long-Term Care.

1 AN ACT Relating to regulating the medical use of cannabis through nonprofit patient cooperatives, collective gardens, local government 2 regulation of nonprofit patient cooperatives and collective gardens, 3 security requirements for the transportation of cannabis, affirmative 4 defense and arrest and prosecution protections, establishing a 5 б voluntary registry within the department of health, modifying the 7 Washington state institute for public policy study, and providing technical corrections; amending RCW 69.51A.010, 69.51A.140, 69.51A.085, 8 69.51A.030, 69.51A.043, 69.51A.045, 69.51A.050, 69.51A.055, 69.51A.060, 9 69.51A.025, and 69.51A.200; adding new sections to chapter 69.51A RCW; 10 11 adding a new section to chapter 42.56 RCW; creating a new section; and 12 repealing RCW 69.51A.047 and 69.51A.040.

13 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

14 **Sec. 1.** RCW 69.51A.010 and 2010 c 284 s 2 are each amended to read 15 as follows:

16 The definitions in this section apply throughout this chapter 17 unless the context clearly requires otherwise.

18 (1) <u>"Cannabis" means all parts of the plant Cannabis, whether</u> 19 growing or not; the seeds thereof; the resin extracted from any part of

the plant; and every compound, manufacture, salt, derivative, mixture, 1 or preparation of the plant, its seeds, or resin. "Cannabis" does not 2 include the mature stalks of the plant, fiber produced from the stalks, 3 oil, or cake made from the seeds of the plant, any other compound, 4 manufacture, salt, derivative, mixture, or preparation of the mature 5 б stalks, except the resin extracted therefrom, fiber, oil, or cake, or 7 the sterilized seed of the plant which is incapable of germination. The term "cannabis" includes cannabis products and useable cannabis. 8

(2) "Collective garden" means qualifying patients or their 9 designated providers sharing responsibility for acquiring and supplying 10 the resources required to produce, process, transport, and deliver 11 cannabis for medical use such as: A location for a collective garden; 12 equipment, supplies, and labor necessary to plant, grow, and harvest 13 cannabis; cannabis plants, seeds, and cuttings; and equipment, 14 supplies, and labor necessary for proper construction, plumbing, 15 wiring, and ventilation of a garden of cannabis plants. Members of a 16 collective garden must only be qualifying patients or their designated 17 providers. 18

<u>(3) "Commercial building unit" means a building or portion thereof,</u>
 <u>designed or used for commercial purposes.</u>

21 <u>(4) "Correctional facility" has the meaning provided in RCW</u>
22 <u>72.09.015.</u>

(5) "Corrections agency or department" means any agency or 23 24 department in the state of Washington, including local governments or jails, that is vested with the responsibility to manage those 25 26 individuals who are being supervised in the community for a criminal conviction and has established a written policy for determining when 27 the medical use of cannabis, including possession, manufacture, or 28 delivery of, or for possession with intent to manufacture or deliver, 29 is inconsistent with and contrary to the person's supervision. 30

<u>(6)(a)</u> "Designated provider" means a person who:

31 32

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

33 ((<del>(b)</del>)) <u>(ii)</u> Has been designated in ((writing)) <u>a written document</u> 34 <u>signed and dated</u> by a <u>qualifying</u> patient to serve as a designated 35 provider under this chapter;

36 ((<del>(c) Is prohibited from consuming marijuana obtained for the</del> 37 personal, medical use of the patient for whom the individual is acting 38 as designated provider; and

- 1 (d))) (iii) Is the designated provider to only one <u>qualifying</u>
  2 patient ((at any one time)); and
- 3 (iv) Is in compliance with the terms and conditions set forth in
  4 <u>RCW 69.51A.043.</u>
- (b) "Designated provider" includes a qualifying patient who serves
  as the designated provider for another qualifying patient and who may
  be in possession of both patients' cannabis at the same time.
- 8 <u>(7) "Dispense" means the selection, measuring, packaging, labeling,</u> 9 <u>delivery, or sale of cannabis by a collective garden or nonprofit</u> 10 <u>patient cooperative to a qualifying patient or designated provider who</u> 11 <u>is a member of that collective garden or nonprofit patient cooperative</u>. 12 <u>(((2)))</u> <u>(8) "Dwelling" means a building or portion thereof,</u>
- 13 <u>designed or used for residential occupancy and which includes kitchen</u> 14 <u>facilities.</u>
- 15 (9) "Health care professional," for purposes of this chapter only, 16 means a physician licensed under chapter 18.71 RCW, a physician 17 assistant licensed under chapter 18.71A RCW, an osteopathic physician 18 licensed under chapter 18.57 RCW, an osteopathic physicians' assistant 19 licensed under chapter 18.57A RCW, a naturopath licensed under chapter 18.36A RCW, or an advanced registered nurse practitioner licensed under 20 chapter 18.79 RCW.
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- ((<del>(3)</del>)) <u>(10) "Jail" has the meaning provided in RCW 70.48.020.</u>

23 <u>(11) "Labeling" means all labels and other written, printed, or</u> 24 graphic matter upon any cannabis intended for medical use or 25 accompanying such cannabis.

26 (12) "Medical use of ((marijuana)) <u>cannabis</u>" means the production, 27 possession, <u>dispensing</u>, <u>manufacture</u>, <u>delivery</u>, or administration of 28 ((marijuana, as defined in RCW 69.50.101(q),)) <u>cannabis</u> for the 29 exclusive benefit of a qualifying patient in the treatment of his or 30 her terminal or debilitating ((illness)) <u>medical condition</u>.

