

November 9, 2017

FREEDOM OF INFORMATION ACT REQUEST

Office of National Drug Control Policy
Office of Legal Counsel
Attn: Chief FOIA Officer
750 17th Street, N.W.
Washington, D.C. 20503

VIA ELECTRONIC MAIL (FOIA@ondcp.eop.gov)

Re: Disclosure of documents and communications of the ONDCP and President's Commission on Drug Abuse and the Opioid Crisis relating to the approval, publishing, and dissemination of the study named "Cannabis Use and Risk of Prescription Opioid Use Disorder" conducted by Drs. Mark Olfson, Melanie M. Wall, Ph.D, Shang-Min Liu, M.S., Carlos Blanco, M.D., Ph.D from March 1, 2017 through November 3rd, 2017.

Dear Mr. Passante:

This is a request under the Freedom of Information Act (5 U.S.C. §552, as amended).

By this letter I am requesting any documents, communications, (including but not limited to emails, social media, and SMS or other text messages), meeting minutes, recommendations, memoranda, policies, or actions taken by the Office of National Drug Control Policy and/or the President's Commission ("Commission") on Drug Abuse and the Opioid Crisis, as a whole and/or in the individual capacity of each commission member, that reference or discuss "Cannabis Use and Risk of Prescription Opioid Use Disorder in the United States" (**ATTACHED**) from March 1, 2017 to November 3, 2017.

This request includes any communications about medical cannabis generally as well as any information or communications that led to the drafting, development, or decision making process of the below paragraph from the November 1st letter from the President's Commission on Drug Abuse and Combating the Opioid Crisis (**ATTACHED**):

The Commission acknowledges that there is an active movement to promote the use of marijuana as an alternative medication for chronic pain and as a treatment for opioid addiction. Recent research out of the NIH's National Institute on Drug Abuse found that marijuana use led to a 2 ½ times greater chance that the marijuana user would become

an opioid user and abuser. The Commission found this very disturbing. There is a lack of sophisticated outcome data on dose, potency, and abuse potential for marijuana. This mirrors the lack of data in the 1990's and early 2000's when opioid prescribing multiplied across health care settings and led to the current epidemic of abuse, misuse and addiction. The Commission urges that the same mistake is not made with the uninformed rush to put another drug legally on the market in the midst of an overdose epidemic.

Such documents need not be identified by title or "draft"/"final" designations if to do so would compromise the ONDCP or Commission's decision-making process. In such cases, the requesters ask that you merely delete such revealing designations and release the balance.

Recent Center for Disease Control numbers indicate that over 64,000 individuals lost their lives to overdose last year. With 175 individuals losing their lives each day to the drug crisis, I note that time is of the essence in this matter. **There is a great need for prompt disclosure so that the released information may more adequately inform the public debate.**

This request is made on behalf of Americans for Safe Access. Americans for Safe Access actively informs the public on matters affecting medical cannabis patients throughout the country. Through publications, reports, commentary to the press, sponsorship of educational programs and events, and the development of an institutional expertise regarding medical cannabis, it has become very involved in the development of a regional and national agenda for the protection of patients. Americans for Safe Access has lobbied, litigated, and publicly commented on federal actions which often directly affect the nearly two million medical cannabis patients in the United States.

Americans for Safe Access plans to make these documents available to the public through their website. As this organization is a nonprofit, whose materials are open to the general public, many people will thereby have access to the information contained in the materials which are the subject of this request. These materials will not be used for commercial use or gain.

This request is not meant to be exclusive of any other records which, though not specifically requested, would have a reasonable relationship to the subject matter of this request. In the event that access to any of the requested records is denied, please note that the FOIA provides that if only portions of a requested file are exempted from release, the remainder must still be released. I therefore request that I be provided with all non-exempt portions which are reasonably segregable. I further request that you describe the deleted material in detail and specify the statutory basis for the denial as well as your reasons for believing that the alleged statutory justification applies in this instance.

Please separately state your reasons for not invoking your discretionary powers to release the requested documents in the public interest. Such statements will be helpful in deciding whether to appeal an adverse determination, and in formulating arguments in case an appeal is taken. Americans for Safe Access written justification might also help to avoid unnecessary litigation. I of course reserve my right to appeal the withholding or deletion of any information and expect that you will list the office and address were such an appeal can be sent.

