

The Legalization of Marijuana in Michigan



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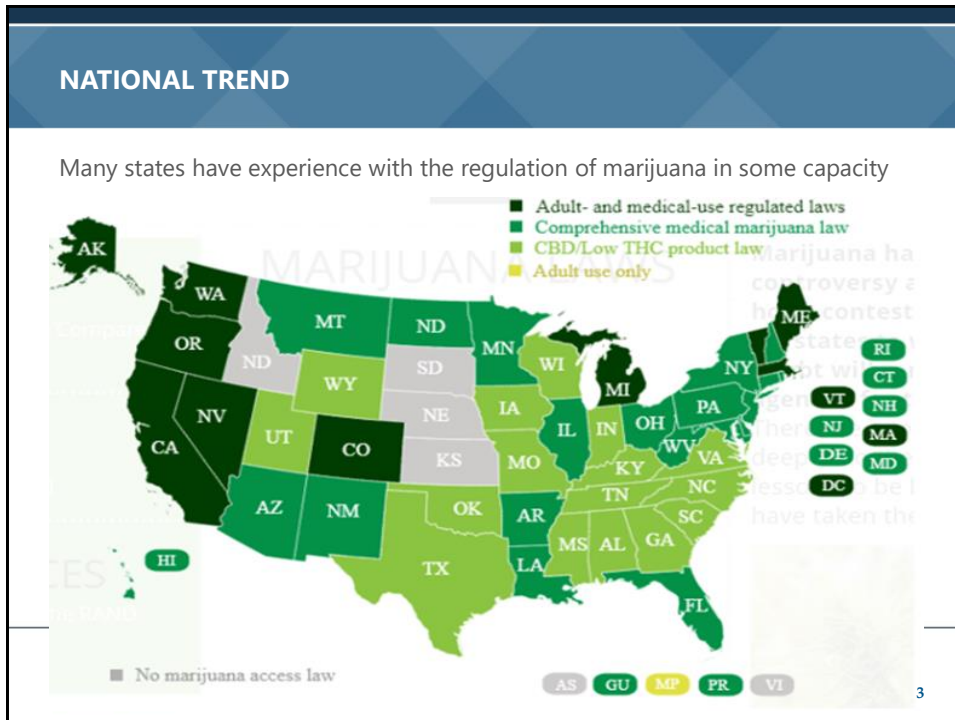
NATIONAL TREND

- Nationally, support for the legalization of marijuana (62%) has more than doubled over the past twenty years
- "Majorities of Millennials (74%), Gen Xers (63%) and Baby Boomers (54%) say the use of marijuana should be legal. Members of the Silent Generation continue to be the least supportive of legalization (39%), but they have become more supportive in the past year." (Pew Research Center)



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FEDERAL OVERSIGHT

- U.S. Controlled Substances Act (CSA)
 - Schedule I controlled substance
- U.S. Department of justice marijuana enforcement policy updates
- In 2016, the U.S. Drug Enforcement Agency (DEA) changed policy to increase the number of DEA-registered cannabis manufacturers authorized to produce cannabis for research purposes
- Passage of Farm Bill, removing “hemp” from the CSA definition of “marijuana” and excluding THC contained in “hemp” from scheduling under the CSA


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FEDERAL OVERSIGHT

- FDA approved cannabinoids
 - Epidiolex® oral solution (cannabidiol/"CBD") for the treatment of seizures associated with two rare, severe forms of epilepsy, Lennox-Gastaut syndrome and Dravet syndrome, in patients two years of age or older
 - Synthetic cannabinoids - Dronabinol (Marinol® and Syndros™) and nabilone (Cesamet®) to treat nausea and vomiting associated with cancer chemotherapy; dronabinol is also approved to treat loss of appetite and weight loss in people with AIDS
- Introduction of the Medical Cannabis Research Act of 2019 (H.R. 601)

