

116TH CONGRESS
1ST SESSION

H. R. 1151

To allow veterans to use, possess, or transport medical marijuana and to discuss the use of medical marijuana with a physician of the Department of Veterans Affairs as authorized by a State or Indian Tribe, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 12, 2019

Ms. LEE of California introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on the Judiciary, and Veterans' Affairs, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To allow veterans to use, possess, or transport medical marijuana and to discuss the use of medical marijuana with a physician of the Department of Veterans Affairs as authorized by a State or Indian Tribe, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Veterans Medical
5 Marijuana Safe Harbor Act.”.

1 **SEC. 2. FINDINGS.**

2 Congress finds the following:

3 (1) Chronic pain affects the veteran population,
4 with almost 60 percent of veterans returning from
5 serving in the Armed Forces in the Middle East, and
6 more than 50 percent of older veterans, who are
7 using the health care system of the Department of
8 Veterans Affairs living with some form of chronic
9 pain.

10 (2) Opioids account for approximately 63 per-
11 cent of all drug deaths in the United States.

12 (3) In 2011, veterans were twice as likely to die
13 from accidental opioid overdoses as nonveterans.

14 (4) States with medical cannabis laws have a
15 24.8 percent lower mean annual opioid overdose
16 mortality rate compared with States without medical
17 cannabis laws.

18 (5) Marijuana and its compounds show promise
19 for treating a wide-range of diseases and disorders,
20 including pain management.

21 (6) Medical marijuana in States where it is
22 legal may serve as a less harmful alternative to
23 opioids in treating veterans.

1 **SEC. 3. SAFE HARBOR FOR USE BY VETERANS OF MEDICAL**
2 **MARIJUANA.**

3 (a) SAFE HARBOR.—Notwithstanding the Controlled
4 Substances Act (21 U.S.C. 801 et seq.), the Controlled
5 Substances Import and Export Act (21 U.S.C. 951 et
6 seq.), or any other Federal law, it shall not be unlawful
7 for—

8 (1) a veteran to use, possess, or transport med-
9 ical marijuana in a State or on Indian land if the
10 use, possession, or transport is authorized and in ac-
11 cordance with the law of the applicable State or In-
12 dian Tribe;

13 (2) a physician to discuss with a veteran the
14 use of medical marijuana as a treatment if the phy-
15 sician is in a State or on Indian land where the law
16 of the applicable State or Indian Tribe authorizes
17 the use, possession, distribution, dispensation, ad-
18 ministration, delivery, and transport of medical
19 marijuana; or

20 (3) a physician to recommend, complete forms
21 for, or register veterans for participation in a treat-
22 ment program involving medical marijuana that is
23 approved by the law of the applicable State or In-
24 dian Tribe.

25 (b) DEFINITIONS.—In this section:

1 (1) INDIAN LAND.—The term “Indian land”
2 means any of the Indian lands, as such term is de-
3 fined in section 824(b) of the Indian Health Care
4 Improvement Act (25 U.S.C. 1680n).

5 (2) INDIAN TRIBE.—The term “Indian Tribe”
6 has the meaning given the term “Indian tribe” in
7 section 4 of the Indian Self-Determination and Edu-
8 cation Assistance Act (25 U.S.C. 5304).

9 (3) PHYSICIAN.—The term “physician” means
10 a physician appointed by the Secretary of Veterans
11 Affairs under section 7401(1) of title 38, United
12 States Code.

13 (4) STATE.—The term “State” has the mean-
14 ing given that term in section 102 of the Controlled
15 Substances Act (21 U.S.C. 802).

16 (5) VETERAN.—The term “veteran” has the
17 meaning given that term in section 101 of title 38,
18 United States Code.

19 (c) SUNSET.—This section shall cease to have force
20 or effect on the date that is five years after the date of
21 the enactment of this Act.

22 **SEC. 4. STUDIES ON USE OF MEDICAL MARIJUANA BY VET-**
23 **ERANS.**

24 (a) STUDY ON EFFECTS OF MEDICAL MARIJUANA ON
25 VETERANS IN PAIN.—

1 (1) IN GENERAL.—Not later than two years
2 after the date of the enactment of this Act, the Sec-
3 retary of Veterans Affairs shall conduct a study on
4 the effects of medical marijuana on veterans in pain.

5 (2) REPORT.—Not later than 180 days after
6 the date on which the study required under para-
7 graph (1) is completed, the Secretary shall submit to
8 Congress a report on the study, which shall include
9 such recommendations for legislative or administra-
10 tive action as the Secretary considers appropriate.

11 (b) STUDY ON USE BY VETERANS OF STATE MED-
12 ICAL MARIJUANA PROGRAMS.—

13 (1) IN GENERAL.—Not later than two years
14 after the date of the enactment of this Act, the Sec-
15 retary shall conduct a study on the relationship be-
16 tween treatment programs involving medical mari-
17 juana that are approved by States, the access of vet-
18 erans to such programs, and a reduction in opioid
19 abuse among veterans.

20 (2) REPORT.—Not later than 180 days after
21 the date on which the study required under para-
22 graph (1) is completed, the Secretary shall submit to
23 Congress a report on the study, which shall include
24 such recommendations for legislative or administra-
25 tive action as the Secretary considers appropriate.

1 (c) VETERAN DEFINED.—In this section, the term
2 “veteran” has the meaning given that term in section 101
3 of title 38, United States Code.

4 (d) USE OF AMOUNTS.—For fiscal years 2020 and
5 2021, of the amounts appropriated to the Department of
6 Veterans Affairs—

7 (1) \$10,000,000 shall be used to carry out sub-
8 section (a); and

9 (2) \$5,000,000 shall be used to carry out sub-
10 section (b).

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