

**Testimony 2/27/19 – Senate Judiciary – S.117**

In developing the adult use market, it is important to ensure that patients in Vermont can continue to access the care they need.

- Maintain benefits of the current Vermont Medical Marijuana dispensaries
- Strengthen some of the existing statutes and programs
- 6 years of experience with medical marijuana

**Definitions**

Remove the 3-month treating or consulting relationship - Unnecessary burden on the patient -

**Debilitating medical condition**

- Instead of describing, with an exhaustive list, what such a condition is, leave it up to the health care professional to determine what disease, condition, or treatment would benefit from medical marijuana
  - Health care professionals are best positioned to determine which patients, depending on their health care condition, would benefit from the use of medical marijuana.
  - Nothing mandates a health care professional to recommend medical marijuana.

**Dispensary**

- A patient does not have to designate a particular medical marijuana dispensary - Patients should be able to obtain their medication from any dispensary throughout their treatment

**Possession limit**

- 3 mature plants and 3 ounces - If patients can grow either less than, or the same amount of, marijuana as those in the adult use market, there is no incentive for patients to join the Medical Marijuana Program.
- Many very ill patients need dosages that are higher than the two ounces per month that is allowed under current law, due to severity of illness and/or because they experience adaptation by the brain to the continued presence of cannabis (higher doses of cannabis may be required to obtain the effect of the initial dose). This tolerance effect has been widely studied and is something patients share with us as a side effect of using cannabis for symptom relief. In addition, the highly concentrated oil, Rick Simpson, sought by Vermonters with cancer, requires patients to use much, if not all, of their monthly limit.

**Registered patient**

- Does not have to be a Vermont resident - There are a number of out-of-state patients who see Vermont health care providers for their medical care
- **Allow patients who are registered in another state's medical marijuana program to use VT dispensaries.**

**Registration and Fees**

A patient who has a chronic disease shall not be required to renew application and the patient's registration card shall not expire during the life of the patient unless the patient requests to be removed from the Registry

- Undue burden on patient - Patients who are on the registry with a chronic disease, such as Parkinson's, HIV/AIDS, and MS, should only be required to file an initial registration. Our understanding is that the purpose of registering each year is to ensure that someone still has a qualifying condition. Given the fact that these diseases are chronic, re-registration is not necessary.

**Personal cultivation**

Personal cultivation only on property lawfully in possession of the cultivator or with the written consent of the person in lawful possession of the property and in an enclosure that is screened from public view and is secure. This will align medical law with the law that passed last year.

**Operation of Dispensaries**

Remove cultivation and possession limits of dispensaries

- Similar to adult use - With more patients using products that are extracted from the plant, we are finding we are limited by existing law.

**Testing**

In line with hemp testing, there need to be protocols for testing of marijuana and marijuana infused products developed by the Department of Agriculture

- Potency and contaminant testing
- Cannabinoid label guarantees
- Pesticides and other contaminants

Medical marijuana dispensaries which offer testing services described in this bill should be deemed to be certified

- In recognition of the testing currently underway by some dispensaries - continue to permit credentialed diagnostic testing by Vermont medical marijuana dispensaries, and will allow the Vermont Agency of Agriculture lab to serve as a third-party lab auditor.

If DPS requires testing, it should be responsible for the cost of the test of a product produced at a registered dispensary.

**Possible addition to S.117**

**Post-Traumatic Stress Disorder (PTSD)**

PTSD is considered a debilitating medical condition, provided the Department confirms the applicant is undergoing psychotherapy or counseling with a licensed mental health care provider;

- Eliminate the counseling requirement, because it is overly burdensome on the patient – multiple health care providers
  - PTSD patients must go to a health care professional and state they are seeing a mental health provider who has diagnosed them with PTSD. The health care professional, who is not the one who diagnosed the patient, then makes the referrals for MM. Then the Department confirms with the MH provider that the person does in fact have PTSD.
  - In the adult use market, PTSD patients will be able to purchase marijuana on their own - Why would they choose to go through this process?