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**HOUSE BILL 1766**

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**State of Washington 64th Legislature 2015 Regular Session**

**By** Representatives Cody, Schmick, Appleton, and Tharinger

AN ACT Relating to medical marijuana; amending RCW 69.51A.005, 69.51A.010, 69.51A.025, 69.51A.030, 69.51A.040, 69.51A.043, 69.51A.047, 69.51A.055, 69.51A.060, 69.51A.110, 69.51A.120, and 69.51A.900; adding new sections to chapter 69.51A RCW; repealing RCW 69.51A.070, 69.51A.140, 69.51A.200, 69.51A.045, and 69.51A.085; and providing effective dates.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

**Sec.**  RCW 69.51A.005 and 2011 c 181 s 102 are each amended to read as follows:

(1) The legislature finds that:

(a) There is medical evidence that some patients with terminal or debilitating medical conditions may, under their health care professional's care, benefit from the medical use of ((~~cannabis~~)) marijuana. Some of the conditions for which ((~~cannabis~~)) marijuana appears to be beneficial include, but are not limited to:

(i) Nausea, vomiting, and cachexia associated with cancer, HIV-positive status, AIDS, hepatitis C, anorexia, and their treatments;

(ii) Severe muscle spasms associated with multiple sclerosis, epilepsy, and other seizure and spasticity disorders;

(iii) Acute or chronic glaucoma;

(iv) Crohn's disease; and

(v) Some forms of intractable pain.

(b) Humanitarian compassion necessitates that the decision to use ((~~cannabis~~)) marijuana by patients with terminal or debilitating medical conditions is a personal, individual decision, based upon their health care professional's professional medical judgment and discretion.

(2) Therefore, the legislature intends that:

(a) Qualifying patients with terminal or debilitating medical conditions who, in the judgment of their health care professionals, may benefit from the medical use of ((~~cannabis~~)) marijuana, shall not be arrested, prosecuted, or subject to other criminal sanctions or civil consequences under state law based solely on their medical use of ((~~cannabis~~)) marijuana, notwithstanding any other provision of law;

(b) Persons who act as designated providers to such patients shall also not be arrested, prosecuted, or subject to other criminal sanctions or civil consequences under state law, notwithstanding any other provision of law, based solely on their assisting with the medical use of ((~~cannabis~~)) marijuana; and

(c) Health care professionals shall also not be arrested, prosecuted, or subject to other criminal sanctions or civil consequences under state law for the proper authorization of medical use of ((~~cannabis~~)) marijuana by qualifying patients for whom, in the health care professional's professional judgment, the medical use of ((~~cannabis~~)) marijuana may prove beneficial.

(3) Nothing in this chapter establishes the medical necessity or medical appropriateness of ((~~cannabis~~)) marijuana for treating terminal or debilitating medical conditions as defined in RCW 69.51A.010.

(4) Nothing in this chapter diminishes the authority of correctional agencies and departments, including local governments or jails, to establish a procedure for determining when the use of ((~~cannabis~~)) marijuana would impact community safety or the effective supervision of those on active supervision for a criminal conviction, nor does it create the right to any accommodation of any medical use of ((~~cannabis~~)) marijuana in any correctional facility or jail.

**Sec.**  RCW 69.51A.010 and 2010 c 284 s 2 are each amended to read as follows:

The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.

(1) "Department" means the department of health.

(2) "Designated provider" means a person who:

(a) Is eighteen years of age or older;

(b) Has been designated in writing by a patient to serve as a designated provider under this chapter;

(c) Is prohibited from consuming marijuana obtained for the personal, medical use of the patient for whom the individual is acting as designated provider; and

(d) Is the designated provider to only one patient at any one time.

((~~(2)~~)) (3) "Health care professional," for purposes of this chapter only, means a physician licensed under chapter 18.71 RCW, a physician assistant licensed under chapter 18.71A RCW, an osteopathic physician licensed under chapter 18.57 RCW, an osteopathic physicians' assistant licensed under chapter 18.57A RCW, a naturopath licensed under chapter 18.36A RCW, or an advanced registered nurse practitioner licensed under chapter 18.79 RCW.

