

Introduced by Senator Vasconcellos

February 25, 1999

An act to add Section 11362.7 to the Health and Safety Code, relating to controlled substances.

LEGISLATIVE COUNSEL'S DIGEST

SB 848, as introduced, Vasconcellos. Medicinal marijuana.

Existing law, the Compassionate Use Act of 1996, prohibits any physician from being punished, or denied any right or privilege, for having recommended marijuana to a patient for medical purposes. The act prohibits the provisions of law making unlawful the possession or cultivation of marijuana from applying to a patient, or to a patient's primary caregiver, who possesses or cultivates marijuana for the personal medical purposes of the patient upon the written or oral recommendation or approval of a physician. Existing law establishes a Research Advisory Panel to study and approve research projects concerning marijuana or hallucinogenic drugs.

This bill would require the state to develop and implement a plan for the safe and affordable distribution of medicinal marijuana.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature hereby finds and
2 declares all of the following:

1 (a) On November 5, 1996, 56 percent of California
2 voters approved Proposition 215 to ensure that seriously
3 ill Californians have their right to obtain and use
4 marijuana for medical purposes.

5 (b) Proposition 215 urged the federal and state
6 government to implement a plan to provide for the safe
7 and affordable distribution of marijuana to all patients in
8 medical need of marijuana.

9 (c) Since Proposition 215 became law, the state and
10 federal governments have failed to respond to the voters'
11 call for a distribution plan. Instead, both levels of
12 government have dedicated substantial resources to
13 closing down every effort to fulfill the wishes of the
14 voters.

15 (d) In the vacuum created by government inactivity,
16 private, local distribution organizations have arisen. The
17 activity of these programs has raised legal questions about
18 the extent to which Proposition 215 protects these
19 collective efforts to distribute medicinal marijuana. As a
20 result, while generally well-intentioned, most of these
21 programs have been subject to, and often closed because
22 of, police and judicial action. The closure of these
23 programs has left many patients who need medicinal
24 marijuana without access to marijuana.

25 (e) A distribution plan is essential not only to ensure
26 that patients in medical need of marijuana have safe and
27 affordable access to marijuana, but also to prevent
28 Proposition 215 from becoming a sieve through which
29 illegal activities occur.

30 (f) There is widespread consensus among physicians,
31 law enforcement, patients, providers, and other
32 stakeholders that the most effective solution is for the
33 federal government to reschedule marijuana so that it
34 can be prescribed under strict protocols. However, until
35 the federal government acts, California state and local
36 officials must act to implement the will of the voters.

37 (g) It is the intent of the Legislature that the issue of
38 medicinal marijuana is and should remain a public health
39 issue, between physicians and their patients.



1 (h) It is the further intent of the Legislature, until the
2 federal government acts to reschedule marijuana, to
3 respond fully to the wishes of the voters in approving
4 Proposition 215 by developing a plan for the safe and
5 affordable distribution of medicinal marijuana to persons
6 in need.

7 SEC. 2. Section 11362.7 is added to the Health and
8 Safety Code, to read:

9 11362.7. The state shall develop and implement a plan
10 for the safe and affordable distribution of medicinal
11 marijuana.

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