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Executive Summary

Purpose

Rocky Mountain High Intensity Drug Trafficking Area (RMHIDTA) is tracking the impact of marijuana legalization in the state of Colorado. This report will utilize, whenever possible, a comparison of three different eras in Colorado’s legalization history:

- **2006 – 2008:** Medical marijuana pre-commercialization era
- **2009 – Present:** Medical marijuana commercialization and expansion era
- **2013 – Present:** Recreational marijuana era

Rocky Mountain HIDTA will collect and report comparative data in a variety of areas, including but not limited to:

- Impaired driving and fatalities
- Youth marijuana use
- Adult marijuana use
- Emergency room admissions
- Marijuana-related exposure cases
- Diversion of Colorado marijuana

This is the fifth annual report on the impact of legalized marijuana in Colorado. It is divided into ten sections, each providing information on the impact of marijuana legalization. The sections are as follows:

Section 1 – Impaired Driving and Fatalities:

- Marijuana-related traffic deaths when a driver was positive for marijuana more than doubled from 55 deaths in 2013 to 123 deaths in 2016.

- Marijuana-related traffic deaths increased 66 percent in the four-year average (2013-2016) since Colorado legalized recreational marijuana compared to the four-year average (2009-2012) prior to legalization.
  - During the same time period, all traffic deaths increased 16 percent.
• In 2009, Colorado marijuana-related traffic deaths involving drivers testing positive for marijuana represented 9 percent of all traffic deaths. By 2016, that number has more than doubled to 20 percent.

Section 2 – Youth Marijuana Use:

• Youth past month marijuana use increased 12 percent in the three-year average (2013-2015) since Colorado legalized recreational marijuana compared to the three-year average prior to legalization (2010-2012).

• The latest 2014/2015 results show Colorado youth ranked #1 in the nation for past month marijuana use, up from #4 in 2011/2012 and #14 in 2005/2006.

• Colorado youth past month marijuana use for 2014/2015 was 55 percent higher than the national average compared to 39 percent higher in 2011/2012.

Section 3 – Adult Marijuana Use:

• College age past month marijuana use increased 16 percent in the three-year average (2013-2015) since Colorado legalized recreational marijuana compared to the three-year average prior to legalization (2010-2012).

• The latest 2014/2015 results show Colorado college-age adults ranked #2 in the nation for past-month marijuana use, up from #3 in 2011/2012 and #8 in 2005/2006.

• Colorado college age past month marijuana use for 2014/2015 was 61 percent higher than the national average compared to 42 percent higher in 2011/2012.

• Adult past-month marijuana use increased 71 percent in the three-year average (2013-2015) since Colorado legalized recreational marijuana compared to the three-year average prior to legalization (2010-2012).

• The latest 2014/2015 results show Colorado adults ranked #1 in the nation for past month marijuana use, up from #7 in 2011/2012 and #8 in 2005/2006.

• Colorado adult past month marijuana use for 2014/2015 was 124 percent higher than the national average compared to 51 percent higher in 2011/2012.
Section 4 – Emergency Department and Hospital Marijuana-Related Admissions:

- The yearly rate of emergency department visits related to marijuana increased 35 percent after the legalization of recreational marijuana (2011-2012 vs. 2013-2015).

- Number of hospitalizations related to marijuana:
  - 2011 – 6,305
  - 2012 – 6,715
  - 2013 – 8,272
  - 2014 – 11,439
  - Jan-Sept 2015 – 10,901

- The yearly number of marijuana-related hospitalizations increased 72 percent after the legalization of recreational marijuana (2009-2012 vs. 2013-2015).

Section 5 – Marijuana-Related Exposure:

- Marijuana-related exposures increased 139 percent in the four-year average (2013-2016) since Colorado legalized recreational marijuana compared to the four-year average (2009-2012) prior to legalization.

- Marijuana-Only exposures more than doubled (increased 210 percent) in the four-year average (2013-2016) since Colorado legalized recreational marijuana compared to the four-year average (2009-2012) prior to legalization.

Section 6 – Treatment:


- Over the last ten years, the top four drugs involved in treatment admissions were alcohol (average 13,551), marijuana (average 6,712), methamphetamine (average 5,578), and heroin (average 3,024).
Section 7 – Diversion of Colorado Marijuana:

- In 2016, RMHIDTA Colorado drug task forces completed 163 investigations of individuals or organizations involved in illegally selling Colorado marijuana both in and out of state.
  - These cases led to:
    - 252 felony arrests
    - 7,116 (3.5 tons) pounds of marijuana seized
    - 47,108 marijuana plants seized
    - 2,111 marijuana edibles seized
    - 232 pounds of concentrate seized
    - 29 different states to which marijuana was destined

- Highway interdiction seizures of Colorado marijuana increased 43 percent in the four-year average (2013-2016) since Colorado legalized recreational marijuana compared to the four-year average (2009-2012) prior to legalization.