(((4))) (13) "Nonprofit patient cooperative" means a member run nonprofit corporation registered with the secretary of state under chapter 24.03 or 24.06 RCW but which is not required to be recognized as an organization under 26 U.S.C. Sec. 501(c)(3) by the federal internal revenue service. Nonprofit patient cooperatives dispense cannabis for the medical use of their members if not prohibited by counties, cities, or towns under section 2 of this act and must meet 1 <u>all requirements of this chapter. Members of a nonprofit patient</u> 2 <u>cooperative must only be qualifying patients or their designated</u> 3 <u>providers.</u>

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(14) "Peace officer" has the meaning provided in RCW 43.101.010.

(15) "Personally identifiable information" means any information 5 that includes, but is not limited to, data that uniquely identify, б distinguish, or trace a person's identity, such as the person's name, 7 date of birth, or address, either alone or when combined with other 8 sources, that establish the person is a qualifying patient, designated 9 provider, licensed producer, or licensed processor of cannabis products 10 for purposes of registration with the department of health or its 11 designee. The term "personally identifiable information" also means 12 13 any information used by the department of health or its designee to identify a person as a qualifying patient, designated provider, 14 licensed producer, or licensed processor of cannabis products. 15

16 <u>(16) "Plant" means an organism having at least three</u> 17 <u>distinguishable and distinct leaves, each leaf being at least three</u> 18 <u>centimeters in diameter, and a readily observable root formation</u> 19 <u>consisting of at least two separate and distinct roots, each being at</u> 20 <u>least two centimeters in length. Multiple stalks emanating from the</u> 21 <u>same root ball or root system shall be considered part of the same</u> 22 single plant.

23 24 (17)(a) "Qualifying patient" means a person who:

((<del>(a)</del>)) <u>(i)</u> Is a patient of a health care professional;

25 ((<del>(b)</del>)) <u>(ii)</u> Is eighteen years of age or older or who is under
26 eighteen years of age and whose parent or guardian has provided written
27 consent for the medical use of cannabis by the minor to a health care
28 professional;

29 (iii) Has been diagnosed by that health care professional as having 30 a terminal or debilitating medical condition;

31 ((<del>(c)</del>)) <u>(iv)</u> Is a resident of the state of Washington at the time 32 of such diagnosis;

33 (((<del>(d)</del>)) <u>(v)</u> Has been advised by that health care professional about 34 the risks and benefits of the medical use of ((marijuana)) <u>cannabis</u>; 35 ((and

36 (e))) (vi) Has been advised by that health care professional that 37 ((they)) he or she may benefit from the medical use of ((marijuana)) 38 cannabis; and

- (vii) Is otherwise in compliance with the terms and conditions of
   this chapter.
- 3 (b) The term "qualifying patient" does not include a person who is 4 actively being supervised for a criminal conviction by a corrections 5 agency or department that has determined that the terms of this chapter 6 are inconsistent with and contrary to his or her supervision and all 7 related processes and procedures related to that supervision.
- 8 (18) "Registration card" means a card issued by the department of 9 health or its designee under section 16 of this act that demonstrates 10 registration with the registry.
- 11 (19) "Registry" means the registry developed and maintained by and 12 within the department of health or its designee under section 16 of 13 this act to permit qualified patients and designated providers to 14 register in order to qualify for arrest and prosecution protection. 15 Collective gardens and nonprofit patient cooperatives may also register 16 their locations.
- 17 (((<del>(5)</del>)) <u>(20)</u> "Tamper-resistant paper" means paper that meets one or 18 more of the following industry-recognized features:
- 19 (a) One or more features designed to prevent copying of the paper;
- 20 (b) One or more features designed to prevent the erasure or 21 modification of information on the paper; or
- (c) One or more features designed to prevent the use of counterfeitvalid documentation.
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- ((<del>(6)</del>)) <u>(21)</u> "Terminal or debilitating medical condition" means:
- (a) Cancer, human immunodeficiency virus (HIV), multiple sclerosis,
   epilepsy or other seizure disorder, or spasticity disorders; or
- (b) Intractable pain, limited for the purpose of this chapter tomean pain unrelieved by standard medical treatments and medications; or
- (c) Glaucoma, either acute or chronic, limited for the purpose of this chapter to mean increased intraocular pressure unrelieved by standard treatments and medications; or
- 32 (d) Crohn's disease with debilitating symptoms unrelieved by 33 standard treatments or medications; or
- 34 (e) Hepatitis C with debilitating nausea or intractable pain35 unrelieved by standard treatments or medications; or
- 36 (f) Diseases, including anorexia, which result in nausea, vomiting, 37 ((wasting)) cachexia, appetite loss, cramping, seizures, muscle spasms,

1 or spasticity, when these symptoms are unrelieved by standard 2 treatments or medications; or

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

6 (((7))) (22) "Useable cannabis" means dried flowers of the Cannabis
7 plant. Useable cannabis excludes stems, stalks, leaves, seeds, and
8 roots. "Useable cannabis" does not include cannabis products.

<u>(23)(a)</u> "Valid documentation" means:

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10 (((a) A)) (i) An original statement signed and dated by a 11 qualifying patient's health care professional written on tamper-12 resistant paper and valid for up to one year from the date of the 13 health care professional's signature, which states that, in the health 14 care professional's professional opinion, the patient may benefit from 15 the medical use of ((marijuana)) cannabis; and

16 ((<del>(b)</del>)) <u>(ii)</u> Proof of identity such as a Washington state driver's 17 license or identicard, as defined in RCW 46.20.035.

18 (b) In the case of a designated provider, "valid documentation" 19 means the signed and dated document valid for up to one year from the 20 date of signature executed by the qualifying patient who has designated 21 the provider.

22 <u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 69.51A RCW 23 to read as follows:

(1)(a) Counties with a population of less than two hundred thousand and the cities and towns within such counties may enact ordinances providing that nonprofit patient cooperatives are not prohibited from operation within their jurisdiction. Nonprofit patient cooperatives are prohibited within those jurisdictions unless such ordinance is enacted.