((~~(3)~~)) (4) "Marijuana" has the same meaning as in RCW 69.50.101.

(5) "Marijuana-infused products" has the same meaning as in RCW 69.50.101.

(6) "Medical use of marijuana" means the production, possession, or administration of marijuana, as defined in RCW 69.50.101((~~(q)~~)), for the exclusive benefit of a qualifying patient in the treatment of his or her terminal or debilitating ((~~illness~~)) medical condition.

((~~(4)~~)) (7) "Qualifying patient" means a person who:

(a) Is a patient of a health care professional;

(b) Has been diagnosed by that health care professional as having a terminal or debilitating medical condition;

(c) Is a resident of the state of Washington at the time of such diagnosis;

(d) Has been advised by that health care professional about the risks and benefits of the medical use of marijuana; and

(e) Has been advised by that health care professional that they may benefit from the medical use of marijuana.

((~~(5)~~)) (8) "Tamper-resistant paper" means paper that meets one or more of the following industry-recognized features:

(a) One or more features designed to prevent copying of the paper;

(b) One or more features designed to prevent the erasure or modification of information on the paper; or

(c) One or more features designed to prevent the use of counterfeit valid documentation.

((~~(6)~~)) (9) "Terminal or debilitating medical condition" means a condition severe enough to significantly interfere with the patient's activities of daily living and ability to function, which can be objectively assessed and evaluated and limited to the following:

(a) Cancer, human immunodeficiency virus (HIV), multiple sclerosis, epilepsy or other seizure disorder, or spasticity disorders; ((~~or~~))

(b) Intractable pain, limited for the purpose of this chapter to mean pain unrelieved by standard medical treatments and medications; ((~~or~~))

(c) Glaucoma, either acute or chronic, limited for the purpose of this chapter to mean increased intraocular pressure unrelieved by standard treatments and medications; ((~~or~~))

(d) Crohn's disease with debilitating symptoms unrelieved by standard treatments or medications; ((~~or~~))

(e) Hepatitis C with debilitating nausea or intractable pain unrelieved by standard treatments or medications; ((~~or~~))

(f) Diseases, including anorexia, which result in nausea, vomiting, wasting, appetite loss, cramping, seizures, muscle spasms, or spasticity, when these symptoms are unrelieved by standard treatments or medications((~~; or~~

~~(g) Any other medical condition duly approved by the Washington state medical quality assurance commission in consultation with the board of osteopathic medicine and surgery as directed in this chapter~~)).

((~~(7)~~)) (10) "Useable marijuana" has the same meaning as in RCW 69.50.101.

(11) "Valid documentation" means:

(a) A statement signed and dated by a qualifying patient's health care professional written on tamper-resistant paper, which states that, in the health care professional's professional opinion, the patient may benefit from the medical use of marijuana; and

(b) Proof of identity such as a Washington state driver's license or identicard, as defined in RCW 46.20.035.

**Sec.**  RCW 69.51A.025 and 2011 c 181 s 413 are each amended to read as follows:

Nothing in this chapter or in the rules adopted to implement it precludes a qualifying patient or designated provider from engaging in the private, unlicensed, noncommercial production, possession, transportation, delivery, or administration of ((~~cannabis~~)) marijuana for medical use as authorized under RCW 69.51A.040.

