

County primed for medical pot regulations

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In conjunction with a three-bill legislative package signed by the governor this past October, Yolo County is likely to see its own local regulations on medical marijuana going forward in 2018.

During a recent Board of Supervisors meeting, a lobbyist from Rural County Representatives of California gave a presentation outlining highlights of the new state laws, while suggesting county officials begin thinking of how they may want to be a part of the conversation with their own legal framework.

“It really changes the way we look at and how we deal with medical marijuana in Yolo County,” Assistant County Counsel Carrie Scarlata said of Assembly Bills 243, 266 and Senate Bill 643, noting the county had traditionally defaulted to California’s broader laws in the past. “We have to look at how we want to deal with that ... so we will be coming back to the board asking for direction with some policy recommendations.”

RCRC’s senior legislative advocate Paul Smith said he and his associates had pushed for four key medical marijuana principles in the Legislature that rural counties could “live with,” adding the California State Association of Counties had pursued similar policies.

Those policy principles entailed preserving local control (time, place, manner) of growth and distribution, explicit county taxing authority, moving toward a strict licensing scheme among most parties involved and addressing environmental impacts of the alternative medicine’s manufacturing.

“On the whole and on the balance, this was about as good as we were going to get,” Smith said. “We needed something, and hence, we supported this.”

Perhaps the most important — and complex — of the four core principles, Smith added, was the new strict licensing scheme that the state, and presumably many counties, will start adopting for all of its medical marijuana actors.

The biggest takeaway from this new provision, Smith continued, is that most people engaging in commercial medical marijuana will need two licenses to operate: one at the state level and one at the local level, provided a county doesn’t ban medical marijuana use outright. With a few exceptions (i.e. personal growers and patient caregivers being exempt from state licensure, but not necessarily local jurisdiction regulations) just about everyone in the chain of medical marijuana administration will have to secure dual licensing before proceeding with their part of the business — especially cultivators, who will need to obtain a local license first before a state-issued one can be granted.

Smith went on to say that while some specific statutes of the dual licensing scheme are controversial and likely to be reevaluated or even repealed in the coming year — the last sentence of AB-243’s Health and Safety Code 11362.777 (g), for example, allowing local municipalities to either regulate or ban medical marijuana grows completely despite established state-issued cultivation parameters — the new law as it stands essentially empowers the board to deal with medical marijuana however they see fit.

“Begin to think about what your local approval process will be, assuming you are not going to be a prohibiting county,” Smith implored of the five supervisors. “I can assure you will have a number of constituents and folks in this county wanting you to do something sooner rather than later so they can start the process.”

Smith proceeded to touch on other aspects of the three medical marijuana bills, including mobile delivery and transport standards, potential conflicting local ordinances, the role of local enforcement, state license background check requirements and employer restrictions, among others.

He even gave the board a heads-up about a pending ballot measure known as the Parker Initiative that will most likely be among next November’s ballot measures — one seeking to legalize recreational marijuana use.

“Today we’re not enacting anything; this was just an informational item,” Chairman Matt Rexroad said at the conclusion of Smith’s presentation. “I wanted (Paul) to make a presentation that will help us inform our decisions going forward...I think the presentation was definitely worth it.”

Although the supervisors did not comment extensively on the medical marijuana agenda item last week, they did later express interest in sitting down soon in the new year and coming up with a system that would be best for Yolo County, explaining they could offer the best compromise for residents on top of what the state will be rolling out in the next couple years.

“I believe the Board of Supervisors will want to have some county-specific policies and not be completely at the will of the state-wide measures,” said District 2 Supervisor Don Saylor. “We haven’t arrived at what that framework will be yet (though).”

Supervisor Rexroad said he agreed that the board would have to come up with some sort of concrete plan soon, adding that it was not good public policy to ignore a market that was clearly prevalent in the county.

“We have to accept reality,” Rexroad said. “We can’t just stick head in sand on this.”

District 1 Supervisor Oscar Villegas expressed more of a “live and let live” philosophy toward the issue of medical marijuana in general, while emphasizing the need to explore the county’s reimbursement options moving forward to help cover potential litigation costs it could incur.

He also went to say that he was looking forward toward the challenge of crafting new policies around an issue that seems to be growing more and more out of the county’s hands.

“We can’t stop it,” Villegas said. “It’s a bit of a tidal wave, and we’ll have to ride it.”

Whatever the Board of Supervisors do, they’ll have to act fast. A looming March 1, 2016 deadline is currently in place for them to offer up a county-specific framework on how it wishes to proceed, or else lose out on the privilege to participate in a dual licensing scheme.

As Smith made clear in his presentation, it is coming in some form.