

# Groundwater Reflections

Volume 35, Issue 4, Winter 2016



Winter 2016 Newsletter:  
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## CGA MOVES TO SACRAMENTO

On December 7, CGA closed its office in Santa Rosa. With able assistance from President Ron Hedman, CGA staff packed all records in boxes, donated usable office materials to a local charity, and transported everything to Sacramento.

For a good part of this year, CGA has been planning its office relocation to Sacramento. It is hoped that by being close to the capitol, your association will have greater influence on groundwater-related legislative issues. Additionally, Executive Director John Hofer, and office staff Bev Haley and Renee Hofer are stepping down. They will be replaced by an association management team from Smith Moore & Associates (SMA), with Elizabeth Cardwell as Executive Director.

Change is always daunting. For over 25 years, CGA has had an Executive Director and staff situated in an office on Mendocino Avenue in Santa Rosa. We have enjoyed the convenience of having the same phone number and P.O. Box. That consistency has created a strong sense of stability for the association. Now CGA is not only moving its location and changing its phone number and mailing address, but members will have to learn entirely new contact people.

This change, however, will not be negative. In reality, SMA will be the all-inclusive provider for all of our association needs. They will have the in-house expertise to plan our Board meetings and Conventions,

facilitate our educational activities, manage our web site, provide legislative advocacy and bookkeeping services, as well as developing personal lines of communication with members including publication of Groundwater Reflections.

There seems little doubt that with this change, association operations will be more efficient over the coming year as SMA becomes more familiar with CGA. We look forward to writing the next chapter of CGA's long history at its new home in California's capitol.

**California Groundwater Association**  
700 R Street, Suite 200  
Sacramento, CA 95811  
Phone: (916) 231-2134

## CGA HOLDS SUCCESSFUL CONVENTION

Those who attended the 68<sup>th</sup> annual Convention and Trade Show held recently at the Peppermill Resort Spa Casino, were not disappointed. Despite higher overall costs and a slowing of the drilling industry, over 400 attendees enjoyed 78 booths and rig displays on the show-room floor. The Americana theme was visible throughout the venue, and added to the general good feeling of the event.



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# DATES TO REMEMBER 2017

- FEB. 8, 2017 - WATER WELL CONSTR WORKSHOP**  
Doubletree by Hilton Sacramento, CA
- FEB. 9, 2017 – DAY AT THE CAPITOL**  
Doubletree by Hilton Sacramento, CA
- FEB. 10-11, 2017 - BOARD OF DIRECTORS MEETING**  
Doubletree by Hilton Sacramento, CA
- MAY 4, 2017 - WATER WELL CONSTR WORKSHOP**  
TBD
- MAY 5-6, 2017 - BOARD OF DIRECTORS MEETING**  
Tenaya Lodge at Yosemite, Fish Camp, CA
- SEPT. 7, 2017 - WATER WELL CONSTR WORKSHOP**  
TBD
- SEPT. 8-9, 2017 - BOARD OF DIRECTORS MEETING**  
Disneyland Hotel, Anaheim, CA
- OCT. 19-21, 2017 - CGA 69<sup>th</sup> ANNUAL CONVENTION & TRADE SHOW**  
Grand Sierra Resort & Casino, Reno, NV

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## CGA President's Message

By Ron Hedman

Thank you for 2016.

The convention was a success and it could not have been done without you! Golf, Jenga, Gaming, and Americana themed! Thank you for everyone's participation.

Thank you to the CGA Executive Board: Mike Maggiora, Mike Meyer, Dave Fulton, Mike Guardino. It's been a great year.

Thank you Randy Delenikos for all your hard work and wish you continued success.

As President, I have three goals for 2017. I am seeking your help in coming up with ideas, solutions, directions to the following:

1. Each branch meet at minimum once a year.
2. CARB – All of us, both large and small companies are impacted one way or another.
3. Legislation – having the voice of our industry be heard.

Feb 9<sup>th</sup> is the Day at the Capitol with the Board meetings following on Friday and Saturday, Feb 10 and 11 in Sacramento.

I challenge all members and non-members to come talk with our legislature, flood the halls with our presence, share our concerns, be a voice, be stronger in numbers. It's a goal to have over 100 participating. Show that CGA supporters are present and accounted for and noticed at our capitol. We can't reach our goals without your support! Thank You!

I look forward to working with Manufacturers and Suppliers. You are CGA blood and keep new products and ideas in front of us.

The CGA office will be moved to Sacramento as of January 1<sup>st</sup> 2017.

If you have any suggestions for goals for CGA, the Executive Board will be meeting Jan 9, 2017 to plan and set goals for the new year.

CGA will keep you informed throughout 2017. Looking forward to another great year.

Ron



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## CGA Executive Director's Message

By John Hofer

Three years ago, I embarked on the daunting task of replacing CGA's long-time Executive Director. I mentioned at the time that most change was not welcomed with enthusiasm, particularly if its impact was direct. Presumably, most of the association has become accustomed with Bev, Renee, and I manning the office, but now once again, CGA is facing some major changes.

