
MARIJUANA FOR SYMPTOM RELIEF

OVERSIGHT COMMITTEE



2019

Annual Report

Therapeutic Use of Cannabis

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Prepared By

Marijuana for Symptom Relief Oversight Committee

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Executive Summary

Title 18 Chapter 86 established the Marijuana for Symptom Relief Oversight Committee. The Oversight Committee was created to evaluate and make recommendations to the General Assembly. This report has been provided by the Committee to fulfill these requirements and address the following:

- (A) The ability of qualifying patients and registered caregivers in all areas of the state to obtain timely access to marijuana for symptom relief.
- (B) The effectiveness of the registered dispensaries individually and together in serving the needs of qualifying patients and registered caregivers, including the provision of educational and support services.
- (C) Sufficiency of the regulatory and security safeguards contained in this subchapter and adopted by the Department of Public Safety to ensure that access to and use of cultivated marijuana is provided only to cardholders authorized for such purposes.

This legislative report provides an overview of the Vermont Marijuana Registry in 2019:

- The Vermont Marijuana Registry currently has 4,616 registered patients and 500 registered caregivers. This number of active patients has decreased 18.5% from the peak number of registrants in June 2018, prior to the passage of H.511.
- A disease or medical condition or its treatment producing a qualifying symptom is the most common debilitating medical condition experienced by patients approved by the Vermont Marijuana Registry with 79% of the patient population, followed by cancer (10%) and PTSD (5%). All other medical conditions each account for no more than 2% of total patients.
- The Department has approved 5 dispensaries to operate in the state which are collectively operating 7 dispensing sites throughout Vermont.
- In December 2019, the Vermont Marijuana Registry launched an online portal which allows patients and caregivers to apply, check their status, and make changes. The online portal has improved Registry efficiency and user experience.

Continuing the Medical Marijuana Program in Vermont

In 2020 it is expected that the Vermont General Assembly will again take up legislation that would regulate the sale of recreational marijuana to the state's adult population. During these discussions the Marijuana for Symptom Relief Oversight Committee would like to emphasize the importance of a continued existence for the medical marijuana program to its patients throughout the state. We ask that the following points be considered:

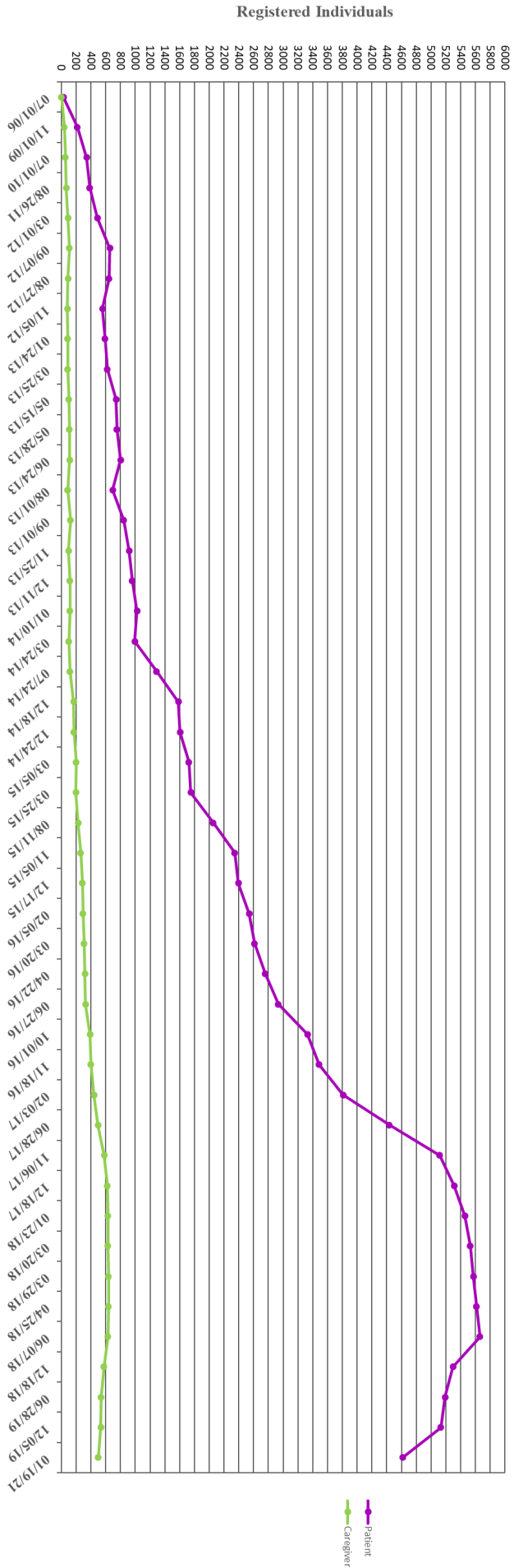
- **Experience in Symptom Relief** – Patients require a high level of care from the dispensaries and their staff in order to help them navigate a world that is new, under-researched, and would not be found in dispensaries catering to recreational users. The experience and mission of the medical marijuana dispensaries leaves them better prepared to make recommendations to a patient for their specific symptoms.
- **Cost of Marijuana** – Marijuana should continue to be sold tax-free to registered patients. The cost of marijuana is a major hurdle for some patients because health insurance does not cover it and the nature of having a debilitating medical condition affects the ability of many to have a steady income.
- **Product Availability and Continued Access** – If dispensaries begin to sell marijuana to eligible adults it is imperative that these new consumers do not negatively impact the ability of medical patients to obtain the product(s) that best relieve their symptoms. The continued existence of medical marijuana dispensaries is also important to ensure that specialized products such as salves, edibles, suppositories and tinctures continue to be developed and available. Should the legislature choose to restrict the strength or type of legal recreational product formulations then special consideration should be paid to allow the sale of high-strength products to patients which may be provide better symptom relief.
- **Consistency in Rule and Regulation** – It will be important for medical marijuana dispensaries and patients to be regulated under rules that are no more stringent than what is implemented for the recreational market.
- **Representation in Oversight** – as the landscape changes around marijuana legalization the Marijuana for Symptom Relief Oversight Committee wants to ensure that patients and caregivers do not lose the formalized representation and communication with state regulators and the General Assembly that is currently afforded. The committee views this as an essential component in informing how the program is or is not meeting patient needs.

