

Frequently Asked Questions

Marijuana

Q: What is marijuana?

A: Marijuana is the product of the hemp plant, *cannabis sativa*, containing the psychoactive chemical delta-9-tetrahydrocannabinol (THC) and other related compounds. Popular names/slang for the drug include cannabis, weed, pot, reefer, hash, chronic, and ganja.

Q: How do people use marijuana?

A: Marijuana is typically smoked using rolled paper cigarettes (*joints*), pipes, water pipes (*bongs*), and vaporizers. However, the drug is also mixed into edibles and drinks and extracted into potent oils and waxes.

Q: How does marijuana affect users?

A: Marijuana use impacts the human body both physically and mentally. The “high” from the drug typically causes distorted senses, impaired judgment, lack of balance and coordination, increased appetite, and trouble solving problems. [National Institute on Drug Abuse \(NIDA\) DrugFacts](#) details short-term and long-term effects of marijuana on the brain. The timing of the substance’s onset and effects depends on how it is used.

Q: Is all marijuana the same?

A: No. Marijuana has various plants, hybrids, toxicity and purity levels, is grown under varying conditions, and is sold in dissimilar amounts at dispensaries. According to the NIDA, today’s THC concentrations in marijuana average close to 15 percent compared to approximately 4 percent in the marijuana of the 1980s.

Q: How many people use marijuana?

A: The information below presents the most current research estimating marijuana use:

- The [2016 World Drug Report](#) estimates that there are 182.5 million global cannabis users in 2014, or 3.8 percent of the world.
- The [National Survey on Drug Use and Health](#) reports more than 22.2 million Americans aged 12 or older were current users of marijuana in 2015, or 8.3 percent of the total population. Marijuana is the most commonly used illicit drug in the United States.
- “Marijuana has been the most widely used illicit drug since 1975,” according to the most recent [Monitoring the Future study](#).

Q: How is marijuana classified under Federal law?

A: Under Federal law, marijuana remains classified as a Schedule I drug under the Controlled Substances Act (CSA) and is illegal for any purpose. Drugs classified under [Schedule I](#) are defined as dangerous with a potential for severe psychological or physical dependence and are considered to have a “high potential for abuse” with “no currently accepted medical value.” In August 2016, the DEA [denied two petitions to reschedule marijuana](#). In a press release, the DEA stated that, “Based on the legal standards in the CSA, marijuana remains a Schedule I controlled substance because it does not meet the criteria for currently accepted medical use in treatment in the United States, there is a lack of accepted safety for its use under medical supervision, and it has a high potential for abuse.” However, the DEA did expand the number of “DEA-registered marijuana manufacturers” in an effort to ease restrictions and facilitate research on the effects of marijuana.

Q: How is marijuana classified under state law?

A: Despite its status under Federal law, states continue to pass legislation regarding permissible uses of marijuana for both medical and recreational purposes. State marijuana laws are inconsistent and constantly changing. Among other things, these state laws can impact company drug testing policies and procedures, workplace drug testing program administration, and how drug test results are reviewed and handled. The status of state marijuana legislation, current as of February 2017, is noted below:

- 29 states and Washington, D.C. have medical marijuana laws
- 8 states with medical marijuana have also passed recreational use laws
- 15 states have low THC/high CBD (cannabidiol) laws for limited medical purposes, but the allowable levels of THC in the oils fluctuate by state

For more information, download the [Marijuana Legislation by State](#) infographic.

Note: This information is not intended to serve as legal advice. All information provided by Quest Diagnostics is qualified by the laws and regulations of the individual states, and such information is subject to change. If you have any legal issues or concerns, we urge you to get advice from your attorney.

Q: How can states continue to pass medical and recreational marijuana legislation if marijuana is illegal under Federal law?

A: Even though marijuana is illegal for any purpose under the CSA, the enforcement of the CSA is within the discretion of the federal government. Under the previous administration, federal agencies, including specifically the Department of Justice (DOJ), de-prioritized marijuana enforcement in states with medical marijuana laws through policy guidance. Congress has also previously passed statutory budget amendments to limit federal agency enforcement initiatives that interfere with state

medical marijuana laws. It is currently unclear how marijuana enforcement priorities will change under the new administration.

Q: What is the standard dose of marijuana used medicinally?

A: There are no standard safety or efficacy requirements for medical marijuana because the “[U.S. Food and Drug Administration has not approved a marketing application for marijuana for any indication.](#)” In those states with medical marijuana statutes, physicians or other authorized providers may provide a “recommendation” of medical marijuana use, but may not legally “prescribe” marijuana. Synthetic THC (e.g., Dronabinol capsule) can be prescribed and is dispensed based on recommended dosing guidelines and the physician’s judgment.

Q: What are some common misconceptions about marijuana?

A: Common misconceptions of marijuana include that it is harmless, non-addictive, and not a gateway drug. Marijuana Outreach by the Drug and Alcohol Testing Industry Association (DATIA) details the top ten marijuana myths with cited references in its literature. Download brochure: datia.org/datia/eNews/marijuana_longbrochure.pdf

Q: What are the effects of inhaling secondhand marijuana smoke?