At the end of this month, the office will be relocated to Sacramento, and the organization operations will be handled by an association management team, Smith Moore & Associates (SMA) – CHANGE! Not only will the voices on the phone be unfamiliar, but even the phone number will be different – MORE CHANGE! The good news is that these changes will eventually be in CGA's best interest. It will, however, take some time for CGA and SMA to adjust to each other. With everyone working together, our association promises to grow and become a greater influence in our industry.

As for myself, this latest change is not entirely unwelcome. Although I will miss the challenge of dealing with the day to day operations of CGA, I look forward to a somewhat slower pace. We still plan to be counted among the CGA community, but Renee and I will relish attending association events to see long-time friends without having the added burden of responsibility.

When I began this challenge, the country was just emerging from a recession and the California drought was reaching epic proportions. I felt that my greatest responsibility was to help steer CGA to a more relevant influential position in the industry, while growing its flagging finances. After three years, with some significant setbacks, I can say that we were, for the most part, successful. CGA is moving to have a greater legislative presence in Sacramento, and we now have working capital with which to grow.

As always, any great challenge doesn't end successfully without support from family and friends. To those who listened and advised when the times were most difficult, I will be forever indebted. Problems really can be diminished or even solved over golf, scotch, or cigars!

My great friend Bev Haley and my loving wife Renee, who have labored under the worst conditions during the last half of my tenure, have been a constant source of inspiration. I can only hope that my frustrations and impatience were not taken too seriously. Without their support and dedication, I doubt that this story would have had a happy ending.

John

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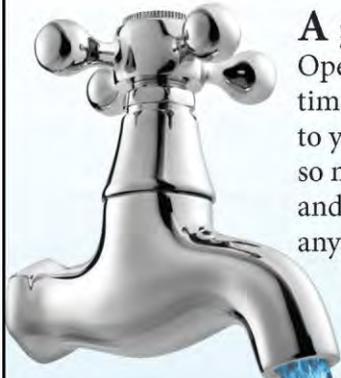
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## CGAA President's Message

By Vicky Hedman

The year sailed and CGAA rode the tailwinds. To the women of CGAA, you are smart, you are kind and so important. Thank you for making life in CGAA a win. Our 2016 Convention unfolded as planned and through your hard work all year long, we reaped the benefits of your continued contributions of time, creativity, open discussions and then agreeing on direction. What a fabulous group of women. Your convention luncheon this year and all the 'unseen' efforts required do not go unnoticed.

To the officers, members, and friends of 2016 I applaud you for a year well done.

Thank YOU to our CGAA board members for your tireless work.

- Keri Greenwood = Vice President / aka volunteer Goddess / or is it that we all stare at her until she does it...
- Stephanie Mickelson = Treasurer / Does all minutes at all committee meetings, no kidding and forever / helps me when I get stuck with conducting our board meetings and directs me with small nods and winks. Oh, and the money.
- Margaret Fulton = Treasurer/Secretary / our 'YES I CAN' girl!!
- Nicole Guardino = Secretary / Mother / How do you get it all done?
- Renee Hofer = Photographer / Executive Staff / Mecca Supporter
- Karen Weimer = Historian / Comedian / My personal Secret Keeper
- Kathy Rottman = Woman of the Year / Our Passionate Research analyst and Spokesperson / Speaker
- Joan Daugbjerg, M/S representatives my gal pal, you will see her taking care of anything and everything.
- Judy Delenikos = M/S representatives, Great support and holds our secret jar.
- Joan Murphy, Kelly Doherty, Bev Haley, Marisa Montes, Jeannie and Eileen Landino, Jeannie Meyer, Joanne Maggiora, Sinary San, Helen Wilson, Sue Laughlin, Pat Thompson, Georgette Haley, we have worked together, ate, drank and life is better with you in it. All CGAA Goddesses!!!
- All women...

It is a wrap for 2016. John and Renee Hofer, Bev and Pat Haley - Words can never describe how much I appreciate all that you have done for me personally. In true fashion, your professional and personal caring made the year a success. Thank You!

Vicky

## CGA Welcomes New Members

Since the last issue, CGA has added 9 new or returning members:

**All Well Abandonment**, Rancho Cordova, CA  
**Bill Johnson Equipment Co.**, Phoenix, AZ  
**CAL AQUA**, Vacaville, CA  
**Clarion Pacific Insurance**, Santa Cruz, CA  
**Grimmer Precision Sheetmetal, Inc.**, Gilroy, CA  
**Smith Power Products, Inc.**, Sparks, NV  
**Tryad Service Corporation**, Shafter, CA  
**Tylor McMillan's Well Service, LLC**, Bakersfield, CA  
**Water Well Repair, Inc.**, Bakersfield, CA

When you meet any of these folks, please extend some CGA hospitality!



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Joe Beloso (Northern & Central CA)  
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## CGA Holds Successful Convention

Continued from Page 1

The fourteen educational sessions, including a craft beer



tasting, were among the highest attended in recent memory. Helped by phenomenally great weather, the annual golf tournament at

LakeRidge Golf Course set the tone for the entire convention. The gaming events were, as always, enjoyed

by all participants. The newest event, Game Night at the Edge nightclub, with its good food, drink, and rousing



Jenga matches, was an unqualified success.

