



Maine Association of
Recovery Residences

Cannabis - Policy Guidance for Affiliate Members of the Maine Association of Recovery Residences

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Preamble

“Marijuana” is the most common name for cannabis in the United States today. Because the history of the word is steeped in racial politics, in particular oppression against Mexican immigrants and African-Americans, this policy refers to cannabis except when referencing existing statutes that refer to “marijuana”.

Several years ago, the State of Maine created a statute to allow members of the public to obtain a Maine Medical Use of Marijuana Program Certification (often called a “Medical Marijuana Card”) from licensed physicians, Physician Assistants, and Certified Nurse Practitioners for medicinal use of cannabis. Patients obtain medical cannabis from licensed dispensaries or registered caregivers and obtained within the state of Maine. In 2016, the state’s voters approved a referendum making cannabis legal for recreational use (no certification required) for persons 21 years of age and older. In 2020, the first recreational cannabis retailers opened for business in Maine. Cannabis (Marijuana) remains a Schedule I substance under the federal Controlled Substances Act (no medical use recognized) and therefore illegal without a special permit. Information about the Maine Medical Marijuana Program may be found [HERE](https://www.maine.gov/dafs/omp/medical-use/rules-statutes/18-691-C.M.R.-ch.-2) (<https://www.maine.gov/dafs/omp/medical-use/rules-statutes/18-691-C.M.R.-ch.-2>).

Maine law allows licensed physicians, Physician Assistants, and Certified Nurse Practitioners to certify that it is their professional opinion that the patient is likely to receive therapeutic benefits from the medical use of cannabis to treat or alleviate a patient's debilitating medical condition. Some residents of recovery residences may have a medical cannabis card for therapeutic purposes. In general, use of cannabis by persons in a recovery residence is treated like use of alcohol or illicit substances – NOT permitted.

MARR recognizes that there are many pathways to recovery and that a complete ban on therapeutic cannabis use could prevent appropriate utilization of cannabis as an adjunct to recovery in certain individuals. Therefore, MARR requires that any Affiliate Member considering allowing medical cannabis use by qualified residents adopt a written policy with consideration of the following:

- A policy statement concerning cannabis use be included in materials available to all residents.
- The Cannabis Policy should include a statement expressing the basis for the program (philosophy).
- The policy is clear that medical cannabis use is restricted to individuals with a current Medical Marijuana Card issued by a licensed medical doctor, Physicians Assistant, or Certified Nurse Practitioner.
- That all residents be made aware of the existence of the policy.



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- That all prospective residents be informed of the policy before admission to the residence.
- That use of medical cannabis must not interfere with the normal activities and processes in recovery, and that evidence of a resident's impairment due to cannabis use be grounds for dismissal from the program. This is necessary to avoid the situation where an individual with a Medical Marijuana Card feels they may use cannabis in any manner they please. If the usage of cannabis interferes with progress in recovery, it becomes a treatment issued to be addressed. Referral to a more appropriate situation may be indicated.
- That any resident using cannabis under this policy agrees to sign appropriate Release(s) of Confidential information (42 CFR Part 2) to permit communication with the Medical Marijuana Card's issuer.
- That a member's Cannabis Policy be a part of a comprehensive policy regarding all psychotherapeutic medications. Cannabis products should be kept under secure storage conditions and subject to:
 - Product inventory;
 - Observed product self-dispensing; and
 - Random product counts.
 - That only edible and tincture formulations of cannabis be permitted; *combustible and aerosolized cannabis products are not permitted at any time on or off of the premises* (cannabis odor and residue may cling to clothing and may be detectable on the breath for a long time after consumption and could present a serious environmental trigger for some recovering persons).

Other considerations:

The National Alliance of Recovery Residences (NARR) does NOT currently have a policy guide for cannabis use among its state affiliates. They offer some guidance in their MAT policy and have stated that medical cannabis might be treated in a similar fashion with the following caveats:

- MAT (Buprenorphine, methadone, etc.) are FDA approved medications with a recognized therapeutic application; cannabis is not.
- When Affiliate Members are drafting policies for MAT and medical cannabis, consideration should be given to avoiding language that may appear discriminatory to people using MAT or medical cannabis (with a card).

Use of CBD may be addressed in the Marijuana Policy. CBD (Cannabidiol) is a non-THC containing derivative of the cannabis plant. It does NOT contain any psychoactive substance. Users claim it provides relief from inflammatory conditions. Its use in recovery settings should not typically create any problems, except in rare cases when enough residual THC material may be present to create a positive urine drug screen.

A final note:

MARR does not require self-described abstinence-based recovery programs to permit the use of MAT and/or medical cannabis. This policy should be clearly stated. As evidence accumulates about the risks and benefits of cannabis use by people in recovery, it may be prudent to revisit this area from time to time.



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