30 (b) Counties with a population of two hundred thousand or more and 31 the cities and towns within such counties may enact ordinances 32 providing that nonprofit patient cooperatives are prohibited from 33 operation within their jurisdiction. Nonprofit patient cooperatives 34 are not prohibited within those jurisdictions unless such ordinance is 35 enacted.

36 (2) A county, city, or town that does not prohibit nonprofit 37 patient cooperatives under subsection (1) of this section may adopt and enforce requirements for nonprofit patient cooperatives that include but are not limited to: Security requirements; inspection standards, including policies on verifying qualified patient records; limits on size of membership; limits on membership periods; and limits on number of plants and amounts of useable cannabis so long as such limits do not exceed the maximum amount allowed under RCW 69.51A.043.

7 (3) Nonprofit patient cooperatives are subject to the requirements
8 of section 3 of this act and must comply with all city, town, or county
9 requirements adopted under this section and RCW 69.51A.140.

10 <u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 69.51A RCW 11 to read as follows:

(1) It is not a violation of state criminal or civil law for a nonprofit patient cooperative to distribute cannabis for the medical use of its members if a city, town, or county in which the nonprofit patient cooperative is located has enacted an ordinance under section 2(1)(a) of this act or has not enacted an ordinance under section 2 (1)(b) of this act. A nonprofit patient cooperative must comply with all city, town, or county requirements and the following:

(a) A nonprofit patient cooperative must be registered as a
 nonprofit corporation with the secretary of state under chapter 24.03
 or 24.06 RCW;

(b) Only qualifying patients or their designated providers maybecome members of the nonprofit patient cooperative;

(c) Before accepting a member, the nonprofit patient cooperative must confirm that the patient qualifies for the medical use of cannabis through inspection of that patient's proof of identity and registration card or, if the patient is not registered, through contacting that patient's health care professional or his or her staff;

(d) A nonprofit patient cooperative may obtain cannabis from a collective garden or collective gardens operating under RCW 69.51A.085 and may produce and process cannabis if the nonprofit patient cooperative contains no more than fifteen plants per member up to a total of ninety-nine plants and:

34 (i) No more than twenty-four ounces of useable cannabis per member35 up to a total of one hundred forty-four ounces;

36 (ii) No more cannabis product that could be made with the useable 37 cannabis limits that apply under (d)(i) of this subsection; or 1 (iii) A combination of useable cannabis and cannabis product that 2 does not exceed a combined total representing possession and processing 3 of no more useable cannabis than what is permitted under (d)(i) of this 4 subsection;

5 (e) Members of a nonprofit patient cooperative are not required to 6 provide work as part of their membership;

7 (f) A copy of each member's valid documentation or registration 8 card under section 16 of this act and a copy of the member's proof of 9 identity, must be available at all times on the premises of a nonprofit 10 patient cooperative;

(g) No useable cannabis from the nonprofit patient cooperative may be delivered to anyone other than one of the members of the nonprofit patient cooperative;

(h) A nonprofit patient cooperative must ensure that no cannabis,
cannabis paraphernalia, or artistic depictions of cannabis may be
viewed from outside the facility;

(i) A nonprofit patient cooperative may not be located within five hundred feet of a community center, child care center, elementary or secondary school, or college or university. A city, town, or county may adopt an ordinance providing for distance requirements that are greater than or less than the distance requirements under this subsection (1)(i);

(j) A nonprofit patient cooperative may hire staff to assist in the operation of the nonprofit patient cooperative or use member volunteers;

(k) A nonprofit patient cooperative may not advertise cannabis for sale to the general public in any manner that promotes or tends to promote the use or abuse of cannabis. This subsection does not preclude a nonprofit patient cooperative from advertising in trade journals or on medical cannabis web sites;

31 (1) A nonprofit patient cooperative may not permit cannabis to be 32 consumed on the premises of the nonprofit patient cooperative;

(m) A nonprofit patient cooperative must exclude from its premises people who are not members or employees of the nonprofit patient cooperative. However, a nonprofit patient cooperative may allow tradespersons and service personnel onto its premises for the purpose of repair or maintenance and may periodically allow prospective members, government officials, acting in their official capacity, media

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1 representatives, neighborhood watch groups, and proprietors of nearby 2 businesses onto its premises for the purpose of observing the operation 3 of the nonprofit patient cooperative;

(n) A nonprofit patient cooperative must permit city, town, county,
or state employees to access patient authorization records but only
while engaged in their duties of enforcement and administration of the
requirements of that jurisdiction's ordinance or state law; and

8 (o) Each nonprofit patient cooperative shall be operated as a 9 completely independent entity. A nonprofit patient cooperative shall 10 not share or exchange with any other nonprofit patient cooperative 11 including, but not limited to, management, staff, materials, plants, 12 cannabis, proceeds, goods, or services. This requirement does not 13 preclude a nonprofit patient cooperative from operating out of multiple 14 locations.

(2) A person who knowingly violates a provision of this section isnot entitled to the protections of this chapter.

17 (3) If charged with a violation of state law relating to cannabis 18 while performing his or her duties for the nonprofit patient 19 cooperative, an employee of a nonprofit patient cooperative is deemed 20 to have established an affirmative defense to such charges by proof of 21 compliance with this section. Member volunteers are provided with 22 arrest protection if they meet the requirements of section 8 of this 23 act or may assert an affirmative defense if they meet the requirements 24 of RCW 69.51A.043.

25 **Sec. 4.** RCW 69.51A.140 and 2011 c 181 s 1102 are each amended to 26 read as follows:

27 (1) Nothing in this chapter is intended to preempt the authority of cities and towns ((may adopt and enforce any of the following 28 29 pertaining to the production, processing, or dispensing of cannabis or 30 cannabis products within their jurisdiction:)) to impose zoning 31 requirements, ((business)) licensing requirements, permitting <u>requirements</u>, health and safety requirements, ((and business)) taxes, 32 fees, or other conditions upon any nonprofit patient cooperative or 33 collective garden producing, processing, or dispensing cannabis within 34 35 its jurisdiction. ((Nothing in chapter 181, Laws of 2011 is intended 36 to limit the authority of cities and towns to impose zoning 37 requirements or other conditions upon licensed dispensers, so long as))

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However, such requirements ((do)) may not preclude the possibility of siting ((licensed dispensers)) collective gardens within the jurisdiction. ((If the jurisdiction has no commercial zones, the jurisdiction is not required to adopt zoning to accommodate licensed dispensers.))