## Tournament Winners

### Golf

1st Place:

Jay Cole, Josh Henry,  
Kim Jensen, and Andy Johnson

2nd Place:

Rod Henderson, Mark Maggiora,  
Dennis Quindt, and Tim Schmidt

Last Place:

Joan Daugbjerg, Kelly Doherty,  
Erik Lowe, and J.P. O'Leary

Closest to the Pin-Men:

Kellen Kayla

Longest Drive-Men:

Mark Maggiora

Longest Drive-Women:

Kelly Doherty

### Texas Hold 'Em

1st Place – Kelly Doherty

2nd Place – Dan Hedman

3rd Place – Mike Maggiora

### Blackjack

1st Place – Dennis Quindt

2nd Place – Joanne Maggiora

3rd Place – Ted Ogilvie

See more pictures on Pages 11 and 13

# WE DO WATER WELL.

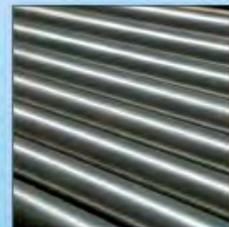
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**Insurance Corner**  
By Bob Murphy, CIC

**Marijuana Considerations in Workers' Compensation**

By: Michael Erdil MD, FACOEM  
From AIG Medical Advisor 4<sup>th</sup> Quarter, 2016

**Introduction**

Marijuana has been used for its reported medical and mood altering properties for centuries. While there is a limited amount of evidence regarding the efficacy of marijuana and related substances for select medical conditions like HIV wasting, nausea and vomiting due to chemotherapy, and pain and spasticity due to multiple sclerosis, the medical evidence for other uses is a subject of debate. Despite the limited amount of evidence-based research regarding medical efficacy, several states and the District of Columbia have adopted regulations to permit use of medical marijuana. In



<https://www.drugabuse.gov/publications/drugfacts/marijuana>

addition, a few states and the District of Columbia have passed laws to permit some form of recreational use. These changes in public attitudes and regulatory changes in select states have resulted in the need for workers' compensation systems to adopt guidelines regarding marijuana use in workers' compensation, and for employers to implement policies and procedures pertaining to marijuana use in the workplace. The focus of this newsletter is to provide an overview of considerations regarding marijuana in workers' compensation and employment settings.

**Trends**

Marijuana is the most commonly used illicit drug in the U.S., with estimates that over 18 million individuals over age 12 years used marijuana in the past month, and perhaps five million use marijuana almost daily (<https://www.whitehouse.gov/ondcp/frequently-asked-questions-and-facts-about-marijuana#trends>). A Pew Research Center study estimated that 48 percent of adults have tried marijuana at some point in their lives, with 12 percent doing so in the last year and 7.3 percent in the past month (<http://www.pewresearch.org/daily-number/marijuana-use-increased-over-the-last-decade/>).

*Continued on Page 19*

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## LEGISLATIVE REPORT

By Pete Conaty  
Legislative Advocate

### Save the Date: CGA Day at the Capitol

FEBRUARY 9, 2017 • All Day

The CGA's Annual Day at the Capitol event will be in Sacramento on February 9, 2017. More details to follow as the event draws nearer. Since the 2017-18 Legislative Session begins in January, there will be newly elected legislators to meet and brief on what CGA does.

Please mark the date in your calendars and prepare to come to the State Capitol for this important all day event.

The Sustainable Groundwater Management Act (SGMA), the drought, CARB, and well standards will continue to be key issues for CGA. As is the case in any legislative session, there will be unforeseen legislation, regulatory actions, and program implementation that may affect CGA and would need to be supported, opposed, or watched.

### Bulletin 74

Since our bill to update well standards, SB 995-Pavley, failed in the Assembly Appropriations Committee, I have been working with the Governor's office to get

them to include the funding for the Bulletin 74 update in the Governor's Budget. I have also been working with DWR on the issue and have submitted an official letter requesting this funding be made available. I am cautiously optimistic funding for the Bulletin 74 rewrite will be included in the Governor's Budget which will be released in early January.

The Legislative Analyst's Office (LAO) announced earlier this week that they have a positive outlook for the state's fiscal well-being in the near term. The LAO, estimates the state could end the 2017-18 fiscal year with \$11.5 billion in total reserves. This total includes \$2.8 billion in discretionary reserves, which the Legislature can appropriate for any purpose.

If the funding is in the Governor's budget, then we must still continue to fight to preserve that funding while the Legislature makes its adjustments to the budget.

If it is not in the budget, we will need to introduce legislation. Either way, it is imperative that CGA members attend the Day at the Capitol event so that we can educate and inform legislators and staff on the importance of updated well standards.

### Bob Reeb

Bob Reeb, well known water lobbyist, whom most of you got to meet at the Reno convention, will be assisting Pete Conaty & Associates on all water issues.



