S.7

AN ACT RELATING TO THE COMPASSIONATE USE OF MARIJUANA FOR MEDICAL PURPOSES

It is hereby enacted by the General Assembly of the State of Vermont:

Sec. 1. 18 V.S.A. chapter 86 is amended to read:

CHAPTER 86. THERAPEUTIC USE OF CANNABIS

Subchapter 2. Marijuana for Medical Symptom Use

by Persons with Severe Illness

§ 4472. DEFINITIONS

For the purposes of this subchapter:

(1) “Bona fide physician-patient relationship” means a treating or consulting relationship of not less than six months duration, in the course of which a physician has completed a full assessment of the registered patient’s medical history and current medical condition, including a personal physical examination.

(2) “Debilitating medical condition,” provided that, in the context of the specific disease or condition described in subdivision (A) or (B) of this subdivision (2), reasonable medical efforts have been made over a reasonable amount of time without success to relieve the symptoms, means:

(A) end of life care for cancer or acquired immune deficiency syndrome; or

(B) cancer, acquired immune deficiency syndrome, positive status for human immunodeficiency virus, multiple sclerosis, or the treatment of these diseases or medical conditions if:

(i) the disease or condition or its treatment results in severe, persistent, and intractable symptoms; and

(ii) in the context of the specific disease or condition, reasonable medical efforts have been made over a reasonable amount of time without success in relieving the symptoms.

(A) cancer, multiple sclerosis, positive status for human immunodeficiency virus, acquired immune deficiency syndrome, or the treatment of these conditions, if the disease or the treatment results in severe, persistent, and intractable symptoms; or

(B) a disease, medical condition, or its treatment that is chronic, debilitating, and produces severe, persistent, and one or more of the following intractable symptoms: cachexia or wasting syndrome; severe pain; severe nausea; or seizures.

(3) “Marijuana” shall have the same meaning as provided in subdivision 4201(15) of this title.

(4) “Physician” means a person who is:

(A) licensed under chapter 23 or chapter 33 of Title 26, and is licensed with authority to prescribe drugs under Title 26; or

(B) a physician, surgeon, or osteopathic physician licensed to practice medicine and prescribe drugs under comparable provisions in New Hampshire, Massachusetts, or New York.

(5) “Possession limit” means the amount of marijuana collectively possessed between the registered patient and the patient’s registered caregiver which is no more than one two mature marijuana plant plants, two seven immature plants, and two ounces of usable marijuana.

(6) “Registered caregiver” means a person who is at least 21 years old who has never been convicted of a drug-related crime and who has agreed to undertake responsibility for managing the well-being of a registered patient with respect to the use of marijuana for symptom relief.

(7) “Registered patient” means a person who has been issued a registration card by the department of public safety identifying the person as having a debilitating medical condition pursuant to the provisions of this subchapter.

(8) “Secure indoor facility” means a building or room equipped with locks or other security devices that permit access only by a registered caregiver or registered patient.

(9) “Usable marijuana” means the dried leaves and flowers of marijuana, and any mixture or preparation thereof, and does not include the seeds, stalks, and roots of the plant.
Use for symptom relief” means the acquisition, possession, cultivation, use, transfer, or transportation of marijuana or paraphernalia relating to the administration of marijuana to alleviate the symptoms or effects of a registered patient’s debilitating medical condition which is in compliance with all the limitations and restrictions of this subchapter. For the purposes of this definition, “transfer” is limited to the transfer of marijuana and paraphernalia between a registered caregiver and a registered patient.

§ 4473. REGISTERED PATIENTS; QUALIFICATION STANDARDS AND PROCEDURES

(a) To become a registered patient, a person must be diagnosed with a debilitating medical condition by a physician in the course of a bona fide physician-patient relationship.

(b) The department of public safety shall review applications to become a registered patient using the following procedures:

1. A patient with a debilitating medical condition shall submit, under oath, a signed application for registration to the department. If the patient is under the age of 18 the application must be signed by both the patient and a parent or guardian. The application shall require identification and contact information for the patient and the patient’s registered caregiver applying for authorization under section 4474 of this title, if any. The applicant shall attach to the application a copy of relevant portions of the patient’s medical record sufficient to establish that the patient has a debilitating medical condition.

2. The department shall develop a medical verification form to be completed by a physician and submitted by a patient applying for registration in the program. The form shall include:

   A. A cover sheet which includes the following:
      i. A statement of the penalties for providing false information.
      ii. Definitions of the following statutory terms:
         (I) “Bona fide physician-patient relationship” as defined in subdivision 4472(1) of this title.
         (II) “Debilitating medical condition” as defined in subdivision 4472(2) of this title.
         (III) “Physician” as defined in subdivision 4472(4) of this title.

