

Oregon Medical Marijuana Program

Senate Bill 1085

Effective: January 1, 2006

SUMMARY

1. Changes the current legal number of plants allowed per patient from four (4) mature and three (3) immature to six (6) mature plants.
2. Plants that have no flowers and are less than 12” in height and 12” in diameter are considered seedlings or starts (also “clones”, etc.) And not “mature” plants.
3. Changes the current legal amount of marijuana a registrant may possess from four (4) ounces to twenty-four (24) ounces.
4. Requires the OMMP to establish a “grow site registration system” to authorize the production of marijuana by the registry cardholder, the designated primary caregiver or a person responsible for a grow site. Creates new classification of “grow site registrant” that will add marginal cost to the registration database.
5. Limits the number of patients, for whom a grower can grow marijuana, at a “multiple patient” grow site, to four (4) patients. Currently there is no limit.
6. Prohibits a grower from producing marijuana for five (5) years, if convicted of a drug related offense.
7. Prohibits a patient from producing marijuana for five (5) years, if convicted of a drug related offense and limits the amount of marijuana a patient may possess to one (1) ounce.
8. Mandates that a person, when transporting marijuana, must be in possession of a registration card.
9. Mandates the OMMP to provide law enforcement with a verification system that permits access to information twenty-four (24) hours per day, seven (7) days per week – referred to as “24/7” and “24x7”.
10. Removes “affirmative defense” for possession of marijuana in excess of allowable amounts (this was the key issue for law enforcement and would have allowed for patients to be in possession of amounts greater than statute permits).
11. Permits but does not mandate appropriate health care providers to assist registered patients in the administration of medical marijuana.
12. Requires the Department of Human Services (DHS) to create an advisory committee on medical marijuana to replace the existing administrative work group.