б (2) Nothing in this chapter is intended to preempt the authority of 7 counties ((may adopt and enforce any of the following pertaining to the 8 production, processing, or dispensing of cannabis or cannabis products 9 within their jurisdiction in locations outside of the corporate limits of any city or town:)) to impose zoning requirements, ((business)) 10 11 licensing requirements, ((and)) permitting requirements, health and safety requirements, taxes, fees, or other conditions upon any 12 13 nonprofit patient cooperative or collective garden producing, processing, or dispensing cannabis within its jurisdiction in locations 14 outside the corporate limits of any city or town. ((Nothing in chapter 15 181, Laws of 2011 is intended to limit the authority of counties to 16 impose zoning requirements or other conditions upon licensed 17 dispensers, so long as)) However, such requirements ((do)) may not 18 19 preclude the possibility of siting ((licensed dispensers)) collective 20 gardens within the jurisdiction. ((If the jurisdiction has no 21 commercial zones, the jurisdiction is not required to adopt zoning to 22 accommodate licensed dispensers.))

23 **Sec. 5.** RCW 69.51A.085 and 2011 c 181 s 403 are each amended to 24 read as follows:

(1) Qualifying patients ((may)) or their designated providers may create and participate in collective gardens ((for the purpose of producing, processing, transporting, and delivering)) to produce, process, transport, or deliver cannabis for the medical use of its members, or in the case of designated providers, the qualifying patients they serve, or nonprofit patient cooperatives subject to the following conditions:

32 (a) <u>Only qualifying patients and designated providers may become</u>
 33 <u>members of a collective garden;</u>

34 <u>(b) A collective garden may have n</u>o more than ten ((<del>qualifying</del> 35 <del>patients may participate in a single collective garden at any time</del>)) 36 <u>members at any time</u>; 1 (((<del>b)</del>)) <u>(c) No more than one collective garden is permitted per</u>
2 <u>dwelling or commercial building unit;</u>

3 (d) A collective garden may contain no more than fifteen plants per
4 ((patient)) member up to a total of forty-five plants;

5 (((<del>c)</del>)) (<u>e</u>) A collective garden may contain no more than twenty-6 four ounces of useable cannabis per ((<del>patient</del>)) <u>member</u> up to a total of 7 seventy-two ounces of useable cannabis;

8 ((<del>(d)</del>)) <u>(f)</u> A copy of each ((<del>qualifying patient's</del>)) <u>member's</u> valid 9 documentation or ((<del>proof of</del>)) registration ((<del>with the registry</del> 10 <del>established in section 901 of this act, including</del>)) <u>card and</u> a copy of 11 the ((<del>patient's</del>)) <u>member's</u> proof of identity, must be available at all 12 times on the premises of the collective garden; and

13 ((<del>(e)</del>)) <u>(q)</u> No useable cannabis from the collective garden ((<del>is</del>)) 14 <u>may be</u> delivered to anyone other than one of the ((<del>qualifying patients</del> 15 <del>participating in</del>)) <u>members of</u> the collective garden <u>or a nonprofit</u> 16 <u>patient cooperative</u>.

17 (2) ((For purposes of this section, the creation of a "collective garden" means qualifying patients sharing responsibility for acquiring 18 19 and supplying the resources required to produce and process cannabis for medical use such as, for example, a location for a collective 20 21 garden; equipment, supplies, and labor necessary to plant, grow, and 22 harvest cannabis; cannabis plants, seeds, and cuttings; and equipment, 23 supplies, and labor necessary for proper construction, plumbing, wiring, and ventilation of a garden of cannabis plants. 24

(3)) A person who knowingly violates a provision of subsection (1)
 of this section is not entitled to the protections of this chapter.

27 <u>NEW SECTION.</u> Sec. 6. A new section is added to chapter 69.51A RCW 28 to read as follows:

(1) Useable cannabis exceeding twenty-four ounces, cannabis product exceeding what one could reasonably produce with twenty-four ounces of useable cannabis, or a combination of useable cannabis and cannabis product that represents possession and processing of more than twentyfour ounces of useable cannabis must be transported in a locked metal box that is bolted to the transporting vehicle.

35 (2) This section does not apply to qualified patients or designated36 providers who are transporting:

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(a) No more than twenty-four ounces of useable cannabis;

(b) No more cannabis product than what could reasonably be produced
 with no more than twenty-four ounces of useable cannabis; or

3 (c) A combination of useable cannabis and cannabis product that 4 does not exceed a combined total representing possession and processing 5 of no more than twenty-four ounces of useable cannabis.

6 (3) This section does not apply to a designated provider who is 7 both a qualifying patient and a designated provider for another 8 qualifying patient, and is transporting no more than twice the amounts 9 described in subsection (2) of this section.

10 Sec. 7. RCW 69.51A.030 and 2011 c 181 s 301 are each amended to 11 read as follows:

12 (1) The following acts do not constitute crimes under state law or 13 unprofessional conduct under chapter 18.130 RCW, and a health care professional may not be arrested, searched, prosecuted, disciplined, or 14 subject to other criminal sanctions or civil consequences or liability 15 16 under state law, or have real or personal property searched, seized, or 17 forfeited pursuant to state law, notwithstanding any other provision of 18 law as long as the health care professional complies with subsection (2) of this section: 19

20 (a) Advising a patient about the risks and benefits of medical use 21 of cannabis or that the patient may benefit from the medical use of 22 cannabis; or

(b) Providing a patient meeting the ((criteria established)) definition of qualifying patient under RCW 69.51A.010(((26))) with valid documentation, based upon the health care professional's assessment of the patient's medical history and current medical condition, where such use is within a professional standard of care or in the individual health care professional's medical judgment.

