

## **The Peron Act: The Separation of Recreational and Medical Marijuana Allowing the Regulation of Medical Marijuana, Compassion Services Exemptions, and Special Allowances for Use.**

By Darryl Cotton

With the passage of Proposition 64 in California, recreational cannabis is now legal here. This begs the question how will government effectively regulate and control both a recreational and a medical cannabis industry that in truth serves two distinctly different markets? You can't. The fundamental differences between the two is that the recreational cannabis user does not require, or rely on a physician consultation for treatment of a medical condition in which cannabis might help them whereas the patient seeking cannabis for treatment does. I see a relatively easy way to address this conundrum that should satisfy the majority of those who need to consider these issues by splitting the core cannabis industries into two parts. One set of laws under current Prop 64 law that would regulate the recreational, for-profit, cannabis industry and another set of laws that would regulate those non-profit entities serving the medical cannabis community.

I believe this requires another initiative making laws that would provide patients' rights relative to medical grade cannabis access and just as importantly make it so that those who wish to grow and manufacture products, that exclusively serve the medical cannabis market, would not have to be burdened by the rules and regulations that a for-profit entity would be responsible for under Prop 64 regulations. To that end and in honor of Dennis Peron, the original co-author of Prop 215 which in 1996 ushered in the era of medical marijuana, I give you the Peron Act;

Here is how it would work:

- 1) As Medical Cannabis Products (MCP) expenses are not covered under traditional insurance programs, the costs associated with buying cannabis products are borne by the patient. To help keep those costs to the patient down the state would waive or greatly reduce the license fees for those businesses that qualified for these licenses.
- 2) Local governments would not be able to tax products at the point of sale that were certified as medical grade.
- 3) In the dispensaries recreational users would not be able to purchase medical grade cannabis products, identified by a special stamp, unless they had the physician's recommendation to do so. On the other hand a medical patient would not be prohibited from buying recreational products but would be taxed when choosing to do so.
- 4) A key component of the Peron Act would be the advancement of research and product development. As a medical cannabis industry how can we work to further these efforts while



maintaining enough money to stay in business and to satisfy the regulatory agencies requirements with the work being done? I say we earn it. To that end I propose that the state regulations for the Medical Cannabis Cultivator (MCC) be such that when the MCC meets its annual state relicensing requirements they are given an option to increase canopy size by 50% the previous year crop size up to an established to be determined maximum crop size.

Why this will be important in the eyes of the state is by rewarding the players who play by the rules and maintain legitimate dispensing of their products the crop sizes are earned over years of the MCC playing by the rules. The likelihood of a licensed MCC redirecting their products for black market gains would be career and business suicide.

4.1) Recent research has shown the benefits of THC in the suppression of blood flow to cancer cells. For the purposes of Medical Cannabis Products there will be an increased maximum limitation of 19% THC for those flower products.

4.2) Recent research has shown there are increased benefits to the patient in terms of increased bioavailability when the concentrated form of the plant is brought to the patient in the form of a live resin extraction which due to the freshness and extraction techniques maintains the highest plant integrity and essential elements to the patient.

4.3) Those MCC's who use certified organically grown cannabis, that which does not use any synthetic nutrients pesticides, fungicides, insecticides or airocides would be given the opportunity to perform Live Resin Extraction (LRE) procedures at their farms in certified facilities that may use an approved extraction technique that meets state and local regulations. This is the only practical way to handle this beneficial extraction technique. Those products would then be fast track lab tested and given to the Type 11 Distributor for distribution to those dispensaries that would carry the products.

5) Unlike Prop 64, the Peron Act would not allow a 2/3 majority to change the language within it.

6) The Peron Act will require public and non-public schools to develop policies that authorizes parents, guardians, and primary caregivers to administer medical marijuana to a qualified patient/student to receive such medication while on school grounds, aboard a bus or attending a school sponsored event.

7) The allowance for compassion programs to supply patients that cannot otherwise afford, with Medicinal Marijuana, and qualifying compassion entities would be exempt from provisions of Proposition 64 in regards to the reduction or elimination of taxes, tracking, and any other regulation deemed to interfere with the ability for compassion entities to supply qualified patients with medical cannabis.

The issues cited herein represent goals worthy of implementation as they help define the real differences that exist between the recreational and medical marijuana markets and how the two might coexist and flourish to serve those two unique and distinctly different markets.

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