



VERMONT
CANNABIS TRADES
ASSOCIATION, INC.

To: Senate Judiciary Committee
From: Shayne Lynn, Executive Director, Champlain Valley Dispensary, Inc.
Re: S.16
Date: February 2, 2017

Thank you for inviting me to testify. My name is Shayne Lynn. I am here today testifying for the Vermont Cannabis Trades Association, which includes three of the existing VT dispensaries. Vermont. I serve the Burlington (CVD) and Brattleboro (SVW) areas. I would like to propose some changes to S.16.

1. No waiting period for patient when referred by a specialist

We support waiving the three-month patient–health care professional relationship requirement. While this requirement has been successful in reducing “doctor shopping”, it still drives people to the illegal black market.

2. Expand the list of qualifying conditions

We appreciate chronic pain and glaucoma being added last year. We believe adding PTSD, Crohn’s disease and Parkinson disease more Vermonters will benefit from access of this alternative medication for symptom relief. We, also, support allowing health care professionals to determine if there is another disease, condition or treatment that might benefit from using cannabis.

3. Allow advertising by dispensaries similar to what was proposed in S.241 last year for marijuana retail entities.

Vermont has a very low participation rate (0.3% of population) for its medical marijuana program. Advertising is an important means for informing patients that this alternative exists.

4. Increase the allowable purchase quantity to three ounces every 30 days.

Many very ill patients seek dosages that are higher than the two ounces per month that is allowed under current law. We support increasing the allowable purchase quantity to three ounces every 30 days. In addition, Rick Simpson, sought by Vermonters with cancer, is a highly concentrated oil which requires patients to use much if not all of their monthly limits.

5. Define one ounce as 28.35 grams.

We would ask that the Department of Public Safety change their rules, which state that an ounce is 28 grams. It is actually 28.35. It has resulted in the failure to regulate 70 grams of product per every 100 patients per month. Moreover, the lack of precision in adopting the true measure of an ounce would result in depriving patients utilizing their maximum allotment of 8.4 grams of product they are entitled to and have paid for each year.

6. Allow outside growing

A few years ago, the Vermont legislature changed the law to allow dispensaries to grow outdoors as long as it was not visible to the public. The Department of Public Safety interpreted this differently than what we believe was the legislative intent and request the definition be clarified.

7. Allow patients to belong to a dispensary, even if they grow

For some patients, growing their own can have its difficulties. Allowing patients to grow and purchase removes the stress and pressure on home cultivators.

8. Allow dispensaries to convert from a nonprofit to any other type of business entity authorized by the laws of this State.

There are 24 states that have medical marijuana programs. Only 32% of the dispensaries operating within these 24 states are required to operate on a nonprofit basis. We receive zero benefits of being a nonprofit, because cannabis is still classified as a schedule 1 drug and we are not recognized by the IRS as a 501(c)(3) and cannot accept charitable donations.

9. Continuing medical education for health care professionals

Lack of education for medical providers significantly limits their ability to have an informed discussion with patients who are now asking their providers about cannabis. To address this problem, the Department of Pharmacology at the University of Vermont, College of Medicine has become a national leader in cannabis education. Physicians need information not just about the registry, but about the scientific evidence for cannabis, including risks and benefits. We therefore request editing the current language as follows:

“and one hour specifically devoted to ~~the Medical Marijuana Registry~~ medical cannabis.”

10. Agency of Agriculture, Food and Market testing

Our trade association strongly supports mandatory analytical testing of cannabis products and we recommend some changes for the following reasons:

- a) “Periodic analytical sample testing” does not clearly define the time period or sampling procedures.
- b) Testing should be done before and after infusion into edible products. Testing before infusion is needed because recovery of cannabinoids from different products varies widely by the food matrix and the buffers used for homogenization, limiting accurate testing of potency in edible products.
- c) Testing should not be limited to the Agency of Agriculture; to promote small business development in VT, official testing should be available from any laboratory that meets accreditation standards
- d) We recommend that the bill authorize the Agency of Agriculture to accredit cannabis laboratories (by verifying test accuracy), and ensure standard sampling and testing protocols.

Therefore, we request editing the following language:

“The Agency of Agriculture, Food and Markets, or other laboratories accredited by either the Agency or by the ISO 17025 standard, shall conduct periodic analytical sample provide adequate sampling and testing of marijuana-infused edible or potable medical cannabis products sold by a dispensary to ensure appropriate labeling of the tetrahydrocannabinol content as required by subdivision 4474e(h)(2) of this chapter.”

11. Adding 4 more dispensaries

Although we are not opposed to having more dispensaries, our concern is the low number of patients at this time. As of now, Vermont has the lowest number of registered patients in America with roughly 2,611 (as of 9/9/16) patients using the registry; compared to states like Maine (20,005) and Rhode Island (12,815). In Rhode Island, there are 3 dispensaries.

12. License small, professional craft cultivators

We believe our current market place could be best served by licensing small, professional, craft cultivators. Additional cultivation licensing would allow for a diversity and consistency of strains to be offered at the dispensary level. It also creates a unique Vermont demand and supply model, and simultaneously builds in flexibility to match the market places unknowns.

Thank you for this time and opportunity to speak with you today.