

## 5 Administrative Actions for First 100 Days

In the first 100 days of the Biden-Harris Administration, federal department and agency leaders will be nominated, confirmed, and will begin work on implementing policy priorities of the new administration. From the economy to housing and public health, these policies will affect the lives of millions of patients. While the Biden-Harris Administration's 100-day plan does not include an approach to federal medical cannabis reforms, there are actions that can be taken to improve the lives of patients without legislative action from Congress.

### 1. Stop Evictions of Medical Cannabis Patients in Federal Housing

The U.S. Department of Housing and Urban Development (HUD) maintains policies such as the Quality Housing and Work and Responsibility Act of 1998 that prohibit federally subsidized housing tenants from possessing or using cannabis, even if tenants are doing so in compliance with state and local laws. These policies force medical cannabis patients to choose between their health and their housing. The HUD Secretary may revise the 2014 guidance<sup>1</sup> issued by the Department regarding the authority of public housing agencies to deny admission of medical cannabis patients and replace the language to allow occupancy to patients using medical cannabis.

### 2. Allow VA Doctors to Recommend Cannabis

The nearly 18 million<sup>2</sup> veterans served by the U.S. Department of Veterans Affairs face a confusing system of federal and state laws regarding medical cannabis use. Veterans that rely on the VA as their primary healthcare provider are unable to receive medical cannabis recommendations from their doctors despite their state having a medical cannabis program. With 1 in 5<sup>3</sup> military veterans making the choice to use state-authorized medical cannabis for treatment, it is time for the VA to reexamine its policies on cannabis. As a first step, the Secretary of Veterans Affairs can repeal §3(b) of the Veterans Health Administration Directive 1315 so that cannabis is no longer defined as a drug of abuse.

### medical cannabis patient

*[me-di-kəl ka-nə-bəs pā-shənt] n.*

a person living with a medical condition\* who uses cannabis therapeutics because it's the only option, it's a more suitable option, or it's an adjunct treatment to available care options.

*\*State programs recognize over 125 symptoms and medical conditions that doctors and their patients can treat with medical cannabis.*

<sup>1</sup> <https://www.hud.gov/sites/documents/USEOFMARIJINMFASSISTPROPTY.PDF>

<sup>2</sup> <https://www.va.gov/health/aboutvha.asp>

<sup>3</sup> <https://www.legion.org/veteranshealthcare/239814/survey-shows-veteran-households-support-research-medical-cannabis>

### 3. Stop Drug Testing Federal Employees and Contractors for Cannabis

Federal employees and contractors, regardless of their state of residence, are prohibited from using cannabis and are subject to random drug testing. Legal authority requiring federal employees to adhere to this policy began in 1986 and is now administered by the Substance Abuse and Mental Health Services Administration. The Biden-Harris administration can instruct the Office of Personnel Management (OPM) to stop testing for cannabis and can work to remove cannabis from the list of illegal drugs for which federal employees are screened.

### 4. Reinstate the Cole Memo

In 2018, the U.S. Department of Justice rescinded its 2013 Cole Memo, a series of guidelines for cannabis states and providers to avoid federal interference, which has left federal prosecutors without guidance for approaching disparities in state and federal laws. The memo, coupled with the Treasury Department's 2014 Financial Crimes Enforcement Network FinCEN guidance that detailed financial institution requirements for serving legal cannabis businesses, reassured banks and credit unions regarding the safety of doing business with the legal cannabis industry. Restoring the Cole Memo will ensure that states can continue to supply medical cannabis to patients without federal interference.

### 5. Ask Congress for Comprehensive Medical Cannabis Legislation

Safe access to medical cannabis for all Americans is still hampered by the conflict between federal and state laws. Despite all the great work that patient advocates and state and local governments have done over the last 27 years, there are millions of Americans that state programs still cannot reach\*\*. Comprehensive medical cannabis legislation would harmonize state and federal law, creating a consistent and predictable regulatory environment on which patients and their doctors can depend. Congress needs to know that the Biden-Harris administration wants a medical cannabis bill to create equity for patients nationwide.



#### \*\* Only Federal Leadership Can Bring Equity to:

- ✓ 18 million veterans
- ✓ 34 million Americans living in poverty
- ✓ 9 million Americans in the federal workforce
- ✓ 94 million Americans living in states without medical cannabis programs
- ✓ 109,000 Americans on organ transplant lists



AmericansForSafeAccess.org

*ASA is the largest national organization of patients, medical cannabis providers, medical professionals, scientists and concerned citizens promoting safe and legal access to cannabis for therapeutic use and research with over 150,000 supporters in all 50 states.*