

MAR 08 2019

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# SENATE RESOLUTION

REQUESTING THAT THE AUDITOR CONDUCT A SUNRISE ANALYSIS OF  
MANDATING HEALTH CARE COVERAGE FOR CANNABIDIOL OIL DERIVED  
FROM INDUSTRIAL HEMP.

1           WHEREAS, industrial hemp is defined under the State's  
2 Industrial Hemp Pilot Program as the cultivated plant *Cannabis*  
3 *sativa* L. and any part of that plant, whether growing or not,  
4 with a delta-9 tetrahydrocannabinol concentration of not more  
5 than 0.3 percent on a dry weight basis or a tetrahydrocannabinol  
6 concentration allowed by federal law, whichever is greater; and  
7

8           WHEREAS, industrial hemp contains cannabidiol, a  
9 therapeutic non-psychoactive chemical compound, and low levels  
10 of tetrahydrocannabinol, a psychoactive chemical compound that  
11 is found in high levels in other types of cannabis plant, that  
12 are classified as marijuana; and  
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14           WHEREAS, the medicinal benefits of cannabidiol have been  
15 recently recognized by the United States Food and Drug  
16 Administration, which, on June 25, 2018, approved Epidiolex  
17 (cannabidiol) oral solution for the treatment of seizures  
18 associated with severe forms of epilepsy, specifically, Lennox-  
19 Gastaut syndrome and Dravet syndrome, in patients two years of  
20 age and older; and  
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22           WHEREAS, both cannabidiol and tetrahydrocannabinol have  
23 similar medicinal benefits, such as relieving pain, reducing  
24 nausea, easing migraines, and reducing inflammation; however,  
25 cannabidiol, unlike tetrahydrocannabinol, does not produce a  
26 high, does not have psychoactive side effects, does not increase  
27 appetite, and does decrease seizures; and  
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29           WHEREAS, House Bill No. 20, introduced during the Regular  
30 Session of 2019, requires health insurers and similar entities  
31 that provide coverage for health care to provide drug coverage  
32 for cannabidiol oil that is derived from industrial hemp; and



