

13-0002-535

RESOLUTION

WHEREAS, any official position of the City of Los Angeles with respect to legislation, rules, regulations or policies proposed to or pending before a local, state or federal governmental body or agency must have first been adopted in the form of a Resolution by the City Council with the concurrence of the Mayor; and

WHEREAS, H.R. 689 (Blumenauer), otherwise known as the "States' Medical Marijuana Patient Protection Act," would require the Secretary of Health and Human Services to submit to the Drug Enforcement Agency (DEA) and Food and Drug Administration (FDA), a recommendation related to marijuana within the Controlled Substances Act, other than Schedule I or Schedule II, and would prohibit the restriction of medical prescriptions and use of marijuana in states in which it is legal, per state law; and

WHEREAS, Schedule I and II contain listings of the most high risk substances, which either have no accepted medical uses in the United States (Schedule I) or have few accepted medical uses under highly restricted circumstances (Schedule II); and

WHEREAS, substances which are listed under Schedule I-V must meet certain criteria for classification, and although the decision of the DEA has been appealed in the past, cannabis is currently listed under Schedule I of the Controlled Substances Act, substances of this type are prohibited per Federal law; and

WHEREAS, H.R. 689 seeks to reschedule marijuana under Schedule III or lower, which would, in essence, permit States (not the DEA/FDA) to regulate the possession and distribution of marijuana, thus eliminating Federal control, a practice which would be opposite of the standard procedures of other prescription drugs in the United States (see attachment); and

WHEREAS, among the reasons that enactment of this legislation would be problematic, one is that a Federal department would be asked to legally find that marijuana does not meet the criteria of Schedule I or II drugs/chemicals, despite any evidence to the contrary; and

WHEREAS, since this bill would consequently create further loopholes and ambiguity, and would create a different regulatory framework which is inconsistent with any other pharmaceutical drug in the United States, it is important that local jurisdictions, such as the City of Los Angeles, oppose any measures, such as this bill, which would treat marijuana differently from an ordinary prescription drug and exempt any regulation, testing, etc., from DEA/FDA oversight;

NOW, THEREFORE, BE IT RESOLVED, with the concurrence of the Mayor, that by the adoption of this Resolution, the City of Los Angeles hereby includes in its 2013-2014 Federal Legislative Program, OPPOSITION to H.R. 689 which would provide for the rescheduling of marijuana, and for the medical use of marijuana, in accordance with the laws of various states.

PRESENTED BY: Bernard C. Parks
BERNARD C. PARKS
Councilmember, 8th District

SECONDED BY: [Signature]

[Signature]

ORIGINAL

The right way to regulate pot

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- > POLITICAL MOVEMENTS like the tea party may come and go, but the pot party
- > seems to get stronger with every national election, putting the federal
- > government in an increasingly untenable position.
- >
- > To date, more than one-third of the states and the District of Columbia
- > have legalized marijuana, at least for medical purposes, and, according to
- > Americans for Safe Access, eight other states are considering bills to do
- > the same. As a result, we're getting close to the point where half the
- > country will have legalized a drug designated a Schedule 1 controlled
- > substance by the federal government, meaning it has no known medical uses
- > and is as dangerous as heroin. This has been an overly restrictive
- > classification since it was imposed in 1970, yet what's remarkable about
- > the anti-prohibition movement is that it still hasn't prompted the
- > government to reconsider its stance. A bill in Congress would do just that,
- > but it also points out that there's a right way and a wrong way to proceed.
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- > *The bill introduced this week by Rep. Earl Blumenauer (D-Ore.) is the
- > wrong way*. It requires that marijuana be reclassified as no higher than a
- > Schedule 3 controlled substance, making it similar to most other
- > prescription drugs. But it leaves oversight to the states. Although other
- > drugs are controlled by the Drug Enforcement Administration and regulated
- > by the Food and Drug Administration, marijuana would be a class unto
- > itself: The bill exempts marijuana from control by these agencies, allowing
- > any state to legalize it and come up with its own regulatory framework for
- > producing and distributing it. When it comes to licensure, quality control,
- > testing, enforcement of distribution laws and so on, the states would be on
- > their own.
- >
- > We've already seen where that road leads. California's experiment with
- > medical marijuana has been a regulatory nightmare, in part because of
- > confusion and conflict with federal law, but also because coming up with a
- > new regulatory framework for a drug whose medical value is uncertain is
- > difficult and expensive. Who's to say whether the marijuana sold at the
- > corner dispensary is uncontaminated, or has no harmful side effects, or
- > really contains active ingredients in the amount the seller claims, or will
- > really cure what ails you?
- >
- > Regulatory failures have made it all too easy for recreational pot smokers
- > to get their hands on the drug, even though that's not what California
- > voters intended when they legalized medical marijuana in 1996. What we'd
- > like to see is federal legislation that would treat marijuana like an
- > ordinary prescription drug, complete with FDA oversight. Anything less
- > would probably just add to the confusion and abuse.