

Date of Hearing: July 2, 2019

ASSEMBLY COMMITTEE ON BUSINESS AND PROFESSIONS

Evan Low, Chair

SB 627 (Galgiani) – As Amended April 30, 2019

SENATE VOTE: 33-0

SUBJECT: Medicinal cannabis and medicinal cannabis products: veterinary medicine

SUMMARY: Authorizes a qualified veterinarian, as defined, to recommend the use of medicinal cannabis on an animal patient, as specified, upon the Veterinarian Medical Board's (VMB) development of guidelines on the appropriate administration and use of medicinal cannabis for an animal patient; prohibits a veterinarian from being punished for recommending cannabis for an animal patient; and, includes cannabis for use on animals under the Medicinal and Adult-Use Cannabis Regulation and Safety Act (MAUCRSA).

EXISTING LAW:

- 1) Establishes the VMB under the jurisdiction of the Department of Consumer Affairs (DCA) to license and regulate veterinarians, registered veterinary technicians and veterinary premises. (Business and Professions Code (BPC) § 4800 *et seq.*)
- 2) Requires a veterinarian, each time they initially prescribe, dispense, or furnish a dangerous drug in an outpatient setting, to offer to provide to the client responsible for the animal patient, a consultation, as specified. (BPC § 4829.5)
- 3) Prohibits a licensee from dispensing or administering cannabis or cannabis products to an animal patient. (BPC § 4884(a))
- 4) States that, notwithstanding any other law and absent negligence or incompetence, a licensed veterinarian shall not be disciplined by the VMB solely for discussing the use of cannabis on an animal for medical purposes. (BPC § 4884(b))
- 5) Requires the VMB on or before January 1, 2020 to adopt guidelines for veterinarians to follow when discussing cannabis within the veterinarian-client-patient relations and post the guidelines on the VMB's Web site. (BPC § 4884(c))
- 6) Authorizes the VMB to deny, revoke, or suspend a license or registration or assess a fine for: 1) accepting, soliciting, or offering any form of remuneration from or to a cannabis licensee if the veterinarian or his or her immediate family have a financial interest with the cannabis licensee; 2) discussing cannabis with a client while the veterinarian is employed by, or has an agreement with a "cannabis licensee, as defined; and 3) distributing any form of advertising for cannabis in California. (BPC 4883(p)(q)(r))
- 7) Establishes MAUCRSA to regulate the cultivation, distribution, transport, storage, manufacturing, processing, and sale of both medicinal and adult-use cannabis. (BPC § 26000)

THIS BILL:

- 1) Adds a definition for “cannabis” or “cannabis products” and for “medicinal cannabis” or “medicinal cannabis products” under the veterinary practice act which have the same meanings as under the MAUCRSA.
- 2) Requires the VMB to issue guidelines for the appropriate administration and use of medicinal cannabis on an animal patient; requires the VMB to consult with the California Cannabis Research Program, as specified in developing the guidelines; and, requires the VMB to report back to the Legislature on the progress of developing the guidelines, as specified.
- 3) Authorizes a qualified veterinarian to discuss the use of medicinal cannabis or cannabis products on an animal patient and authorizes a veterinarian to recommend the use of medical cannabis or medical cannabis products on an animal patient for any condition for which cannabis or cannabis products provide relief on or after the date that the VMB issues the guidelines specified above.
- 4) Requires the veterinarian to have an established veterinarian client patient relationship and the recommendation must include, at a minimum, both the condition the recommendation is for, along with the name of the animal patient and name of the primary caregiver of the animal patient. Prohibits a licensee from recommending cannabis for an animal patient without an appropriate examination and a medical indication. Prohibits a licensee from recommending cannabis for an animal patient while the veterinarian is employed by, or has an agreement with a person or entity dispensing medicinal cannabis or medicinal cannabis products.
- 5) Prohibits the VMB from taking specified enforcement actions against a veterinarian for recommending medicinal cannabis or medicinal cannabis products for an animal patient.
- 6) States that a “qualified veterinarian” who makes a recommendation is entitled to the same protections as a physician and surgeon who makes a recommendation in accordance with the CUA.
- 7) Adds animal patients with valid veterinarian’s recommendations to MACUSRA for medicinal cannabis and medicinal cannabis products.
- 8) Adds to the definition of “medicinal cannabis” or “medicinal cannabis products” a product intended to be sold for use on an animal patient pursuant to a veterinarian’s recommendation, as specified.
- 9) Defines a “veterinarian recommendation” to mean a recommendation by a qualified veterinarian that a patient use cannabis, as specified.
- 10) Authorizes a primary caregiver, as defined, to purchase medicinal cannabis or medicinal cannabis products for use on an animal patient if the primary caregiver has a valid veterinarian’s recommendation for an animal patient that the primary caregiver owns and the