29 (2)(a) A health care professional may only provide a patient with valid documentation authorizing the medical use of cannabis or register 30 31 the patient with the registry established in section ((901)) 16 of this act if he or she has a newly initiated or existing documented 32 33 relationship with the patient, as a primary care provider or a 34 specialist, relating to the diagnosis and ongoing treatment or 35 monitoring of the patient's terminal or debilitating medical condition, 36 and only after:

(i) Completing a physical examination of the patient as
 appropriate, based on the patient's condition and age;

3 (ii) Documenting the terminal or debilitating medical condition of 4 the patient in the patient's medical record and that the patient may 5 benefit from treatment of this condition or its symptoms with medical 6 use of cannabis;

7 (iii) Informing the patient of other options for treating the 8 terminal or debilitating medical condition; and

9 (iv) Documenting other measures attempted to treat the terminal or 10 debilitating medical condition that do not involve the medical use of 11 cannabis.

12 (b) A health care professional shall not:

(i) Accept, solicit, or offer any form of pecuniary remuneration from or to a ((<del>licensed dispenser, licensed producer, or licensed</del> <del>processor of cannabis products</del>)) <u>collective garden or nonprofit patient</u> <u>cooperative</u>;

(ii) Offer a discount or any other thing of value to a qualifying patient who is a ((customer)) member of, or agrees to be a ((customer)) <u>member</u> of, a particular ((licensed dispenser, licensed producer, or <u>licensed processor of cannabis products</u>)) <u>collective garden or</u> <u>nonprofit patient cooperative</u>;

(iii) Examine or offer to examine a patient for purposes of diagnosing a terminal or debilitating medical condition at a location where cannabis is produced, processed, or dispensed;

25 (iv) Have a business or practice which consists solely of 26 authorizing the medical use of cannabis;

(v) Include any statement or reference, visual or otherwise, on the medical use of cannabis in any advertisement for his or her business or practice; or

30 (vi) Hold an economic interest in an enterprise that produces, 31 processes, or dispenses cannabis if the health care professional 32 authorizes the medical use of cannabis.

(3) A violation of any provision of subsection (2) of this section
 constitutes unprofessional conduct under chapter 18.130 RCW.

35 <u>NEW SECTION.</u> Sec. 8. The medical use of cannabis in accordance 36 with the terms and conditions of this chapter does not constitute a 37 crime and a qualifying patient or designated provider in compliance

with the terms and conditions of this chapter may not be arrested, 1 2 prosecuted, or subject to other criminal sanctions or civil consequences, for possession, manufacture, or delivery of, or for 3 possession with intent to manufacture or deliver, cannabis under state 4 law, or have real or personal property seized or forfeited for 5 possession, manufacture, or delivery of, or for possession with intent б 7 to manufacture or deliver, cannabis under state law, and investigating 8 peace officers and law enforcement agencies may not be held civilly liable for failure to seize cannabis in this circumstance, if: 9

10 (1)(a) The qualifying patient or designated provider possesses no
11 more than fifteen cannabis plants and:

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(i) No more than twenty-four ounces of useable cannabis;

13 (ii) No more cannabis product than what could reasonably be 14 produced with no more than twenty-four ounces of useable cannabis; or

(iii) A combination of useable cannabis and cannabis product that does not exceed a combined total representing possession and processing of no more than twenty-four ounces of useable cannabis.

18 (b) If a person is both a qualifying patient and a designated provider for another qualifying patient, the person may possess no more 19 than twice the amounts described in (a) of this subsection, whether the 20 21 useable cannabis, and cannabis product plants, are possessed 22 individually or in combination between the qualifying patient and his 23 or her designated provider;

(2) The qualifying patient or designated provider is registered
with the registry established in section 16 of this act and presents
his or her registration card, to any peace officer who questions the
patient or provider regarding his or her medical use of cannabis;

(3) The qualifying patient or designated provider keeps a copy of
his or her registration card with the registry established in section
16 of this act and the qualifying patient or designated provider's
contact information posted prominently next to any cannabis plants,
cannabis products, or useable cannabis located at his or her residence;

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(4) The investigating peace officer does not possess evidence that:

34 (a) The designated provider has converted cannabis produced or
 35 obtained for the qualifying patient for his or her own personal use or
 36 benefit; or

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(b) The qualifying patient has converted cannabis produced or

1 obtained for his or her own medical use to the qualifying patient's
2 personal, nonmedical use or benefit;

3 (5) The investigating peace officer does not possess evidence that 4 the designated provider has served as a designated provider to more 5 than one qualifying patient within a fifteen-day period; and

6 (6) The investigating peace officer has not observed evidence of 7 any of the circumstances identified in section 16(2) of this act.

8 Sec. 9. RCW 69.51A.043 and 2011 c 181 s 402 are each amended to 9 read as follows:

10 (((1))) A qualifying patient or designated provider who is not 11 registered with the registry established in section ((901)) <u>16</u> of this 12 act may raise ((the)) <u>an</u> affirmative defense ((set forth in subsection 13 (2) of this section, if)) to charges of violations relating to 14 possession, manufacture, or delivery of, or possession with intent to 15 manufacture or deliver, cannabis under state law, through proof at 16 trial, by a preponderance of the evidence, that he or she:

17 <u>(1)(a) ((The qualifying patient or designated provider presents his</u> 18 or her valid documentation to any peace officer who questions the 19 patient or provider regarding his or her medical use of cannabis;

20 (b) The qualifying patient or designated provider)) Possesses no
21 more cannabis than ((the limits set forth in RCW 69.51A.040(1)))
22 fifteen cannabis plants and:

