

MISSOURI'S CANNABIS COMPASSION BILL

2011
96TH GENERAL ASSEMBLY

Endorsed by Sensible Missouri, Missouri's NORML Chapters, and
the chronically and terminally ill of Missouri.

INTRODUCED BY (Sponsor), , (Co-sponsors).

., Chief Clerk

AN ACT

To repeal sections 195.017 and 263.250, RSMo, and to enact in lieu thereof nine new sections relating to the use of marijuana for medicinal purposes, with penalty provisions and a referendum clause.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Sections 195.017 and 263.250, RSMo, are repealed and nine new sections enacted in lieu thereof, to be known as sections 195.017, 195.580 through 195.586, to read as follows:

195.017. 1. The department of health and senior services shall place a substance in Schedule I if it finds that the substance:

- (1) Has high potential for abuse; and
- (2) Has no accepted medical use in treatment in the United States or lacks accepted safety for use in treatment under medical supervision.

2. Schedule I:

(1) The controlled substances listed in this subsection are included in Schedule I;

(2) Any of the following opiates, including their isomers, esters, ethers, salts, and salts of isomers, esters, and ethers, unless specifically excepted, whenever the existence of these isomers, esters, ethers and salts is possible within the specific chemical designation:

- (a) Acetyl-alpha-methylfentanyl;
- (b) Acetylmethadol;
- (c) Allylprodine;
- (d) Alphacetylmethadol;
- (e) Alphameprodine;
- (f) Alphamethadol;
- (g) Alpha-methylfentanyl;
- (h) Alpha-methylthiofentanyl;
- (i) Benzethidine;
- (j) Betacetylmethadol;
- (k) Beta-hydroxyfentanyl;
- (l) Beta-hydroxy-3-methylfentanyl;
- (m) Betameprodine;
- (n) Betamethadol;
- (o) Betaprodine;
- (p) Clonitazene;
- (q) Dextromoramide;
- (r) Diampromide;
- (s) Diethylthiambutene;

(t) Difenoxin;
(u) Dimenoxadol;
(v) Dimepheptanol;
(w) Dimethylthiambutene;
(x) Dioxaphetyl butyrate;
(y) Dipipanone;
(z) Ethylmethylthiambutene;
(aa) Etonitazene;
(bb) Etoxidine;
(cc) Furethidine;
(dd) Hydroxypethidine;
(ee) Ketobemidone;
(ff) Levomoramide;
(gg) Levophenacetylmorphan;
(hh) 3-Methylfentanyl;
(ii) 3-Methylthiofentanyl;
(jj) Morpheridine;
(kk) MPPP;
(ll) Noracymethadol;
(mm) Norlevorphanol;
(nn) Normethadone;
(oo) Norpipanone;
(pp) Para-fluorofentanyl;
(qq) PEPAP;
(rr) Phenadoxone;

(ss) Phenampromide;

(tt) Phenomorphan;

(uu) Phenoperidine;

(vv) Pir tramide;

(ww) Proheptazine;

(xx) Properidine;

(yy) Propiram;

(zz) Racemoramide;

(aaa) Thiofentanyl;

(bbb) Tilidine;

(ccc) Trimeperidine;

(3) Any of the following opium derivatives, their salts, isomers and salts of isomers unless specifically excepted, whenever the existence of these salts, isomers and salts of isomers is possible within the specific chemical designation:

(a) Acetorphine;

(b) Acetyldihydrocodeine;

(c) Benzylmorphine;

(d) Codeine methylbromide;

(e) Codeine-N-Oxide;

(f) Cyprenorphine;

(g) Desomorphine;

(h) Dihydromorphine;

(i) Drotebanol;

(j) Etorphine (except hydrochloride salt);

(k) Heroin;

- (l) Hydromorphenol;
- (m) Methyldesorphine;
- (n) Methyldihydromorphine;
- (o) Morphine methylbromide;
- (p) Morphine methylsulfonate;
- (q) Morphine-N-Oxide;
- (r) Myrophine;
- (s) Nicocodeine;
- (t) Nicomorphine;
- (u) Normorphine;
- (v) Pholcodine;
- (w) Thebacon;

(4) Any material, compound, mixture or preparation which contains any quantity of the following hallucinogenic substances, their salts, isomers and salts of isomers, unless specifically excepted, whenever the existence of these salts, isomers, and salts of isomers is possible within the specific chemical designation:

- (a) 4-bromo-2, 5-dimethoxyamphetamine;
- (b) 4-bromo-2, 5-dimethoxyphenethylamine;
- (c) 2,5-dimethoxyamphetamine;
- (d) 2,5-dimethoxy-4-ethylamphetamine;
- (e) 2,5-dimethoxy-4-(n)-propylthiophenethylamine;
- (f) 4-methoxyamphetamine;
- (g) 5-methoxy-3,4-methylenedioxyamphetamine;
- (h) 4-methyl-2, 5-dimethoxyamphetamine;
- (i) 3,4-methylenedioxyamphetamine;

- (j) 3,4-methylenedioxyamphetamine;
- (k) 3,4-methylenedioxy-N-ethylamphetamine;
- (l) N-hydroxy-3, 4-methylenedioxyamphetamine;
- (m) 3,4,5-trimethoxyamphetamine;
- (n) Alpha-ethyltryptamine;
- (o) Alpha-methyltryptamine;
- (p) Bufotenine;
- (q) Diethyltryptamine;
- (r) Dimethyltryptamine;
- (s) 5-methoxy-N,N-diisopropyltryptamine;
- (t) Ibogaine;
- (u) Lysergic acid diethylamide;
- (v) [Marijuana or marihuana;
- (w)] Mescaline;
- [(x)] **(w)** Parahexyl;