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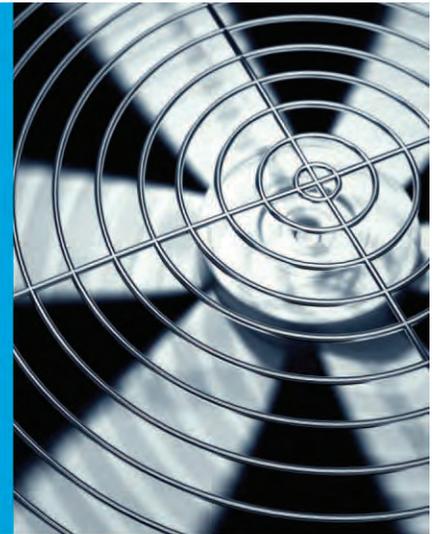
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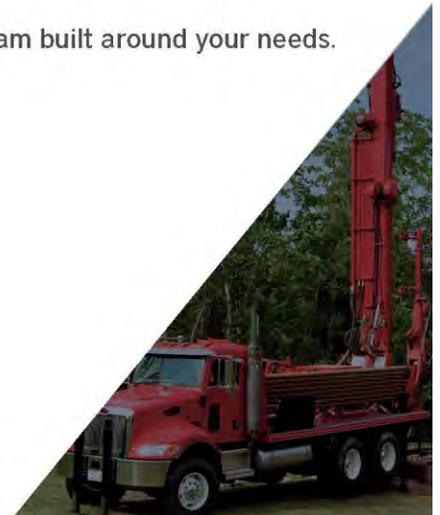
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1937 REO Speedwagon



Scholarship Winner Elias Juarez With His Folks



CGA's Head Table



Laura Perry Enthralls Banquet Attendees With Stories of Antarctica



Blackjack Tournament Nervousness



NGWA President Todd Hunter Addresses the Banquet



A Successful Auction Purchase



## Employee Benefits

By Kelly Doherty

### CGA - CBX Open Enrollment Is Here!

It is now Open Enrollment for the California Builders Exchanges ancillary benefit program.

Good News - **NO Rate Increases** for ANY Plans in 2017!

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## ANNUAL AWARD WINNERS

Awards for 2016 were presented at the annual awards banquet during the convention and trade show last October. These awards honor deserving individuals who have made extraordinary contributions to CGA and the groundwater industry.

### Contractor of the Year – J.D. Doshier Award

The Contractor of the Year was presented to Bruce Hunter by fellow Fresno Branch member Twyla Moline. Bruce operates Well Spy, a division of Sam Jorgensen Pump Co. Inc. in Reedley, California. He is a CGA past-president and has been involved in the association for many years.



### Mfg./Supplier of the Year – Harry Bingham Award

Dave Landino presented this year's Harry Bingham award to Craig Newman of Newman Well Surveys of Salinas, California. Craig has been providing electrical logging services within the Central Coast Branch for many years. Although he was unable to attend, his award was well-received by those in attendance.



### Woman of the Year

Anita Tullis, owner of Quick Tanks, Inc. of Kendallville, Indiana was honored as the 2016 Woman of the Year. Kathy Rottman presented the award to a long-time member who journeys from Indiana almost every year to attend our convention.



## Legislators of the Year

Two legislators were honored this year at the annual banquet. CGA Legislative Committee Co-Chair Larry Rottman presented the awards in absentia to Senator Fran Pavley (D-Agoura Hills) for her work on the Bulletin 74 update, and to Assemblymember Tom Lackey (R-Palmdale) for his assistance on proposed new CARB regulations.



## DAY AT THE CAPITOL

CGA will hold its annual Day at the Capitol on February 9, 2017. As Pete Conaty indicated in his remarks on page 9, this event presents an opportunity for members to interact with their legislative representatives and discuss issues of prime importance to CGA. This will be an extremely important year for CGA to introduce ourselves to new legislators particularly since we have



just relocated to Sacramento. Additionally, should funding for Bulletin 74 revision not be included in Governor Brown's budget for 2017, renewed efforts to pass legislation requiring this important update will need to be initiated.

Accommodations have been arranged at the Doubletree by Hilton Sacramento, 2001 Point W Way, Sacramento, CA 95815. Reservations can be made by calling the hotel at (800) 344-4321. The deadline for the room block is January 18, 2017.

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2016 has been another great year for event sponsorships. During the course of the year, CGA's membership, representing all three divisions, very generously chose to augment increasing costs with numerous sponsorships. It is with deep gratitude that your association recognizes the following sponsors:

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## FEBRUARY BOARD MEETING RESERVATION DEADLINE

The initial CGA events of 2017, the Water Well Construction Workshop, Day at the Capitol, and the Board of Directors Meeting, take place in Sacramento on February 8 through 11. Accommodations have been arranged at the Doubletree by Hilton Sacramento, 2001 Point W Way, Sacramento, CA 95815 Reservations can be made by calling the hotel at (800) 344-4321. The deadline for the room block is January 18, 2017.

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## Marijuana Considerations in Workers' Compensation

Continued from Page 8

These estimates are similar to those from the National Survey on Drug Use and Health (see fig 1).

