A BILL TO BE ENTITLED
AN ACT

To amend Chapter 34 of Title 43 of the Official Code of Georgia Annotated, relating to physicians, acupuncture, physician assistants, cancer and glaucoma treatment, respiratory care, clinical perfusionists, and orthotics and prosthetics practice, so as to change certain provisions relating to the use of marijuana for treatment of cancer and glaucoma; to provide for regulated medicinal use of cannabis and derivatives thereof to treat certain conditions; to provide for related matters; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.

Chapter 34 of Title 43 of the Official Code of Georgia Annotated, relating to physicians, acupuncture, physician assistants, cancer and glaucoma treatment, respiratory care, clinical perfusionists, and orthotics and prosthetics practice, is amended by revising Article 5, relating to use of cannabis for treatment of cancer and glaucoma, as follows:

"ARTICLE 5

43-34-120.

This article shall be known and may be cited as the 'Controlled Substances Therapeutic Research Act 'Haleigh's Hope Act'.

43-34-121.

(a) The General Assembly finds and declares that the potential medicinal value of marijuana has received insufficient study due to a lack of financial incentives for the undertaking of appropriate research by private drug manufacturing concerns. Individual physicians cannot feasibly utilize marijuana in clinical trials because of federal governmental controls which involve expensive, time-consuming approval and monitoring procedures this article's purpose is the compassionate, potentially life-saving use of medical...
cannabis, and this article is not intended to sanction, encourage, or otherwise provide for
the legalization of recreational use of cannabis.

(b) The General Assembly further finds and declares that limited studies throughout the
nation indicate that marijuana and certain of its derivatives possess valuable and, in some
cases, unique therapeutic properties, including the ability to relieve nausea and vomiting
which routinely accompany chemotherapy and irradiation used to treat cancer patients.
Marijuana also may be effective in reducing intraocular pressure in glaucoma patients who
do not respond well to conventional medications: It is the intent of the General Assembly
in enacting this article to permit the therapeutic and treatment application of cannabis and
its derivatives. Such therapeutic and treatment applications shall include a nonsmoking
delivery system whether it be in the form of liquid, pill, or injection or other delivery
system that does not include smoking.

c) The General Assembly further finds and declares that, in enabling individual
physicians and their patients to participate in a state-sponsored program for the
investigational use of marijuana and its derivatives, qualified physicians and surgeons
throughout the state will be able to study the benefits of the drug in a controlled clinical
setting, and additional knowledge will be gained with respect to dosage and effects: It is
the intent of the General Assembly in enacting this article to permit certain registered
patients to use and possess medical cannabis and its derivatives and to allow the dispensing
of medical cannabis and its derivatives by licensed, registered entities within this state.

(d) It is the intent of the General Assembly in enacting this article to permit research into
the therapeutic applications of marijuana and its derivatives in cancer and glaucoma
patients. This would allow qualified physicians approved by the Patient Qualification
Review Board created by Code Section 43-34-124 to provide the drug on a compassionate
basis to seriously ill persons suffering from the severe side effects of chemotherapy or
radiation treatment and to persons suffering from glaucoma who are not responding to
conventional treatment, which persons would otherwise have no lawful access to it. It is
the further intent of the General Assembly to facilitate clinical trials of marijuana and its
derivatives, particularly with respect to persons suffering from cancer and glaucoma who
would be benefited by use of the drug provide in Georgia a safe, effective, and timely
delivery system of medical cannabis oil with a maximum amount of tetrahydrocannabinol
for certain limited diagnoses and to provide for an infrastructure to tightly regulate such
system with significant security and strict state oversight.

e) This article is limited to clinical trials and research into therapeutic applications of
marijuana only for use in treating glaucoma and in treating the side effects of
chemotherapeutic agents and radiation and should not be construed as either encouraging
or sanctioning the social use of marijuana. Nothing in this article shall be construed to
encourage the use of marijuana in lieu of or in conjunction with other accepted medical treatment, but only as an adjunct to such accepted medical treatment. It is the intent of the General Assembly to provide protection from prosecution for possession of medical cannabis oil with a stated maximum amount of tetrahydrocannabinol for citizens who provide evidence that such cannabis oil has been obtained legally in another state. (f) It is further the intent of the General Assembly to create a strict regulatory system that satisfies or exceeds recommendations from the United States Department of Justice to protect the sovereignty of this state in the administration of this article.

43-34-122.

As used in this article, the term:

(1) "Board" means the Georgia Composite Medical Board:

(2) "Marijuana" means marijuana or tetrahydrocannabinol, as defined or listed in Article 2 of Chapter 13 of Title 16.

(3) "Physician" means a person licensed to practice medicine pursuant to Article 2 of this chapter:

(4) "Program" means the Controlled Substances Therapeutic Research Program established pursuant to Code Section 43-34-123.

