

VA MEDICINAL CANNABIS RESEARCH ACT OF 2018

MAY 18, 2018.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. ROE of Tennessee, from the Committee on Veterans' Affairs, submitted the following

R E P O R T

[Including cost estimate of the Congressional Budget Office]

The Committee on Veterans' Affairs, to whom was referred the bill (H.R. 5520) to authorize the Secretary of Veterans Affairs to use the authority of the Secretary to conduct and support research on the efficacy and safety of medicinal cannabis, and for other purposes, having considered the same, report favorably thereon with an amendment and recommend that the bill as amended do pass.

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The amendment is as follows:
 Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the “VA Medicinal Cannabis Research Act of 2018”.

SEC. 2. CONDUCT OF RESEARCH INTO EFFECTS OF CANNABIS ON HEALTH OUTCOMES OF CERTAIN VETERANS.

(a) **RESEARCH.**—In carrying out the responsibilities of the Secretary of Veterans Affairs under section 7303 of title 38, United States Code, the Secretary may conduct and support research relating to the efficacy and safety of forms of cannabis described in subsection (c) on the health outcomes of covered veterans diagnosed with chronic pain, post-traumatic stress disorder, and other conditions the Secretary determines appropriate. The Secretary shall ensure that such research is conducted in accordance with applicable regulations relating to the oversight of research, including such regulations prescribed by the Office of Research and Development of the Department of Veterans Affairs, the Department of Health and Human Services (including through the National Institute on Drug Abuse), the Food and Drug Administration, the Drug Enforcement Administration, and the National Institutes of Health.

(b) **DATA PRESERVATION.**—Research conducted pursuant to subsection (a) shall include a mechanism to ensure the preservation of all data, including all data sets, collected or used for purposes of the research required by subsection (a) in a manner that will facilitate further research.

(c) **FORMS OF CANNABIS TO BE RESEARCHED.**—The forms of cannabis described in this subsection are—

(1) varying forms of cannabis, including—

(A) full plants and extracts;

(B) at least three different strains of cannabis with significant variants in phenotypic traits and various ratios of tetrahydrocannabinol and cannabidiol in chemical composition; and

(C) other chemical analogs of tetrahydrocannabinol; and

(2) varying methods of cannabis delivery, including topical application, combustible and non-combustible inhalation, and ingestion.

(d) **IMPLEMENTATION.**—If the Secretary conducts and supports research under subsection (a), the Secretary shall—

(1) before conducting and supporting such research, develop a plan to implement this section and submit such plan to the Committees on Veterans’ Affairs of the House of Representatives and the Senate; and

(2) issue any requests for proposals the Secretary determines appropriate for such implementation.

(e) **REPORTS.**—During the five-year period beginning on the date of the enactment of this Act, the Secretary shall submit periodically, but not less frequently than annually, to the Committees on Veterans’ Affairs of the House of Representatives and the Senate reports on—

(1) the implementation of this section; or

(2) the rationale of the Secretary with respect to determining not to implement this section.

(f) **COVERED VETERAN DEFINED.**—In this section, the term “covered veteran” means a veteran who is enrolled in the patient enrollment system of the Department of Veterans Affairs under section 1705 of title 38, United States Code.

AMENDMENT TO H.R. 5520 OFFERED BY MR. WENSTRUP OF OHIO

Page 2, line 4, strike the subparagraph heading and insert “RESEARCH.—”.

Page 2, line 11, after the period insert the following new sentence: “The Secretary shall ensure that such research is conducted in accordance with applicable regulations relating to the oversight of research, including such regulations prescribed by the Office of Research and Development of the Department of Veterans Affairs, the Department of Health and Human Services (including through the National Institute on Drug Abuse), the Food and Drug Administration, the Drug Enforcement Administration, and the National Institutes of Health.”.

Page 3, strike lines 6 through 21 and insert the following new subsections:

(d) **IMPLEMENTATION.**—If the Secretary conducts and supports research under subsection (a), the Secretary shall—

(1) before conducting and supporting such research, develop a plan to implement this section and submit such plan to the Committees on Veterans' Affairs of the House of Representatives and the Senate; and

(2) issue any requests for proposals the Secretary determines appropriate for such implementation.

(e) REPORTS.—During the five-year period beginning on the date of the enactment of this Act, the Secretary shall submit periodically, but not less frequently than annually, to the Committees on Veterans' Affairs of the House of Representatives and the Senate reports on—

(1) the implementation of this section; or

(2) the rationale of the Secretary with respect to determining not to implement this section.

