

Bill as Introduced

HB 157 - AS AMENDED BY THE HOUSE

8Mar2017... 0682h

2017 SESSION

17-0114
01/09

HOUSE BILL **157**

AN ACT adding chronic pain to qualifying conditions under therapeutic use of cannabis.

SPONSORS: Rep. Schleien, Hills. 37; Rep. E. Edwards, Hills. 11; Rep. Fisher, Belk. 9; Rep. Zaricki, Hills. 6; Rep. Josephson, Graf. 11

COMMITTEE: Health, Human Services and Elderly Affairs

AMENDED ANALYSIS

This bill establishes chronic pain as a qualifying medical condition under therapeutic use of cannabis.

Explanation: Matter added to current law appears in ***bold italics***.
Matter removed from current law appears [~~in brackets and struck through.~~]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Seventeen

AN ACT adding chronic pain to qualifying conditions under therapeutic use of cannabis.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 1 Use of Cannabis for Therapeutic Purposes; Definitions. Amend RSA 126-X:1, IX(a) to read as
2 follows:

3 IX.(a)(1) "Qualifying medical condition" means the presence of:

4 [~~1~~] (A) Cancer, glaucoma, positive status for human immunodeficiency virus,
5 acquired immune deficiency syndrome, hepatitis C currently receiving antiviral treatment,
6 amyotrophic lateral sclerosis, muscular dystrophy, Crohn's disease, multiple sclerosis, chronic
7 pancreatitis, spinal cord injury or disease, traumatic brain injury, epilepsy, lupus, Parkinson's
8 disease, Alzheimer's disease, ulcerative colitis, or one or more injuries that significantly interferes
9 with daily activities as documented by the patient's provider; and

10 [~~2~~] (B) A severely debilitating or terminal medical condition or its treatment that
11 has produced at least one of the following: elevated intraocular pressure, cachexia, chemotherapy-
12 induced anorexia, wasting syndrome, agitation of Alzheimer's disease, severe pain that has not
13 responded to previously prescribed medication or surgical measures or for which other treatment
14 options produced serious side effects, constant or severe nausea, moderate to severe vomiting,
15 seizures, or severe, persistent muscle spasms; or

16 (2) "Qualifying medical condition" also means moderate to severe chronic
17 pain.

18 2 Effective Date. This act shall take effect 60 days after its passage.

Committee Minutes

Senate Health and Human Services Committee

Kyle Baker 271-2609

HB 157, adding chronic pain to qualifying conditions under therapeutic use of cannabis.

Hearing Date: April 13, 2017

Time Opened: 3:30

Time Closed: 3:50

Members of the Committee Present: Senators Bradley, Avard, Gray, Fuller Clark and Hennessey

Members of the Committee Absent : None

Bill Analysis: This bill establishes chronic pain as a qualifying medical condition under therapeutic use of cannabis.

Sponsors:

Rep. Schleien

Rep. E. Edwards

Rep. Fisher

Rep. Zaricki

Rep. Josephson

Who supports the bill: Rep. Jess Edwards; Darryl Perry, Liberty Lobby LLC; Matt Simon, MPP; Michael Bisson; Jamie Cox; Joshua Chase; Charles Spangler; Rep. John Fothergill; Dr. Gail Devoid; Rep. Joe Guthrie; Dan McGuire, NH Liberty Alliance; Rep. Jerry Knirk; Rep. Mindi Messmer; Will Anderson; Heather Brown; Lauren Benson; Lisa Withrow; Paul Twomey; Rep. Elizabeth Edwards; Lisa Powers; Ethan Daisy; Melissa Thurgode; Rep. Keith Ammon; Denis Goddard; Devon Chaffee, ACLU-NH

Who opposes the bill: Elizabeth Sargent, NH Association of Chiefs of Police; Sgt Chris Huges, NH State Police; Rep. Barbara Griffin

Who is neutral on the bill: None

Summary of testimony presented in support:

Rep. John Fothergill, Coos District 1

- Introducing the bill on behalf of Rep. Schleien.
- This bill passed by a large margin in the house.
- This bill would allow patients with moderate to severe pain to get access to cannabis.
- There was a lot of testimony that stated the cannabis is very effective for

treating moderate to severe chronic pain without the need for the use of opioids with dangerous side effects.

Matt Simon – Marijuana Policy Project

- Supports this bill.
- This bill is very similar to SB 15, which would make it so you would need to have tried other treatments for severe pain before being prescribed cannabis.
- This bill is better than SB 15; there is very definitive evidence that cannabis is very effective in treating chronic pain.