**Sec.**  RCW 69.51A.030 and 2011 c 181 s 301 are each amended to read as follows:

(1) The following acts do not constitute crimes under state law or unprofessional conduct under chapter 18.130 RCW, and a health care professional may not be arrested, searched, prosecuted, disciplined, or subject to other criminal sanctions or civil consequences or liability under state law, or have real or personal property searched, seized, or forfeited pursuant to state law, notwithstanding any other provision of law as long as the health care professional complies with subsection (2) of this section:

(a) Advising a patient about the risks and benefits of medical use of ((~~cannabis~~)) marijuana or that the patient may benefit from the medical use of ((~~cannabis~~)) marijuana; or

(b) Providing a patient meeting the ((~~criteria established under RCW 69.51A.010(26)~~)) definition of a qualifying patient with valid documentation, based upon the health care professional's assessment of the patient's medical history and current medical condition, where such use is within a professional standard of care or in the individual health care professional's medical judgment.

(2)(a)(i) A health care professional may only provide a patient with valid documentation authorizing the medical use of ((~~cannabis or register the patient with the registry established in section 901 of this act~~)) marijuana if he or she has a newly initiated or existing documented relationship with the patient, as a primary care provider or a specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition, and only after:

((~~(i)~~)) (A) Completing ((~~a~~))an in-person physical examination of the patient as appropriate, based on the patient's condition and age;

((~~(ii)~~)) (B) Documenting the terminal or debilitating medical condition of the patient in the patient's medical record and that the patient may benefit from treatment of this condition or its symptoms with medical use of ((~~cannabis~~)) marijuana;

((~~(iii)~~)) (C) Informing the patient of other options for treating the terminal or debilitating medical condition; and

((~~(iv)~~)) (D) Documenting other measures attempted to treat the terminal or debilitating medical condition that do not involve the medical use of ((~~cannabis~~)) marijuana.

(ii) If a patient is less than eighteen years of age, in addition to the requirement of (a) of this subsection, the health care professional must:

(A) Reexamine the patient annually or as frequently as medically indicated and consult with his or her parent or guardian; and

(B) Consult, as medically indicated, with other health care providers who are providing treatment to the patient prior to providing the patient with valid documentation authorizing the medical use of marijuana or a renewal of valid documentation authorizing the medical use of marijuana.

(b) A health care professional shall not:

(i) Accept, solicit, or offer any form of pecuniary remuneration from or to a licensed dispenser, licensed producer, or licensed processor of ((~~cannabis~~)) marijuana products;

(ii) Offer a discount or any other thing of value to a qualifying patient who is a customer of, or agrees to be a customer of, a particular licensed dispenser, licensed producer, or licensed processor of ((~~cannabis~~)) marijuana products;

(iii) Examine or offer to examine a patient for purposes of diagnosing a terminal or debilitating medical condition at a location where ((~~cannabis~~)) marijuana is produced, processed, or dispensed;

(iv) Have a business or practice which consists solely of authorizing the medical use of ((~~cannabis~~)) marijuana;

(v) Include any statement or reference, visual or otherwise, on the medical use of ((~~cannabis~~)) marijuana in any advertisement for his or her business or practice; or

(vi) Hold an economic interest in an enterprise that produces, processes, or dispenses ((~~cannabis~~)) marijuana if the health care professional authorizes the medical use of ((~~cannabis~~)) marijuana.

(3) A health care professional:

(a) Shall identify the expiration date of the valid documentation issued pursuant to subsection (2)(a) of this section. The expiration date may not be more than one year from the date that the valid documentation was issued. Any renewal of the valid documentation must meet the procedures established under subsection (2)(a) of this section and be performed immediately prior to the issuance of the renewed valid documentation; and

(b) May identify the amount of marijuana that is likely needed by the qualifying patient for his or her medical needs. If no recommendations are included when the health care professional issues the valid documentation, the qualifying patient may possess a combination of the following: Three ounces of useable marijuana, forty-eight ounces of marijuana-infused product in solid form, two hundred sixteen ounces of marijuana-infused product in liquid form. The qualifying patient may also grow, in his or her domicile, up to six plants for the personal medical use of the qualifying patient.

(4) A violation of any provision of subsection (2) of this section constitutes unprofessional conduct under chapter 18.130 RCW.

