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SECOND SUBSTITUTE HOUSE BILL 2320

State of Washington 68th Legislature 2024 Regular Session

By House Appropriations (originally sponsored by Representatives Davis, Eslick, Bergquist, Callan, Dent, Dye, Senn, Leavitt, Harris, Ryu, Walen, Peterson, Pollet, and Ramel)

READ FIRST TIME 02/05/24.

AN ACT Relating to reducing the public health harms associated with high THC cannabis products by raising awareness, implementing and studying health interventions, and increasing the minimum legal age of sale of high THC cannabis products to prevent psychosis; amending RCW 69.50.357; adding a new section to chapter 28B.20 RCW; creating new sections; and providing an expiration date.

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

8 NEW SECTION. The legislature finds that there is a Sec. 1. growing body of research evidencing that consuming cannabis with high 9 10 concentrations of THC may be harmful to some people, 11 younger persons and persons who have or are at risk for developing 12 certain mental health conditions or psychotic disorders. Products 13 like THC-infused vape oils, shatter, and dabs can contain close to 14 100 percent THC, and may carry risks not commonly associated with 15 consumption of useable cannabis flower or other cannabis products 16 with relatively lower THC concentrations. In the interest of public 17 health, the legislature intends to review studies and consider increasing the minimum legal age of sale of high 18 THC cannabis products to age 25, and the legislature intends to require caution 19 20 notices, developed by the department of health, to be posted at the 21 point of sale in cannabis retail outlets to raise awareness about

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- 1 possible health impacts and risks associated with high THC cannabis.
- 2 The legislature further intends to implement and study health
- 3 interventions, gather data, and ensure that new research, data, and
- 4 information concerning the impacts of high THC cannabis continues to
- 5 be incorporated into state policy.
- NEW SECTION. Sec. 2. By July 1, 2025, the department of health must develop an optional training that cannabis retail staff may
- 8 complete to better understand the health and safety impacts of high
- 9 THC cannabis products. In developing the optional training, the
- 10 department of health must consult with cannabis retail staff,
- 11 cannabis consumers, persons who have been harmed by high THC
- 12 products, health care providers, prevention professionals,
- 13 researchers with relevant expertise, behavioral health providers, and
- 14 representatives of licensed cannabis businesses.
- 15 **Sec. 3.** RCW 69.50.357 and 2022 c 16 s 71 are each amended to 16 read as follows:
- (1) (a) Retail outlets may not sell products or services other than cannabis concentrates, useable cannabis, cannabis-infused products, or paraphernalia intended for the storage or use of cannabis concentrates, useable cannabis, or cannabis-infused
- 21 products.

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- (b) (i) Retail outlets may receive lockable boxes, intended for the secure storage of cannabis products and paraphernalia, and related literature as a donation from another person or entity, that is not a cannabis producer, processor, or retailer, for donation to their customers.
 - (ii) Retail outlets may donate the lockable boxes and provide the related literature to any person eligible to purchase cannabis products under subsection (2) of this section. Retail outlets may not use the donation of lockable boxes or literature as an incentive or as a condition of a recipient's purchase of a cannabis product or paraphernalia.
- 33 (iii) Retail outlets may also purchase and sell lockable boxes, 34 provided that the sales price is not less than the cost of 35 acquisition.
- 36 (2) Licensed cannabis retailers may not employ persons under 37 twenty-one years of age or allow persons under twenty-one years of 38 age to enter or remain on the premises of a retail outlet. However,

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qualifying patients between eighteen and twenty-one years of age with a recognition card may enter and remain on the premises of a retail outlet holding a medical cannabis endorsement and may purchase products for their personal medical use. Qualifying patients who are under the age of eighteen with a recognition card and who accompany their designated providers may enter and remain on the premises of a retail outlet holding a medical cannabis endorsement, but may not purchase products for their personal medical use.

- (3) (a) Licensed cannabis retailers must ensure that all employees are trained on the rules adopted to implement this chapter, identification of persons under the age of twenty-one, and other requirements adopted by the board to ensure that persons under the age of twenty-one are not permitted to enter or remain on the premises of a retail outlet.
- (b) Licensed cannabis retailers with a medical cannabis endorsement must ensure that all employees are trained on the subjects required by (a) of this subsection as well as identification of authorizations and recognition cards. Employees must also be trained to permit qualifying patients who hold recognition cards and are between the ages of eighteen and twenty-one to enter the premises and purchase cannabis for their personal medical use and to permit qualifying patients who are under the age of eighteen with a recognition card to enter the premises if accompanied by their designated providers.
- (4) Except for the purposes of disposal as authorized by the board, no licensed cannabis retailer or employee of a retail outlet may open or consume, or allow to be opened or consumed, any cannabis concentrates, useable cannabis, or cannabis-infused product on the outlet premises.
- (5) (a) By December 31, 2024, licensed cannabis retailers shall post a conspicuous notice at the point of sale in retail outlets with information about: (i) The potential health risks and adverse health impacts that may be associated with the consumption of high THC cannabis; (ii) the potentially much higher risks that may be present for younger persons under age 25 as well as for persons who have or are at risk for developing certain mental health conditions or psychotic disorders; and (iii) where to find help in case of negative effects and resources for quitting or reducing cannabis consumption. The notice must be the same or substantially the same as the notice developed by the department of health under this subsection (5).

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(b) The department of health shall develop the notice required under this section and make it available to licensed cannabis retailers. The notice must, at a minimum, identify the information specified in (a)(i) through (iii) of this subsection, and may include additional information.

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- (6) The board must fine a licensee one thousand dollars for each violation of any subsection of this section. Fines collected under this section must be deposited into the dedicated cannabis account created under RCW 69.50.530.
- 10 NEW SECTION. Sec. 4. A new section is added to chapter 28B.20 11 RCW to read as follows:
 - (1) Subject to amounts appropriated for this specific purpose, the health care authority must issue a request for proposal and contract with an entity to develop, implement, test, and evaluate guidance and health interventions for health care providers and patients at risk for developing serious complications due to cannabis consumption who are seeking care in emergency departments, primary care settings, behavioral health settings, other health care facilities, and for use by state poison control and recovery hotlines to promote cannabis use reduction and cessation for the following populations:
- 22 (a) Youth and adults at high risk of adverse mental health impacts from use of high THC cannabis; 23
 - (b) Youth and adults who have experienced a cannabis-induced first episode psychosis but do not have a diagnosis of a psychotic disorder; and
- 27 (c) Youth and adults who have a diagnosed psychotic disorder and 28 use cannabis.
- (2) The health care authority must submit a preliminary report to 29 the appropriate committees of the legislature summarizing the progress toward developing and testing health interventions and recruiting patients and health care facilities to participate by 32 December 1, 2025. The health care authority must provide a progress 33 report on initial outcomes of the health interventions for 34 participating patients and health care facilities by July 1, 2027. 35 The health care authority must submit a final report to the 36 appropriate committees of the legislature summarizing the results of 37 38 the interventions and any recommendations for implementation of health interventions by December 1, 2028.

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- (3) A contract entered under the authorization in this section must include, in the scope of work, data gathering on adverse health impacts occurring in Washington associated with consumption of high THC cannabis, and data gathered must be included in the reports submitted to the legislature under this section.
 - (4) This section expires December 31, 2028.

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NEW SECTION. Sec. 5. If specific funding for the purposes of this act, referencing this act by bill or chapter number, is not provided by June 30, 2024, in the omnibus appropriations act, this act is null and void.

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