

Medical Marijuana Qualifying Conditions

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Issue

This report (1) lists the qualifying debilitating conditions under the state's medical marijuana program and (2) summarizes the process for petitions seeking to add conditions to the qualifying list.

Summary

Connecticut's medical marijuana law allows patients to use marijuana for certain debilitating medical conditions ([CGS § 21a-408](#) et seq.). The law lists some of these conditions, but it also authorizes the Department of Consumer Protection (DCP) commissioner to add other conditions to the list by adopting regulations. Table 1 below shows the full list of qualifying conditions.

Medical Marijuana Patient Registration

Under Connecticut law and regulations, patients seeking to use medical marijuana must first register with DCP. Before a patient may register, his or her physician or advanced practice registered nurse must certify that the patient has a qualifying debilitating medical condition. For more information on this process, see DCP's [website](#).

Members of the public may submit petitions to DCP to request that the department add to the list of qualifying debilitating conditions. By law, a [board of physicians](#) knowledgeable about medical marijuana use conducts public hearings at least twice a year to evaluate such petitions and make recommendations to the DCP commissioner ([CGS § 21a-408I](#)).

DCP regulations set forth procedures for such petitions, summarized below. Under those procedures, the commissioner may not adopt regulations adding to the list of qualifying debilitating conditions unless the board has considered the appropriateness of adding the condition and submitted a written recommendation to her ([Conn. Agencies Reg., § 21a-408-12](#)).

Medical Marijuana Qualifying Conditions

The state's medical marijuana program was created by [PA 12-55](#). The act listed certain debilitating medical conditions qualifying for medical marijuana use. The legislature added to the list of debilitating conditions in 2016 ([PA 16-23](#)). DCP added to the list through regulations in 2016 and again in 2018.

Table 1 lists the current qualifying debilitating conditions under Connecticut's medical marijuana program, as set forth in [CGS § 21-408\(a\)\(3\)](#) and [Conn. Agencies Reg., § 21a-408-12a](#).

Table 1: Qualifying Debilitating Medical Conditions Under Connecticut's Medical Marijuana Program

Condition	Adults Only (18+) or Both Minors and Adults
Conditions Listed in Statute	
Cancer	Adults
Glaucoma	Adults
HIV or AIDS	Adults
Parkinson's disease	Adults
Multiple sclerosis	Adults
Damage to the nervous tissue of the spinal cord with objective neurological indication of intractable spasticity	Adults
Epilepsy	Both (for minors, only severe epilepsy qualifies)
Uncontrolled intractable seizure disorder	Both
Cachexia (emaciation often caused by cancer or cardiac diseases)	Adults
Wasting syndrome	Adults
Crohn's disease	Adults
Posttraumatic stress disorder	Adults
Irreversible spinal cord injury with objective neurological indication of intractable spasticity	Both
Cerebral palsy	Both
Cystic fibrosis	Both
Terminal illness requiring end-of-life care	Both

Table 1 (Cont.)

Condition	Adults Only (18+) or Both Minors and Adults
Conditions Listed in DCP Regulations	
Sickle cell disease	Adults
Post laminectomy syndrome with chronic radiculopathy	Adults
Severe psoriasis and psoriatic arthritis	Adults
Amyotrophic lateral sclerosis	Adults
Ulcerative colitis	Adults
Complex regional pain syndrome, Type I and II	Adults
Spasticity or neuropathic pain associated with fibromyalgia	Adults
Severe rheumatoid arthritis	Adults
Post herpetic neuralgia	Adults
Muscular dystrophy	Both
Hydrocephalus with intractable headache	Adults
Intractable headache syndromes	Adults
Neuropathic facial pain	Adults
Osteogenesis imperfecta	Both

Regulatory Process to Add Conditions to the Qualifying List

Under DCP regulations (which were recently [amended](#)), anyone seeking to add a medical condition to the list of qualifying debilitating conditions for medical marijuana must submit a petition to DCP on a [form](#) prescribed by the commissioner.

The current form requires the petitioner to include specified information addressing (1) the medical condition, treatment, or disease that the person is seeking to add to the list, (2) the person's current treatment and other conventional therapies, and (3) medical and scientific evidence supporting the use of marijuana for the condition at issue. The petitioner must also attach letters in support of the petition by licensed health care professionals knowledgeable about the condition at issue. The commissioner may deny a request to present a petition to the board of physicians if the petition does not include all of the required information.

Generally, the commissioner may also deny a petition without submitting it to the board if it concerns a condition that (1) she previously considered and rejected or (2) is substantially similar to one that she previously rejected. But this authority does not apply if the petition includes new scientific research supporting the request.

If a petition meets the regulation's requirements, the commissioner must refer it to the board for a public hearing, to be held at least 60 days after the petition was submitted. A quorum of the board must hold hearings at least twice a year to evaluate such petitions and consider any other conditions that, on its own initiative, the board believes should be reviewed for possible inclusion on the qualifying list.

In addition to information provided in the petition, the board may examine information from other sources (such as medical evidence or research). After the hearing, the board must consider the public comments and any additional information or expertise made available to the board for each proposed condition considered at the hearing.

The board must issue a written recommendation to the commissioner as to whether the condition should be added to the list of qualifying debilitating conditions. The recommendation must address:

1. whether the condition is debilitating,
2. whether marijuana is more likely than not to have the potential to be beneficial to treat or alleviate such debilitation, and
3. other matters that the board considers relevant to approving or denying the petition.

After receiving the board's recommendation and any dissenting or concurring opinions, if the commissioner concludes that the medical condition under consideration should be added to the qualifying list, she must begin the process of adopting regulations to that effect, through the standard regulation adoption procedures ([Conn. Agencies Reg., § 21a-408-12](#)).

More information on the petition process is available on DCP's [website](#).

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