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MICHIGAN'S LEGAL LANDSCAPE

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MICHIGAN'S THREE MARIJUANA-RELATED LAWS		
2008 Michigan Medical Marihuana Act	2016 Medical Marihuana Facilities Licensing Act	2018 Michigan Regulation and Taxation of Marihuana Act
<ul style="list-style-type: none"> • Allows for patient/caregiver relationship regarding medical marijuana. • Patients may possess up to 12 plants and 2.5 ounces of marijuana. • Caregivers may register to serve up to 5 patients. • Patients/caregivers must be registered with the state registry program. • MI licensed MD/DO certification of debilitating medical condition required • May not sell marijuana. 	<ul style="list-style-type: none"> • Allows for commercial sale of marijuana to patients and caregivers. • Five different types of licenses granted by the Medical Marihuana Licensing Board: growers, processors, provisioning centers, secure transporters, safety compliance facilities. • May not sell marijuana to non-cardholders. • Map of licensed facilities available at Michigan.gov/BMR. 	<ul style="list-style-type: none"> • Up to 12 plants per household and 10 ounces. Amounts greater than 2.5 ounces must be locked in a safe. • Up to 2.5 ounces on your person, no more than 15 grams of marijuana concentrates. • Allows for commercial sale of marijuana to adults over the age of 21. • Six different types of licenses granted by the Bureau of Marijuana Regulation: growers, processors, retailers, microbusinesses, secure transporters, safety compliance facilities. • Commercial license applications available by December 6, 2019.
		<p><i>Note: This information is accurate as of December 6, 2018. The provisions of all three laws are concurrently in place and active.</i></p> <p><i>Source: Michigan Department of Licensing and Regulatory Affairs</i></p>

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OVERVIEW
<ul style="list-style-type: none"> • Michigan Medical Marihuana Act (MMMA) approved by Michigan voters on November 4, 2008 • Only Michigan licensed physicians can complete and sign the physician certification for a qualifying patient • The list of debilitating medical conditions that qualify a person for the medical use of marijuana can be found at https://www.michigan.gov/lara/0,4601,7-154-89334_79571_83746-449306--,00.html


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OVERVIEW

- On November 6, 2018, Michigan voters approved Proposal 1, creating the Michigan Regulation and Taxation of Marihuana Act (MRTMA)
- Michigan became the 10th state in the country to legalize the recreational use of marijuana in addition to the District of Columbia
- As of December 6, 2018, possession of the allowed amount is legal; however, selling for recreational purposes is not yet legal
- Communities must affirmatively act to “opt out” of regulating recreational marijuana commercial enterprises



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REGULATORY OVERSIGHT

- The Michigan Department of Regulatory Affairs' (LARA) Bureau of Marijuana Regulation (BMR) oversees all marijuana-related regulation
 - Patient and caregiver registry, medical marijuana facility licensing, and newly established statutory requirements of adult-use marijuana
- Michigan's marijuana-related website
 - www.michigan.gov/marijuana
 - Consolidates information from multiple state departments
 - Includes links to medical marijuana facilities, registry card application information, health effects, and more



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REGULATORY OVERSIGHT

- LARA is required to promulgate rules necessary to implement, administer and enforce the Acts
 - Rules in place for the MMMA and MMFLA
 - Emergency rules issued in July for the MRTMA
 - Applications for licensure to operate a marihuana establishment
 - Testing, packaging, and labeling standards
 - Requirements and standards for safe cultivation, processing, and distribution
 - Fee schedule and collection
 - Security, record-keeping, marketing restrictions, etc.
- LARA plans to start taking business applications on November 1st (required to do so by mid-December)

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MICHIGAN'S UNIVERSAL SYMBOL



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WHAT'S NEXT?