[(y)] **(x)** Peyote, to include all parts of the plant presently classified botanically as Lophophora Williamsii Lemaire, whether growing or not; the seeds thereof; any extract from any part of such plant; and every compound, manufacture, salt, derivative, mixture or preparation of the plant, its seed or extracts;

- [(z)] **(y)** N-ethyl-3-piperidyl benzilate;
- [(aa)] **(z)** N-methyl-3-piperidyl benzilate;
- [(bb)] **(aa)** Psilocybin;
- [(cc)] **(bb)** Psilocyn;

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[(dd)] (cc) Tetrahydrocannabinols naturally contained in a plant of the genus Cannabis (cannabis plant), as well as synthetic equivalents of the substances contained in the cannabis plant, or in the resinous extractives of such plant, or synthetic substances, derivatives, and their isomers with similar chemical structure and pharmacological activity to those substances contained in the plant, such as the following:

- a. 1 cis or trans tetrahydrocannabinol, and their optical isomers;**
- b. 6 cis or trans tetrahydrocannabinol, and their optical isomers;**
- c. 3,4 cis or trans tetrahydrocannabinol, and their optical isomers;**

d. Any compounds of these structures, regardless of numerical designation of atomic positions covered;

[(ee)] (dd) Ethylamine analog of phencyclidine;

[(ff)] (ee) Pyrrolidine analog of phencyclidine;

[(gg)] (ff) Thiophene analog of phencyclidine;

[(hh)] (gg) 1-[1-(2-thienyl)cyclohexyl]pyrrolidine;

[(ii)] (hh) Salvia divinorum;

[(jj)] (ii) Salvinorin A;

(5) Any material, compound, mixture or preparation containing any quantity of the following substances having a depressant effect on the central nervous system, including their salts, isomers and salts of isomers whenever the existence of these salts, isomers and salts of isomers is possible within the specific chemical designation:

(a) Gamma-hydroxybutyric acid;

(b) Mecloqualone;

(c) Methaqualone;

(6) Any material, compound, mixture or preparation containing any quantity

of the following substances having a stimulant effect on the central nervous system, including their salts, isomers and salts of isomers:

- (a) Aminorex;
- (b) N-benzylpiperazine;
- (c) Cathinone;
- (d) Fenethylamine;
- (e) Methcathinone;
- (f) (+,-)cis-4-methylaminorex ((+,-)cis-4,5-dihydro-4-methyl-5-phenyl-2-oxazoline);
- (g) N-ethylamphetamine;
- (h) N,N-dimethylamphetamine;

(7) A temporary listing of substances subject to emergency scheduling under federal law shall include any material, compound, mixture or preparation which contains any quantity of the following substances:

- (a) N-(1-benzyl-4-piperidyl)-N-phenylpropanamide (benzylfentanyl), its optical isomers, salts and salts of isomers;
- (b) N-(1-(2-thienyl)methyl-4-piperidyl)-N-phenylpropanamide (thienylfentanyl), its optical isomers, salts and salts of isomers;

(8) Khat, to include all parts of the plant presently classified botanically as *Catha edulis*, whether growing or not; the seeds thereof; any extract from any part of such plant; and every compound, manufacture, salt, derivative, mixture, or preparation of the plant, its seed or extracts.

3. The department of health and senior services shall place a substance in Schedule II if it finds that:

- (1) The substance has high potential for abuse;
- (2) The substance has currently accepted medical use in treatment in the United States, or currently accepted medical use with severe restrictions; and

(3) The abuse of the substance may lead to severe psychic or physical dependence.

4. The controlled substances listed in this subsection are included in Schedule II:

(1) Any of the following substances whether produced directly or indirectly by extraction from substances of vegetable origin, or independently by means of chemical synthesis, or by combination of extraction and chemical synthesis:

(a) Opium and opiate and any salt, compound, derivative or preparation of opium or opiate, excluding apomorphine, thebaine-derived butorphanol, dextrorphan, nalbuphine, nalmefene, naloxone and naltrexone, and their respective salts but including the following:

- a. Raw opium;
- b. Opium extracts;
- c. Opium fluid;
- d. Powdered opium;
- e. Granulated opium;
- f. Tincture of opium;
- g. Codeine;
- h. Ethylmorphine;
- i. Etorphine hydrochloride;
- j. Hydrocodone;
- k. Hydromorphone;
- l. Metopon;
- m. Morphine;
- n. Oxycodone;
- o. Oxymorphone;
- p. Thebaine;

(b) Any salt, compound, derivative, or preparation thereof which is chemically equivalent or identical with any of the substances referred to in this subdivision, but not including the isoquinoline alkaloids of opium;

(c) Opium poppy and poppy straw;

(d) Coca leaves and any salt, compound, derivative, or preparation of coca leaves, and any salt, compound, derivative, or preparation thereof which is chemically equivalent or identical with any of these substances, but not including decocainized coca leaves or extractions which do not contain cocaine or ecgonine;

(e) Concentrate of poppy straw (the crude extract of poppy straw in either liquid, solid or powder form which contains the phenanthrene alkaloids of the opium poppy);

(2) Any of the following opiates, including their isomers, esters, ethers, salts, and salts of isomers, whenever the existence of these isomers, esters, ethers and salts is possible within the specific chemical designation, dextrorphan and levopropoxyphene excepted:

(a) Alfentanil;

(b) Alphaprodine;

(c) Anileridine;

(d) Bezitramide;

(e) Bulk dextropropoxyphene;

(f) Carfentanil;

(g) Butyl nitrite;

(h) Dihydrocodeine;

(i) Diphenoxylate;

(j) Fentanyl;

(k) Isomethadone;

(l) Levo-alphaacetylmethadol;

