

Virginia Medical Cannabis Patient Advocates Support HB 1605 & HB 1445, But Seek a More Comprehensive Program for Access and Protections

Why the current law is ineffective:

Section § 18.2-251.1 of the Code of Virginia allows physicians to write “prescriptions” for marijuana (also known as cannabis). However, because cannabis is currently classified as a Schedule I drug, it cannot be prescribed by any doctor in the United States or dispensed through pharmacies. In states with medical cannabis programs, a written “recommendation” is given to patients to qualify them for medical cannabis treatment. The current but non-functional law also allowed for distribution through pharmacies because of the Schedule I status, pharmacies throughout the nation cannot dispense medical cannabis. In states with successful medical cannabis programs, distribution is accomplished through a combination home state-regulated dispensaries and/or home cultivation.

What HB 1605 and HB 1445 would both do:

Change the word “*prescription*” to “*recommendation*.” This would legally protect physicians from prosecution and allow them to discuss and/or recommend cannabis treatment to qualifying patient, and would also protect patients from prosecution for possession (but not cultivation) of cannabis with a valid physician’s recommendation.

The differences of HB 1605 and HB 1445:

- HB 1605 lifts the current qualifying conditions list and allows registered physicians to recommend cannabis treatment to patients. This includes any serious condition that may benefit from cannabis therapy and/or conditions in which the patient does not respond to current therapeutic options.
- HB 1445 expands the conditions list to include epilepsy. We support and applaud the champions of this bill for willing to expand the current law to provide legal protection to more patients. However, this expansion would still **not** cover patients with conditions that do not respond to current therapy and may benefit from cannabis therapy (including Multiple sclerosis, Parkinson’s disease, PTSD, Chron’s disease, ALS, as well as rare and severe conditions such as gastroparesis).

See Reverse for Recommendations

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What both the bills will NOT do:

- Neither bill would establish a state-regulated medical marijuana dispensary program. **Safe Access VA supports safe and legal access to regulated medical marijuana dispensaries for Virginia patients with a physician's recommendation. Safe Access VA urges lawmakers to consider the model legislation drafted by Americans for Safe Access.ⁱ**
- Neither bill protects patients who decide to cultivate their own medicine, and possession of marijuana paraphernalia is also not protected. Patients with a valid recommendation from their physician for the use of cannabis would still be subject to prosecution for the cultivation of marijuana or possession of paraphernalia.

Recommendation:

- At a minimum, conduct related to cultivation and paraphernalia should also be included in any new VA medical cannabis legislation.
- Comprehensive protections and safe and legal access for all patients with medical necessity is the most prudent course of action. See ASA's model legislation.

ⁱ Model legislation available in *MEDICAL MARIJUANA ACCESS IN THE U.S. A Patient-Focused Analysis of the Patchwork of State Laws*, see: http://www.safeaccessnow.org/asa_reports.

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