Rep. Jerry Knirk – Carroll 3

- Retired Spinal Surgeon.
- Opioids are a very poor choice for the treatment of chronic non-malignant pain.
- The risk profile for cannabis is very small. No one has died of an overdose from cannabis.
- Using cannabis for pain treatment has caused a significant drop in the usage of opioids and a decrease opioid related death.
- Shared a story about a patient that was on a very large dose of opioids that was able to get completely off of opioid by occasional use of cannabis.
- Doctors are not prescribing cannabis, rather just giving the patient the right to go to an alternative treatment center to use cannabis as an option.

Rep. Mindi Messmer – Rock. 24

- We heard lots of compelling testimony on how this bill would decrease opioid use.
- Chronic pain is a symptom, and we have received a list of diseases and other health issues which this bill would help cover.
- Instead of adding each disease one by one to the list of qualifying conditions for medical cannabis, adding chronic pain would take care of many conditions.

Sen. Hennessey- Who can certify the presence of chronic pain?

Messmer- They must be a doctor or nurse practitioner.

Heather Brown

- Supports this bill.
- Chronic pain has been brought on by surgeries I have gotten in the past.
- This pain cannot be treated by anything other than pills right now.
- Cannabis has been more effective in treating my pain than pills.
- There are going to be a huge number of bills for qualifying conditions for medical cannabis next year, this bill would cover many of those and get rid of some red tape.
- This bill will alleviate a burden on many people in this state and the states workload regarding medical cannabis in the coming years.

Lauren Benson – Patient suffering from Chronic Pain

- She is very lucky with how successful her treatment with medical marijuana has been.
- Opioids have so many negative side effects; medical cannabis is a much more pleasant experience.
- It allows you to figure out the best treatment for you in a harmless manner.

Paul Twomey

- Criminal defense lawyer for 35 years, I have met many people who used marijuana to treat pain instead of opiates as a personal choice.
- There is a 24% reduction of overdose deaths in the first year in states which have medical cannabis for chronic pain.
- There is also a major reduction in hospital visits for opioid related problems.

Rep. Elizabeth Edwards – Hills. 11

- Co-sponsor of this bill.
- There are cases of people who have taken opiates for chronic pain with no success but medical cannabis has helped them.
- These people are not able to get cannabis legally right now, and we need to change that. We cannot have these individuals risking criminal offense for trying to get treatment.

Summary of testimony presented in opposition: None

Neutral Information Presented: None

Future Action: Ought to Pass

KRB

Date Hearing Report completed: April 13, 2017

Speakers

Senate Health and Human Services Committee

SIGN-IN SHEET

Date: 4/11/2017 Time: 1:45 p.m.

HB 157 AN ACT adding chronic pain to qualifying conditions under therapeutic use of cannabis.

Name/Representing (please print neatly)

Name/Representing	Support	Oppose	Speaking?	Yes	No
K. JESS EDWARDS	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Robert W. Perry Liberty Lobby LLC	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Matt Swan Marijuana Lobby Project	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
MICHAEL A. BISSON	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Scott Curtis HESB - NHSP	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Janet Cox	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
John Chase	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Charles Spangle	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Rep. BARBARA GRIFFIN	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rep. John Fotheringham	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rep. Carl Devard	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rep. Joe Guthrie	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Dan McGuire NH Liberty Alliance	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Russ Kinn Concord 3	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Minda Mess District 24	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Will Anderson Concord / self	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Aleather M. Brown	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
LAUREN BENSON	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lisa Whitrow APRN	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>

Testimony



Medical Marijuana Access Can Help Fight the Opioid Epidemic

Allowing people who suffer from chronic pain to use marijuana helps reduce opiate use.

- A recent study found a **48% reduction in patients' opioid use** after three months of medical marijuana treatment.¹ A survey of 542 patients using cannabis in addition to opioids found that 39% reduced their opioid dosage and another 39% stopped using opioids altogether.²
- Health Affairs reported that doctors in a state where marijuana was legal prescribed an average of **1,826 fewer doses of painkillers per year** to patients enrolled in Medicare Part D — which resulted in significant cost savings.³
- Scientists have found that when cannabis is used in combination with prescription opioids, it increases their pain-relieving properties, so patients can reduce their dosage and get the same effect.⁴
- Researchers at Columbia University's School of Public Health found that, in states that passed medical marijuana laws, fewer drivers killed in car crashes tested positive for opioids after the laws went into effect.⁵

Medical marijuana access is also associated with reduced opioid overdose deaths.