- (m) Levomethorphan;
- (n) Levorphanol;
- (o) Metazocine;
- (p) Methadone;
- (q) Meperidine;
- (r) Methadone-Intermediate, 4-cyano-2-dimethylamino-4, 4-diphenylbutane;
- (s) Moramide-Intermediate, 2-methyl-3-morpholino-1, 1-diphenylpropane--carboxylic acid;
- (t) Pethidine (meperidine);
- (u) Pethidine-Intermediate-A, 4-cyano-1-methyl-4-phenylpiperidine;
- (v) Pethidine-Intermediate-B, ethyl-4-phenylpiperidine-4-carboxylate;
- (w) Pethidine-Intermediate-C, 1-methyl-4-phenylpiperidine-4-carboxylic acid;
- (x) Phenazocine;
- (y) Piminodine;
- (z) Racemethorphan;
- (aa) Racemorphan;
- (bb) Remifentanil;
- (cc) Sufentanil;

(3) Any material, compound, mixture, or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system:

- (a) Amphetamine, its salts, optical isomers, and salts of its optical isomers;
- (b) Lisdexamfetamine, its salts, isomers, and salts of its isomers;
- (c) Methamphetamine, its salts, isomers, and salts of its isomers;
- (d) Phenmetrazine and its salts;
- (e) Methylphenidate;

(4) Any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including its salts, isomers, and salts of isomers whenever the existence of those salts, isomers, and salts of isomers is possible within the specific chemical designation:

- (a) Amobarbital;
- (b) Glutethimide;
- (c) Pentobarbital;
- (d) Phencyclidine;
- (e) Secobarbital;

(5) Any material or compound which contains any quantity of nabilone;

(6) Any material, compound, mixture, or preparation which contains any quantity of the following substances:

- (a) Immediate precursor to amphetamine and methamphetamine: Phenylacetone;
- (b) Immediate precursors to phencyclidine (PCP):
 - a. 1-phenylcyclohexylamine;
 - b. 1-piperidinocyclohexanecarbonitrile (PCC);

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(7) Any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including its salts, isomers, and salts of isomers whenever the existence of those salts, isomers, and salts of isomers is possible within the specific chemical designation: Marijuana.

5. The department of health and senior services shall place a substance in Schedule III if it finds that:

(1) The substance has a potential for abuse less than the substances listed in Schedules I and II;

(2) The substance has currently accepted medical use in treatment in the United States; and

(3) Abuse of the substance may lead to moderate or low physical dependence or high psychological dependence.

6. The controlled substances listed in this subsection are included in Schedule III:

(1) Any material, compound, mixture, or preparation which contains any quantity of the following substances having a potential for abuse associated with a stimulant effect on the central nervous system:

- (a) Benzphetamine;
- (b) Chlorphentermine;
- (c) Clortermine;
- (d) Phendimetrazine;

(2) Any material, compound, mixture or preparation which contains any quantity or salt of the following substances or salts having a depressant effect on the central nervous system:

(a) Any material, compound, mixture or preparation which contains any quantity or salt of the following substances combined with one or more active medicinal ingredients:

- a. Amobarbital;
- b. Secobarbital;
- c. Pentobarbital;

(b) Any suppository dosage form containing any quantity or salt of the following:

- a. Amobarbital;
- b. Secobarbital;
- c. Pentobarbital;

(c) Any substance which contains any quantity of a derivative of barbituric acid or

its salt;

(d) Chlorhexadol;

(e) Embutramide;

(f) Gamma hydroxybutyric acid and its salts, isomers, and salts of isomers contained in a drug product for which an application has been approved under Section 505 of the federal Food, Drug, and Cosmetic Act;

(g) Ketamine, its salts, isomers, and salts of isomers;

(h) Lysergic acid;

(i) Lysergic acid amide;

(j) Methyprylon;

(k) Sulfondiethylmethane;

(l) Sulfonethylmethane;

(m) Sulfonmethane;

(n) Tiletamine and zolazepam or any salt thereof;

(3) Nalorphine;

(4) Any material, compound, mixture, or preparation containing limited quantities of any of the following narcotic drugs or their salts:

(a) Not more than 1.8 grams of codeine per one hundred milliliters or not more than ninety milligrams per dosage unit, with an equal or greater quantity of an isoquinoline alkaloid of opium;

(b) Not more than 1.8 grams of codeine per one hundred milliliters or not more than ninety milligrams per dosage unit with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(c) Not more than three hundred milligrams of hydrocodone per one hundred milliliters or not more than fifteen milligrams per dosage unit, with a fourfold or greater quantity of an isoquinoline alkaloid of opium;

(d) Not more than three hundred milligrams of hydrocodone per one hundred

milliliters or not more than fifteen milligrams per dosage unit, with one or more active nonnarcotic ingredients in recognized therapeutic amounts;

(e) Not more than 1.8 grams of dihydrocodeine per one hundred milliliters or not more than ninety milligrams per dosage unit, with one or more active nonnarcotic ingredients in recognized therapeutic amounts;

(f) Not more than three hundred milligrams of ethylmorphine per one hundred milliliters or not more than fifteen milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(g) Not more than five hundred milligrams of opium per one hundred milliliters or per one hundred grams or not more than twenty-five milligrams per dosage unit, with one or more active nonnarcotic ingredients in recognized therapeutic amounts;

(h) Not more than fifty milligrams of morphine per one hundred milliliters or per one hundred grams, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(5) Any material, compound, mixture, or preparation containing any of the following narcotic drugs or their salts, as set forth in subdivision (6) of this subsection; buprenorphine;

(6) Anabolic steroids. Any drug or hormonal substance, chemically and pharmacologically related to testosterone (other than estrogens, progestins, corticosteroids, and dehydroepiandrosterone) that promotes muscle growth, except an anabolic steroid which is expressly intended for administration through implants to cattle or other nonhuman species and which has been approved by the Secretary of Health and Human Services for that administration. If any person prescribes, dispenses, or distributes such steroid for human use, such person shall be considered to have prescribed, dispensed, or distributed an anabolic steroid within the meaning of this paragraph. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture or preparation containing any quantity of the following substances, including its salts, esters and ethers:

(a) $3\beta,17$ -dihydroxy-5 α -androstane;

- (b) $3\alpha,17\beta$ -dihydroxy- 5α -androstane;
- (c) 5α -androstan-3,17-dione;
- (d) 1-androstenediol ($3\beta,17\beta$ -dihydroxy- 5α -androst-1-ene);
- (e) 1-androstenediol ($3\alpha,17\beta$ -dihydroxy- 5α -androst-1-ene);
- (f) 4-androstenediol ($3\beta,17\beta$ -dihydroxy-androst-4-ene);
- (g) 5-androstenediol ($3\beta,17\beta$ -dihydroxy-androst-5-ene);
- (h) 1-androstenedione ($[5\alpha]$ -androst-1-en-3,17-dione);
- (i) 4-androstenedione (androst-4-en-3,17-dione);
- (j) 5-androstenedione (androst-5-en-3,17-dione);
- (k) Bolasterone ($7\alpha,17\alpha$ -dimethyl- 17β -hydroxyandrost-4-en-3-one);
- (l) Boldenone (17β -hydroxyandrost-1,4,-diene-3-one);
- (m) Calusterone ($7\beta,17\alpha$ -dimethyl- 17β -hydroxyandrost-4-en-3-one);
- (n) Clostebol (4-chloro- 17β -hydroxyandrost-4-en-3-one);
- (o) Dehydrochloromethyltestosterone(4-chloro- 17β -hydroxy- 17α -methyl-androst-1,4-dien-3-one);
- (p) Δ^1 -dihydrotestosterone (a.k.a. '1-testosterone')(17β -hydroxy- 5α -androst-1-en-3-one);
- (q) 4-dihydrotestosterone (17β -hydroxy-androstan-3-one);
- (r) Drostanolone (17β -hydroxy- 2α -methyl- 5α -androstan-3-one);
- (s) Ethylestrenol (17α -ethyl- 17β -hydroxyestr-4-ene);
- (t) Fluoxymesterone (9 -fluoro- 17α -methyl- $11\beta,17\beta$ -dihydroxyandrost-4-en-3-one);
- (u) Formebolone (2 -formyl- 17α -methyl- $11\alpha,17\beta$ -dihydroxyandrost-1,4-dien-3-one);
- (v) Furazabol (17α -methyl- 17β -hydroxyandrostano[2,3-c]-furazan);

- (w) 13 β -ethyl-17 β -hydroxygon-4-en-3-one;
- (x) 4-hydroxytestosterone (4,17 β -dihydroxy-androst-4-en-3-one);
- (y) 4-hydroxy-19-nortestosterone (4,17 β -dihydroxy-estr-4-en-3-one);
- (z) Mestanolone (17 α -methyl-17 β -hydroxy-5-androstan-3-one);
- (aa) Mesterolone (1 α -methyl-17 β -hydroxy-[5 α]-androstan-3-one);
- (bb) Methandienone (17 α -methyl-17 β -hydroxyandrost-1,4-dien-3-one);
- (cc) Methandriol (17 α -methyl-3 β ,17 β -dihydroxyandrost-5-ene);
- (dd) Methenolone (1-methyl-17 β -hydroxy-5 α -androst-1-en-3-one);
- (ee) 17 α -methyl-3 β ,17 β -dihydroxy-5 α -androstane);
- (ff) 17 α -methyl-3 α ,17 β -dihydroxy-5 α -androstane);
- (gg) 17 α -methyl-3 β ,17 β -dihydroxyandrost-4-ene;
- (hh) 17 α -methyl-4-hydroxynandrolone (17 α -methyl-4-hydroxy-17 β -hydroxyestr-4-en-3-one);
- (ii) Methyldienolone (17 α -methyl-17 β -hydroxyestra-4,9(10)-dien-3-one);
- (jj) Methyltrienolone (17 α -methyl-17 β -hydroxyestra-4,9-11-trien-3-one);
- (kk) Methyltestosterone (17 α -methyl-17 β -hydroxyandrost-4-en-3-one);
- (ll) Mibolerone (7 α ,17 α -dimethyl-17 β -hydroxyestr-4-en-3-one);
- (mm) 17 α -methyl- Δ 1-dihydrotestosterone(17 β -hydroxy-17 α -methyl-5 α -androst-1-en-3-one) (a.k.a. '17- α -methyl-1-testosterone');
- (nn) Nandrolone (17 β -hydroxyestr-4-ene-3-one);
- (oo) 19-nor-4-androstenediol (3 β ,17 β -dihydroxyestr-4-ene);
- (pp) 19-nor-4-androstenediol (3 α ,17 β -dihydroxyestr-4-ene);
- (qq) 19-nor-5-androstenediol (3 β ,17 β -dihydroxyestr-5-ene);
- (rr) 19-nor-5-androstenediol (3 α ,17 β -dihydroxyestr-5-ene);
- (ss) 19-nor-4-androstenedione (estr-4-en-3,17-dione);

