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## HOUSE CONCURRENT RESOLUTION

REQUESTING THE DIRECTOR OF HEALTH AND THE DIRECTOR OF HUMAN SERVICES TO CONVENE A WORKING GROUP TO RECOMMEND WHETHER MARIJUANA SHOULD BE RETAINED AS A SCHEDULE I CONTROLLED SUBSTANCE OR RESCHEDULED.

1           WHEREAS, marijuana is presently classified as a schedule I  
2 controlled substance under state law, indicating that it has the  
3 highest degree of danger or probable danger; and  
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5           WHEREAS, of the five schedules of controlled substances,  
6 only schedule I controlled substances, such as marijuana, may  
7 not be dispensed by practitioners, in other words, prescribed by  
8 physicians; and  
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10           WHEREAS, the designation of marijuana as a schedule I  
11 controlled substance is made by the recommendation of the  
12 Department of Public Safety, which is tasked with the duty to  
13 assess the degree of danger or probable danger of a controlled  
14 substance based upon statutorily determined factors; and  
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16           WHEREAS, the Department of Public Safety is assisted in its  
17 scheduling of controlled substances by the Hawaii Advisory  
18 Commission on Drug Abuse and Controlled Substances, which is an  
19 advisory commission placed within the Department of Health for  
20 administrative purposes, and makes recommendations regarding the  
21 addition, deletion, or rescheduling of all controlled  
22 substances; and  
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24           WHEREAS, regardless of its classification as a schedule I  
25 controlled substance, marijuana also has recognized medical  
26 benefits, and the laws governing the medical use of marijuana,  
27 which are currently administered by the Department of Public  
28 Safety, will be administered instead by the Department of Health  
29 beginning January 1, 2015; and  
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1           WHEREAS, the medical marijuana laws are consistent with the  
2 controlled substances law in not authorizing physicians to  
3 prescribe medical marijuana, but instead only authorizing them  
4 to certify that, for a particular patient, the potential  
5 benefits of the medical use of marijuana outweigh its health  
6 risks; and

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8           WHEREAS, clearly, the medical marijuana laws would serve  
9 patients more effectively if medical marijuana could be  
10 prescribed by physicians; and

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12           WHEREAS, in one of its resolutions, the Hawaii Medical  
13 Association recommends that medical marijuana should be "re-  
14 scheduled to a status that is either equal to or less  
15 restrictive than the Schedule III status of synthetic THC  
16 (Marinol), so as to reduce barriers to needed research and to  
17 humanely increase availability of cannabinoid medications to  
18 patients who may benefit"; and

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20           WHEREAS, the Hawaii Medical Association maintains that  
21 medical marijuana fulfills none of the criteria for  
22 classification as a Schedule I controlled substance, because it  
23 is considered minimally addictive or non-addictive, has many  
24 well-known medical benefits, and has no known lethal dosage; and

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26           WHEREAS, in a position paper issued in 2008, the American  
27 College of Physicians urged an evidence-based review of  
28 marijuana's status as a schedule I controlled substance to  
29 determine whether it should be reclassified to a different  
30 schedule, considering the scientific findings regarding  
31 marijuana's safety and efficacy in some clinical conditions as  
32 well as evidence on the health risks associated with marijuana  
33 consumption, particularly in its crude smoked form; now,  
34 therefore,

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36           BE IT RESOLVED by the House of Representatives of the  
37 Twenty-seventh Legislature of the State of Hawaii, Regular  
38 Session of 2014, the Senate concurring, that the Director of  
39 Health and the Director of Human Services are requested to  
40 convene a working group to recommend whether marijuana should be  
41 retained as a schedule I controlled substance or rescheduled;  
42 and

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# H.C.R. NO. 204

1 BE IT FURTHER RESOLVED that the Director of Health and the  
 2 Director of Human Services are requested to determine the size,  
 3 composition, and leadership of the working group and to provide  
 4 the working group with any necessary administrative,  
 5 professional, technical, and clerical support; and

6  
 7 BE IT FURTHER RESOLVED that the working group, through its  
 8 chairperson, is requested to submit a report of its findings and  
 9 recommendations, including any proposed legislation, to the  
 10 Legislature not later than twenty days prior to convening of the  
 11 Regular Session of 2015; and

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 13 BE IT FURTHER RESOLVED that, if the working group is unable  
 14 to develop a recommendation that is supported by at least two-  
 15 thirds of its members, the working group is requested to include  
 16 in its report a description of the differences of opinion among  
 17 the working group and to attach a minority report to its report,  
 18 if necessary; and

19  
 20 BE IT FURTHER RESOLVED that certified copies of this  
 21 Concurrent Resolution be transmitted to the Director of Health  
 22 and the Director of Human Services.  
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 24  
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OFFERED BY:

*Allen A. Blotti*

*Brenda Kofecki*

*Richard Henry*

*[Signature]*

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