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FEDERATION OF STATE MEDICAL BOARDS

- Physician's use of marijuana (Resolution 16-3)
 - "given the lack of data supporting clinical efficacy and difficulty evaluating impairment, state medical and osteopathic boards advise their licensees to abstain from the use of marijuana, for medical and recreational purposes, while actively engaged in the practice of medicine"
 - Updated the FSMB Model policy, *Essentials of State Medical and Osteopathic Practice Act*, Section IX, Disciplinary Action Against Licensees, to include "marijuana" in the list of substances that impair ability



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FEDERATION OF STATE MEDICAL BOARDS

- Physician's recommendation of marijuana in patient care
 - Model guidelines developed
 - Physician-patient relationship
 - Patient evaluation
 - Informed and shared decision making
 - Treatment agreement
 - Qualifying conditions
 - Ongoing monitoring and adopting the treatment plan
 - Consultation and referral
 - Medical records
 - Physician conflicts of interest

PRACTICE CONSIDERATIONS

- Ask about marijuana use as part of medical history similar to other substances such as tobacco and alcohol
- Conversations with patients re: use and risk, safe storage, impaired driving, over consumption of edibles, etc.
- Base discussion on medical opinion and experience and not personal opinions
- Informed consent implications

PRACTICE CONSIDERATIONS

- Potential benefits of recommending the medical use of marijuana
 - May provide relief from pain when other medications don't work or have undesirable side effects
 - May improve appetite and relieve nausea for patients with cancer or AIDS
 - May help treat certain seizure disorders
- Concerns that not enough data currently to safely recommend

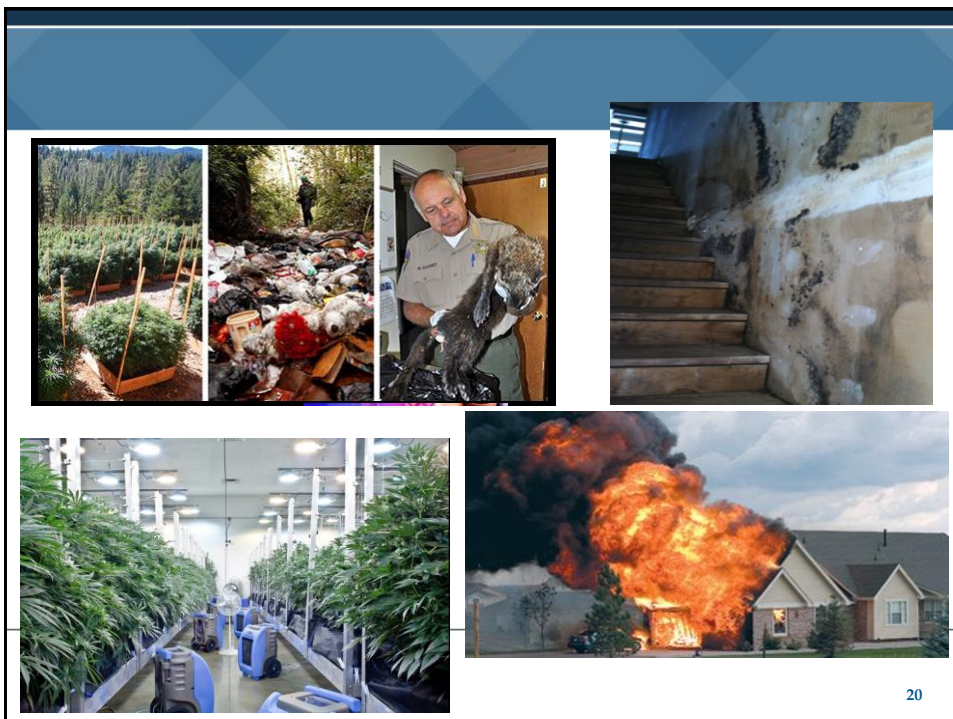
PRACTICE CONSIDERATIONS

- Concerns about recommending the medical use of marijuana
 - Known and unknown effects on the brain
 - Impairment of memory, judgement, and coordination
 - Increased risk of being in a motor vehicle crash
 - Harmful effects of smoking, using when pregnant, etc.
 - Not approved by the US Food and Drug Administration (FDA)
 - Lack of medical studies under IRB-approved research protocols
 - Current Schedule I classification
 - Legal alternatives with comparable affect