23 (i) No more than twenty-four ounces of useable cannabis;

24 (ii) No more cannabis product than what could reasonably be
 25 produced with no more than twenty-four ounces of useable cannabis; or

26 (iii) A combination of useable cannabis and cannabis product that 27 does not exceed a combined total representing possession and processing 28 of no more than twenty-four ounces of useable cannabis; or

(b) Possess no more than twice the amounts described in (a) of this subsection if the person is both a qualifying patient or designated provider for another qualifying patient, whether the plants, useable cannabis, and cannabis products are possessed individually or in combination between the qualifying patient and his or her designated provider;

35 (((-))) (2) The qualifying patient or designated provider is in 36 compliance with all other terms and conditions of this chapter; <u>and</u>

- 1 (((d) The investigating peace officer does not have probable cause 2 to believe that the qualifying patient or designated provider has 3 committed a felony, or is committing a misdemeanor in the officer's 4 presence, that does not relate to the medical use of cannabis;
- 5 (e) No outstanding warrant for arrest exists for the qualifying
  6 patient or designated provider; and
- 7 (f) The investigating peace officer has not observed evidence of
  8 any of the circumstances identified in section 901(4) of this act.

9 (2) A qualifying patient or designated provider who is not 10 registered with the registry established in section 901 of this act, 11 but who presents his or her valid documentation to any peace officer 12 who questions the patient or provider regarding his or her medical use 13 of cannabis, may assert an affirmative defense to charges of violations of state law relating to cannabis through proof at trial, by a 14 preponderance of the evidence, that he or she otherwise meets the 15 requirements of RCW 69.51A.040. A qualifying patient or designated 16 17 provider meeting the conditions of this subsection but possessing more cannabis than the limits set forth in RCW 69.51A.040(1) may, in the 18 investigating peace officer's discretion, be taken into custody and 19 20 booked into jail in connection with the investigation of the 21 incident.)) (3) The qualifying patient or designated provider presents his or her valid documentation to any peace officer who questions the 22 patient or provider regarding his or her medical use of cannabis or is 23 24 able to demonstrate that he or she had valid documentation in effect at the time of questioning. 25

26 **Sec. 10.** RCW 69.51A.045 and 2011 c 181 s 405 are each amended to 27 read as follows:

A qualifying patient or designated provider in possession of 28 29 cannabis plants, useable cannabis, or cannabis product exceeding the 30 limits set forth in RCW ((69.51A.040)) 69.51A.043(1) but otherwise in compliance with all other terms and conditions of this chapter may 31 32 establish an affirmative defense to charges of violations of state law relating to cannabis through proof at trial, by a preponderance of the 33 34 evidence, that the qualifying patient's necessary medical use exceeds 35 the amounts set forth in RCW ((<del>69.51A.040</del>)) <u>69.51A.043</u>(1). An 36 investigating peace officer may seize cannabis plants, useable 37 cannabis, or cannabis product exceeding the amounts set forth in RCW

1 ((69.51A.040)) 69.51A.043(1): PROVIDED, That in the case of cannabis 2 plants, the qualifying patient or designated provider shall be allowed 3 to select the plants that will remain at the location. The officer and 4 his or her law enforcement agency may not be held civilly liable for 5 failure to seize cannabis in this circumstance.

6 Sec. 11. RCW 69.51A.050 and 1999 c 2 s 7 are each amended to read 7 as follows:

8 (1) The lawful possession, <u>dispensing</u>, <u>delivery</u>, or manufacture of 9 medical ((<u>marijuana as authorized by</u>)) <u>cannabis under</u> this chapter 10 shall not result in the forfeiture or seizure of any <u>real or personal</u> 11 property <u>including</u>, <u>but not limited to</u>, <u>cannabis intended for medical</u> 12 <u>use</u>, <u>items used to facilitate the medical use of cannabis or its</u> 13 <u>production or dispensing for medical use</u>, <u>or proceeds of sales of</u> 14 <u>cannabis for medical use made by nonprofit patient cooperatives</u>.

15 (2) No person shall be prosecuted for constructive possession, 16 conspiracy, or any other criminal offense solely for being in the 17 presence or vicinity of ((medical marijuana)) <u>cannabis intended for</u> 18 <u>medical use</u> or its use as authorized by this chapter.

(3) The state shall not be held liable for any deleterious outcomes from the medical use of ((marijuana)) <u>cannabis</u> by any qualifying patient.

22 **Sec. 12.** RCW 69.51A.055 and 2011 c 181 s 1105 are each amended to 23 read as follows:

(1)(a) The arrest and prosecution protections established in ((RCW 69.51A.040)) section 8 of this act may not be asserted in a supervision revocation or violation hearing by a person who is supervised by a corrections agency or department, including local governments or jails, that has determined that the terms of this section are inconsistent with and contrary to his or her supervision.

30 (b) The affirmative defenses established in RCW 69.51A.043((-)) and 31 69.51A.045((-, 69.51A.047, and section 407 of this act)) may not be 32 asserted in a supervision revocation or violation hearing by a person 33 who is supervised by a corrections agency or department, including 34 local governments or jails, that has determined that the terms of this 35 section are inconsistent with and contrary to his or her supervision. 1 (2) The provisions of RCW ((<del>69.51A.040</del>)) <u>69.51A.043</u>, 69.51A.085, 2 and 69.51A.025 do not apply to a person who is supervised for a 3 criminal conviction by a corrections agency or department, including 4 local governments or jails, that has determined that the terms of this 5 chapter are inconsistent with and contrary to his or her supervision.

6 (((3) A person may not be licensed as a licensed producer, licensed 7 processor of cannabis products, or a licensed dispenser under section 8 601, 602, or 701 of this act if he or she is supervised for a criminal 9 conviction by a corrections agency or department, including local 10 governments or jails, that has determined that licensure is 11 inconsistent with and contrary to his or her supervision.))