primary caregiver is 18 years of age or over.

- 11) Requires all medicinal cannabis or medicinal cannabis products that are intended for use on animal patient to have cannabis as the primary active ingredient.
- 12) States that it is the intent of the Legislature to: prevent the potential danger of animal abuse by regulating the use of medicinal cannabis on animals; give veterinarians the tools they need to treat their patients effectively without the fear of jeopardizing their license; ensure that access is readily available to animal patients; and, further research and knowledge throughout the health care system and for health care practitioners regarding medicinal cannabis.
- 13) Makes other technical and conforming changes.

FISCAL EFFECT: Unknown. This bill is keyed fiscal by Legislative Counsel.

COMMENTS:

Purpose. This bill is sponsored by *Lovingly & Legally*. According to the Author, “Most people consider their pets as a member of their family. In an effort to relieve pain, many pet owners are turning to the Internet or simply the person behind the counter at a recreational or medicinal cannabis shop for advice in treating their pets. Since many animals, especially dogs who are more sensitive to cannabis products, dosages and frequency of ingestion could have negative effects on pets. Some pet owners are unwittingly hurting their pets in the process since their most trusted source of information, veterinarians, are legally prohibited from making a recommendation on type of product to use, the frequency of use and other similar dosage concerns. This measure recognizes that pet owners deserve the most reliable information possible regarding the health and well-being of their pet and that that information should come from a knowledgeable and educated veterinarian.”

Background. Veterinarians. The veterinary medical profession provides health care to a variety of livestock and pets. Currently, there are no requirements for a veterinarian to take any coursework on the use of cannabis on an animal patient. This bill would authorize a “qualified veterinarian” to recommend the use of medicinal cannabis or cannabis products on an animal patient for any condition for which the product would provide relief for the ailment. Current law does not provide a “qualified veterinarian” designation. Under this bill a “qualified veterinarian” would be identified as one who has completed a medicinal CE program approved by the American Association of Veterinary State Boards’ Registry of Approved Continuing Education. Licensure renewal requires a licensed veterinarian to complete 36 hours of CE every two years. This bill does not specify a number of hours of CE that must be taken, nor does it require any additional coursework to be taken on this topic.

Cannabis Regulation in California. In 1996, California voters passed Proposition 215, legalizing the use of medicinal cannabis (MC) in the state. In October 2015, nearly 20 years after the authorization of the use of MC, Governor Jerry Brown signed into law a trio of bills [AB 243 (Wood, Chapter 688, Statutes of 2015), AB 266 (Bonta, Cooley, Jones-Sawyer, Lackey, and Wood, Chapter 689, Statutes of 2015), and SB 643 (McGuire, Chapter 719, Statutes of 2015)]

collectively known as the Medical Cannabis Regulation and Safety Act (MCRSA). MCRSA established the state's first comprehensive regulatory framework for medicinal cannabis. In 2016, the voters of California passed Proposition 64, the Adult Use of Marijuana Act (AUMA) to legalize the recreational use of cannabis in the state by 2018. In June 2017, AUMA and MCRSA were combined to form one system for the regulation of cannabis, MAUCRSA. Currently, MAUCRSA is applicable to both recreation and medicinal products, however, it does not specifically authorize the use for animal patients. This bill adds cannabis or cannabis products for use on animal patients to the current provisions of MAUCRSA, and allow medicinal cannabis retailers to provide cannabis for use on an animal patient as long as the animal patient has a veterinarian recommendation.

