

SAN MATEO COUNTY HEALTH SYSTEM
BEHAVIORAL HEALTH AND RECOVERY SERVICES

DATE: August 10, 2010

BHRS POLICY: 10-02
SUBJECT: Medical Marijuana
AUTHORITY: AOD Policy No. 1-2008
SUPERSEDES: New Policy

BACKGROUND

San Mateo County Behavioral Health and Recovery Services (BHRS) recognizes the potential contradictions that may arise when treating clients for substance use disorders who are, at the same time, using medical marijuana. The challenge for BHRS is to provide effective, welcoming residential and outpatient treatment and, at the same time, consider a known addictive substance that is also used as adjunctive treatment for certain medical conditions.

PURPOSE

- To support clients' health and well-being by providing effective treatment and recovery services to clients using medical marijuana.
- To address the issues encountered when someone who is prescribed medical marijuana, an addictive substance, seeks substance use treatment.

POLICY

- This policy applies to both county operated and contracted treatment sites and facilities.
- AOD providers are referred to the AOD Medication Policy which states "Clients cannot be denied services based solely on the fact that they are taking prescribed medications, regardless of the type of medication".
- Medical marijuana must be used for an illness identified by the Institute of Medicine (IOM) and California Medical Association (CMA) to be appropriate for this treatment protocol, such as terminal illness, intractable pain, chemotherapy inducing nausea and vomiting, and AIDS wasting syndrome. Medical marijuana is not generally indicated for treatment of illnesses such as anxiety disorders and mood disorders.
- Individuals who qualify for medical marijuana and are seeking treatment from BHRS or contracted residential and/or outpatient providers will receive those services so long as the described procedures are followed and the criteria outlined in this policy are met.

- In order to avoid the negative impact of smoking marijuana on others (physically and psychologically), clients will only be admitted into residential settings when their medical marijuana is administered in an oral form, most commonly dronabinol (trade named Marinol), an FDA approved pill form of THC for use with certain conditions.
- All clients in residential substance abuse treatment using medical marijuana must sign a treatment agreement (sample attached).
- Female Clients – even though BHRS is not prescribing medical marijuana, it is appropriate and prudent client care to discuss the possible risks to a fetus or to a child being nursed incurred by smoking or ingesting cannabis. Use of dronabinol (Marinol) is not recommended for nursing mothers (product information – MARINOL ® oral capsules – 2006).

CRITERIA

- Substance Abuse Treatment Outpatient Services
 - The client must sign an Authorization to Disclose (Release of Information) between the BHRS self-operated or contracted program and the client’s physician to discuss the reasons for and appropriate use of medical marijuana.
 - The client must present a valid copy of his/her medical marijuana card verifying the client’s need for medical marijuana. NOTE: Medical Marijuana Identification Cards are valid for one year. Once the card has expired, clients must apply for new cards through their prescribing physicians and should present the card to the BHRS provider at the next visit.
 - If a client who is currently receiving BHRS services no longer has a prescribing physician, the client may be referred to primary care within San Mateo County to obtain a Primary Care Physician.
 - The use of medical marijuana must not impair the ability of the client to fully participate in all aspects of the treatment program.
 - In order to maximize the client’s ability to participate effectively in treatment programs, medical marijuana should be taken/used no closer than 4 hours before the treatment session.
 - If a client appears impaired during a treatment session, whether individual or group, the client may be asked to leave the session.
 - In some circumstances, being asked to leave a session may be considered a failure to comply with a treatment agreement and may result in discharge from the program.

- Residential Services
 - The client must sign an Authorization to Disclose (Release of Information) between the BHRS self-operated or contracted program and the client’s physician to discuss the reasons for and appropriate use of medical marijuana.
 - The client must present a valid copy of his/her medical marijuana card verifying the client’s need for medical marijuana. NOTE: Medical Marijuana Identification Cards are valid for one year. Once the card has expired, clients must apply for a

new card through their prescribing physician and should present the card to the BHRS provider at the next visit.

- If a client who is currently receiving BHRS services no longer has a prescribing physician, the client may be referred to primary care within San Mateo County to obtain a Primary Care Physician.
- If the client has not met the above requirements, then medical marijuana will not be allowed in the residential setting. In this circumstance, please consult with your BHRS analyst/manager for assistance and further direction.
- Clients may not smoke medical marijuana while participating in any aspect of the residential treatment program. Clients needing medical marijuana must agree to take the ADA approved drug, dronabinol (Marinol), which is available in pill form. If indicated, it is the client's responsibility to communicate with their prescribing physician and arrange for the switch to the pill form, prior to acceptance in the residential program.
- The use of medical marijuana must not impair the ability of the client to fully participate in all aspects of the treatment program.
- If a client appears impaired during a treatment session, whether individual or group, or unable to participate in the treatment milieu, the client may be asked to leave the session.
- In some circumstances, being asked to leave a session may be considered a failure to comply with a treatment agreement and may result in discharge from the program.

PROCEDURE FOR CLIENTS IN RESIDENTIAL CARE

- For the Primary Counselor
 1. Have the client sign a release of information to communicate with the physician who authorizes the use of marijuana for a medical condition.
 2. Communication with the prescribing physician is a practice standard in order to assure the ongoing health and safety of the client using medical marijuana and that of others in the program.
 3. Make a good faith effort to obtain documentation from the client's physician that traditional medications have failed to provide relief and that a medical exam with that finding is documented.
 4. Make a good faith effort to obtain an authorization letter for the use of medical marijuana from the client's physician that documents the diagnosis and includes a beginning and expected end date for the course of treatment.
 5. Provide documentation of your efforts to communicate with the prescribing physician to your Clinical Supervisor for review and approval.
 6. If the client is approved for admission into the program, document in the client's chart that he/she may use medical marijuana as an adjunct to treatment of medical conditions.
 7. Monitor timeline for approved use of medical marijuana and inform the client and Clinical Supervisor when approaching the end date.
 8. Monitor the effective date of the Medical Marijuana card.

9. Store the medication and monitor the client's self administration using the same procedures as with any other prescribed controlled medication.
- For the Clinical Supervisor:
 1. Review the required documentation and note in the client's chart that this process has been completed, whether or not admission is approved. If the request is not approved, documentation will provide an explanation of the reasons.
 2. Programs may utilize drug testing/screening as a clinical tool with clients utilizing medical marijuana or dronabinol (Marinol). Drug testing for illicit drugs, abuse of prescription drugs, or alcohol may continue per program policy. Levels of THC for clients using medical marijuana may also be noted and results clinically evaluated and utilized.
 3. Any questions or concerns about a client's eligibility for the use of medical marijuana should be directed to the program Clinical Director who will, as needed, work with the assigned BHRS manager/analyst and the BHRS Medical Director, as indicated.

Approved:

Signature on File

Louise Rogers, Director
Behavioral Health and Recovery Services

Signature on File

Celia Moreno, MD
BHRS Medical Director

Signature on File

Stephen G. Kaplan, Director
Alcohol and Other Drug Services

Attachment A: Sample Medical Marijuana Treatment Agreement

Attachment B: Sample Form to Request Medical Information from Prescribing Physician