

RÉSUMÉ DIGEST

ACT 207 (HB 169)

2019 Regular Session

Hoffmann

Existing law authorizes physicians who are domiciled in La. and licensed by and in good standing with the La. State Board of Medical Examiners, referred to hereafter as the "board", to recommend medical marijuana for therapeutic use by patients clinically diagnosed as suffering from a debilitating medical condition. Authorizes physicians to prescribe, rather than recommend, medical marijuana for treatment of a patient's debilitating medical condition if and when the U.S. Drug Enforcement Administration reclassifies marijuana from a Schedule I drug to a Schedule II drug. Defines "debilitating medical condition" to mean cancer, glaucoma, Parkinson's disease, positive status for human immunodeficiency virus, acquired immune deficiency syndrome, cachexia or wasting syndrome, seizure disorders, epilepsy, spasticity, severe muscle spasms, intractable pain, Crohn's disease, muscular dystrophy, multiple sclerosis, post traumatic stress disorder, and certain conditions associated with autism spectrum disorder.

New law retains existing law and requires that La.-licensed physicians report adverse events and health outcomes associated with a patient's use of medical marijuana to the data system provided for in new law. Defines "adverse event" as any incident related to the use of a drug prescribed or recommended to a patient that may result in serious harm or injury to the patient or in the patient's death.

New law provides that its purpose is to promote the practice of evidence-based medicine in La. through the creation of a system which facilitates the collection and analysis of information on health effects, events, and outcomes associated with the use of medical marijuana by patients in this state.

New law authorizes the board to create and maintain an electronic data system for the collection and analysis of clinical information associated with the use of medical marijuana by patients. Requires that the system include, at minimum, the following components:

- (1) A component for the collection of data concerning adverse events experienced by patients which are associated with the use of medical marijuana. Requires the board to design and administer the data system such that any of the following persons may report an adverse event:
 - (a) The patient.
 - (b) A family member of the patient.
 - (c) A physician who prescribes or recommends medical marijuana to a patient.
 - (d) Any physician who treats the patient other than a physician who prescribes or recommends medical marijuana to the patient.
- (2) A component for the collection of data concerning health outcomes other than adverse events experienced by patients that are associated with the use of medical marijuana. Requires the board to design and administer the data system such that reporting of health outcomes is limited to physicians exclusively.

New law requires the board to collaborate with the following institutions in designing and implementing the data system:

- (1) The medical school of the Louisiana State University Health Sciences Center at New Orleans.
- (2) The medical school of the Louisiana State University Health Sciences Center at Shreveport.
- (3) The Tulane University School of Medicine.
- (4) The Pennington Biomedical Research Center.

- (5) The College of Nursing and Allied Health at Southern University and A&M College.
- (6) The Xavier University of Louisiana College of Pharmacy.

New law requires the board to maintain the data system in a secure environment which complies, at minimum, with all applicable federal laws and regulations providing for the protection of health information.

New law provides that the board may authorize and facilitate access to data in the system to an outside party only if that party seeks the data for use in a bona fide medical research effort which has been authorized by the institutional review board of the organization conducting the research. Stipulates that the board shall have exclusive authority to determine whether an activity qualifies as a bona fide medical research effort in accordance with new law and that any disclosure of data in the system shall be subject to the approval of the board.

New law provides that except for any disclosure of data specifically authorized by new law, all data in the data system shall be confidential and shall not be available for subpoena. Provides that such data shall not be disclosed, discoverable, or compelled to be produced in any civil, criminal, administrative, or other proceeding. Stipulates that the data maintained in the data system shall not be subject to any public records request or considered a public record pursuant to existing law relative to public records, R.S. 44:1 et seq.

New law authorizes the board to receive and expend all funds as may be necessary to implement and maintain the data system. Provides that such funds may include, without limitation, funds appropriated by the legislature, including any appropriation of federal funds; funding provided by contract or other agreement with a governmental entity; and any public or private donations, gifts, or grants from governmental sources, individuals, corporations, nonprofit organizations, or other business entities.

New law requires the board to promulgate administrative rules as necessary to implement new law.

Effective August 1, 2019.

(Amends R.S. 44:4.1(B)(26); Adds R.S. 40:1046(A)(6) and 1168.1-1168.6 and R.S. 40:1046(A)(6) of §2 of Act No. 96 of the 2016 R.S.)