Prior Related Legislation. AB 2215 (Kara, Chapter 819, Statutes of 2018) prohibits a licensed veterinarian from dispensing or administering cannabis or cannabis products; specifies that absent negligence or incompetence a veterinarian shall not be disciplined or have his or her license denied, revoked or suspended by the VMB solely for discussing the use of cannabis on an animal for medicinal purposes; provides that the VMB would have until January 1, 2020, to promulgate guidelines for veterinarians to follow when discussing the use of cannabis; and prohibits a veterinarian from having any financial or pecuniary interest with a MAUCRSA licensee or to distribute any form of advertising for cannabis in California.

SB 94 (Committee on Budget and Fiscal Review, Chapter 27, Statutes of 2017) combined the Adult Use of Marijuana Act and the Medical Cannabis Regulation and Safety Act into one system for the regulation of cannabis, resulting in MAUCRSA.

SB 643 (McGuire, Chapter 719, Statutes of 2015) stated legislative intent to commission objective scientific research by the UC regarding the efficacy and safety of administering cannabis as part of medical treatment. Requires UC, if it accepts by appropriate resolution, the responsibility to create the Program that will develop and conduct studies intended to ascertain the general medical safety and efficacy of cannabis, and if found valuable, to develop medical guidelines for the appropriate administration and use of cannabis.

ARGUMENTS IN SUPPORT:

The *American College of Veterinary Botanical Medicine*, and the *American Holistic Veterinary Medical Association* writes in support, “thousands of people are currently using cannabis for their pets with questionable advice from the internet or potentially unreliable advice from budtenders. Pet owners deserve the most reliable information possible regarding their pet’s health and well-being. That information and advice is expected to come from trusted veterinarians. “

ARGUMENTS IN OPPOSITION:

The *California Veterinary Medical Association (CVMA)* writes in opposition, “[This bill] now significantly expands existing authority by allowing veterinarians to "recommend" cannabis to clients. However, the bill states that only a newly created, so-called "qualified veterinarian" may recommend cannabis. The Veterinary Medicine Practice Act does not create a qualifying professional designation like this for any other drug that is prescribed by a licensed veterinarian. Consequently, we feel this designation for one product is inappropriate.”

In addition, *VetCBD* states in opposition, “Specifically, *VetCBD* is seeking an amendment that would clarify that all adults age 21 and over would be able to purchase medicinal cannabis products for their animals, even if they had not received a veterinarian’s recommendation. *VetCBD* is currently stocked by hundreds of licensed adult use retailers and purchased by thousands of adult animal caregivers every month. *VetCBD* is currently marketed as an adult use human product, available for purchase by any adult aged 21 and over, but would be regulated as a medicinal animal product if [this bill] were to be adopted.”

POLICY ISSUES:

There is major concern in regards to the significant lack of research on this Schedule I drug as it relates to animals.

In an attempt to address this concern, BPC Section 4826.3 was amended to require the board to consult with the California Cannabis Research Program, known as the Center for Medicinal Cannabis Research (CMCR). As understood, the thought was CMCR already conducted research (or is currently) conducting research on the efficacy of cannabis on animals. This was identical to the requirement for MBC when developing their guidelines. However, at the time the MBC was required to develop their guidelines, CMCR had over a decade worth of research specific to humans. This is not the case for animal research. Dr. Igor Grant from CMCR, has stated “...they have not done any studies on the efficacy of cannabis on animals.” They are willing to do so, but he said they would need additional funding.

In addition, while BPC Section 4826.3 would require the Board to consult with CMCR, there is no requirement for research to actually be conducted. As it stands, CMCR would not be able to provide any meaningful assistance to the Board. While MBC’s guidelines include identifying potential risks and benefits, there simply is not enough knowledge out there for veterinarians to educate their clients on potential risks and benefits for animal patients. Add this to the obvious fact that our guidelines impact all sorts of species/breeds/ailments (rather than limited to one species – humans).

Given the lack of research and the lack of assistance CMCR can currently provide, it is the opinion of this Committee that the reporting requirement of every six months will be a complete waste of time and resources. It is suggested that an added research requirement and the necessary funds to conduct the research be added to the bill.