- Of the 346 highway interdiction seizures in 2016, there were 36 different states destined to receive marijuana from Colorado.
  - The most common destinations identified were Illinois, Missouri, Texas, Kansas and Florida.

Section 8 – Diversion by Parcel:

- Seizures of Colorado marijuana in the U.S. mail has increased 844 percent from an average of 52 parcels (2009-2012) to 491 parcels (2013-2016) in the four-year average that recreational marijuana has been legal.

- Seizures of Colorado marijuana in the U.S. mail has increased 914 percent from an average of 97 pounds (2009-2012) to 984 pounds (2013-2016) in the four-year average that recreational marijuana has been legal.
Section 9 – Related Data:

- Crime in Denver increased 17 percent and crime in Colorado increased 11 percent from 2013 to 2016.

- Colorado annual tax revenue from the sale of recreational and medical marijuana was 0.8 percent of Colorado’s total statewide budget (FY 2016).

- As of June 2017, there were 491 retail marijuana stores in the state of Colorado compared to 392 Starbucks and 208 McDonald’s.

- 66 percent of local jurisdictions have banned medical and recreational marijuana businesses.

Section 10 – Reference Materials:

This section lists various studies and reports regarding marijuana.

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THERE IS MUCH MORE DATA IN EACH OF THE TEN SECTIONS. THIS PUBLICATION MAY BE FOUND ON THE ROCKY MOUNTAIN HIDTA WEBSITE; GO TO WWW.RMHIDTA.ORG AND SELECT REPORTS.
Introduction

Purpose

The purpose of this annual report is to document the impact of the legalization of marijuana for medical and recreational use in Colorado. Colorado serves as an experimental lab for the nation to determine the impact of legalizing marijuana. This is an important opportunity to gather and examine meaningful data and identify trends. Citizens and policymakers nationwide may want to delay any decisions on this important issue until there is sufficient and accurate data to make informed decisions.

The Debate

There is an ongoing debate in this country concerning the impact of legalizing marijuana. Those in favor argue that the benefits of removing prohibition far outweigh the potential negative consequences. Some of the cited benefits include:

- Eliminate arrests for possession and sale, resulting in fewer people with criminal records and a reduction in the prison population
- Free up law enforcement resources to target more serious and violent criminals
- Reduce traffic fatalities since users will switch from alcohol to marijuana, which does not impair driving to the same degree
- No increase in use, even among youth, because of strict regulations
- Added revenue generated through taxation
- Eliminate the black market

Those opposed to legalizing marijuana argue that the potential benefits of lifting prohibition pale in comparison to the adverse consequences. Some of the cited consequences include:

- Increase in marijuana use among youth and young adults
- Increase in marijuana-impaired driving fatalities
- Rise in number of marijuana-addicted users in treatment
- Diversion of marijuana
Adverse impact and cost of the physical and mental health damage caused by marijuana use
The economic cost to society will far outweigh any potential revenue generated

Background

As of 2016, a number of states have enacted varying degrees of legalized marijuana by permitting medical marijuana and eight permitting recreational marijuana. In 2010, legislation was passed in Colorado that included the licensing of medical marijuana centers (dispensaries), cultivation operations, and manufacturing of marijuana edibles for medical purposes. In November 2012, Colorado voters legalized recreational marijuana allowing individuals to use and possess an ounce of marijuana and grow up to six plants. The amendment also permits licensing marijuana retail stores, cultivation operations, marijuana edible manufacturers, and testing facilities. Washington voters passed a similar measure in 2012.

Preface

It is important to note that, for purposes of the debate on legalizing marijuana in Colorado, there are three distinct timeframes to consider: the early medical marijuana era (2000–2008), the medical marijuana commercialization era (2009 – current) and the recreational marijuana era (2013 – current).

- **2000 – 2008:** In November 2000, Colorado voters passed Amendment 20 which permitted a qualifying patient, and/or caregiver of a patient, to possess up to 2 ounces of marijuana and grow 6 marijuana plants for medical purposes. During that time there were between 1,000 and 4,800 medical marijuana cardholders and no known dispensaries operating in the state.

- **2009 – Current:** Beginning in 2009 due to a number of events, marijuana became de facto legalized through the commercialization of the medical marijuana industry. By the end of 2012, there were over 100,000 medical marijuana cardholders and 500 licensed dispensaries operating in Colorado. There were also licensed cultivation operations and edible manufacturers.
• **2013 – Current**: In November 2012, Colorado voters passed Constitutional Amendment 64 which legalized marijuana for recreational purposes for anyone over the age of 21. The amendment also allowed for licensed marijuana retail stores, cultivation operations and edible manufacturers. Retail marijuana businesses became operational January 1, 2014.