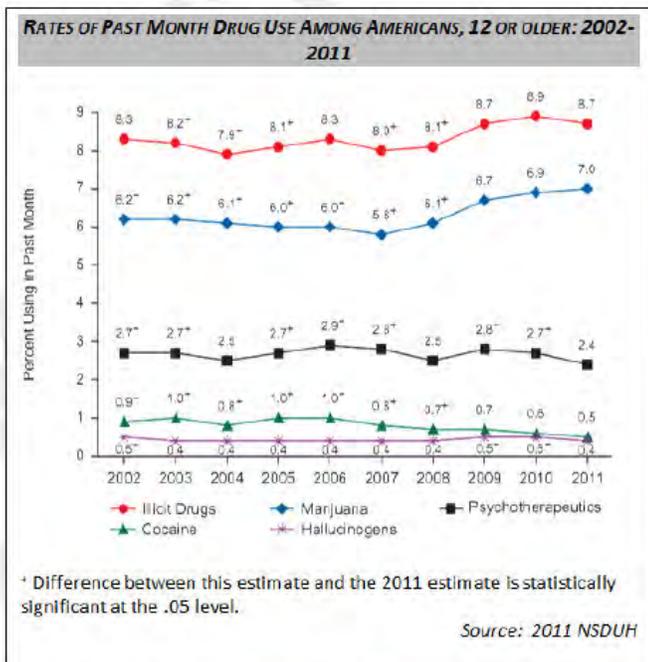


Figure 1: <https://www.whitehouse.gov/ondcp/frequently-asked-questions-and-facts-about-marijuana#trends>

A press release from Quest Laboratories in 2014 reported that 2.1 percent of U.S. workplace drug tests were positive for marijuana, with rates of positive tests significantly higher in states with legalized recreational marijuana such as Colorado (20 percent) and the State of Washington (23 percent)

(<http://newsroom.questdiagnostics.com/2014-09-11-Workforce-Drug-Test-Positivity-Rate-Increases-for-the-First-Time-in-10-Years-Driven-by-Marijuana-and-Amphetamines-Finds-Quest-Diagnostics-Drug-Testing-Index-Analysis-of-Employment-Drug-Tests>).

These observations reflect changes in public attitude towards marijuana. This includes a recent increase in public support for legalizing marijuana, with the Pew Research Center noting 53 percent of Americans now supporting legalization (<http://www.pewresearch.org/fact-tank/2015/04/14/6-facts-about-marijuana/>). Thus it is no surprise that several states have adopted regulations supporting marijuana for medical and recreational use, with some states changing their laws to decriminalize use in some settings.

## Regulations

The U.S. Department of Justice classifies marijuana as a Schedule I drug under the Controlled Substances Act based upon the lack of accepted medical use and high risk for abuse ([http://www.dea.gov/docs/marijuana-position\\_2011.pdf](http://www.dea.gov/docs/marijuana-position_2011.pdf)). Thus workers covered by federal drug testing programs are prohibited from using marijuana at any time for any reason, and users may be subject to disciplinary action. This includes safety sensitive workers such as commercial drivers, pilots, aircraft maintenance workers, and railroad and marine operators as well as federal workers covered by the Drug Free Workplace Act.

To date, the U.S. Food and Drug Administration (FDA) has not approved botanical marijuana for any indication. However, the FDA has approved Marinol, a synthetic, pharmaceutical formulation including the active ingredient in marijuana (dronabinol, a synthetic delta-9-tetrahydrocannabinol or THC), as well as Cesamet containing an agent that mimics THC (synthetic nabilone, a cannabidiol) for therapeutic uses including for the treatment of anorexia associated with weight loss in AIDS patients, and nausea and vomiting due to chemotherapy for cancer (<http://www.fda.gov/newsevents/publichealthfocus/ucm421168.htm>).

As noted, changes in public attitudes regarding marijuana have resulted in a number of states passing legislation regarding marijuana use that conflict with federal law. As of this date, 24 states and the District of Columbia permit use of medical marijuana. Four states and the District of Columbia permit some form of recreational use of marijuana (see fig 2).



Figure 2: <http://www.governing.com/gov-data/state-marijuana-laws-map-medical-recreational.html>

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## ***Marijuana Considerations in Workers' Compensation***

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Information on the status of medical and recreational marijuana use is available from the following web sites: <http://www.-governing.com/gov-data/state-marijuana-laws-map-medical-recreational.html> and <http://www.ncsl.org/-research/health/state-medical-marijuana-laws.aspx>.

Given these conflicting state and federal positions, employers should confirm that their policies and procedures comply with regulatory requirements while maintaining a safe work environment.

### **Mechanism of Action and Routes of Use**

Marijuana (cannabis sativa plant) contains a number of compounds called cannabinoids. Delta-9-tetrahydrocannabinol (THC) is the major psychoactive compound (changing brain chemistry and thus affecting mood, perception, alertness, etc) and results in the “high” from marijuana. Other components in the marijuana plant include Cannabinol or Cannabidiol, substances that have weak or absent psychoactive properties.