- A study published in the Journal of the American Medical Association in 2014 found that **opioid overdose deaths were reduced by 25% in states with effective medical marijuana laws.**⁶

No credible studies have ever supported the theory that the physical effects of marijuana are a gateway to opiate use.

- “There is no evidence that marijuana serves as a stepping stone on the basis of its particular physiological effect.” - Institute of Medicine⁷
- “Overall, research does not support a direct causal relationship between regular marijuana use and other illicit drug use.” - Drug Enforcement Administration⁸

In fact, available evidence suggests that cannabis is an “exit drug” that can help people struggling to stop using alcohol and opioids.

- An international team recently conducted one of the most comprehensive surveys of its kind, which examined 60 studies on cannabis and mental health, and found that: “Research suggests that people may be using cannabis as an exit drug to reduce use of substances that are potentially more harmful, such as opioid pain medication.” - Zach Walsh, Psychology Professor at the University of British Columbia and lead author of the study⁹

¹ Staci A. Gruber, *et al.* “Splendor in the Grass? A Pilot Study Assessing the Impact of Medical Marijuana on Executive Function,” *Front. Pharmacol.*, 13 Oct. 2016, Vol. 7.

² The Cannabis and Opioid Survey.” Healer.com, 4 Oct. 2016.

³ Ashley C. Bradford *et al.* “Medical Marijuana Laws Reduce Prescription Medication Use In Medicare Part D,” *Health Aff.* July 2016, Vol. 35 no. 7.

⁴ Abrams, Donald *et al.* “Cannabinoid-Opioid interaction in chronic pain,” *Clinical Pharmacology & Therapeutics*, vol.90, no. 6 (2011).

⁵ June H. Kim, *et al.*, “State Medical Marijuana Laws and the Prevalence of Opioids Detected Among Fatally Injured Drivers,” *Am. J. of Pub. Health*, Nov. 2016, Vol. 106 no.11.

⁶ Marcus A. Bachhuber, *et al.*, “Medical Cannabis Laws and Opioid Analgesic Overdose Mortality in the United States, 1999-2010,” *JAMA Intern Med.* Oct. 2014, Vol. 174 no. 10.

⁷ *Marijuana and Medicine: Assessing the Science*, Institute of Medicine of the National Academy of Sciences (1999).

⁸ Denial of Petition to Initiate Proceedings to Reschedule Marijuana, Federal Register, Doc. # 2016-17954, 8/12/16.

⁹ University of British Columbia, “Marijuana could help treat drug addiction, mental health, study suggests,” ScienceDaily, Nov. 16, 2016.

Committee Report

STATE OF NEW HAMPSHIRE
SENATE
REPORT OF THE COMMITTEE

Wednesday, April 12, 2017

THE COMMITTEE ON Health and Human Services

to which was referred **HB 157**

AN ACT

adding chronic pain to qualifying conditions under
therapeutic use of cannabis.

Having considered the same, the committee recommends that the Bill

OUGHT TO PASS

BY A VOTE OF: 4-1

Senator Martha Hennessey
For the Committee

Kyle Baker 271-2609

HEALTH AND HUMAN SERVICES

HB 157, adding chronic pain to qualifying conditions under therapeutic use of cannabis.

Ought to Pass, Vote 4-1.

Senator Martha Hennessey for the committee.

Other Referrals

COMMITTEE REPORT FILE INVENTORY

H.B. 157 ORIGINAL REFERRAL

_____ RE-REFERRAL

AS INTRODUCED TO COMMITTEE

HEARING REPORT

SIGN-UP SHEET(S)

COMMITTEE REPORT

PREPARED TESTIMONY AND OTHER SUBMISSIONS HANDED IN AT THE PUBLIC HEARING

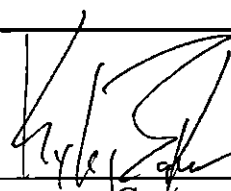
ALL AMENDMENTS (passed or not) CONSIDERED BY COMMITTEE:

_____ - AMENDMENT # _____ _____ - AMENDMENT # _____
_____ - AMENDMENT # _____ _____ - AMENDMENT # _____

OTHER (Anything else deemed important but not listed above, such as amended fiscal notes):

DATE DELIVERED TO SENATE CLERK

BY:



COMMITTEE AIDE