### Colorado’s History with Marijuana Legalization

#### Medical Marijuana 2000 – 2008

In November 2000, Colorado voters passed Amendment 20 which permitted a qualifying patient and/or caregiver of a patient to possess up to 2 ounces of marijuana and grow 6 marijuana plants for medical purposes. Amendment 20 provided identification cards for individuals with a doctor’s recommendation to use marijuana for a debilitating medical condition. The system was managed by the Colorado Department of Public Health and Environment (CDPHE), which issued identification cards to patients based on a doctor’s recommendation. The department began accepting applications from patients in June 2001.

From 2001 – 2008, there were only 5,993 patient applications received and only 55 percent of those designated a primary caregiver. During that time, the average was three patients per caregiver and there were no known retail stores selling medical marijuana (dispensaries). Dispensaries were not an issue because CDPHE regulations limited a caregiver to no more than five patients.

In late 2007, a Denver district judge ruled that CDPHE violated the state’s open meeting requirement when it set a five-patient-to-one-caregiver ratio and overturned the rule. That opened the door for caregivers to claim an unlimited number of patients for whom they were providing and growing marijuana. Although this decision expanded the parameters, very few initially began operating medical marijuana commercial operations (dispensaries) in fear of prosecution, particularly from the federal government.

The judge’s ruling, and caregivers expanding their patient base, created significant problems for local prosecutors seeking a conviction for marijuana distribution by caregivers. Many jurisdictions ceased or limited filing those types of cases.
Medical Marijuana Commercialization and Expansion 2009 – Present

The dynamics surrounding medical marijuana in Colorado began to change substantially after the Denver judge’s ruling in late 2007, as well as several incidents beginning in early 2009. All of these combined factors played a role in the explosion of the medical marijuana industry and number of patients:

At a press conference in Santa Ana, California on February 25, 2009, U.S. Attorney General Eric Holder was asked whether raids in California on medical marijuana dispensaries would continue. He responded “No” and referenced the President’s campaign promise related to medical marijuana. In mid-March 2009, the U.S. Attorney General clarified the position saying that the Department of Justice enforcement policy would be restricted to traffickers who falsely masqueraded as medical dispensaries and used medical marijuana laws as a shield.

Beginning in the spring of 2009, Colorado experienced an explosion to over 20,000 new medical marijuana patient applications and the emergence of over 250 medical marijuana dispensaries (allowed to operate as “caregivers”). One dispensary owner claimed to be a primary caregiver to 1,200 patients. Government took little or no action against these commercial operations.

In July 2009, the Colorado Board of Health, after public hearings, voted to keep the judge’s ruling of not limiting the number of patients a single caregiver could have. They also voted to change the definition of a caregiver to a person that only had to provide medicine to patients, nothing more.

On October 19, 2009, U.S. Deputy Attorney General David Ogden provided guidelines for U.S. Attorneys in states that enacted medical marijuana laws. The memo advised to “Not focus federal resources in your state on individuals whose actions are in clear and unambiguous compliance with existing state law providing for the medical use of marijuana.”

By the end of 2009, new patient applications jumped from around 6,000 for the first seven years to an additional 38,000 in just one year. Actual cardholders went from 4,800 in 2008 to 41,000 in 2009. By mid-2010, there were over 900 unlicensed marijuana dispensaries identified by law enforcement.

In 2010, law enforcement sought legislation to ban dispensaries and reinstate the one-to-five ratio of caregiver to patient as the model. However, in 2010 the Colorado
Legislature passed HB-1284 which legalized medical marijuana centers (dispensaries), marijuana cultivation operations, and manufacturers for marijuana edible products. By 2012, there were 532 licensed dispensaries in Colorado and over 108,000 registered patients, 94 percent of which qualified for a card because of severe pain.

**Recreational Marijuana 2013 – Present**

In November of 2012, Colorado voters passed Amendment 64 which legalized marijuana for recreational use. Amendment 64 allows individuals 21 years or older to grow up to six plants, possess/use 1 ounce or less, and furnish an ounce or less of marijuana if not for the purpose of remuneration. Amendment 64 permits marijuana retail stores, marijuana cultivation sites, marijuana edible manufacturers and marijuana testing sites. The first retail marijuana businesses were licensed and operational in January of 2014. Some individuals have established private cannabis clubs, formed co-ops for large marijuana grow operations, and/or supplied marijuana for no fee other than donations.

What has been the impact of commercialized medical marijuana and legalized recreational marijuana on Colorado? Review the report and you decide.

**NOTES:**
- Data, if available, will compare pre- and post-2009 when medical marijuana became commercialized and after 2013 when recreational marijuana became legalized.
- Multi-year comparisons are generally better indicators of trends. One-year fluctuations do not necessarily reflect a new trend.
- Percentage comparisons may be rounded to the nearest whole number.
- Percent changes added to graphs were calculated and added by Rocky Mountain HIDTA.
- This report will cite datasets with terms such as “marijuana-related” or “tested positive for marijuana.” That does not necessarily prove that marijuana was the cause of the incident.