12 **Sec. 13.** RCW 69.51A.060 and 2011 c 181 s 501 are each amended to 13 read as follows:

(1) It shall be a class 3 civil infraction to use or display
 medical cannabis in a manner or place which is open to the view of the
 general public.

17 (2) Nothing in this chapter establishes a right of care as a 18 covered benefit or requires any state purchased health care as defined 19 in RCW 41.05.011 or other health carrier or health plan as defined in 20 Title 48 RCW to be liable for any claim for reimbursement for the 21 medical use of cannabis. Such entities may enact coverage or 22 noncoverage criteria or related policies for payment or nonpayment of 23 medical cannabis in their sole discretion.

(3) Nothing in this chapter requires any health care professionalto authorize the medical use of cannabis for a patient.

(4) Nothing in this chapter requires any accommodation of any onsite medical use of cannabis in any place of employment, in any school
bus or on any school grounds, in any youth center, in any correctional
facility, or smoking cannabis in any public place <u>as that term is</u>
<u>defined in RCW 70.160.020</u> or hotel or motel.

(5) Nothing in this chapter authorizes the use of medical cannabis
by any person who is subject to the Washington code of military justice
in chapter 38.38 RCW.

(6) Employers may establish drug-free work policies. Nothing in
 this chapter requires an accommodation for the medical use of cannabis
 if an employer has a drug-free work place.

1 (7) It is a class C felony to fraudulently produce any record 2 purporting to be, or tamper with the content of any record for the 3 purpose of having it accepted as, valid documentation under RCW 4 69.51A.010((<del>(32)(a)</del>)) <u>(23)</u>, or to backdate such documentation to a time 5 earlier than its actual date of execution.

6 (8) No person shall be entitled to claim the protection from arrest 7 and prosecution under ((RCW 69.51A.040)) section 8 of this act or the 8 affirmative defense under RCW 69.51A.043 for engaging in the medical use of cannabis in a way that endangers the health or well-being of any 9 10 person through the use of a motorized vehicle on a street, road, or highway, including violations of RCW 46.61.502 or 46.61.504, 11 or 12 equivalent local ordinances provided that a conviction under RCW 13 46.61.502 or 46.61.504, or equivalent local ordinances must not be based solely on the presence of cannabis in an individual's system, 14 15 proof of actual impairment is required.

16 Sec. 14. RCW 69.51A.025 and 2011 c 181 s 413 are each amended to 17 read as follows:

Nothing in this chapter or in the rules adopted to implement it precludes a qualifying patient or designated provider from engaging in the private, unlicensed, noncommercial production, possession, transportation, delivery, or administration of cannabis for medical use as authorized under RCW ((<del>69.51A.040</del>)) <u>69.51A.043</u>.

23 **Sec. 15.** RCW 69.51A.200 and 2011 c 181 s 1001 are each amended to 24 read as follows:

(1) By July 1, ((2014)) 2015, the Washington state institute for public policy shall, within available funds, ((conduct a cost-benefit evaluation of the implementation of chapter 181, Laws of 2011 and the rules adopted to carry out its purposes)) evaluate the implementation of this act and report to the appropriate committees of the legislature on which cities and counties permit nonprofit patient cooperatives.

31 (2) The evaluation ((of the implementation of chapter 181, Laws of 32 2011 and the rules adopted to carry out its purposes)) shall include((, 33 but not necessarily be limited to,)) consideration of the following 34 factors:

35 (a) Qualifying patients' access to ((an)) <u>a safe</u>, adequate, <u>and</u>
 36 <u>consistent</u> source of cannabis for medical use;

- 1 (b) ((Qualifying patients' access to a safe source of cannabis for 2 medical use;
- 3 (c) Qualifying patients' access to a consistent source of cannabis
  4 for medical use;
- 5 (d) Qualifying patients' access to a secure source of cannabis for 6 medical use;
- 7 (e)) Qualifying patients' and designated providers' contact with
  8 law enforcement and involvement in the criminal justice system;
- 9 ((<del>(f)</del>)) <u>(c)</u> Diversion of cannabis intended for medical use to 10 nonmedical uses;
- 11 ((<del>(g)</del>)) <u>(d)</u> Incidents of home invasion burglaries, robberies, and 12 other violent and property crimes associated with qualifying patients 13 accessing cannabis for medical use;
- 14 ((<del>(h)</del>)) <u>(e)</u> Whether there are health care professionals who make a 15 disproportionately high amount of authorizations in comparison to the 16 health care professional community at large; <u>and</u>
- 17  $(((\frac{i})))$  <u>(f)</u> Whether there are indications of health care 18 professionals in violation of RCW 69.51A.030(( $\frac{i}{i}$  and
- 19 (j) Whether the health care professionals making authorizations 20 reside in this state or out of this state)).
- (3) For purposes of facilitating this evaluation, the department((s)) of health ((and agriculture)) will make available to the Washington state institute for public policy requested data, and any other data ((either)) the department ((may)) considers relevant, from which all personally identifiable information has been redacted.
- 26 <u>NEW SECTION.</u> Sec. 16. A new section is added to chapter 69.51A 27 RCW to read as follows:
- (1) By January 1, 2014, the department of health shall adopt rules
   for the creation, implementation, maintenance, and timely upgrading of
   a secure and confidential registration system that allows:
- 31 (a) A peace officer to verify at any time whether a health care 32 professional has registered a person as either a qualifying patient or 33 a designated provider; and
- 34 (b) A peace officer to verify at any time whether an entity is35 registered as a collective garden or nonprofit patient cooperative.
- 36 (2) Before seeking a nonvehicle search warrant or arrest warrant,
   37 a peace officer investigating a cannabis-related incident must make

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1 reasonable efforts to ascertain whether the location or person under 2 investigation is registered under subsection (1) of this section and 3 include the results of this inquiry in the affidavit submitted in 4 support of the application for the warrant. This requirement does not 5 apply to investigations in which:

6 (a) The peace officer has observed evidence of a cannabis operation 7 that is not for the medical use of its participants;

8 (b) The peace officer has observed evidence of theft of electrical9 power;

10 (c) The peace officer has observed evidence of illegal drugs other 11 than cannabis at the premises;

12 (d) The peace officer has observed frequent and numerous short-term 13 visits over an extended period that are consistent with commercial 14 activity, if the subject of the investigation is not a nonprofit 15 patient cooperative;

16 (e) The peace officer has observed violent crime or other 17 demonstrated dangers to the community;

(f) The peace officer has probable cause to believe the subject of the investigation has committed a felony, or a misdemeanor in the officer's presence, that does not relate to cannabis; or

21 (g) The subject of the investigation has an outstanding arrest 22 warrant.

