

SQ 788 IS NOT MEDICAL

Anti-SQ788 Coalition

What unites us: We are opposed to SQ 788 because it is bad public policy. As a coalition, we are free to have differing views on how to proceed in the future on medical marijuana legislation. Some of our members would favor a more limited medical marijuana laws that better protected employers, did not hamstring law enforcement, and potentially had a positive medical benefit, while others in the coalition would not support any use of smoke-able marijuana. We are united in that SQ 788 is bad public policy and should be defeated.

State Question 788 is NOT simple medical marijuana. A few key components of this legislation:

- Unlike a normal doctor's prescription, a medical marijuana license under SQ 788 lasts two years.
- In addition to MDs and DOs, five other types of physicians (including veterinarians, dentists, optometrist, podiatrists, and chiropractors) will be able to sign a medical marijuana license. There is NO requirement for these "physicians" to have attended medical school.
- The threshold for justifying a medical need is extremely low as a patient only has to "*articulate a medical need*" to qualify. Simply saying you at times have a headache will grant a 2-year license.
- Schools, landlords, and employers are expressly prohibited from basing decisions based on positive drug tests for those who hold a license.
- This state question creates a protected class of individuals based upon having a medical marijuana license.

Reasons for opposing this state question are plentiful. Below are the primary reasons many of our coalition find fault with this particular state question.

Employers Oppose SQ 788

- The ability for most employers to be a "drug-free workplace" or even test for marijuana usage is at best questioned if not outright abolished under SQ 788.
From SQ 788: "An employer may not discriminate against a person in hiring, termination...or otherwise penalize a person based upon status as a medical marijuana license holder" or "based upon the results of a drug test showing positive for marijuana or its components."
The only exception to the above mandate unless it would "*cause an employer to **imminently** lose a monetary or licensing related benefit under federal law*" (emphasis added).
- SQ 788 creates a protected class of employees for those holding a medical marijuana license.
- With passage, employers should expect workers' compensation rates to increase. At least five states (Connecticut, Maine, Minnesota, New Jersey, and New Mexico) say medical marijuana is a permissible workers compensation treatment that requires insurer reimbursement. It is natural to expect on-the-job claims to injuries to increase if it becomes a way to pay for marijuana usage.

While there will likely be some conflicts with federal law, courts throughout the nation have continued to become more pro-marijuana on this issue and a best-case scenario for terminating a medical marijuana licensed employee would be an expensive lawsuit should SQ 788 pass.

Law Enforcement Opposes SQ 788

- SQ 788 will largely do away with the ability to charge marijuana peddlers with “intent to distribute” as this law would allow someone to have enough substance to make 85 marijuana cigarettes.
- Those states who have expanded to non-restrictive medical marijuana have seen an increase in gang activity and organized crime around the industry.
- Those in law enforcement have seen the use of marijuana as a gateway to both the use of other illicit drugs and eventually additional criminal behavior as a way to finance these habits.

The Medical and Public Health Community Opposes SQ 788

- Recent studies have linked low birth weight, premature birth, and behavior problems in young children with marijuana use during pregnancy.
- This state question extends prescriptive rights of a tier one drug to any “Oklahoma Board certified physician. There are no qualifying conditions.” This means all seven categories of physicians as recognized by Oklahoma law will be able to sign an application which must be approved. Furthermore, licensing boards related to those doctors are prohibited from any form of discipline for signing medical marijuana applications.
- Second-hand marijuana smoke cannot be regulated by municipalities under SQ 788. Cities are expressly prohibited from regulating where marijuana can be sold or utilized by those with a license.
- Marijuana is a gateway drug currently classified as a federal Schedule I drug. From the DEA, schedule 1 drugs are “drugs with no currently accepted medical use and a high potential for abuse.” Other drugs on this schedule are heroin, LSD, and methamphetamine.

Good Government Advocates Oppose SQ 788

- The 7% tax is not enough to cover administrative and social service costs. Many states have marijuana taxes exceeding 20%.
- SQ 788 burdens an already troubled Oklahoma Department of Health with immediate new responsibilities.
- The SQ incentivizes users to enroll in SoonerCare (Medicaid) by reducing the cost to get a license for those covered by the state’s Medicaid program.
- The only regulatory right given to municipalities under SQ 788 is the ability to allow “license holders or caregivers to exceed the state limits” on the amount of marijuana someone can possess.
- This state question expressly prohibits cities and counties from promulgating other regulations such as zoning. Furthermore, we would expect a legal challenge to municipal efforts to prohibit smoking of “medicinal marijuana” in public spaces such as parks, concert venues, and arenas.
- With the expected increase in needs to fund mental health and substance abuse services, passage of SQ 788 will also strain funding for other core services of state government.

The Faith Community Opposes SQ 788

- With tens of thousands of Oklahoma families dealing with substance abuse issues, our church community has often come to the rescue and they understand the toll on families and the individuals the state-sanctioned use of this drug can cause.

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