- (tt) 19-nor-5-androstenedione (estr-5-en-3,17-dione);
- (uu) Norbolethone (13 β ,17 α -diethyl-17 β -hydroxygon-4-en-3-one);
- (vv) Norclostebol (4-chloro-17 β -hydroxyestr-4-en-3-one);
- (ww) Norethandrolone (17 α -ethyl-17 β -hydroxyestr-4-en-3-one);
- (xx) Normethandrolone (17 α -methyl-17 β -hydroxyestr-4-en-3-one);
- (yy) Oxandrolone (17 α -methyl-17 β -hydroxy-2-oxa-[5 α]-androstan-3-one);
- (zz) Oxymesterone (17 α -methyl-4,17 β -dihydroxyandrost-4-en-3-one);
- (aaa) Oxymethalone (17 α -methyl-2-hydroxymethylene-17 β -hydroxy-[5 α]-androstan-3-one);
- (bbb) Stanozolol (17 α -methyl-17 β -hydroxy-[5 α]-androst-2-eno[3,2-c]-pyrazole);
- (ccc) Stenbolone (17 β -hydroxy-2-methyl-[5 α]-androst-1-en-3-one);
- (ddd) Testolactone (13-hydroxy-3-oxo-13,17-secoandrosta-1,4-dien-17-oic acid lactone);
- (eee) Testosterone (17 β -hydroxyandrost-4-en-3-one);
- (fff) Tetrahydrogestrinone (13 β ,17 α -diethyl-17 β -hydroxygon-4,9,11-trien-3-one);
- (ggg) Trenbolone (17 β -hydroxyestr-4,9,11-trien-3-one);
- (hhh) Any salt, ester, or ether of a drug or substance described or listed in this subdivision, except an anabolic steroid which is expressly intended for administration through implants to cattle or other nonhuman species and which has been approved by the Secretary of Health and Human Services for that administration;

(7) Dronabinol (synthetic) in sesame oil and encapsulated in a soft gelatin capsule in a United States Food and Drug Administration approved drug product;

(8) The department of health and senior services may except by rule any compound, mixture, or preparation containing any stimulant or depressant substance listed in subdivisions (1) and (2) of this subsection from the application of all or any part of sections 195.010 to 195.320 if the compound, mixture, or preparation contains

one or more active medicinal ingredients not having a stimulant or depressant effect on the central nervous system, and if the admixtures are included therein in combinations, quantity, proportion, or concentration that vitiate the potential for abuse of the substances which have a stimulant or depressant effect on the central nervous system.

7. The department of health and senior services shall place a substance in Schedule IV if it finds that:

(1) The substance has a low potential for abuse relative to substances in Schedule III;

(2) The substance has currently accepted medical use in treatment in the United States; and

(3) Abuse of the substance may lead to limited physical dependence or psychological dependence relative to the substances in Schedule III.

8. The controlled substances listed in this subsection are included in Schedule IV:

(1) Any material, compound, mixture, or preparation containing any of the following narcotic drugs or their salts calculated as the free anhydrous base or alkaloid, in limited quantities as set forth below:

(a) Not more than one milligram of difenoxin and not less than twenty-five micrograms of atropine sulfate per dosage unit;

(b) Dextropropoxyphene (alpha-(+)-4-dimethylamino-1, 2-diphenyl-3-methyl-2-propionoxybutane);

(c) Any of the following limited quantities of narcotic drugs or their salts, which shall include one or more nonnarcotic active medicinal ingredients in sufficient proportion to confer upon the compound, mixture or preparation valuable medicinal qualities other than those possessed by the narcotic drug alone:

a. Not more than two hundred milligrams of codeine per one hundred milliliters or per one hundred grams;

b. Not more than one hundred milligrams of dihydrocodeine per one hundred milliliters or per one hundred grams;

c. Not more than one hundred milligrams of ethylmorphine per one hundred milliliters or per one hundred grams;

(2) Any material, compound, mixture or preparation containing any quantity of the following substances, including their salts, isomers, and salts of isomers whenever the existence of those salts, isomers, and salts of isomers is possible within the specific chemical designation:

- (a) Alprazolam;
- (b) Barbitol;
- (c) Bromazepam;
- (d) Camazepam;
- (e) Chloral betaine;
- (f) Chloral hydrate;
- (g) Chlordiazepoxide;
- (h) Clobazam;
- (i) Clonazepam;
- (j) Clorazepate;
- (k) Clotiazepam;
- (l) Cloxazolam;
- (m) Delorazepam;
- (n) Diazepam;
- (o) Dichloralphenazone;
- (p) Estazolam;
- (q) Ethchlorvynol;
- (r) Ethinamate;
- (s) Ethyl loflazepate;

(t) Fludiazepam;
(u) Flunitrazepam;
(v) Flurazepam;
(w) Halazepam;
(x) Haloxazolam;
(y) Ketazolam;
(z) Loprazolam;
(aa) Lorazepam;
(bb) Lormetazepam;
(cc) Mebutamate;
(dd) Medazepam;
(ee) Meprobamate;
(ff) Methohexital;
(gg) Methylphenobarbital (mephobarbital);
(hh) Midazolam;
(ii) Nimetazepam;
(jj) Nitrazepam;
(kk) Nordiazepam;
(ll) Oxazepam;
(mm) Oxazolam;
(nn) Paraldehyde;
(oo) Petrichloral;
(pp) Phenobarbital;
(qq) Pinazepam;
(rr) Prazepam;

- (ss) Quazepam;
- (tt) Temazepam;
- (uu) Tetrazepam;
- (vv) Triazolam;
- (ww) Zaleplon;
- (xx) Zolpidem;
- (yy) Zopiclone;

(3) Any material, compound, mixture, or preparation which contains any quantity of the following substance including its salts, isomers and salts of isomers whenever the existence of such salts, isomers and salts of isomers is possible: fenfluramine;

(4) Any material, compound, mixture or preparation containing any quantity of the following substances having a stimulant effect on the central nervous system, including their salts, isomers and salts of isomers:

- (a) Cathine ((+)-norpseudoephedrine);
- (b) Diethylpropion;
- (c) Fencamfamin;
- (d) Fenproporex;
- (e) Mazindol;
- (f) Mefenorex;
- (g) Modafinil;
- (h) Pemoline, including organometallic complexes and chelates thereof;
- (i) Phentermine;
- (j) Pipradrol;
- (k) Sibutramine;
- (l) SPA ((-)-1-dimethylamino-1,2-diphenylethane);

(5) Any material, compound, mixture or preparation containing any quantity of the following substance, including its salts:

(a) butorphanol;

(b) pentazocine;

(6) Ephedrine, its salts, optical isomers and salts of optical isomers, when the substance is the only active medicinal ingredient;

(7) The department of health and senior services may except by rule any compound, mixture, or preparation containing any depressant substance listed in subdivision (1) of this subsection from the application of all or any part of sections 195.010 to 195.320 if the compound, mixture, or preparation contains one or more active medicinal ingredients not having a depressant effect on the central nervous system, and if the admixtures are included therein in combinations, quantity, proportion, or concentration that vitiate the potential for abuse of the substances which have a depressant effect on the central nervous system.

