

SUBJECT: Expanding eligibility for patients' medical use of low-THC cannabis

COMMITTEE: Public Health — favorable, without amendment

VOTE: 11 ayes — Klick, Guerra, Allison, Campos, Coleman, Collier, Jetton,
Oliverson, Price, Smith, Zwiener

0 nays

WITNESSES: For — John David Carrasco, Cannliv Inc., Texas Cannabis Caucus Democratic Party; Karen Reeves, CenTex Community Outreach; Chase Bearden, Coalition of Texans with Disabilities; Eric Espinoza, Cannabis.Fit DFW Norml; Elias Jackson, Vyripharm Enterprises Inc.; and 11 individuals; (*Registered, but did not testify*: Dennis Borel, Coalition of Texans with Disabilities; John Pitts, Jr, Epilepsy Foundation of Central & South Texas, Epilepsy Foundation of Texas, and Mothers Advocating Medical Marijuana for Autism; Julia Patterson, KK 125 Ovarian Cancer Research Foundation; Elizabeth Miller and Rene Perez, Libertarian Party of Texas; Price Ashley, PharmaCann; Kate Goodrich, Revolution; Fred Shannon, Texans for Medical Relief; Sarah Moseley, Texas Cannabis Collective; Jaclyn Finkel, Texas NORML and Foundation for an Informed Texas; Susan Hays, Village Farms; and 10 individuals)

Against — None

On — Manda Hall, Department of State Health Services; Gregory Fowler, Tourette Texas; David Bass; Jason Walker; Amanda Walker; (*Registered, but did not testify*: Denise Seibert)

BACKGROUND: Health and Safety Code ch. 487 establishes the Texas Compassionate Use Act, which is administered by the Department of Public Safety and allows certain licensed organizations to dispense low-THC cannabis.

Occupations Code sec. 169.001 defines low-THC cannabis as the plant *Cannabis sativa* L., and any compound, manufacture, salt, derivative, mixture, preparation, resin, or oil of that plant that contains no more than

0.5 percent by weight of tetrahydrocannabinols (THC). Sec. 169.002 and 169.003 authorize certain licensed physicians to prescribe low-THC cannabis to patients with certain medical conditions, including epilepsy, multiple sclerosis, autism, and terminal cancer.

DIGEST:

HB 1535 would expand patient eligibility for low-THC cannabis prescriptions and establish a compassionate-use institutional review board. It also would amend the definition of low-THC cannabis by increasing the allowable weight of THC from 0.5 percent to 5 percent.

Prescriptions. The bill would allow licensed physicians to prescribe low-THC cannabis to patients diagnosed with:

- cancer;
- a condition that causes acute or chronic pain for which a physician would otherwise prescribe an opioid;
- a medical condition approved for an authorized research program; or
- a debilitating medical condition designated by the Department of State Health Services.

The bill also would allow physicians to prescribe low-THC cannabis to veterans diagnosed with post-traumatic stress disorder.

Institutional review board. Under the bill, one or more compassionate-use institutional review boards could be established to:

- evaluate and approve proposed research programs to study the medical use of low-THC cannabis in treating a designated medical condition; and
- oversee patient treatment undertaken as part of an approved research program, including the certification of treating physicians.

The bill would require an institutional review board to be affiliated with a dispensing organization and meet other affiliation, accreditation, or registration conditions.

Patient treatment. The bill would limit patient participation in an approved research program to permanent residents of the state and would require patients to provide informed consent in writing prior to receiving treatment. Patient treatment in a research program could be administered only by a licensed physician certified by an institutional review board.

The bill would allow the Texas Medical Board to adopt rules regarding the certification of a physician by an institutional review board.

Report. Each institutional review board would have to submit written reports that describe and assess the research findings of each approved research program to:

- the Health and Human Services Commission (HHSC), by October 1 of each year; and
- the Legislature, by October 1 of each even-numbered year.

Rules. By December 1, 2021, the executive commissioner of HHSC would be required to adopt rules necessary to implement the bill's provisions, including rules designating the medical conditions for which a patient could be treated with low-THC cannabis as part of an approved research program.

By December 1, 2021, the Department of Public Safety would have to adopt or amend its rules regarding the cultivation, processing and dispensing of low-THC cannabis by a licensed dispensing organization.

Other provisions. The bill would make conforming changes in current law.

The bill would take effect September 1, 2021.

SUPPORTERS
SAY:

HB 1535 would help Texans with severe medical conditions by expanding access to low-THC cannabis for patients with all forms of cancer, post-

traumatic stress disorder (PTSD) in veterans, certain conditions that cause acute or chronic pain that would otherwise be prescribed an opioid, and other debilitating medical conditions. Expanding the list of qualifying medical conditions would provide these patients an alternative method of pain management to opioids, which can lead to addiction.

The bill would increase the market for low-THC cannabis, which currently is very limited, by increasing the number of conditions for which this treatment could be prescribed. This would allow dispensing organizations to manufacture low-THC cannabis in larger quantities and help decrease costs for patients.

Some suggest that more research is needed to better understand the potential benefits of the medical use of low-THC cannabis. The bill would provide more data on this by establishing compassionate-use institutional review boards to evaluate and approve proposed research programs to study the medical use of low-THC cannabis and potentially expand the list of qualifying medical conditions in the future.

CRITICS
SAY:

Because some patients may benefit from higher or lower doses of THC, depending on the severity of their condition, HB 1535 should increase the THC cap above 5 percent for medical cannabis. Decisions about appropriate doses of THC in medical cannabis should be left up to the patient and the patient's doctor.

The bill also should provide all patients with post-traumatic stress disorder (PTSD), not just veterans, access to low-THC cannabis, and it should expand the list of qualifying conditions to include neurodevelopmental diseases, such as Tourette syndrome.