PURPOSE AND SUMMARY

H.R. 5520, as amended, the “VA Medicinal Cannabis Research Act of 2018,” would (1) make it clear that VA is authorized to conduct and support research into medicinal cannabis, (2) require VA to report to Congress on how it intends to exercise such authority, and (3) require VA to preserve all data collected or used for research in a manner that could facilitate further research. H.R. 5520, was introduced by Representative Timothy Walz of Minnesota on April 16, 2018.

BACKGROUND AND NEED FOR LEGISLATION

In 2017, The American Legion, the nation’s largest Veteran Service Organization, contracted with an independent public opinion research company to conduct a nationwide survey regarding veteran use and access to medical cannabis. The survey, conducted over two days with over 1,300 respondents and a \pm 3.5 percent margin of error, determined that 92 percent of veteran households support research into the efficacy of medical cannabis for mental and physical conditions and that 22 percent of veterans are currently using cannabis to treat a mental condition.¹

These survey results highlight a large and growing need for valid scientific data and research into the safety and efficacy of cannabis as a medical treatment for veterans suffering chronic mental and physical conditions, especially as an alternative to treatment with opiate or other addictive or otherwise dangerous medications.

As a substance listed as Schedule 1 by the Drug Enforcement Agency, cannabis is determined to have “no current accepted medical use and a high potential for abuse.”² However, there is no clear guidance on VA’s legal authority to conduct research and study the possibility of an “accepted medical use” for medical cannabis.

Section 2 of the bill would clarify that the Secretary of the Department of Veterans Affairs may conduct research on the medical efficacy of cannabis on veterans, requires the Secretary to submit annual reports to Congress on the findings of any research con-

¹ <https://www.legion.org/veteranshealthcare/239814/survey-shows-veteran-households-support-research-medical-cannabis>

² United States Drug Enforcement Agency. (n.d.). *Drug Fact Sheet: Marijuana*. [PDF File].

ducted using this authority, and to preserve all data collected using this authority for use in future research opportunities.

HEARINGS

On April 17, 2018, the Subcommittee on Health conducted a legislative hearing on a number of bills including H.R. 5520.

The following witnesses testified:

The Honorable Beto O'Rourke, U.S. House of Representatives, 16th District, Texas; The Honorable Tim Walberg, U.S. House of Representatives, 7th District, Michigan; The Honorable Neal Dunn, U.S. House of Representatives, 2nd District, Florida; The Honorable Luis Correa, U.S. House of Representatives, 46th District, California; The Honorable Mike Coffman, U.S. House of Representatives, 6th District, Colorado; Louis J. Celli, Director, National Veterans Affairs and Rehabilitation Division, The American Legion; Adrian M. Atizado, Deputy National Legislative Director, Disabled American Veterans; Sarah S. Dean, Associate Legislative Director, Paralyzed Veterans of America; and Kayda Keleher, Associate Director, National Legislative Service, Veterans of Foreign Wars of the United States. Statements for the record were submitted by:

The Elizabeth Dole Foundation; The Independence Fund; Veteran Cannabis Project; Wounded Warrior Project; and Iraq and Afghanistan Veterans of America.

SUBCOMMITTEE CONSIDERATION

There was no subcommittee consideration of H.R. 5520.

COMMITTEE CONSIDERATION

On May 8, 2018, the full Committee met in open markup session, a quorum being present, and ordered H.R. 5520, as amended, favorably reported to the House of Representatives by voice vote. During consideration of the bill, the following amendment was considered and agreed to by voice vote:

An Amendment to H.R. 5520 offered by Representative Brad Wenstrup of Ohio, the Chairman of the Subcommittee on Health.

COMMITTEE VOTES

In compliance with clause 3(b) of rule XIII of the Rules of the House of Representatives, there were no recorded votes taken on amendments or in connection with ordering H.R. 5520, as amended, reported to the House.

COMMITTEE OVERSIGHT FINDINGS

In compliance with clause 3(c)(1) of rule XIII and clause (2)(b)(1) of rule X of the Rules of the House of Representatives, the Committee's oversight findings and recommendations are reflected in the descriptive portions of this report.

STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

In accordance with clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the Committee's performance goals and objectives are to permit the federally-regulated study into the safe-

ty and efficacy of medical cannabis for treatment in veterans with mental and physical conditions, while ensuring VA is required to follow established federal, clinical and scientific guidelines.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX
EXPENDITURES

In compliance with clause 3(c)(2) of rule XIII of the Rules of the House of Representatives, the Committee adopts as its own the estimate of new budget authority, entitlement authority, or tax expenditures or revenues contained in the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

EARMARKS AND TAX AND TARIFF BENEFITS

H.R. 5520, as amended, does not contain any Congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9 of rule XXI of the Rules of the House of Representatives.