   B. A verification sheet which includes the following:
      i. A statement that a bona fide physician-patient relationship exists under subdivision 4472(1) of this title, or that under subdivision (3)(A) of this subsection (b) the debilitating medical condition is of recent or sudden onset, and the patient has not had a previous physician who is able to verify the nature of the disease and its symptoms.
      ii. A statement that reasonable medical efforts have been made over a reasonable amount of time without success to relieve the symptoms.
      iii. A statement that the patient has a debilitating medical condition as defined in subdivision 4472(2) of this title, including the specific disease or condition which the patient has and whether the patient meets the criteria under subdivision 4472(2)(A) or subdivision 4472(2)(B).
      iv. A signature line which provides in substantial part: “I certify that I meet the definition of ‘physician’ under 18 V.S.A. § 4472(4)(A) or 4472(4)(B) (circle one), that I am a physician in good standing in the state of ______, and that the facts stated above are accurate to the best of my knowledge and belief.”
      v. The physician’s contact information.

3. The department shall transmit the completed medical verification form to the physician and contact the physician for purposes of confirming the existence of a bona fide physician-patient relationship and confirming the accuracy of the medical record information contained in the form. The department may approve an application, notwithstanding the six-month requirement in subdivision 4472(1) of this title, if the department is satisfied that the medical verification form confirms that the debilitating medical condition is of recent or sudden onset and that the patient has not had a previous physician who is able to verify the nature of the disease and its symptoms.

4. If the physician is licensed in another state as provided by subdivision 4474(4)(B) of this title, the department shall contact the state’s medical practice board and verify that the physician is in good standing in that state.

5. A review board is established. The medical practice board shall appoint three physicians licensed in Vermont to constitute the review board. If an
application under subdivision (1) of this subsection is denied, within seven days the patient may appeal the denial to the board. Review shall be limited to information submitted by the patient under subdivision (1) of this subsection, and consultation with the patient’s treating physician. All records relating to the appeal shall be kept confidential. An appeal shall be decided by majority vote of the members of the board.

(B) The board shall meet periodically to review studies, data, and any other information relevant to the use of marijuana for symptom relief. The board may make recommendations to the general assembly for adjustments and changes to this chapter.

(C) Members of the board shall serve for three-year terms, beginning February 1 of the year in which the appointment is made, except that the first members appointed shall serve as follows: one for a term of two years, one for a term of three years, and one for a term of four years. Members shall be entitled to per diem compensation authorized under section 1010 of Title 32. Vacancies shall be filled in the same manner as the original appointment for the unexpired portion of the term vacated.

§ 4474. REGISTERED CAREGIVERS; QUALIFICATION STANDARDS AND PROCEDURES

(a) A person may submit a signed application to the department of public safety to become a registered patient’s registered caregiver. The department shall approve or deny the application in writing within 30 days. The department shall approve a registered caregiver’s application and issue the person an authorization card, including the caregiver’s name, photograph, and a unique identifier, after verifying:

(1) the person will serve as the registered caregiver for one registered patient only; and

(2) the person has never been convicted of a drug-related crime.

(b) Prior to acting on an application, the department shall obtain from the Vermont criminal information center a Vermont criminal record, an out-of-state criminal record, and a criminal record from the Federal Bureau of Investigation for the applicant. For purposes of this subdivision, “criminal record” means a record of whether the person has ever been convicted of a drug-related crime. Each applicant shall consent to release of criminal records to the department on forms substantially similar to the release forms developed by the center pursuant to section 2056c of Title 20. The department shall comply with all laws regulating the release of criminal history records and the protection of individual privacy. The Vermont criminal information center shall send to the requester any record received pursuant to this section or inform the department of public safety that no record exists. If the department disapproves an application, the department shall promptly provide a copy of any record of convictions and pending criminal charges to the applicant and shall inform the applicant of the right to appeal the accuracy and completeness of the record pursuant to rules adopted by the Vermont criminal information center. No person shall confirm the existence or nonexistence of criminal record information to any person who would not be eligible to receive the information pursuant to this subchapter.

(c) A registered caregiver may serve only one registered patient at a time, and a registered patient may have only one registered caregiver at a time.

§ 4474a. REGISTRATION; FEES

(a) The department shall collect a fee of $100.00 for the application authorized by sections 4473 and 4474 of this title. The fees received by the department shall be deposited into a registration fee fund and used to offset the costs of processing applications under this subchapter.

(b) A registration card shall expire one year after the date of issue, with the option of renewal, provided the patient submits a new application which is approved by the department of public safety, pursuant to sections 4473 or 4474 of this title, and pays the fee required under subsection (a) of this section.