AMENDMENTS:

AMENDMENT 1. Due to concerns regarding the potential privacy implications surrounding this language, as well as the possible violation of Section 4857 of the Veterinary Medicine Practice Act the committee submits the following change to these Legislative findings:

Page 4, Section 1, strike lines 1 through 5 inclusive pertaining to the sharing of veterinarian-client-patient information.

AMENDMENT 2. In an effort to make the language in 4826.3 conform with the similar direction given to the Veterinary Medical Board in Section 4884 of the Veterinary Medicine Practice Act, the committee submits:

Page 5, Section 4, line 15, 4826.3 (a) (1):

“On or before January 1, 2022, the board shall issue adopt guidelines for the appropriate administration and use of medicinal cannabis on an animal patient. veterinarians to follow when recommending cannabis within the veterinarian-client-patient relationship. These guidelines shall be posted on the board’s internet website.”

Page 5, Section 4, line 32 (c) is conforming:

“On an and after the date that the board issues guidelines on the appropriate administration and use of medicinal cannabis on an animal patient pursuant to paragraph (1) of subdivision (a), a qualified California licensed veterinarian may recommend the use of medicinal cannabis....”

AMENDMENT 3. All references to a “qualified” veterinarian will be stricken throughout the bill, as the bill would only allow veterinarians who take specific continuing education courses on cannabis to be allowed to recommend cannabis to animal patients. Neither the Compassionate Use Act nor Proposition 64 requires a human medical doctor to have “qualified” status.

All veterinarians, by virtue of their license, have the education and skills needed to recommend drugs, including cannabis. Whether a veterinarian chooses to recommend cannabis to their client would be subject to their own professional judgement.

Page 5, line 29 (b) strike the word “qualified.” Replace with “California licensed.”

Page 5, line 35 (c) strike the word “qualified.” Replace with “California licensed.”

Page 6, line 21 (f) (1) strike the word “qualified.” Replace with “California licensed.”

Page 6, line 27, (f) (2) strike the word “qualified.” Replace with “California licensed.”

Page 6, line 33, (2) (g) strike the word “qualified.” Replace with “California licensed.”

Page 13, line 24, (2) (aw) “Veterinarian recommendation” means a recommendation by a qualified California licensed veterinarian that a patient for use cannabis provided use for an animal patient pursuant to Section 4826.3.

Page 18, line 14 (C) add “California licensed” veterinarian.

Page 18, line 26 (C) add “California licensed” veterinarian.

AMENDMENT 4. The language mandating veterinarians take continuing education relating to medicinal cannabis be stricken in its entirety. This language creates a sub-class of veterinary practice for the purpose of recommending a drug. Medical doctors are not required to take continuing education related to cannabis. Veterinarians are already actively taking continuing education on the subject where they have a professional interest.

The committee submits:

Page 7, strike lines 1 through 6 inclusive.

AMENDMENT 5. The 2018 statute relating to the authority of veterinarians to “discuss” cannabis with their animal-owning clients (AB 2215-Kalra) be reinstated in full in this measure. After the bill was signed by the Governor, the Veterinary Medical Board commenced work on the development of the guidelines that are required by statute to be in effect by January 1, 2020. It is important to restore this language in recognition of the work done on this issue, and the work still being done by the VMB. Additionally, there may be some veterinarians who are not interested in “recommending” cannabis to their animal-owning clients. This language protects those veterinarians who merely want to “discuss” the issue of cannabis with their clients. Please note that SB 627, as introduced, struck an important provision of the bill - (a) - and it was subsequently re-lettered. The original (a), (b) and (c) will be reinstated as follows:

4884. (a) A licensee shall not dispense or administer cannabis or cannabis products to an animal patient.

(b) Notwithstanding any other law and absent negligence or incompetence, a veterinarian licensed under this chapter shall not be disciplined by the board or have his or her license denied, revoked, or suspended solely for discussing the use of cannabis on an animal for medicinal purposes.

(c) On or before January 1, 2020, the board shall adopt guidelines for veterinarians to follow when discussing cannabis within the veterinarian-client-patient relationship. These guidelines shall be posted on the board’s Internet Web site.