(3) Law enforcement may access the registry only in connection with
a specific, legitimate criminal investigation regarding cannabis.

(4) Qualified patients, designated providers, collective gardens, and nonprofit patient cooperatives are not required to register under subsection (1) of this section. However, only those entities that are registered will be provided with arrest and prosecution protection under section 8 of this act. Registrations are valid for one year; however, qualifying patients and designated providers must be able to remove themselves from the registry at any time.

(5) During the rule-making process, the department of health must
 consult with the University of Washington computer science and
 engineering security and privacy research lab.

35 (6) The department of health must adopt rules providing for 36 registration renewals and for removing expired registrations from the 37 registry. 1 (7) The department of health may designate a private entity to 2 administer the registry, subject to chapter 43.19 RCW. Either the 3 department of health or its designee must issue registration cards to 4 registered entities.

(8) Fees, including renewal fees, for entities participating in the 5 registration system are limited to the cost to the department of health 6 7 or its designee of implementing, maintaining, and enforcing the 8 provisions of this section and the cost to the department of health of adopting rules to carry out the purposes or this section. The fee 9 10 shall also include any costs for the department of health to disseminate information to employees of state and local law enforcement 11 12 agencies relating to whether a person or location is a qualified 13 patient, designated provider, collective garden, or nonprofit patient 14 cooperative, and for the dissemination of log records relating to such requests for information to the subjects of those requests. No fee may 15 16 be charged to local law enforcement agencies for accessing the 17 registry.

(9) The medical cannabis registry advisory committee is establishedas an advisory group for the department of health.

(a) The department of health shall appoint members of the committee from stakeholders and persons with relevant expertise including, but not limited to, qualifying patients, designated providers, health care professionals, medical marijuana advocates, state and local law enforcement agencies, and the University of Washington computer science and engineering security and privacy research lab.

(b) The committee shall review the proposed rules relating to the registration system created by this section and advise the department of health on the administrative aspects of the registry, including how to best protect personally identifiable information. The department of health may discontinue the committee after the final adoption of the rules or may continue consulting committee members if deemed necessary by the department.

33 (c) The department of health shall provide staff support to the 34 committee.

35 (10) The registry shall meet the following requirements:

(a) Any personally identifiable information included in the
 registry must be nonreversible, pursuant to definitions and standards
 set forth by the national institute of standards and technology;

(b) Any personally identifiable information included in the
 registry must not be susceptible to linkage by use of data external to
 the registry;

4 (c) The registry must incorporate current best differential privacy
5 practices, allowing for maximum accuracy of registry queries while
6 minimizing the chances of identifying the personally identifiable
7 information included therein; and

8 (d) The registry must be upgradable and updated in a timely fashion 9 to keep current with state of the art privacy and security standards 10 and practices.

(11) (11) The registry shall maintain a log of each verification query submitted by a peace officer, including the peace officer's name, agency, and identification number, for a period of no less than three years from the date of the query. Personally identifiable information of qualifying patients and designated providers included in the log shall be confidential and exempt from public disclosure, inspection, or copying under chapter 42.56 RCW: PROVIDED, That:

18 (a) Names and other personally identifiable information from the 19 list may be released only to authorized employees of state or local law enforcement agencies, only as necessary to verify that the person or 20 21 location is a qualified patient, designated provider, collective 22 garden, or nonprofit patient cooperative, and only after the inquiring employee has provided adequate identification. Authorized employees 23 24 who obtain personally identifiable information under this subsection 25 may not release or use the information for any purpose other than 26 verification that a person or location is a qualified patient, 27 designated provider, collective garden, or nonprofit patient 28 cooperative;

(b) Information contained in the registry may be released in aggregate form, with all personally identifying information redacted, for the purpose of statistical analysis and oversight of agency performance and actions;

33 (c) The subject of a registration query may appear during ordinary 34 business hours of the entity administering the registry and inspect or 35 copy log records relating to him or her upon adequate proof of 36 identity; and

37 (d) The subject of a registration query may submit a written

request to the entity administering the registry, along with adequate
 proof of identity, for copies of log records relating to him or her.

3 (12) Fees collected under this section must be deposited into the4 health professions account under RCW 43.70.320.

5 <u>NEW SECTION.</u> Sec. 17. A new section is added to chapter 42.56 RCW 6 to read as follows:

7 Records containing names and other personally identifiable 8 information relating to qualifying patients, designated providers, 9 collective gardens, and nonprofit patient cooperatives are exempt from 10 disclosure under this chapter.

11 <u>NEW SECTION.</u> Sec. 18. The following acts or parts of acts are 12 each repealed:

13 (1) RCW 69.51A.047 (Failure to register or present valid 14 documentation--Affirmative defense) and 2011 c 181 s 406; and

15 (2) RCW 69.51A.040 (Compliance with chapter--Qualifying patients 16 and designated providers not subject to penalties--Law enforcement not 17 subject to liability) and 2011 c 181 s 401, 2007 c 371 s 5, & 1999 c 2 18 s 5.

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