Marijuana can be consumed via several routes of exposure, comes in botanical (cultivated) and synthetic (pharmacologic) forms, and can be obtained from legal (dispensaries) and illicit sources. Users can inhale marijuana by smoking and vaporizing cannabis. Marijuana comes in pill form and can be made into tinctures or edibles for oral consumption. There are also topical applications, though it is unclear that there is sufficient absorption to be effective. Pharmacologic pill forms with quality controlled formulations are only available in the U.S. as Marinol and Cesamet. Of concern, the percentage of psychoactive THC can vary significantly from one type of plant to another among medical marijuana dispensaries, and can result in variable doses consumed and effects experienced. In addition, researchers have observed trends of increased potency of marijuana plants over time, with average THC concentration 3.4 percent in 1993 vs. 12.3 percent THC concentration in 2012. Thus current users experience increased intensity of marijuana psychoactive effects in comparison to users in the past (<http://www.pbs.org/-newshour/updates/pot-getting-potent/>).

### **Effects**

The effects from marijuana use depend on acute vs. chronic use, potency (THC concentration), dose, route

of administration, prior experience, use of other agents that effect brain function including drugs and alcohol, medical conditions, and other factors. Smoking marijuana results in immediate effects that peak in approximately one hour and last approximately three to four hours, or more, though impairment for some activities including driving can last six hours to as many as 24 hours. Oral use has a longer time between consumption and onset of effects, perhaps 30 minutes. The effects after oral consumption may, at times, be less prominent than with smoking, though the duration may be longer. Users of edibles may therefore have more difficulty titrating effects due to the delayed onset. Chronic users may develop tolerance and experience less impairment than occasional users.

Symptoms experienced using marijuana can include euphoria or “high”; relaxation and sedation; altered time and space perception, altered senses, increased appetite; lack of concentration, confusion, impaired learning and memory; loss of balance; hallucination and psychosis; tolerance, dependence, and with long term heavy use, withdrawal symptoms that can include symptoms of anxiety, irritability, and insomnia.

### **Evidence for Medical Efficacy**

Marijuana has been stated to have benefits to treat a number of medical conditions. However, the evidence for many of these claims has not been supported by medical literature. Two recent reviews published in the Journal of the American Medical Association made the following conclusions:

- “There was moderate-quality evidence to support the use of cannabinoids for the treatment of chronic pain and spasticity. There was low-quality evidence suggesting that cannabinoids were associated with improvements in nausea and vomiting due to chemotherapy, weight gain in HIV infection, sleep disorders, and Tourette syndrome. Cannabinoids were associated with an increased risk of short-term AEs” (adverse effects) (see Cannabinoids for Medical Use A Systematic Review and Meta-analysis. <http://jama.jamanetwork.com/article.aspx?articleid=2338251>); and
- “Medical marijuana is used to treat a host of indications, a few of which have evidence to support treatment with marijuana and many that do not. Physicians should educate patients about medical marijuana to ensure that it is used

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## ***Marijuana Considerations in Workers' Compensation***

*Continued from Page 20*

appropriately and that patients will benefit from its use” (see *Medical Marijuana for Treatment of Chronic Pain and Other Medical and Psychiatric Problems: A Clinical Review*.

<http://jama.jamanetwork.com/article.aspx?articleID=2338266>).

There are several points that need to be made regarding these conclusions:

- Many studies evaluating marijuana for chronic pain were short term and involved small numbers of individuals, with the exception of studies involving chronic pain and spasticity due to multiple sclerosis. Many studies used pharmaceutical forms of cannabinoids with predictable dosing. In contrast to other medications, medical marijuana dispensaries are not overseen by the FDA to insure dosing, quality, and safety of dispensed products. Thus it is difficult to make conclusions from limited research studies regarding the long term efficacy and safety of treating medical conditions, including chronic pain, using products from medical marijuana dispensaries. In addition, state policies covering the issuance of medical marijuana certificates vary by state.
- Several medical associations have expressed concern regarding medical marijuana use at this time. The American Academy of Neurology issued a position statement noting: “The current medical marijuana legislation being passed by policymakers across the country, which promotes marijuana-based products as treatment options for various neurologic disorders, is not supported by high-level medical research. In addition, there is concern regarding the safety of marijuana-based products, especially for long term use in patients with disorders of the nervous system. The interaction of these compounds with prescription medications is also unknown. Therefore, further research is urgently needed to determine the safety and medical benefit of various forms of marijuana in neurologic disorders, especially those where anecdotal evidence is available. Anecdotal evidence may engender public support for the use of these products but such evidence must be substantiated by rigorous research, which will in turn inform legislative policy.” (<https://www.aan.com/>

[uploadedFiles/-Website Library Assets/Documents/6.Public Policy/1.Stay Informed/2.Position Statements/3.PDFs of all Position Statements/Final%20Medical%20Marijuana%20Position%20Statement.pdf](#))

- The American Society of Addiction Medicine offered the following comments: “In light of the evolving legal landscape surrounding cannabis in the United States, which is giving rise to increased availability and use of cannabis and cannabis products, ASAM’s viewpoint is that it is imperative that Americans promote and adopt public policies that protect public health and safety as well as protect the integrity of our nation’s pharmaceutical approval process, which is grounded in well-designed and executed clinical research. Currently, the legalization of cannabis in some states but not others provides a unique opportunity for a thorough investigation into the societal and public health impact of broader cannabis use. Such research is critical to inform other jurisdictions in how they can best protect and promote public health as they consider the legal status of marijuana use.” (<http://www.asam.org/docs/default-source/public-policy-statements/marijuana-cannabinoids-and-legalization-9-21-2015.pdf?sfvrsn=0#search=%22marijuana%22>)

At the present time, marijuana is not supported by national workers’ compensation treatment guidelines including the American College of Occupational and Environmental Medicine Occupational Medicine Practice Guidelines, and the ODG Treatment in Workers’ Comp Guidelines. Therefore, marijuana is generally not supported to treat work injuries, though a small number of states have had workers’ compensation or court rulings approving marijuana in some cases.