9. The department of health and senior services shall place a substance in Schedule V if it finds that:

(1) The substance has low potential for abuse relative to the controlled substances listed in Schedule IV;

(2) The substance has currently accepted medical use in treatment in the United States; and

(3) The substance has limited physical dependence or psychological dependence liability relative to the controlled substances listed in Schedule IV.

10. The controlled substances listed in this subsection are included in Schedule V:

(1) Any compound, mixture or preparation containing any of the following narcotic drugs or their salts calculated as the free anhydrous base or alkaloid, in limited quantities as set forth below, which also contains one or more nonnarcotic active medicinal ingredients in sufficient proportion to confer upon the compound, mixture or preparation valuable medicinal qualities other than those possessed by the narcotic drug

alone:

(a) Not more than two and five-tenths milligrams of diphenoxylate and not less than twenty-five micrograms of atropine sulfate per dosage unit;

(b) Not more than one hundred milligrams of opium per one hundred milliliters or per one hundred grams;

(c) Not more than five-tenths milligram of difenoxin and not less than twenty-five micrograms of atropine sulfate per dosage unit;

(2) Any material, compound, mixture or preparation which contains any quantity of the following substance having a stimulant effect on the central nervous system including its salts, isomers and salts of isomers: pyrovalerone;

(3) Any compound, mixture, or preparation containing any detectable quantity of pseudoephedrine or its salts or optical isomers, or salts of optical isomers or any compound, mixture, or preparation containing any detectable quantity of ephedrine or its salts or optical isomers, or salts of optical isomers;

(4) Unless specifically exempted or excluded or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including its salts: pregabalin [(S)-3-(aminomethyl)-5-methylhexanoic acid].

11. If any compound, mixture, or preparation as specified in subdivision (3) of subsection 10 of this section is dispensed, sold, or distributed in a pharmacy without a prescription:

(1) All packages of any compound, mixture, or preparation containing any detectable quantity of pseudoephedrine, its salts or optical isomers, or salts of optical isomers or ephedrine, its salts or optical isomers, or salts of optical isomers, shall be offered for sale only from behind a pharmacy counter where the public is not permitted, and only by a registered pharmacist or registered pharmacy technician; and

(2) Any person purchasing, receiving or otherwise acquiring any compound, mixture, or preparation containing any detectable quantity of pseudoephedrine, its salts

or optical isomers, or salts of optical isomers or ephedrine, its salts or optical isomers, or salts of optical isomers shall be at least eighteen years of age; and

(3) The pharmacist, intern pharmacist, or registered pharmacy technician shall require any person, prior to their purchasing, receiving or otherwise acquiring such compound, mixture, or preparation to furnish suitable photo identification that is issued by a state or the federal government or a document that, with respect to identification, is considered acceptable and showing the date of birth of the person;

(4) The seller shall deliver the product directly into the custody of the purchaser.

12. Pharmacists, intern pharmacists, and registered pharmacy technicians shall implement and maintain an electronic log of each transaction. Such log shall include the following information:

(1) The name, address, and signature of the purchaser;

(2) The amount of the compound, mixture, or preparation purchased;

(3) The date and time of each purchase; and

(4) The name or initials of the pharmacist, intern pharmacist, or registered pharmacy technician who dispensed the compound, mixture, or preparation to the purchaser.

13. Each pharmacy shall submit information regarding sales of any compound, mixture, or preparation as specified in subdivision (3) of subsection 10 of this section in accordance with transmission methods and frequency established by the department by regulation;

14. No person shall dispense, sell, purchase, receive, or otherwise acquire quantities greater than those specified in this chapter.

15. All persons who dispense or offer for sale pseudoephedrine and ephedrine products in a pharmacy shall ensure that all such products are located only behind a pharmacy counter where the public is not permitted.

16. Any person who knowingly or recklessly violates the provisions of subsections 11 to 15 of this section is guilty of a class A misdemeanor.

17. The scheduling of substances specified in subdivision (3) of subsection 10 of this section and subsections 11, 12, 14, and 15 of this section shall not apply to any compounds, mixtures, or preparations that are in liquid or liquid-filled gel capsule form or to any compound, mixture, or preparation specified in subdivision (3) of subsection 10 of this section which must be dispensed, sold, or distributed in a pharmacy pursuant to a prescription.

18. The manufacturer of a drug product or another interested party may apply with the department of health and senior services for an exemption from this section. The department of health and senior services may grant an exemption by rule from this section if the department finds the drug product is not used in the illegal manufacture of methamphetamine or other controlled or dangerous substances. The department of health and senior services shall rely on reports from law enforcement and law enforcement evidentiary laboratories in determining if the proposed product can be used to manufacture illicit controlled substances.

19. The department of health and senior services shall revise and republish the schedules annually.

20. The department of health and senior services shall promulgate rules under chapter 536, RSMo, regarding the security and storage of Schedule V controlled substances, as described in subdivision (3) of subsection 10 of this section, for distributors as registered by the department of health and senior services.

21. Logs of transactions required to be kept and maintained by this section and section 195.417 shall create a rebuttable presumption that the person whose name appears in the logs is the person whose transactions are recorded in the logs.