COMMITTEE COST ESTIMATE

The Committee adopts as its own the cost estimate on H.R. 5520, as amended, prepared by the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, the following is the cost estimate for H.R. 5520, as amended, provided by the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974:

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, May 9, 2018.

Hon. PHIL ROE, M.D.,
*Chairman, Committee on Veterans' Affairs,
House of Representatives, Washington, DC*

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 5520, the VA Medicinal Cannabis Research Act of 2018.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Ann E. Futrell.

Sincerely,

KEITH HALL,
Director.

Enclosure.

H.R. 5520—VA Medicinal Cannabis Research Act of 2018

H.R. 5520 would allow the Department of Veterans Affairs (VA) to conduct and support research related to the use of medical cannabis in the treatment of veterans with chronic pain, post-traumatic stress disorder, and other health conditions. The bill would codify VA's existing authority to conduct such research. On that basis, CBO estimates that implementing H.R. 5520 would cost less than \$500,000 over the 2019–2023 period, primarily to prepare and

submit the necessary reports to the Congress. That spending would be subject to the availability of appropriated funds.

Enacting H.R. 5520 would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply.

CBO estimates that enacting H.R. 5520 would not increase net direct spending or on-budget deficits in any of the four consecutive 10-year periods beginning in 2029.

H.R. 5520 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act.

The CBO staff contact for this estimate is Ann E. Futrell. The estimate was reviewed by Leo Lex, Deputy Assistant Director for Budget Analysis.

FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates regarding H.R. 5520, as amended, prepared by the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

ADVISORY COMMITTEE STATEMENT

No advisory committees within the meaning of section 5(b) of the Federal Advisory Committee Act would be created by H.R. 5520, as amended.

STATEMENT OF CONSTITUTIONAL AUTHORITY

Pursuant to Article I, section 8 of the United States Constitution, H.R. 5520, as amended, is authorized by Congress' power to "provide for the common Defense and general Welfare of the United States."

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that H.R. 5520, as amended, does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act of 1995.

STATEMENT ON DUPLICATION OF FEDERAL PROGRAMS

Pursuant to clause 3(c)(5) of rule XIII of the Rules of the House of Representatives, the Committee finds that no provision of H.R. 5520, as amended, establishes or reauthorizes a program of the Federal Government known to be duplicative of another Federal program, a program that was included in any report from the Government Accountability Office to Congress pursuant to section 21 of Public Law 111–139, or a program related to a program identified in the most recent Catalog of Federal Domestic Assistance.

DISCLOSURE OF DIRECTED RULEMAKING

Pursuant to section 3(i) of H. Res. 5, 115th Cong. (2017), the Committee estimates that H.R. 5520, as amended, contains no directed rulemaking that would require the Secretary to prescribe regulations.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Section 1. Short title

Section 1 of the bill would provide the short title for H.R. 5520, as amended, as the “VA Medicinal Cannabis Research Act of 2018.”

Section 2. Conduct of research into effects of cannabis on health outcomes of certain veterans

Section 2(a) of the bill would provide the authority for the Secretary of Veterans Affairs to conduct and support research into the efficacy and safety of cannabis on the health outcomes of covered veterans diagnosed with chronic pain, PTSD, and other conditions the Secretary may deem appropriate. This section also requires authorized research to comply with all established federal guidelines and regulations.

Section 2(b) of the bill would require all research data authorized and conducted under section 2(a) to be preserved in a manner that will facilitate further research.

Section 2(c) of the bill outlines which forms of cannabis are eligible for research, including (1) full plants and extracts; (2) at least three different strains of cannabis with significant variations of phenotypic traits and various ratios of THC and CBD (the active ingredients in cannabis); and, (3) other chemical analogs of THC. This section also outlines the methods of delivery for research, including topical application, combustible and non-combustible inhalation, and ingestion.

Section 2(d) of the bill requires the VA, prior to conducting any research authorized by this section, to inform Congress of its plan to conduct such research and issue any requests for proposals the Secretary deems appropriate.

Section 2(e) of the bill requires VA to submit periodic reports to Congress on (1) the implementation of this section and (2) the rationale of the Secretary with respect to determining not to implement this section.

Section 2(f) defines the term “covered veteran.”

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

If enacted, this bill would make no changes in existing law.