I anticipate, however, that you will make the requested materials available within the statutorily prescribed period. I thus also request that you waive any applicable fees since disclosure meets the statutory standard for waiver of fees in that it is clearly "in the public interest because furnishing the information can be considered as primarily benefiting the general public," 5 U.S.C. § 552(a)(4)(A). In this regard, I reiterate that Americans for Safe Access has no intention of using the information disclosed for financial gain, as they are requesting these documents solely to inform the public and members of Congress and encourage debate. If for some reason, the fee waiver request is denied, while reserving my right to appeal such a decision, I am willing to pay up to \$25.00 (twenty-five dollars) to cover costs of document search and duplication. If you anticipate costs will be more than this, please do not hesitate to contact me.

Please send the requested documents either in paper form to Steph Sherer, 1624 U St. NW, Suite 200, Washington, DC 20009, or in .pdf format by email to steph@safeaccessnow.org. We appreciate your cooperation in providing the documents in this format

Access to the requested records should be granted within twenty (20) working days from the date of your receipt. Failure to respond in a timely manner shall be viewed as a denial of this request and Americans for Safe Access may immediately file an administrative appeal. Thank you in advance for your prompt reply.

Sincerely,

Steph Sherer
Executive Director
Americans for Safe Access

November 9, 2017

FREEDOM OF INFORMATION ACT REQUEST

National Institute of Drug Abuse
Lanette Palmquist
Room 5230
6001 Executive Blvd.
Rockville, MD 20852

VIA ELECTRONIC MAIL (NIDAFIOIA@mail.nih.gov)

Re: Disclosure of documents and internal and external communications relating to the approval, publication, and dissemination of the study named “Cannabis Use and Risk of Prescription Opioid Use Disorder” conducted by Drs. Mark Olsson, Melanie M. Wall, Ph.D, Shang-Min Liu, M.S., Carlos Blanco, M.D., Ph.D, from March 1, 2017 through November 3, 2017.

Dear Ms. Palmquist:

This is a request under the Freedom of Information Act (5 U.S.C. §552, as amended).

By this letter I am requesting any documents, communications,(including but not limited to emails, SMS or other text messages, phone transcripts), meeting minutes, recommendations, memoranda, policies, or actions taken by NIDA that reference or discuss “Cannabis Use and Risk of Prescription Opioid Use Disorder in the United States” (**ATTACHED**) from March 1, 2017 to November 3, 2017. This request includes any documents related to policy disseminated or implemented based on this study, details surrounding relevant grants approved to conduct this research, inquires on timing of release of study, documents highlighting limitations of this study, and communications with external organizations or their agents about this study.

This request also asks for any communications about medical cannabis generally as well as information or communications that led to the drafting, development, or decision making process of the below paragraph that appeared in the November 1st letter from the President’s Commission on Drug Abuse and the Opioid Crisis (**ATTACHED**):

The Commission acknowledges that there is an active movement to promote the use of marijuana as an alternative medication for chronic pain and as a treatment for opioid addiction. Recent research out of the NIH’s National Institute on Drug Abuse found

that marijuana use led to a 2 ½ times greater chance that the marijuana user would become an opioid user and abuser. The Commission found this very disturbing. There is a lack of sophisticated outcome data on dose, potency, and abuse potential for marijuana. This mirrors the lack of data in the 1990's and early 2000's when opioid prescribing multiplied across health care settings and led to the current epidemic of abuse, misuse and addiction. The Commission urges that the same mistake is not made with the uninformed rush to put another drug legally on the market in the midst of an overdose epidemic (emphasis added).

Such documents need not be identified by title or "draft"/"final" designations if to do so would compromise the NIDA's decision-making process. In such cases, we ask that you merely delete such revealing designations and release the balance.

Recent Center for Disease Control numbers indicate that over 64,000 individuals lost their lives to overdose last year. With 175 individuals losing their lives each day to the drug crisis, I note that time is of the essence in this matter. **There is a great need for prompt disclosure so that the released information may more adequately inform the public debate.**

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Steph Sherer
Executive Director
Americans for Safe Access