### **Side Effects and Risks**

Potential adverse effects from acute use of marijuana can include drowsiness, slowed reaction time, altered balance and coordination, as well as difficulty with learning and memory, impairment for driving that can last more than six to as many as 24 hours after acute use. The risk of motor vehicle accident has been estimated to be from two to six times greater in individuals who use marijuana (<http://www.ncbi.nlm.nih.gov/pubmed/19837255>). Acute psychological side effects can occasionally include hallucinations, anxiety, panic, and psychosis (<https://www.drugabuse.gov/drugsabuse/commonly-abused-drugs-charts#marijuana>).

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## Marijuana Considerations in Workers' Compensation

Continued from Page 21

Use in conjunction with other sedating medications like opioid pain relievers, benzodiazepines, or alcohol can further increase slowed mental function and reaction time.

Long term use has been associated with a number of potential adverse effects including heart and lung problems, memory and psychomotor issues, mental health disorders, as well as dependence, withdrawal symptoms, and addiction risks. Acute smoking of marijuana is associated with transient increases in blood pressure and pulse and a decrease in oxygenation. Some studies have suggested an increased risk of heart attack up to four to eight times in the initial hour after smoking marijuana. Chronically, the risk of death due to cardiovascular disease is estimated to be increased two to five times, with greater risk in more frequent smokers.

Chronic smokers of marijuana report more symptoms of wheezing, chronic cough, and sputum production. Smoking marijuana produces many of the harmful chemicals noted in cigarette smoke, though it is unclear if smoking marijuana increases the risk of emphysema or lung cancer. Chronic use of marijuana has been observed to be associated with impairment of learning, attention, and memory, occurring more commonly with more frequent and longer term use. There is evidence of increased risk of developing psychosis and possibly schizophrenia in chronic marijuana users, especially when use begins before age 18 years. Regular marijuana use may increase symptoms of psychosis, depression, and bipolar disease in some individuals. (<http://www.ncbi.nlm.nih.gov/pubmed/19837255>) (<https://www.whitehouse.gov/ondcp/frequently-asked-questions-and-facts-about-marijuana#trends>)

Substances for Which Most Recent Treatment Was Received in the Past Year among Persons Aged 12 or Older: 2011

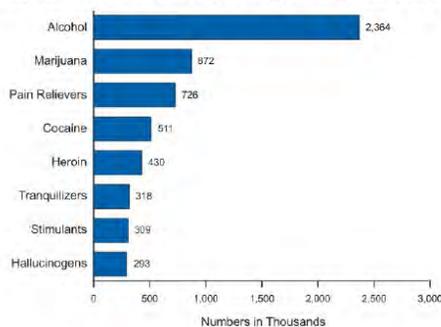
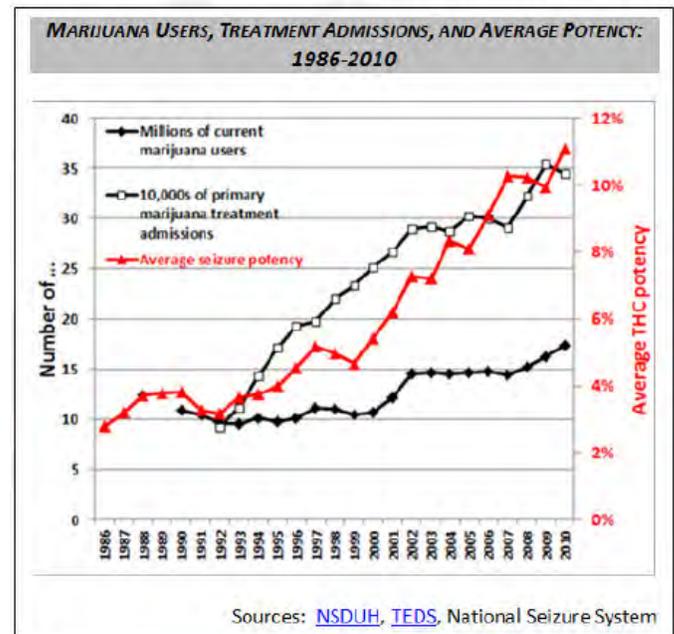


Figure 3: <http://archive.samhsa.gov/data/NSDUH/2k11Results/NSDUHresults2011.htm>

Long term marijuana use is associated with increased risks for dependence, estimated at approximately nine percent of chronic adult users, and up to 17 percent of chronic users who initiated use as an adolescent.

Treatment admissions for marijuana have risen significantly in the past few decades, with reports that in 2011, up to 872,000 Americans age 12 years or older received treatment for marijuana use, more than any other illicit drug (see fig 3).

