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.”.
SEC. 2. FINDINGS.

Congress finds the following:

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

(2) Opioids account for approximately 63 percent of all drug deaths in the United States.

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

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

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

(6) Medical marijuana in States where it is legal may serve as a less harmful alternative to opioids in treating veterans.
SEC. 3. SAFE HARBOR FOR USE BY VETERANS OF MEDICAL MARIJUANA.

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

(1) a veteran to use, possess, or transport medical marijuana in a State or on Indian land if the use, possession, or transport is authorized and in accordance with the law of the applicable State or Indian Tribe;

(2) a physician to discuss with a veteran the use of medical marijuana as a treatment if the physician is in a State or on Indian land where the law of the applicable State or Indian Tribe authorizes the use, possession, distribution, dispensation, administration, delivery, and transport of medical marijuana; or

(3) a physician to recommend, complete forms for, or register veterans for participation in a treatment program involving medical marijuana that is approved by the law of the applicable State or Indian Tribe.

(b) DEFINITIONS.—In this section:
(1) **Indian Land.**—The term “Indian land” means any of the Indian lands, as such term is defined in section 824(b) of the Indian Health Care Improvement Act (25 U.S.C. 1680n).

(2) **Indian Tribe.**—The term “Indian Tribe” has the meaning given the term “Indian tribe” in section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304).

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

(4) **State.**—The term “State” has the meaning given that term in section 102 of the Controlled Substances Act (21 U.S.C. 802).

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

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

**SEC. 4. STUDIES ON USE OF MEDICAL MARIJUANA BY VETERANS.**

(a) **Study on Effects of Medical Marijuana on Veterans in Pain.**—
(1) In general.—Not later than two years after the date of the enactment of this Act, the Secretary of Veterans Affairs shall conduct a study on the effects of medical marijuana on veterans in pain.

(2) Report.—Not later than 180 days after the date on which the study required under paragraph (1) is completed, the Secretary shall submit to Congress a report on the study, which shall include such recommendations for legislative or administrative action as the Secretary considers appropriate.

(b) Study on use by veterans of state medical marijuana programs.—

(1) In general.—Not later than two years after the date of the enactment of this Act, the Secretary shall conduct a study on the relationship between treatment programs involving medical marijuana that are approved by States, the access of veterans to such programs, and a reduction in opioid abuse among veterans.

(2) Report.—Not later than 180 days after the date on which the study required under paragraph (1) is completed, the Secretary shall submit to Congress a report on the study, which shall include such recommendations for legislative or administrative action as the Secretary considers appropriate.
(c) Veteran Defined.—In this section, the term “veteran” has the meaning given that term in section 101 of title 38, United States Code.

(d) Use of Amounts.—For fiscal years 2020 and 2021, of the amounts appropriated to the Department of Veterans Affairs—

(1) $10,000,000 shall be used to carry out subsection (a); and

(2) $5,000,000 shall be used to carry out subsection (b).