A: According to NIDA, “it's unlikely that secondhand marijuana smoke would give anyone a contact high. Further research is needed to investigate if secondhand marijuana smoke has health risks like secondhand tobacco smoke does.”

Q: Can someone have a positive drug test for THC from secondhand smoke?

A: There are no published studies that indicate, even with today’s increased concentrations of THC in marijuana, that someone would test positive due to casual exposure (e.g., a party, concert, etc.).

Q: How can marijuana impact the workplace?

A: A white paper called *What Will Legal Marijuana Cost Employers* examines “the complexities that employers face as marijuana is legalized for medical or recreational use in various U.S. states and how the changing legal landscape will affect employers.” The authors identify five key areas affected by marijuana – litigation, productivity, safety, flexibility, and compliance – and provide suggestions for employers seeking a drug-free workplace. Download white paper: http://nationalfamilies.org/reports/What_Will_Legal_Marijuana_Cost_Employers--Complete.pdf

Q: How many people test positive for marijuana on workplace drug tests?

A: The latest Quest Diagnostics Drug Testing Index™ report showed almost half (45 percent) of employees in the general U.S. workforce with a positive drug test for any substance showed evidence of marijuana. View data and analysis: www.QuestDiagnostics.com/DTI.

Q: How do state marijuana laws address marijuana in the workplace?

A: The degree of employment protections afforded to employees in states that have passed marijuana legislation vary widely from state to state. Currently, these protections fall broadly into four general categories:

1. States with no employee protections;
2. States likely providing no employee protections;
3. States with explicit employee protections; and
4. States with unclear employee protections.

For additional general information regarding employee protections, see our “Employee Protections in the Era of Medical Marijuana Legislation” blog and map. For guidance regarding a specific state law or program, you should consult with an attorney. Download the map: <https://blog.employersolutions.com/marijuana-employee-protections>

Q: Under current state marijuana laws, may employers still test for marijuana?

A: Yes. There are currently no restrictions limiting an employer’s ability to drug test for marijuana, although there may be limitations on permissible disciplinary action that an employer may take if an employee is using marijuana in accordance with that state’s marijuana laws. In general, state medical and recreational use statutes impact only a very small number of employees in most workplaces. Today, more than 99 percent of all non-federally mandated workplace drug tests performed by Quest Diagnostics include marijuana as a part of their drug testing panel.

Q: May an employer prohibit off-duty marijuana use in a drug-free workplace policy?

A: This question raises legal issues that are dependent on an employer’s workplace and both federal and specific state law. Employers considering this issue should obtain an individualized analysis of all federal, state, and local laws to which they are subject by an attorney knowledgeable of those laws.

Q: If an employee tests positive for marijuana/marijuana metabolites on an employment related drug test, does that mean the employee is ‘impaired’?

A: No, a positive workplace drug test alone does not equate to impairment. While employment policies often prohibit employees from using drugs or being impaired at the worksite or during work hours, there is currently no drug test (excluding alcohol

tests measuring blood alcohol concentration) that can inform an employer as to whether an employee is 'impaired' based on the concentration (level) of drugs/metabolites present in a donor specimen. Some state laws explicitly address what can and cannot be considered for determining whether an employee is 'impaired' by marijuana, but most do not. Proper guidance and training of employees and supervisors to recognize objective, observable behavior and other symptoms related to drug use are critical for making impairment and reasonable suspicion drug testing determinations.

Note: Only a handful of states have defined impairment due to marijuana use as it relates to operating a motor vehicle and those levels vary. Currently, there is no consensus on what the standard of impairment is for marijuana.

Q: What are some important considerations in writing a company policy for marijuana?

A: It is imperative that employers promulgate and maintain clearly written, and consistently applied, workplace drug testing policies that comply with all applicable laws. Drafting and implementing a written workplace drug testing policy should be undertaken only after consultation with an attorney knowledgeable of the applicable laws.

Q: Where can an employer find accurate news and resources about marijuana?

A: A number of resources exist for companies and organizations striving to maintain drug-free workplaces:

- [National Survey on Drug Use and Health \(NSDUH\)](#)
- [National Conferences of States Legislatures \(NCSL\)](#) (*state marijuana laws*)
- [NIDA DrugFacts: Marijuana](#)
- [Drug Enforcement Administration \(DEA\)](#)
- [Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#)
- [World Drug Report: Cannabis](#)
- [University of Michigan: Monitoring the Future study](#)
- [Drug and Alcohol Testing Industry Association Marijuana Education Outreach](#)
- [Substance Abuse Program Administrators Association \(SAPAA\)](#)
- [Institute for a Drug-free Workplace](#)
- [Quest Diagnostics Drug Testing Index™](#) (*marijuana positivity in the U.S. general and federally-manated, safety-sensitives workforces*)
- [Quest Diagnostics drug testing blog](#)