NEW SECTION. **Sec.**  A new section is added to chapter 69.51A RCW to read as follows:

(1) After May 1, 2016, a qualifying patient may receive a qualifying patient recognition card from the department if the qualifying patient:

(a) Submits to the department an application signed by:

(i)(A) The qualifying patient; or

(B) If the qualifying patient is less than eighteen years of age, a parent or guardian of the qualifying patient; and

(ii) The qualifying patient's health care professional who has signed the patient's valid documentation; and

(b) Submits a copy of his or her valid documentation to the department.

(2) After May 1, 2016, a designated provider may receive a designated provider recognition card from the department if the designated provider:

(a) Submits to the department an application signed by the designated provider and the qualifying patient that has made the designation; and

(b) Submits a copy of the qualifying patient recognition card for the qualifying patient that has made the designation or, if the qualifying patient recognition card has not been processed by the department, a copy of the qualifying patient's application for a qualifying patient recognition card.

(3) At a minimum, a qualifying patient recognition card and a designated provider recognition card must contain the following information on its face:

(a) The individual's name;

(b) The individual's birth date;

(c) The expiration date;

(d) The amount of marijuana authorized for the patient as determined by the patient's valid documentation, according to RCW 69.51A.030(3)(b); and

(e) In the case of a designated provider recognition card, the name of the qualifying patient who the designated provider represents.

(4) Qualifying patient recognition cards and designated provider recognition cards expire on the date identified by the health care professional on the valid documentation, which may not exceed one year from the date that the valid documentation was authorized.

(5) Qualifying patient recognition cards and designated provider recognition cards are not transferable.

NEW SECTION. **Sec.**  A new section is added to chapter 69.51A RCW to read as follows:

(1) The department shall establish and maintain a system for safeguarding the records of qualifying patients that have applied for a qualifying patient recognition card under section 5 of this act and designated providers that have applied for a designated provider recognition card under section 5 of this act as secure and confidential.

(2) Information maintained by the department under this section shall be confidential and not subject to disclosure, except:

(a) To a peace officer at any time for purposes of verifying that a person is lawfully in possession of a qualifying patient recognition card or a designated provider recognition card;

(b) To appropriate local, state, and federal law enforcement or prosecutorial officials who are engaged in a bona fide specific investigation involving a designated person;

(c) To a health care professional licensing, certification, or regulatory agency or entity;

(d) In an aggregated form that does not allow for the identification of any individual holder of a qualifying patient recognition card or designated provider recognition card;

(e) To persons authorized to prescribe or dispense controlled substances, for the purpose of providing medical or pharmaceutical care for their patients; or

(f) To employees of the department of revenue to the extent necessary to determine applicable exemptions from state and local taxes.

**Sec.**  RCW 69.51A.040 and 2011 c 181 s 401 are each amended to read as follows:

The medical use of ((~~cannabis~~))marijuana in accordance with the terms and conditions of this chapter does not constitute a crime and a qualifying patient or designated provider in compliance with the terms and conditions of this chapter may not be arrested, prosecuted, or subject to other criminal sanctions or civil consequences, for possession, manufacture, or delivery of, or for possession with intent to manufacture or deliver, ((~~cannabis~~))marijuana under state law, or have real or personal property seized or forfeited for possession, manufacture, or delivery of, or for possession with intent to manufacture or deliver, ((~~cannabis~~))marijuana under state law, and investigating peace officers and law enforcement agencies may not be held civilly liable for failure to seize ((~~cannabis~~))marijuana in this circumstance, if:

(1)(a) The qualifying patient or designated provider possesses no more than ((~~fifteen cannabis plants and:~~

~~(i) No more than twenty-four ounces of useable cannabis;~~

~~(ii) No more cannabis product than what could reasonably be produced with no more than twenty-four ounces of useable cannabis; or~~

~~(iii) A combination of useable cannabis and cannabis product that does not exceed a combined total representing possession and processing of no more than twenty-four ounces of useable cannabis~~))the amount identified on the qualifying patient's or designated provider's recognition card issued under section 5 of this act.