(5) "Review board" means the Patient Qualification Review Board established pursuant to Code Section 43-34-124 Reserved.

43-34-123.

(a) There is established under the Georgia Composite Medical Board the Controlled Substances Therapeutic Research Program, which shall be administered by the board. Under the program, the board shall act as a sponsor of state-wide investigational studies, utilizing as drug investigators individual physicians who elect to participate in accordance with the guidelines and protocols developed by the board. Such guidelines and protocols shall be designed to ensure that stringent security and record-keeping requirements for research drugs are met and that participants in the program meet those research standards necessary to establish empirical bases for the evaluation of marijuana as a medically recognized therapeutic substance. The board shall promulgate such rules and regulations as it deems necessary or advisable to administer the program. In promulgating such guidelines, protocols, rules, and regulations, the board shall take into consideration those pertinent rules and regulations promulgated by the Federal Drug Enforcement Agency, the Food and Drug Administration, and the National Institute on Drug Abuse.

(b) The program shall be limited to patients who are certified to the board by a physician as being:
(1) Cancer patients involved in a life-threatening situation in which treatment by chemotherapy or radiology has produced severe side effects; or

(2) Glaucoma patients who are not responding to conventional controlled substances.

c) No patient may be admitted to the program without full disclosure by the physician of the experimental nature of the program and of the possible risks and side effects of the proposed treatment.

d) The cost of any blood test required by the federal Food and Drug Administration prior to entrance into the program shall be paid by the patient seeking entrance into the program.

e) Only the following persons shall have access to the names and other identifying characteristics of patients in the program for whom marijuana has been prescribed under this article:

(1) The board;

(2) The review board created by Code Section 43-34-124;

(3) The Attorney General or his or her designee;

(4) Any person directly connected with the program who has a legitimate need for the information; and

(5) Any federal agency having responsibility for the program.

(a) The board shall appoint the Patient Qualification Review Board. Each member of the review board shall be approved for such membership by a majority vote of the board and shall serve at the pleasure of the board. The review board shall be composed of:

(1) A board certified physician in ophthalmology;

(2) A board certified physician in surgery;

(3) A board certified physician in internal medicine and medical oncology;

(4) A board certified physician in psychiatry;

(5) A board certified physician in radiology; and

(6) A pharmacist licensed under Chapter 4 of Title 26, relating to pharmacists, pharmacy, and drugs.

(b) The review board shall elect from its members a chairperson and a vice chairperson. The review board shall hold regular meetings at least once every 60 days and shall meet at such additional times as shall be called by the chairperson of the review board or the chairperson of the board. Each member of the review board shall receive for services for each day's attendance upon meetings of such board the same amount authorized by law for members of the General Assembly for attendance upon meetings of the General Assembly.

c) The board shall adopt such rules and regulations as it deems necessary for the performance of the duties of the review board.
(d) The review board shall review all patient applicants for the program and their physicians and shall certify those qualified for participation in the program. The review board shall additionally certify pharmacies which are licensed by the state and which are otherwise qualified and certify physicians regarding the distribution of marijuana pursuant to Code Section 43-34-125. Meetings of the review board to certify patients, physicians, or pharmacies shall not be open to the public, as otherwise required by Chapter 14 of Title 50 Reserved.

43-34-125.

(a) The board shall apply to contract with the National Institute on Drug Abuse for receipt of marijuana pursuant to this article and pursuant to regulations promulgated by the National Institute on Drug Abuse, the Food and Drug Administration, and the Federal Drug Enforcement Agency.

(b) The board shall cause marijuana approved for use in the program to be transferred to a certified pharmacy, licensed by the state, for distribution to the certified patient by a licensed pharmacist upon a written order for research medication of the certified physician, pursuant to this article. Any reasonable costs incurred by the board in obtaining or testing marijuana shall be charged to participating physicians who may seek reimbursement from their research subjects utilizing the marijuana Reserved.

43-34-126.

Patient participants in the program are immune from state prosecution for possession of marijuana as authorized by this article and under the program established in this article. A person authorized under this program shall not possess an amount of marijuana in excess of the amount prescribed under the authority of this article. The amount prescribed shall be maintained in the container in which it was placed at the time the prescription was filled. Physician, pharmacy, and pharmacist participants in the program are immune from state prosecution for possession, distribution, and any other use of marijuana, which use is authorized such persons by this article. Any such possession, distribution, or other use not authorized by this article shall be enforced and punished as provided in Chapter 13 of Title 16, relating to controlled substances and dangerous drugs, and Chapter 4 of Title 26, relating to pharmacists and pharmacies Reserved."

SECTION 2.

All laws and parts of laws in conflict with this Act are repealed.