

MAINE STATE LEGISLATURE

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LAWS
OF THE
STATE OF MAINE

AS PASSED BY THE

ONE HUNDRED AND ELEVENTH LEGISLATURE

FIRST REGULAR SESSION
December 1, 1982 to June 24, 1983
Chapters 1-452

PUBLISHED BY THE DIRECTOR OF LEGISLATIVE RESEARCH
IN ACCORDANCE WITH MAINE REVISED STATUTES
ANNOTATED, TITLE 3, SECTION 164, SUBSECTION 6.

J.S. McCarthy Co., Inc.
Augusta, Maine
1983

PUBLIC LAWS
OF THE
STATE OF MAINE

AS PASSED AT THE
FIRST REGULAR SESSION

and

FIRST SPECIAL SESSION

of the

ONE HUNDRED AND ELEVENTH LEGISLATURE

1983

for the 1982-83 year of distribution. No unit may participate in local leeway unless it has raised the minimum amount of its local allocation, as computed by the commissioner under subsection 1, paragraph A or as provided under subsection 1, paragraph D. For the 1982-83 year of distribution only, administrative units that vote to raise local leeway at 1.1 mills and \$140 per pupil or a specified portion of that levy shall not be required to obtain further voter approval for adjustment of state and local shares for local leeway and any appropriation without state participation within the limits previously approved by the unit's legislative body and the Legislature.

Sec. 24. 20-A MRSA §16103, as enacted by PL 1981, c. 693, §§5 and 8, is repealed.

Emergency clause. In view of the emergency cited in the preamble, this Act shall take effect on July 1, 1983.

Effective July 1, 1983.

CHAPTER 423

S.P. 351 - L.D. 1025

AN ACT to Establish a Program for Therapeutic Use of Marijuana.

Be it enacted by the People of the State of Maine as follows:

22 MRSA c. 558-B is enacted to read:

CHAPTER 558-B

MARIJUANA THERAPEUTIC RESEARCH PROGRAM

§2411. Short title

This chapter may be cited as the "Marijuana Therapeutic Research Act."

§2412. Findings and purpose

The Legislature finds that research has recently indicated that the use of marijuana may alleviate nausea and certain other side effects of cancer chemotherapy as well as some symptoms of glaucoma. The Legislature also finds that further research and

strictly controlled experimentation regarding the therapeutic uses of marijuana is necessary and desirable. The purpose of this chapter is to facilitate and encourage this research and experimentation.

§2413. Definitions

As used in this chapter, unless the context indicates otherwise, the following terms have the following meanings.

1. Board. "Board" means the Participation Review Board.

2. Commissioner. "Commissioner" means the Commissioner of Human Services.

3. Department. "Department" means the Department of Human Services.

4. Marijuana. "Marijuana" means marijuana, tetrahydrocannabinols or a chemical derivative of tetrahydrocannabinols.

5. Practitioner. "Practitioner" means an allopathic or osteopathic physician licensed to practice in this State.

6. Program. "Program" means the Marijuana Therapeutic Research Program.

§2414. Marijuana Therapeutic Research Program

1. Establishment; administration. There is established within the department a Marijuana Therapeutic Research Program which shall be administered by the commissioner.

2. Rules. Subject to Title 5, chapter 375, the department shall adopt rules necessary for the proper administration of the program. In adopting rules, the department shall consider pertinent rules adopted by the Drug Enforcement Agency, the Food and Drug Administration, the National Institute on Drug Abuse and any other federal agency concerned with the subject of this chapter.

3. Supply. The commissioner shall contract with the National Institute on Drug Abuse for the receipt of marijuana under rules adopted by the National Institute on Drug Abuse, the Food and Drug Administration and the Drug Enforcement Agency. If, within a reasonable period of time, the commissioner is unable to obtain marijuana as provided in this subsection, he shall contract with appropriate law enforcement agencies in this State for the receipt of confiscated

marijuana not intended for use as evidence in any criminal proceeding. Any marijuana so received shall be made free of impurities and analyzed for potency by the department.

