

This Document can be made available
in alternative formats upon request

State of Minnesota

HOUSE OF REPRESENTATIVES

NINETIETH SESSION

H. F. No. **2662**

05/12/2017 Authored by Hamilton
The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1 A bill for an act
1.2 relating to health; permitting the administration of medical cannabis in schools;
1.3 amending Minnesota Statutes 2016, sections 152.23; 152.27, subdivision 4;
1.4 proposing coding for new law in Minnesota Statutes, chapter 152.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2016, section 152.23, is amended to read:

1.7 **152.23 LIMITATIONS.**

1.8 (a) Nothing in sections 152.22 to 152.37 permits any person to engage in and does not
1.9 prevent the imposition of any civil, criminal, or other penalties for:

1.10 (1) undertaking any task under the influence of medical cannabis that would constitute
1.11 negligence or professional malpractice;

1.12 (2) possessing or engaging in the use of medical cannabis:

1.13 (i) on a school bus or van, except as permitted under section 152.345;

1.14 (ii) on the grounds of any preschool ~~or primary~~, elementary, or secondary school, except
1.15 as permitted under section 152.345;

1.16 (iii) in any correctional facility; or

1.17 (iv) on the grounds of any child care facility or home day care;

1.18 (3) vaporizing medical cannabis pursuant to section 152.22, subdivision 6:

1.19 (i) on any form of public transportation;

1.20 (ii) where the vapor would be inhaled by a nonpatient minor child; or

2.1 (iii) in any public place, including any indoor or outdoor area used by or open to the
2.2 general public or a place of employment as defined under section 144.413, subdivision 1b;
2.3 and

2.4 (4) operating, navigating, or being in actual physical control of any motor vehicle,
2.5 aircraft, train, or motorboat, or working on transportation property, equipment, or facilities
2.6 while under the influence of medical cannabis.

2.7 (b) Nothing in sections 152.22 to 152.37 require the medical assistance and
2.8 MinnesotaCare programs to reimburse an enrollee or a provider for costs associated with
2.9 the medical use of cannabis. Medical assistance and MinnesotaCare shall continue to provide
2.10 coverage for all services related to treatment of an enrollee's qualifying medical condition
2.11 if the service is covered under chapter 256B or 256L.

2.12 Sec. 2. Minnesota Statutes 2016, section 152.27, subdivision 4, is amended to read:

2.13 Subd. 4. **Registered designated caregiver.** (a) The commissioner shall register a
2.14 designated caregiver for a patient if the patient's health care practitioner has certified that
2.15 the patient, in the health care practitioner's medical opinion, is developmentally or physically
2.16 disabled and, as a result of that disability, the patient is unable to self-administer medication
2.17 or acquire medical cannabis from a distribution facility and the caregiver has agreed, in
2.18 writing, to be the patient's designated caregiver. As a condition of registration as a designated
2.19 caregiver, the commissioner shall require the person to:

2.20 (1) be at least 21 years of age;

2.21 (2) agree to only possess any medical cannabis for purposes of assisting the patient; and

2.22 (3) agree that if the application is approved, the person will not be a registered designated
2.23 caregiver for more than one patient, unless the patients reside in the same residence.

2.24 (b) The commissioner shall conduct a criminal background check on the designated
2.25 caregiver prior to registration to ensure that the person does not have a conviction for a
2.26 disqualifying felony offense. Any cost of the background check shall be paid by the person
2.27 seeking registration as a designated caregiver.

2.28 (c) A school nurse or other appropriate school personnel as designated by a school district
2.29 may be registered as a designated caregiver for a student who is a registered patient for the
2.30 purpose of section 152.345.

3.1 Sec. 3. [152.345] POSSESSION AND USE OF MEDICAL CANNABIS IN SCHOOLS.

3.2 (a) A student shall not possess or self-administer medical cannabis on the grounds of a
3.3 preschool, elementary, or secondary school; a school bus or van; or at a school-sponsored
3.4 event, except as permitted under this section.

3.5 (b) A parent or legal guardian of a minor student who is enrolled as a patient in the
3.6 registry program or a student's registered designated caregiver may possess and administer
3.7 medical cannabis to the student on the grounds of a preschool, elementary, or secondary
3.8 school in which the student is enrolled; on a school bus or van; or at a school-sponsored
3.9 event. If the student is 18 years of age or older, the student may self-administer the medical
3.10 cannabis under the supervision of a designated caregiver. A parent, legal guardian, or
3.11 designated caregiver shall not administer medical cannabis in a manner that creates disruption
3.12 to the educational environment or causes exposure to other students. The school may
3.13 designate specific locations on school grounds where medical cannabis may be administered.

3.14 (c) After the parent, legal guardian, or designated caregiver administers the medical
3.15 cannabis, the parent, legal guardian, or designated caregiver shall remove any remaining
3.16 medical cannabis from the grounds of the preschool, elementary, or secondary school; the
3.17 school bus or van; or a school-sponsored event, unless the school allows for the storage of
3.18 the student's supply of medical cannabis in a locked secure location.

3.19 (d) Nothing in this section requires the school or the school district's staff to administer
3.20 medical cannabis.

3.21 (e) The school or school district may adopt policies regarding reasonable parameters of
3.22 the administration and use of medical cannabis.

3.23 (f) This section does not apply to a school district if the school district loses federal
3.24 funding as a result of implementing this section, and can reasonably demonstrate that it lost
3.25 federal funding as a result of implementing this section.