

Vote to Reauthorize the Rohrabacher-Farr Amendment to the CJS Appropriations Bill

Protect State Medical Marijuana Programs and the Patients Who Rely on Them

Over the past two decades, 39 states have adopted and engaged in the ongoing process of implementing their own state medical marijuana programs that allow patients to have access to the therapy under the supervision of a recommending physician. This year's Rohrabacher-Farr Amendment has 6 Republican and 6 Democrat sponsors and would recognize the right of states to operate their own programs with respect to the issue of medical marijuana, without prohibitive interference from the U.S. Justice Department, which had been escalating through the end of 2014 in its efforts to stymie these programs.

Last year, the U.S. House approved the Rohrabacher-Farr Amendment by a vote of 219-189, enjoying strong bipartisan support, with 170 Democrats and 49 Republicans joining in the vote. At the time, there were 32 states with some sort of medical marijuana protections for patients, physicians, and providers acting in accordance to the law. Since last year's vote, the number of states has grown to 39, and is expected continue to grow.

Approximately 2.4 million American patients rely on the protections of the Rohrabacher-Farr Amendment. More than 50 different medical conditions have been approved in varying combinations by the 39 states. The federal government has failed to implement any of the recommendations provided by the National Academy of Science's 1999 Institute of Medicine (IOM) report, Marijuana and Medicine: Assessing the Science Base. Until the Administration provides access to marijuana for research *and* therapeutic use, Congress should limit the ability of the Justice Department to arrest and prosecute patients and providers who are acting in accordance their state law.

Protecting the right of states to set their own policies regarding the therapeutic use of marijuana should appeal to conservatives and liberals alike. Respecting the 10th Amendment rights of states as laboratories of democracy enables them to enact their own laws to best serve the needs of the residents of their state in the way they see fit. Keep big government out of the doctor's office by letting states determine their own medical marijuana laws.

See flip side for amendment text & bipartisan list of sponsors

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Don't Roll Back the Clock on Protecting Medical Marijuana Patients Vote AYE on the Rohrabacher-Farr Amendment

Sponsors: Rohrabacher (R-CA), Farr (D-CA), Ribble (R-WI), Lee (D-CA), Massie (R-KY), Blumenauer (D-OR), Heck (R-NV), Cohen (D-TN), Young (R-AK), Polis (D-CO), McClintock (R-CA), Titus (D-NV)

Amendment Text:

None of the funds made available in this Act to the Department of Justice may be used, with respect to any of the States of Alabama, Alaska, Arizona, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Illinois, Iowa, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Oklahoma, Oregon, Rhode Island, South Carolina, Tennessee, Texas, Utah, Vermont, Virginia, Washington, and Wisconsin, or with respect to either the District of Columbia or Guam, to prevent any of them from implementing their own laws that authorize the use, distribution, possession, or cultivation of medical marijuana.

Quick facts:

- 39 states now have some form of medical marijuana patient protections
- 275 million Americans live under these laws (~85% of U.S. population)
- Approximately 2.4 million patients utilize these laws¹
- Over 50 medical conditions have been approved among these programs²
- States with medical marijuana programs have seen drops in opioid overdoses,³ highway fatalities,⁴ and not experienced increased teen use⁵
- Under the Obama Administration, the Dept. of Justice has spent an estimated \$350 million interfering with state medical marijuana programs⁶

What the amendment doesn't do:

The Amendment does not reschedule or otherwise "legalize" medical marijuana. It also does not prevent the Justice Department from using funds to enforce federal laws against those who do not operate in compliance with state and local medical marijuana laws.

¹Number of Legal Medical Marijuana Patients (as of Oct. 27, 2014),

<http://medicalmarijuana.procon.org/view.resource.php?resourceID=005889>.

² Complete list of state medical marijuana qualifying conditions available at: <https://goo.gl/6kYWo6>.

³ "Medical cannabis laws are associated with significantly lower state-level opioid overdose mortality rates." Medical Cannabis Laws and Opioid Analgesic Overdose Mortality in the United States, 1999-2010. Marcus A. Bachhuber, MD, et al., *JAMA Intern Med.* 2014;174(11):1875. doi:10.1001/jamainternmed.2014.5823.

⁴ "The first full year after coming into effect, [medical] legalization is associated with an 8–11 percent decrease in traffic fatalities." *Journal of Law and Economics*, Vol. 56, No. 2 (May 2013), pp. 333-369.

⁵ "Our results are not consistent with the hypothesis that legalization leads to increased use of marijuana by teenagers." *Medical Marijuana Laws and Teen Marijuana Use*, D. Mark Anderson, et al., National Bureau of Economic Research, NBER Working Paper No. 20332, July 2014.

⁶ See ASA's What's the Cost? report, <http://american-safe-access.s3.amazonaws.com/documents/WhatsTheCost.pdf>.

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