(b) If a person is both a qualifying patient and a designated provider for another qualifying patient, the person may possess no more than ((~~twice~~))the sum of the amounts described in (a) of this subsection, whether the plants, useable ((~~cannabis~~))marijuana, and ((~~cannabis~~))marijuana product are possessed individually or in combination between the qualifying patient and his or her designated provider;

(2) The qualifying patient or designated provider presents his or her ((~~proof of registration with the department of health~~))recognition card issued under section 5 of this act, to any peace officer who questions the patient or provider regarding his or her medical use of ((~~cannabis~~))marijuana;

(3) The qualifying patient or designated provider keeps a copy of his or her ((~~proof of registration with the registry established in section 901~~))recognition card issued under section 5 of this act and the qualifying patient or designated provider's contact information posted prominently next to any ((~~cannabis~~))marijuana plants, ((~~cannabis~~))marijuana products, or useable ((~~cannabis~~))marijuana located at his or her residence;

(4) The investigating peace officer does not possess evidence that:

(a) The designated provider has converted ((~~cannabis~~))marijuana produced or obtained for the qualifying patient for his or her own personal use or benefit; or

(b) The qualifying patient has converted ((~~cannabis~~))marijuana produced or obtained for his or her own medical use to the qualifying patient's personal, nonmedical use or benefit; and

(5) The investigating peace officer does not possess evidence that the designated provider has served as a designated provider to more than one qualifying patient within a fifteen-day period((~~; and~~

~~(6) The investigating peace officer has not observed evidence of any of the circumstances identified in section 901(4) of this act~~)).

**Sec.**  RCW 69.51A.043 and 2011 c 181 s 402 are each amended to read as follows:

(1) A qualifying patient or designated provider who ((~~is~~))does not ((~~registered with the registry established in section 901~~))hold a recognition card issued under section 5 of this act may raise the affirmative defense set forth in subsection (2) of this section, if:

(a) The qualifying patient or designated provider presents his or her valid documentation to any peace officer who questions the patient or provider regarding his or her medical use of ((~~cannabis~~))marijuana;

(b) The qualifying patient or designated provider possesses no more ((~~cannabis than the limits set forth in RCW 69.51A.040(1)~~))marijuana than three ounces of useable marijuana, forty-eight ounces of marijuana-infused product in a solid form, two hundred sixteen ounces of marijuana-infused product in liquid form, or six plants;

(c) The qualifying patient or designated provider is in compliance with all other terms and conditions of this chapter;

(d) The investigating peace officer does not have probable cause to believe that the qualifying patient or designated provider has committed a felony, or is committing a misdemeanor in the officer's presence, that does not relate to the medical use of ((~~cannabis~~))marijuana; and

(e) No outstanding warrant for arrest exists for the qualifying patient or designated provider((~~; and~~

~~(f) The investigating peace officer has not observed evidence of any of the circumstances identified in section 901(4) of this act~~)).

(2) A qualifying patient or designated provider who ((~~is~~))does not ((~~registered with the registry established in section 901~~))hold a recognition card issued under section 5 of this act, but who presents his or her valid documentation to any peace officer who questions the patient or provider regarding his or her medical use of ((~~cannabis~~))marijuana, may assert an affirmative defense to charges of violations of state law relating to ((~~cannabis~~))marijuana through proof at trial, by a preponderance of the evidence, that he or she otherwise meets the requirements of RCW 69.51A.040. A qualifying patient or designated provider meeting the conditions of this subsection but possessing more ((~~cannabis~~))marijuana than the limits set forth in ((~~RCW 69.51A.040(1)~~))subsection (1)(b) of this section may, in the investigating peace officer's discretion, be taken into custody and booked into jail in connection with the investigation of the incident.

