## **2SHB 2320** - S COMM AMD

By Committee on Labor & Commerce

1 Strike everything after the enacting clause and insert the 2 following:

Sec. 1. The legislature finds that there is a 3 "NEW SECTION. growing body of research evidencing that consuming cannabis with high 4 concentrations of THC may be harmful to some people, 5 including 6 younger persons and persons who have or are at risk for developing certain mental health conditions or psychotic disorders. Products 7 like THC-infused vape oils, shatter, and dabs can contain close to 8 100 percent THC, and may carry risks not commonly associated with 9 consumption of useable cannabis flower or other cannabis products 10 11 with relatively lower THC concentrations. In the interest of public 12 health, the legislature intends to review studies and consider 13 increasing the minimum legal age of sale of high THC cannabis 14 products to age 25, and the legislature intends to require caution 15 notices, developed by the department of health, to be posted at the 16 point of sale in cannabis retail outlets to raise awareness about 17 possible health impacts and risks associated with high THC cannabis. 18 The legislature further intends to implement and study health 19 interventions, gather data, and ensure that new research, data, and 20 information concerning the impacts of high THC cannabis continues to 21 be incorporated into state policy.

22 NEW SECTION. Sec. 2. The legislature intends to provide the 23 department of health with recurring funding available each fiscal year, beginning in fiscal year 2025, to allow the department of 24 25 health to issue requests for proposals and contract for targeted public health messages and social marketing campaigns directed toward 26 27 individuals most likely to suffer negative impacts of high THC products including persons under 25 years of age and persons living 28 29 with mental health challenges. Messages and media campaigns funded must include information about risks, comparative dosing of cannabis 30

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1 products, and resources for persons seeking support for quitting or 2 decreasing their intake of tetrahydrocannabinol. The content of 3 public health messages and social marketing campaigns must be 4 developed in partnership with persons targeted by the messages and 5 campaigns and in consultation with professionals proficient in public 6 health communication and in cannabis research.

<u>NEW SECTION.</u> Sec. 3. By July 1, 2025, the department of health 7 must develop an optional training that cannabis retail staff may 8 complete to better understand the health and safety impacts of high 9 THC cannabis products. In developing the optional training, the 10 department of health must consult with cannabis retail staff, 11 cannabis consumers, persons who have been harmed by high THC 12 13 health care providers, prevention professionals, products, researchers with relevant expertise, behavioral health providers, and 14 15 representatives of licensed cannabis businesses.

16 Sec. 4. RCW 69.50.357 and 2022 c 16 s 71 are each amended to 17 read as follows:

(1) (a) Retail outlets may not sell products or services other than cannabis concentrates, useable cannabis, cannabis-infused products, or paraphernalia intended for the storage or use of cannabis concentrates, useable cannabis, or cannabis-infused products.

(b)(i) Retail outlets may receive lockable boxes, intended for the secure storage of cannabis products and paraphernalia, and related literature as a donation from another person or entity, that is not a cannabis producer, processor, or retailer, for donation to their customers.

(ii) Retail outlets may donate the lockable boxes and provide the related literature to any person eligible to purchase cannabis products under subsection (2) of this section. Retail outlets may not use the donation of lockable boxes or literature as an incentive or as a condition of a recipient's purchase of a cannabis product or paraphernalia.

34 (iii) Retail outlets may also purchase and sell lockable boxes, 35 provided that the sales price is not less than the cost of 36 acquisition.

37 (2) Licensed cannabis retailers may not employ persons under
38 twenty-one years of age or allow persons under twenty-one years of
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1 age to enter or remain on the premises of a retail outlet. However, qualifying patients between eighteen and twenty-one years of age with 2 a recognition card may enter and remain on the premises of a retail 3 outlet holding a medical cannabis endorsement and may purchase 4 products for their personal medical use. Qualifying patients who are 5 6 under the age of eighteen with a recognition card and who accompany their designated providers may enter and remain on the premises of a 7 retail outlet holding a medical cannabis endorsement, but may not 8 purchase products for their personal medical use. 9

10 (3) (a) Licensed cannabis retailers must ensure that all employees 11 are trained on the rules adopted to implement this chapter, 12 identification of persons under the age of twenty-one, and other 13 requirements adopted by the board to ensure that persons under the 14 age of twenty-one are not permitted to enter or remain on the 15 premises of a retail outlet.