This increase in admissions for marijuana coincides with, and may result from the sharp rise in the potency of marijuana (<https://www.whitehouse.gov/ondcp/frequently-asked-questions-and-facts-about-marijuana#trends>) (see fig 4).



Sources: [NSDUH](http://www.nsdh.gov), [TEDS](http://www.teds.gov), National Seizure System

Figure 4: <https://www.whitehouse.gov/ondcp/frequently-asked-questions-and-facts-about-marijuana#trends>

### Work-related Considerations

Employers are faced with addressing the issues of medical and recreational marijuana, where permitted, complying with applicable state and federal regulations regarding marijuana use, while maintaining a safe work environment.

To help employers make workplace decisions, the American College of Occupational and Environmental Medicine released guidance regarding workplace use of marijuana. The notice of release is available at: <http://datia.org/datia/eNews/AAOHN&ACOEM.pdf>. According to the release, "The guidance includes detailed

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## ***Marijuana Considerations in Workers' Compensation***

*Continued from Page 22*

examination of current workplace drug-testing trends and best practices. The authors conclude by offering eight recommendations for employers, ranging from suggestions for effective drug-testing and employee-education programs to policies regarding off-work use of marijuana." The full text of the article is available through the Journal of Occupational and Environmental Medicine at the following web site:

[http://journals.lww.com/joem/Fulltext/2015/04000/Marijuana\\_in\\_the\\_Workplace\\_Guidance\\_for.17.aspx](http://journals.lww.com/joem/Fulltext/2015/04000/Marijuana_in_the_Workplace_Guidance_for.17.aspx).

The article makes the following recommendations:

- Employers need to evaluate legal implications of federal and state regulations and have policies and procedures to comply with all applicable regulations.
- Employers covered by the Drug-Free Workplace Act must adopt and publish policies, specify actions for employees who violate the policies, and provide workplace education about drug use dangers and available support programs.
- Drug testing policies need to comply with applicable state and federal regulations and hiring decisions must comply with the Americans with Disabilities Act, and any other applicable federal and state statutes.
- Marijuana use is not permitted for any safety-sensitive worker covered by U.S. Department of Transportation drug testing programs (e.g. commercial motor vehicle operators, pilots, and covered aircraft maintenance personnel, etc.).
- Regarding state marijuana laws, ACOEM notes that "Although state laws vary, laws regulating marijuana require employers neither to permit drug use in the workplace nor to tolerate employees who report to work impaired. For this reason, employers may institute drug-free-workplace policies to help ensure that employees come to work in an unimpaired state and do not endanger themselves or others while working." Legal advisors should help employers adopt or make certain that their policies address use of medical and recreational marijuana, avoid having employees work while impaired, and comply with applicable laws.
- Employers need to have policies and procedures to evaluate potential impairment. ACOEM also notes the following recommendations:

- "A medical review officer (MRO) and other occupational health professionals should be included, with legal counsel, in discussions about company policy or individual use of marijuana."
- "Specific guidelines regarding testing for post-accident and possible impairment assessments should be developed and explained to employees." Guidelines for fitness for duty need to include decision making in states with medical and recreational marijuana.
- "The occupational health provider should work with site management to assess risk based on the safety-sensitive nature of the job. Considerations of workplace safety in the context of the underlying medical condition for which marijuana has been recommended may also be appropriate."

### **Conclusion**

Marijuana continues to be prohibited for medical or recreational use according to the federal government. However, 24 states and the District of Columbia have now enacted medical marijuana regulations, and four states permit recreational marijuana use within certain parameters. There is some research of efficacy of marijuana to treat nausea and vomiting due to chemotherapy, weight loss from HIV infection, and pain and spasticity in patients with multiple sclerosis. However, research with regard to the efficacy to treat other conditions is less clear, and there has been limited research with regard to the use of medical marijuana in relation to state programs. There are potential significant short and long term side effects of marijuana use.

The treatment of work injuries with marijuana is generally not supported by medical evidence. Employers need to be aware of specific rulings in select states that have required payors to cover marijuana to treat symptoms due to a work injury. Employers also need to make sure that they have policies and procedures to ensure having a safe work environment that complies with applicable federal and state laws regarding marijuana in addition to their comprehensive program to address drug testing and chemical impairment.

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## ***Marijuana Considerations in Workers' Compensation***

*Continued from Page 23*

### **Resources**

Additional resources are available at the following sites:

The National Institute on Drug Abuse has a web site describing marijuana statistics and trends, latest science, news releases and related resources including educational resources. Their web site is at <https://www.drugabuse.gov/drugs-abuse/marijuana>.

The Office of National Drug Control Policy has a Marijuana Resource Center containing general information and links to a Marijuana FAQ, State Laws related to Marijuana and The Public Health Consequences of Marijuana Legislation. This information is available at the following web site: <https://www.whitehouse.gov/ondcp/marijuanainfo>.

For more information email us at [mms@aig.com](mailto:mms@aig.com).

### **MEMBERSHIP RENEWALS**

Membership renewals for 2017 will be sent out by Smith Moore & Associates early in January. This is somewhat later than in the recent past, due to the change in office staffing and the move to Sacramento.

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