4. Distribution. The commissioner shall deliver marijuana received under subsection 3 to appropriate state or privately operated licensed pharmacies designated by the commissioner. Any marijuana so delivered shall be distributed to patients upon the written prescription of their approved practitioner. Any privately operated licensed pharmacy designated by the commissioner under this section shall not be liable, except for gross negligence, in any civil action on account of marijuana distributed to patients under this chapter.

§2415. Participation Review Board

The commissioner shall appoint a Participation Review Board to review practitioners for participation in the program. The board shall serve at the commissioner's pleasure and shall consist of:

1. Physician licensed to practice in this State; American Board of Ophthalmology. A physician licensed to practice in this State and certified by the American Board of Ophthalmology;

2. Physician licensed to practice in this State; American Board of Internal Medicine. A physician licensed to practice in this State and certified by the American Board of Internal Medicine and also certified in the subspecialty of medical oncology; and

3. Physician licensed to practice in this State; American Board of Psychiatry. A physician licensed to practice in this State and certified by the American Board of Psychiatry.

Members of the board may be reimbursed for their attendance at meetings at the rate of \$40 per day.

§2416. Participation in the program

1. Application. Any practitioner who wants to participate in the program shall apply to the board for approval and pay a \$25 application fee.

2. Review and approval. The board shall review all applicants and, if they are eligible under subsection 3 and the rules adopted by the department under section 2414, subsection 2, shall approve them for participation. In performing these duties, the board shall be subject to Title 5, chapter 375.

3. Prescriptions. A practitioner approved for

participation in the program may prescribe marijuana to only those patients who are undergoing cancer chemotherapy or suffering from glaucoma and are in a life-threatening or sense-threatening situation, and who are not responding to conventional treatment or who are suffering severe side effects even though conventional treatment is proving effective.

§2417. Expressly authorized possession, prescription and distribution

A practitioner approved for participation in the program is expressly authorized to prescribe marijuana under this chapter. A patient for whom marijuana has been prescribed by a practitioner approved for participation in the program is expressly authorized to possess marijuana under this chapter. A state or privately operated licensed pharmacy designated by the commissioner is expressly authorized to possess and distribute marijuana under this chapter.

§2418. Confidentiality

1. Access to information. Only the following persons shall have access to the names and other identifying characteristics of patients for whom marijuana has been prescribed under this chapter:

- A. The commissioner;
- B. The board;
- C. The Attorney General or his designee;
- D. Any person directly connected with the program who has a legitimate need for the information; and
- E. Any person for whom access has been specifically authorized by a patient.

Meetings and records of the board shall not be subject to the requirements of Title 1, chapter 13.

2. Exceptions. Nothing in this section may affect the right to inspect the records of any pharmacy under Title 17-A, section 1113, or prohibit access to or release of information concerning any persons acting under color of this chapter with respect to conduct not expressly authorized by this chapter.

§2419. Reports

The commissioner and the board shall annually report their findings and recommendations regarding the program to the Governor and the Legislature.

§2420. Sunset

This chapter is repealed on December 31, 1987.

Effective September 23, 1983.

CHAPTER 424

S.P. 475 - L.D. 1441

AN ACT to Permit the Location of
Manufactured Housing on Individual
House Lots.

Be it enacted by the People of the State of Maine as follows:

30 MRSA §4965 is enacted to read:

§4965. Regulation of manufactured housing

1. Definitions. As used in this subchapter, unless the context otherwise indicates, the following terms have the following meanings.

A. "Manufactured housing" means a structural unit or units designed for occupancy, and constructed in a manufacturing facility and then transported by the use of its own chassis, or placed on an independent chassis, to a building site. The term includes any type of building which is constructed at a manufacturing facility and then transported to a building site where it is utilized for housing and may be purchased or sold by a dealer in the interim. For purposes of this section, 2 types of manufactured housing are included. They are:

(1) Those units constructed after June 15, 1976, commonly called "newer mobile homes," which the manufacturer certifies are constructed in compliance with the United States Department of Housing and Urban Development standards, meaning structures, transportable in one or more sections, which, in the traveling mode, are 14 body feet or more in width and are 750 or more square feet, and which are built on a permanent chassis and designed to be used as dwellings, with or without permanent foundations, when connected to the required utili-