195.580. Whereas it has never been proven that cannabis has any potential for abuse or dependence, apart from that which was caused directly by its prohibition, and Whereas cannabis DOES have accepted medical use in treatment in the United States; currently 15 states have some form of a medical cannabis program, And Whereas cannabis has medical value, as proven by endorsement by both the

American College of Physicians and the American Medical Association, and Whereas the United States of America as represented by the Department of Health and Human Services has legally stated by way of the 2003 United States Patent 6,630,507 that

“Cannabinoids have been found to have antioxidant properties, unrelated to NMDA receptor antagonism. This new found property makes cannabinoids useful in the treatment and prophylaxis of wide variety of oxidation associated diseases, such as ischemic, age-related, inflammatory and autoimmune diseases. The cannabinoids are found to have particular application as neuroprotectants, for example in limiting neurological damage following ischemic insults, such as stroke and trauma, or in the treatment of neurodegenerative diseases, such as Alzheimer’s disease, Parkinson’s disease and HIV dementia.” [Abstract], and

Whereas cannabis does not meet the criteria for ANY of the current drug Schedules, sections 195.017 through 263.250 shall be edited to reflect that cannabis is removed from Missouri’s list of controlled substances.

195.581. *Definitions*

- **Adequate Supply:** an amount of cannabis collectively possessed between the qualifying patient and the qualifying caregiver(s) that is reasonably necessary to ensure uninterrupted availability
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- **Curing stage:** harvested cannabis leaves and/or flowers that are in the process of drying and/or curing
-
- **Department:** the department of Missouri state government that would be responsible for overseeing a medical cannabis program, (i.e. the Department of Health and Senior Services)
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- **Immature cannabis plants:** cannabis plants that are devoid of flowers or buds, over 12” in height and/or circumference
-
- **Mature cannabis plants:** any cannabis plant bearing flowers or buds, over 12” in height and/or circumference

-
- **"Medical cannabis": cannabis grown within a controlled environment for the purposes of being used as a medicine**
-
- **"Medical use": the acquisition, possession, cultivation, use, transfer, and/or transportation of cannabis or paraphernalia relating to the administration of cannabis to alleviate the symptoms or effects of a qualifying patient's medical condition. For the purposes of "medical use", the term "transfer" is limited to the transfer of cannabis and paraphernalia between primary caregivers and qualifying patients**
-
- **"Physician": a person who is licensed by the state of Missouri, or any state that has a valid medical cannabis program**
-
- **"Primary caregiver": a person who is at least eighteen years of age and who has agreed to undertake responsibility for managing the well-being of a person with respect to cannabis therapy**
-
- **Qualifying patient: any person under a physician's care**
-
- **Registry identification card: a document issued to a patient and/or caregiver identifying him or her as a legal patient or caregiver**
-
- **"Usable cannabis": the dried leaves and flowers of cannabis, and any mixture or preparation thereof, that is appropriate for the medical use of cannabis**
-
- **"Written certification", a valid Registry Identification Card, the qualifying patient's medical records or a statement signed by a physician stating that in the physician's professional opinion the patient would benefit from cannabis therapy**

195.582. LIMITS: An "Adequate supply" shall not exceed six mature cannabis plants, six immature cannabis plants*, eight ounces of usable cannabis, and no more than eight ounces of cannabis in the curing stage.

***Any plants less than 12" in height and/or circumference shall not be included in any count or weight.**

RECIPROCITY: Patients and their caregivers shall reserve the right to contribute seeds, clones, and/or seedlings to fellow qualified patients and/or caregivers.

(1) A "Debilitating medical condition" is any chronic and/or debilitating condition or disease, such as:

(a) Cancer, glaucoma, positive status for Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS), Crohn's Disease, Irritable Bowel Syndrome (IBS), hepatitis C, Alzheimer's Disease, Osteoarthritis, Rheumatoid Arthritis, Fibromyalgia (FMS), Multiple Sclerosis (MS), Muscular Dystrophy (MD), Parkinson's Disease, Lou Gehrig's Disease (ALS), Ehlers-Danlos Syndrome, migraines, seizures (Epilepsy), chronic pain, wasting syndrome, anorexia, nausea, anxiety, Post Traumatic Stress Disorder (PTSD), sleep disorders, muscle spasms, and/or

(b) Any other medical condition and/or its treatment approved by a licensed physician or Nurse Practitioner.

Patients may use, possess, and/or cultivate cannabis who possess a valid Registry identification card, or a signed statement from their physician stating that they might benefit from cannabis therapy from any state that currently has a medical cannabis program, (i.e. Alaska, Arizona, California, Colorado, Hawaii, Maine, Michigan, Montana, Nevada, New Jersey, New Mexico, Oregon, Rhode Island, Vermont, Washington, and Washington D.C)

195.583. 1. A qualifying patient who has in his or her possession a valid Registry identification card, or a signed statement from their physician stating that they might benefit from cannabis therapy shall not be subject to arrest, prosecution, or penalty in any manner for the medical use of cannabis or its possession, provided the quantity of cannabis does not exceed an adequate supply.

2. Patients under the age of eighteen shall not be permitted to possess cannabis unless:

(1) The qualifying patient's physician has recommended cannabis therapy and

(2) A parent, guardian, or person having legal custody consents in writing to:

(a) Allow the qualifying patient's medical use of cannabis;

(b) Serve as the qualifying patient's primary caregiver; and

(c) Control the acquisition of the cannabis, the dosage, and the frequency of the medical use of cannabis by the qualifying patient.

3. When the acquisition, possession, cultivation, transportation, or administration of cannabis by a qualifying patient is not practicable, the legal protections established by sections 195.580 to 195.598 for a qualifying patient shall extend to the qualifying patient's primary caregivers, provided that the primary caregivers' actions are necessary for the qualifying patient's medical use of cannabis.

4. A physician shall not be subject to arrest or prosecution, penalized in any manner, or denied any right or privilege for providing written certification for the medical use of cannabis to qualifying patients.