AMENDMENT 6. In regards to AB 2215-Kalra (2018), the Veterinary Medical Board specifically requested language that would allow the Board to pursue cases involving negligence and incompetence by a veterinarian who discusses cannabis with an animal owner. It is appropriate to mirror that same language when establishing rules for “recommending” cannabis. The committee will consider the following:

Page 6, line 20, 4826.3 (f) (1):

“Notwithstanding any other law, and absent negligence or incompetence, except as provided in subdivisions (p), (q), and (r) of Section 4883, a California licensed qualified veterinarian under this chapter shall not be disciplined by the board or have their license denied, revoked, or suspended solely for recommending the use of cannabis on an animal patient. who makes a recommendation for an animal patient under this section shall not be punished, or denied any right or privilege, for having recommended medicinal cannabis or medicinal cannabis products for an animal patient for medical purposes pursuant to this section.

AMENDMENT 6. All references to “primary caregiver” in reference to the animal patients only (not the human primary caregiver references) to be stricken. The Veterinary Medicine Practice Act uses the term “veterinarian-client-patient-relationship” throughout. It is appropriate, when referring to an animal owner to describe them as the “client,” and the animal as the “patient.” Without this change, the Practice Act would need to be rewritten throughout. The committee submits:

Page 6, line 10 (B), strike the words “primary caregiver.” Replace with “client.”

Page 6, line 38 (1), strike the words, “Primary caregiver.” Replace with “client.”

Page 6, line 31 (a) strike the words, “Primary caregiver.” Replace with “client.”

Page 6, line 33, (a) strike the words, “Primary caregiver.” Replace with “client.”

Page 6, line 35, (a) strike the words, “Primary caregiver.” Replace with “client.”

Page 7, line 3 (d) add the words, “or client” after “caregiver.”

Page 7, line 5 (d) add the words, “or client” after “caregiver.”

Page 7, line 6 (d) add the words, “or client” after “caregiver.”

Page 18, line 15 (C) - strike the entire line: “for which the person is a primary caregiver.”

Page 18, line 27 (C) - strike the entire line: “for which the person is a primary caregiver.”

AMENDMENT 7. On page 19 (b) pertaining to confidentiality be reconfigured, the current language for veterinarians is inappropriately placed within the confidentiality standards for human medicine, which are very specific to their Practice Act. The creation of a new (c) which would reference the Veterinary Medicine Practice Act confidentiality of records statute, Section 4857 will be submitted.

Page 19, lines 10-11 (b) strike:

“2525) of Chapter 5 of Division 2 or in a veterinarian’s recommendation issued in accordance with Section 4826.3 and”

Page 19, line 26, add a new (c):

“Information contained in a California licensed veterinarian’s recommendation issued in accordance with this Act, shall remain a confidential part of an animal patient’s record in conjunction with Section 4857 of the Business and Professions Code.”

AMENDMENT 8. There should be some conformity to the 21 year old age limit, instead of the 18 year old age limit referenced in the bill as in print.

In addition to cannabis that is allowed access via veterinarian recommendation, allow cannabis for medicinal animal use to be accessed by 21 year old at the normal retail setting.

Delete cross-reference to HSC 11357 in added B&P code 26003 as it is unneeded if we change purchasing age to 21 years and older

Cannabis products be should be defined as including animal products. (e.g. by amending Section 26001 (j) which defines “cannabis products” to include those “intended for medicinal use on an animal.”). This is consistent with the human product language.

AMENDMENT 9. Reference to the definition of livestock in Food and Agricultural Code:

Insert: FAC Section 14205. “Livestock” includes all animals, poultry, and bees, and aquatic and amphibian species which are raised, kept, or used for profit. It does not include those species which are usually kept as pets, such as dogs, cats, and pet birds.

AMENDMENT 10. Implement a 2022 deadline for VMB to adopt guidelines and allow veterinarians to recommend cannabis on animal patients

AMENDMENT 11. Delete reference of “administration and use” of cannabis in VMB’s adoption of guidelines.

REGISTERED SUPPORT:

Lovingly and Legally (Sponsor)
California Small Business Association
Laytonville Grange #726

REGISTERED OPPOSITION:

California Veterinary Medical Association
VetCBD

Analysis Prepared by: Danielle Sires / B. & P. / (916) 319-3301