**Sec.**  RCW 69.51A.047 and 2011 c 181 s 406 are each amended to read as follows:

A qualifying patient or designated provider who ((~~is not registered with the registry established in section 901 of this act or~~)) does not present his or her recognition card issued under section 5 of this act or valid documentation to a peace officer who questions the patient or provider regarding his or her medical use of ((~~cannabis~~))marijuana but is in compliance with all other terms and conditions of this chapter may establish an affirmative defense to charges of violations of state law relating to ((~~cannabis~~))marijuana through proof at trial, by a preponderance of the evidence, that he or she was a validly authorized qualifying patient or designated provider at the time of the officer's questioning. ((~~A qualifying patient or designated provider who establishes an affirmative defense under the terms of this section may also establish an affirmative defense under RCW 69.51A.045.~~))

**Sec.**  RCW 69.51A.055 and 2011 c 181 s 1105 are each amended to read as follows:

(1)(a) The arrest and prosecution protections established in RCW 69.51A.040 may not be asserted in a supervision revocation or violation hearing by a person who is supervised by a corrections agency or department, including local governments or jails, that has determined that the terms of this section are inconsistent with and contrary to his or her supervision.

(b) The affirmative defenses established in RCW 69.51A.043((~~, 69.51A.045,~~))and 69.51A.047((~~, and section 407 of this act~~)) may not be asserted in a supervision revocation or violation hearing by a person who is supervised by a corrections agency or department, including local governments or jails, that has determined that the terms of this section are inconsistent with and contrary to his or her supervision.

(2) The provisions of RCW 69.51A.040, 69.51A.085, and 69.51A.025 do not apply to a person who is supervised for a criminal conviction by a corrections agency or department, including local governments or jails, that has determined that the terms of this chapter are inconsistent with and contrary to his or her supervision.

((~~(3) A person may not be licensed as a licensed producer, licensed processor of cannabis products, or a licensed dispenser under section 601, 602, or 701 of this act if he or she is supervised for a criminal conviction by a corrections agency or department, including local governments or jails, that has determined that licensure is inconsistent with and contrary to his or her supervision.~~))

**Sec.**  RCW 69.51A.060 and 2011 c 181 s 501 are each amended to read as follows:

(1) It shall be a class 3 civil infraction to use or display marijuana for medical ((~~cannabis~~)) use in a manner or place which is open to the view of the general public.

(2) Nothing in this chapter establishes a right of care as a covered benefit or requires any state purchased health care as defined in RCW 41.05.011 or other health carrier or health plan as defined in Title 48 RCW to be liable for any claim for reimbursement for the medical use of ((~~cannabis~~)) marijuana. Such entities may enact coverage or noncoverage criteria or related policies for payment or nonpayment of marijuana for medical ((~~cannabis~~)) use in their sole discretion.

(3) Nothing in this chapter requires any health care professional to authorize the medical use of ((~~cannabis~~)) marijuana for a patient.

(4) Nothing in this chapter requires any accommodation of any on-site medical use of ((~~cannabis~~)) marijuana in any place of employment, in any school bus or on any school grounds, in any youth center, in any correctional facility, or smoking ((~~cannabis~~)) marijuana in any public place or hotel or motel.

(5) Nothing in this chapter authorizes the use of medical ((~~cannabis~~)) marijuana by any person who is subject to the Washington code of military justice in chapter 38.38 RCW.

(6) Employers may establish drug-free work policies. Nothing in this chapter requires an accommodation for the medical use of ((~~cannabis~~)) marijuana if an employer has a drug-free work place.

(7) It is a class C felony to fraudulently produce any record purporting to be, or tamper with the content of any record for the purpose of having it accepted as, valid documentation under RCW 69.51A.010((~~(32)(a)~~)), or to backdate such documentation to a time earlier than its actual date of execution.

(8) No person shall be entitled to claim the protection from arrest and prosecution under RCW 69.51A.040 or the affirmative defense under RCW 69.51A.043 for engaging in the medical use of ((~~cannabis~~)) marijuana in a way that endangers the health or well-being of any person through the use of a motorized vehicle on a street, road, or highway, including violations of RCW 46.61.502 or 46.61.504, or equivalent local ordinances.