5. Cannabis plants, equipment for their cultivation, as well as legal amounts of medical cannabis shall not be seized from the possession of a medical patient if the medical patient presents identification as a medical cannabis patient. Any such property interest shall not be forfeited under any provision of state or local law providing for the forfeiture of property other than as a sentence imposed after conviction of a criminal offense or entry of a plea of guilty to a criminal offense. Cannabis, paraphernalia, or other property seized from a qualifying patient or primary caregiver in connection with the claimed medical use of cannabis shall be returned immediately upon the determination by a court or prosecutor that the qualifying patient or primary caregivers are entitled to the protections of 195.550 to 195.568, as may be evidenced by a decision not to prosecute, the dismissal of charges, or an acquittal.

6. No person shall be subject to arrest or prosecution for "constructive possession", "conspiracy", or any other offense for simply being in the presence or vicinity of the medical use of cannabis as permitted under sections 195.580 to

195.583.

7. Any medical cannabis patient shall be afforded all the same rights under the law as any other pharmaceutically medicated individual, as it pertains to:

(1) Routine traffic stops as well as any interaction with law enforcement that does not involve an illegal act;

(2) Any interaction with a person's employer that pertains solely to legal medical cannabis use; or

(3) Exclusion from drug testing when such test pertains to cannabis and its metabolites whether by an employer or a member of law enforcement; or

(4) Medical care, including organ transplants. A registered qualifying patient's authorized use of cannabis shall be considered the equivalent of any other medication used at the direction of a physician, and shall not constitute the use of an illicit substance.

8. A patient or caregiver who has not received a registry identification card may present evidence supporting his or her need for medical cannabis for treatment of a medical condition. Such evidence may constitute a defense to a charge of cannabis possession or cultivation and shall be admissible in the courts of the state of Missouri if such evidence otherwise properly qualifies as admissible under the rules of evidence.

195.584. A person and a person's primary caregivers may assert the medical use of cannabis as a defense to any prosecution involving cannabis, and such defense shall be presumed valid where the evidence shows that:

(1) The person's medical records indicate or a physician has stated that the patient would benefit from cannabis therapy.

(2) The person and the person's primary caregivers were collectively in possession of a quantity of cannabis that was not more than was reasonably necessary to ensure the uninterrupted availability of cannabis for the purpose of alleviating the symptoms or effects of the person's medical condition.

195.585. 1. "Registry identification card" means a document issued by the department that identifies a person as a qualifying patient or primary caregiver.

2. Not later than ninety days after the effective date of sections 195.580 to 195.598, the department shall promulgate rules governing the manner in which it will consider applications for registry identification cards, and for renewing registry identification cards, for qualifying patients and primary caregivers.

3. The department shall issue registry identification cards to qualifying patients, and to qualifying patients' primary caregivers, if any, who submit the following, in accordance with the department's rules:

(1) Written certification that the person is a qualifying patient;

(2) Registration fee, not to exceed twenty-five dollars per qualifying patient;

(3) Name, address, and date of birth of the qualifying patient;

(4) Name, address, and telephone number of the qualifying patient's physician; and

(5) Name, address, and date of birth of the qualifying patient's primary caregivers, if the qualifying patient has designated any primary caregivers at the time of application.

4. The department shall verify the information contained in an application submitted under this section, and shall approve or deny an application within thirty days of receipt of the application. The department may deny an application only if the applicant did not provide the information required under this section, or if the department determines that the information provided was falsified.

5. The department shall issue registry identification cards within five days of approving an application, which shall expire two year after the date of issuance. Registry identification cards shall contain:

(1) The name, address, and date of birth of the qualifying patient and primary caregivers, if any;

(2) The date of issuance and expiration date of the registry identification

card; and

(3) Other information that the department may specify in its rules.

6. A person who possesses a registry identification card shall notify the department of any change in the person's name, address, qualifying patient's physician, or qualifying patient's primary caregiver, within thirty days of such change.

7. Possession of or application for a registry identification card alone shall not constitute probable cause to search the person or property of the person possessing or applying for the card or otherwise subject the person or property of the person possessing the card to inspection by any governmental agency.

8. The department shall maintain a confidential list of the persons to whom the department has issued registry identification cards. Individual names on the list shall be confidential and not be subject to disclosure, except to:

(1) Authorized employees of the department as necessary to perform the official duties of the department; or

(2) Authorized employees of state or local law enforcement agencies, only for the purpose of verifying that a person is a medical cannabis patient.

195.586. 1. A "registered organization" means a nonprofit corporation registered with the state under chapter 355, RSMo, and organized for the purpose of lawfully selling, administering, delivering, dispensing, distributing, cultivating, or possessing cannabis, cultivation equipment, related supplies and educational materials, or cannabis seeds for medical use.

2. Prior to selling, administering, delivering, dispensing, distributing, cultivating, or possessing cannabis for medical use, a registered organization shall file a registration statement with the department and thereafter shall file an annual registration statement with the department in accordance with department rules which shall provide for the form and content of the registration statement.

3. Not later than ninety days after the effective date of sections 195.580 to

195.598, the department shall promulgate rules that include procedures for the oversight of registered organizations, specifications for the membership of the staff and the boards of directors of registered organizations, appropriate protections for people associated with registered organizations, a registration system for qualifying patients and primary caregivers who use the services of registered organizations, recordkeeping and reporting requirements for registered organizations.

4. It shall be lawful to sell, administer, deliver, dispense, distribute, cultivate, or possess cannabis where it is:

**(1) By a registered organization to a qualifying patient or primary caregiver;
or**

(2) By any federal, state, or local law enforcement agency to a registered organization.

5. A registered organization shall not sell, administer, deliver, dispense, or distribute cannabis without first verifying the validity of the qualifying patient's written certification by:

(1) verifying that the patient has in his or her possession a valid registry identification card, or

(2) signed statement from their physician stating that they could benefit from cannabis therapy.