16 (b) Licensed cannabis retailers with medical cannabis а 17 endorsement must ensure that all employees are trained on the subjects required by (a) of this subsection as well as identification 18 19 of authorizations and recognition cards. Employees must also be trained to permit qualifying patients who hold recognition cards and 20 21 are between the ages of eighteen and twenty-one to enter the premises 22 and purchase cannabis for their personal medical use and to permit 23 qualifying patients who are under the age of eighteen with a recognition card to enter the premises if accompanied by their 24 25 designated providers.

(4) Except for the purposes of disposal as authorized by the board, no licensed cannabis retailer or employee of a retail outlet may open or consume, or allow to be opened or consumed, any cannabis concentrates, useable cannabis, or cannabis-infused product on the outlet premises.

31 (5) (a) By December 31, 2024, licensed cannabis retailers shall 32 post a conspicuous notice at the point of sale in retail outlets with 33 information about: (i) The potential health risks and adverse health impacts that may be associated with the consumption of high THC 34 cannabis; (ii) the potentially much higher risks that may be present 35 36 for younger persons under age 25 as well as for persons who have or are at risk for developing certain mental health conditions or 37 psychotic disorders; and (iii) where to find help in case of negative 38 39 effects and resources for quitting or reducing cannabis consumption.

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1 The notice must be the same or substantially the same as the notice

2 <u>developed by the department of health under this subsection (5).</u>

3 (b) The department of health shall develop the notice required 4 under this section and make it available to licensed cannabis 5 retailers. The notice must, at a minimum, identify the information 6 specified in (a)(i) through (iii) of this subsection, and may include 7 additional information.

8 <u>(6)</u> The board must fine a licensee one thousand dollars for each 9 violation of any subsection of this section. Fines collected under 10 this section must be deposited into the dedicated cannabis account 11 created under RCW 69.50.530.

12 <u>NEW SECTION.</u> Sec. 5. A new section is added to chapter 28B.20 13 RCW to read as follows:

(1) Subject to amounts appropriated for this specific purpose, 14 the University of Washington addictions, drug, and alcohol institute 15 must develop, implement, test, and evaluate guidance and health 16 interventions for health care providers and patients at risk for 17 18 developing serious complications due to cannabis consumption who are seeking care in emergency departments, primary care settings, 19 20 behavioral health settings, other health care facilities, and for use 21 by state poison control and recovery hotlines to promote cannabis use 22 reduction and cessation for the following populations:

(a) Youth and adults at high risk of adverse mental healthimpacts from use of high THC cannabis;

(b) Youth and adults who have experienced a cannabis-induced first episode psychosis but do not have a diagnosis of a psychotic disorder; and

28 (c) Youth and adults who have a diagnosed psychotic disorder and 29 use cannabis.

30 (2) The University of Washington addictions, drug, and alcohol 31 institute must submit a preliminary report to the appropriate 32 committees of the legislature summarizing the progress toward developing and testing health interventions and recruiting patients 33 and health care facilities to participate by December 1, 2025. The 34 35 institute must provide a progress report on initial outcomes of the health interventions for participating patients and health care 36 facilities by July 1, 2027. The institute must submit a final report 37 38 to the appropriate committees of the legislature summarizing the

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results of the interventions and any recommendations for
implementation of health interventions by December 1, 2028.

3 (3) A contract entered under the authorization in this section 4 must include, in the scope of work, data gathering on adverse health 5 impacts occurring in Washington associated with consumption of high 6 THC cannabis, and data gathered must be included in the reports 7 submitted to the legislature under this section.

8 (4) This section expires December 31, 2028.

9 <u>NEW SECTION.</u> Sec. 6. If specific funding for the purposes of 10 this act, referencing this act by bill or chapter number, is not 11 provided by June 30, 2024, in the omnibus appropriations act, this 12 act is null and void."

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On page 1, line 4 of the title, after "psychosis;" strike the remainder of the title and insert "amending RCW 69.50.357; adding a new section to chapter 28B.20 RCW; creating new sections; and providing an expiration date."

<u>EFFECT:</u> • Legislative intent is provided regarding funding to be provided to the Department of Health (DOH) to allow DOH to issue requests for proposals and contract for targeted public health messages and social marketing campaigns directed toward individuals most likely to suffer negative impacts of high THC products including persons under 25 years of age, persons reporting poor mental health, and persons living with mental health challenges.

• Provides that the UW Addictions, Drug, and Alcohol Institute, rather than the Health Care Authority, must develop guidance and health interventions for health care providers and patients at risk for developing serious complications due to cannabis consumption seeking care in certain settings.

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