NEW SECTION. **Sec.**  A new section is added to chapter 69.51A RCW to read as follows:

If a qualifying patient is less than eighteen years of age, a parent or guardian of the qualifying patient must:

(1) Be named as his or her designated provider and hold a designated provider recognition card to that effect; and

(2) Have sole control over the qualifying patient's marijuana, except that the qualifying patient may possess an amount of marijuana that is necessary to fulfill his or her next dose.

**Sec.**  RCW 69.51A.110 and 2011 c 181 s 408 are each amended to read as follows:

A qualifying patient's medical use of ((~~cannabis~~)) marijuana as authorized by a health care professional may not be a sole disqualifying factor in determining the patient's suitability for an organ transplant, unless it is shown that this use poses a significant risk of rejection or organ failure. This section does not preclude a health care professional from requiring that a patient abstain from the medical use of ((~~cannabis~~)) marijuana, for a period of time determined by the health care professional, while waiting for a transplant organ or before the patient undergoes an organ transplant.

**Sec.**  RCW 69.51A.120 and 2011 c 181 s 409 are each amended to read as follows:

A qualifying patient or designated provider may not have his or her parental rights or residential time with a child restricted solely due to his or her medical use of ((~~cannabis~~)) marijuana in compliance with the terms of this chapter absent written findings supported by evidence that such use has resulted in a long-term impairment that interferes with the performance of parenting functions as defined under RCW 26.09.004.

NEW SECTION. **Sec.**  A new section is added to chapter 69.51A RCW to read as follows:

(1) The department shall convene a work group of representatives of the medical quality assurance commission, board of osteopathic medicine and surgery, the nursing care quality assurance committee, the board of naturopathy, and an association representing physicians to develop practice guidelines for health care professionals to consider when authorizing the medical use of marijuana for patients. The practice guidelines shall address:

(a) Assessing a patient to determine if he or she has a debilitating condition or intractable pain;

(b) Conducting an adequate examination of a patient for the need for marijuana for medical use;

(c) Dosing criteria related to the medical use of marijuana;

(d) Developing a treatment plan for patients who may benefit from the medical use of marijuana;

(e) Communicating with a patient about the medical use of marijuana and other options for treating his or her terminal or debilitating medical condition;

(f) Maintaining records for patients who have been authorized to use marijuana for medical purposes; and

(g) Other issues identified by the work group as necessary to provide appropriate care to patients who have been authorized to use marijuana for medical purposes.

(2) The department shall make the practice guidelines broadly available to health care professionals.

NEW SECTION. **Sec.**  A new section is added to chapter 69.51A RCW to read as follows:

All valid documentation issued prior to the effective date of this section expires May 1, 2016.

**Sec.**  RCW 69.51A.900 and 2011 c 181 s 1106 are each amended to read as follows:

This chapter may be known and cited as the Washington state medical use of ((~~cannabis~~)) marijuana act.

NEW SECTION. **Sec.**  The following acts or parts of acts are each repealed:

(1)RCW 69.51A.070 (Addition of medical conditions) and 2007 c 371 s 7 & 1999 c 2 s 9;

(2)RCW 69.51A.140 (Counties, cities, towns—Authority to adopt and enforce requirements) and 2011 c 181 s 1102; and

(3)RCW 69.51A.200 (Evaluation) and 2011 c 181 s 1001.

NEW SECTION. **Sec.**  The following acts or parts of acts are each repealed, effective May 1, 2016:

(1)RCW 69.51A.045 (Possession of cannabis exceeding lawful amount—Affirmative defense) and 2011 c 181 s 405; and

(2)RCW 69.51A.085 (Collective gardens) and 2011 c 181 s 403.

NEW SECTION. **Sec.**  Sections 7 and 8 of this act take effect May 1, 2016.

**--- END ---**