

Memorandum

To: Medical Cannabis Policy Advisory Board

From: Utah Patients Coalition

Date: Nov 16

Subject: Feedback on Legislative Proposal Regarding Medical Cannabis and Problem-Solving Courts

The Utah Patients Coalition appreciates the opportunity to provide feedback on the judiciary's proposal regarding medical cannabis in problem-solving courts. While we remain cautious about allowing courts to override decisions made by medical professionals, we recognize the unique challenges posed by substance use disorders (SUD) and cannabis use disorder (CUD) within court-involved populations. It is critical to balance the therapeutic needs of individuals with the judiciary's goal of ensuring effective treatment and long-term recovery.

Key Considerations

Cannabis Use Disorder Prevalence

While Cannabis has beneficial medical applications, research does indicate that approximately 9% of cannabis users may develop CUD. In populations already grappling with SUD, this rate can increase as high as 30%. This variability highlights the need for individualized, evidence-based approaches to treatment while respecting patient rights.

Using Cannabis during treatment

Among people who use illicit drugs initiating opioid agonist treatment, at least daily cannabis use was associated with approximately 21% greater odds of retention in treatment compared with less than daily consumption.

Burden of Proof for Revoking Medical Cannabis Use

Before a patient's rights to medical cannabis are revoked the problem solving courts should have more than an assumption that an individual's issues are directly tied to cannabis use, such as a documented history of cannabis abuse or evidence that medical cannabis is actively impeding recovery efforts. For instance, the court should be able provide substantiated proof that cannabis use is interfering with treatment adherence, exacerbating substance use tendencies, or undermining the individual's ability to achieve long-term sobriety. Without such evidence, the revocation of medical cannabis use risks being punitive rather than therapeutic, potentially harming patients who are otherwise benefiting from their medical cannabis regimen. This approach ensures that decisions are based on objective, individualized assessments rather than assumptions or generalizations.

Transparency and Oversight

To ensure fairness and accountability, we propose a mechanism to track and review outcomes where medical cannabis cards are revoked for problem-solving court participants. This tracking should include:

- Annual Reporting: Data on the number of participants allowed to retain their medical cannabis cards versus those who had cards revoked.
- Sunset Review: If revocation rates exceed 30-40% of participants, the courts' authority to override medical cannabis recommendations should be revoked. This safeguard ensures decisions are not disproportionately affecting patients.

Engagement with Recommending Medical Providers (QMPs)

Courts must work in close collaboration with the recommending Qualified Medical Provider (QMP) before revoking a patient's medical cannabis card. We propose the following steps:

- Problem Solving Courts must notify the recommending QMP and certify that the QMP wants to revoke the card, or wants the patient to keep their cannabis card and agrees to be available to the courts in the treatment planning process if needed.

Appeals through the Compassionate Use Board (CUB)

If the QMP does not respond, or declines to participate but supports the patient's cannabis use, the court should facilitate an appeal to the Compassionate Use Board. The CUB would evaluate the case and determine whether continued cannabis use is compatible with the treatment plan. (this will require an amendment to 26B)

Patient-Centered Protections

These proposed layers of protection are essential to avoid unnecessary revocations of medical cannabis cards for patients without a history of cannabis misuse. By integrating transparency, oversight, and collaboration with QMPs, we can ensure that treatment decisions are equitable and focused on achieving the best outcomes for each individual.

Thank you for considering our feedback,

Desiree Hennessy
Utah Patients Coalition