

BHDCJS Hearing on June 15th
Medical Marijuana Subcommittee
Chair: Dr. Libby Stuyt

Recommendation: Restricting the use of dispensary cannabis for those on probation while in court-ordered treatment.

Many people on probation are court ordered to treatment to address the problems that resulted in legal charges. Treatment providers are identifying a problem with medical marijuana in that people are high in treatment and are not able to effectively participate in their treatment. When communicating with the doctors providing the approval for medical marijuana, the treatment providers find the doctors are not following the guidelines established by HB21-1317.

The clients almost always establish care after the index charge, and it is extremely easy to get approval. The doctors often do not request medical records and are often not establishing or confirming a diagnosis. They are not asking if the person is on probation or if they have a SUD or MH history. When asked if they are recommending the product, dose, frequency, THC potency etc they say they leave that up to the patient “per the constitution”. Therefore, many are not using it for medical benefit but are using recreationally and this is resulting in consequences including psychosis and cognitive problems.

This subcommittee’s recommendation is if people are allowed the **privilege** of community supervision, probation, or parole, they shall not use dispensary medical marijuana while in treatment. There are currently about 75,000 people in Colorado on probation and this would apply to anyone in court-ordered treatment. There would be an option for the use of dronabinol (Marinol) FDA approved pure THC, if the treating physician believed they would benefit from it. Probation officers should be able to monitor sobriety on all those in treatment and there should be facilitated communication between probation officers, treatment providers and treating physicians regarding use of this drug. Marinol as a prescription medication has a maximum recommended dose of 20 mg per day and this amount appears very differently in a urine drug screen than that from 1600 mg that is present in 2 grams of 80% THC shatter available as “medicine” in the dispensary.