PRACTICE CONSIDERATIONS

- Patients exposed to marijuana industry work-related hazards
 - MIOSHA Fact Sheet
 - Carbon dioxide used to enrich growing environment
 - Chemicals used as plant nutrients, to clean and sanitize equipment and to extract essential oils from plant materials
 - Molds, allergens and vegetative dusts from growing and processing environments
 - Noise from growing and processing equipment
 - Accidents related to machinery and equipment
 - Lighting eye hazards (e.g., grow lights)
 - Heat and humidity from warm indoor growing climates
 - Workplace violence related to asset protection

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PRACTICE CONSIDERATIONS

- Employment facts
 - MRTMA **does not**...
 - Require an employer to allow use in the workplace or on the employer's property
 - Prohibit disciplining an employee for violation of a workplace drug policy or working while under the influence
 - Prevent the refusal to hire someone who has violated a workplace drug policy
- Under the MMMA, an employee discharged from employment solely based on a positive drug tests for marijuana is not disqualified from receiving unemployment benefits (*Braska v. Challenge Manufacturing Co.*, 307 Mich App 340; 861 NW2d 289 (2014))

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MEDICAL COMMUNITY ROLE

- Legislative advocacy to ensure patient safety
- Input on point-of-sale warnings and product labeling
- Providing input in development of rules
- Educational programming and materials for physician offices
- Ongoing communication and public awareness efforts
- Advocate for improved public health surveillance efforts to obtain data on short- and long-term public health and safety effects
- Advocate for clinical trials

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MSMS'S MARIJUANA POLICY AGENDA

- MSMS advocates that any labeling of marijuana products include warnings that make clear the content, potency, as well as the known safety and health risks, based on the best available scientific evidence.
- MSMS advocates for prohibiting the use of marijuana in public places.
- MSMS supports sanctions on sellers for misrepresenting health benefits of marijuana.
- MSMS encourages the adoption of legal and regulatory tools to monitor and stem illegal activity related to marijuana.



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MSMS'S MARIJUANA POLICY AGENDA

- MSMS advocates for funding of more research to determine the consequences of long-term marijuana use, especially among youth, adolescents, pregnant women, and women who are breastfeeding. Research should:
 - Be conducted pursuant to valid research protocols, including properly controlled clinical studies of adequate size and duration;
 - Explore how legalization impacts existing and emerging mental health and substance use issues facing communities; and
 - Be vetted by independent evaluators with backgrounds in the health sciences.



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MSMS's MARIJUANA POLICY AGENDA

- MSMS supports dedicating a substantial portion of tax revenue from marijuana sales toward public health purposes, including substance use prevention and treatment program, marijuana-use educational campaigns, and public service announcements, rigorous research on the health effects of marijuana and public health surveillance efforts.
- MSMS advocates for funding for ongoing surveillance to determine the impact of marijuana legalization and commercialization on public health and safety (e.g., emergency department visits and hospitalizations, impaired driving rates, traffic fatalities and injuries, unintentional exposures, crimes related to use/intoxication, impact on high-risk populations, etc.)



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The student "cored out" an apple to smoke marijuana covertly.

To conceal their marijuana use a student converted a highlighter to smoke their marijuana.

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RESOURCES

- Drug Facts: Marijuana – <https://www.drugabuse.gov/publications/drugfacts/marijuana>
- CDC Marijuana Fact Sheet (Driving) - <https://www.cdc.gov/marijuana/factsheets/driving.htm>
- CDC Marijuana Fact Sheet (Pregnancy) - <https://www.cdc.gov/marijuana/factsheets/pregnancy.htm>
- CDC Marijuana Fact Sheet (Teens) - <https://www.cdc.gov/marijuana/factsheets/teens.htm>
- Marijuana Talk Kit - <https://drugfree.org/download/marijuana-talk-kit/>
- NIDA Marijuana Webpage - <https://www.drugabuse.gov/drugs-abuse/marijuana>
- CO DPH Marijuana Fact Sheets - <https://www.colorado.gov/pacific/cdphe/marijuana-fact-sheets>



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Thank you!

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