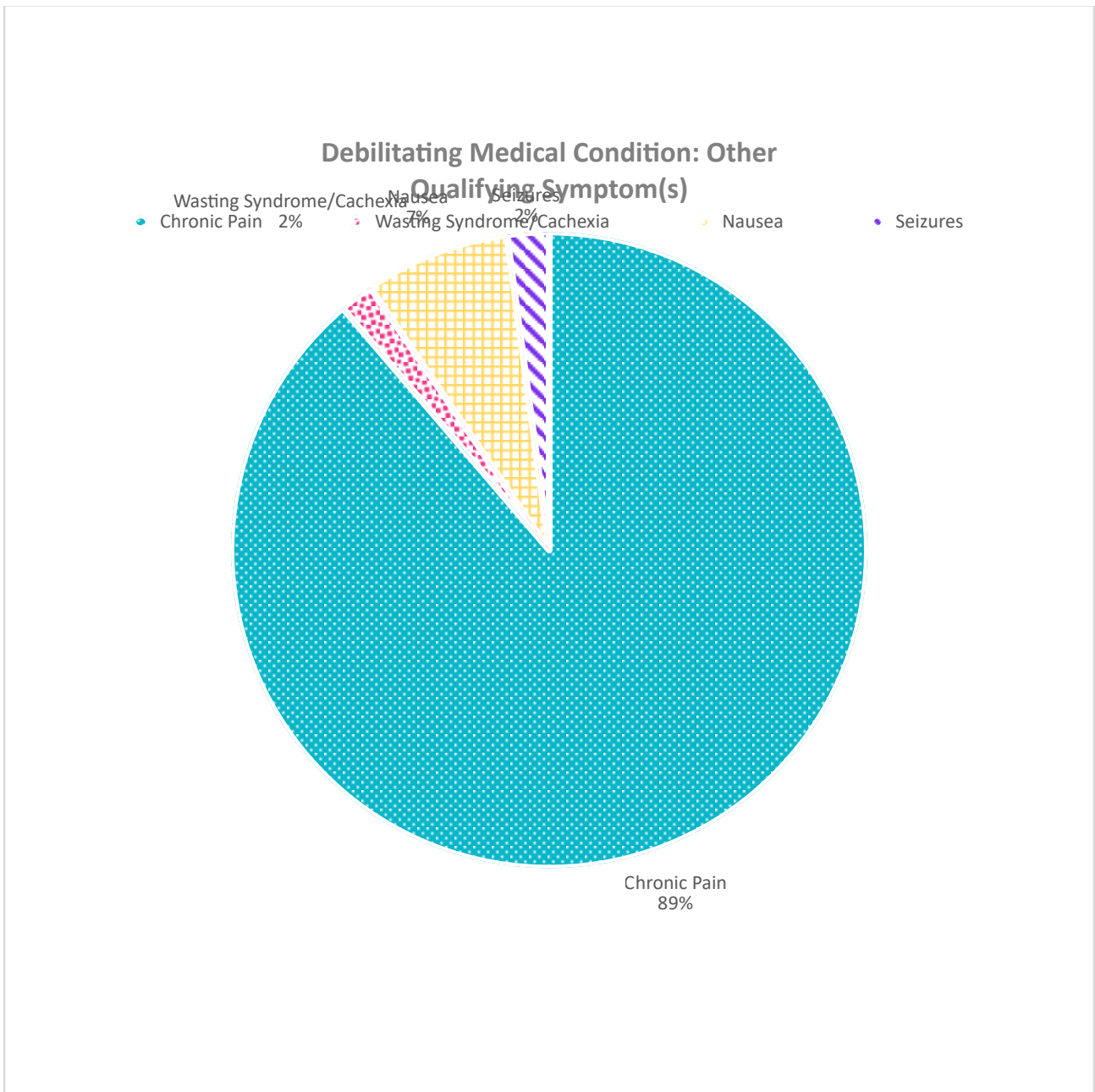
Recommendations for Medical Marijuana in Vermont

The Marijuana for Symptom Relief Oversight Committee has made the following recommendations for changes to the Vermont Medical Marijuana Program with the goal of improving access and the ability to meet patient needs:

- **Laboratory Testing** – mandatory testing with prescribed limits for contaminants such as heavy metals, bacteria, solvents, pesticides, and mold is critical to a healthy medical marijuana program. The Committee advocates that testing should be performed by third-party laboratories rather than the dispensary itself to avoid any conflict of interest. Random sampling by regulators to ensure compliance must also be included as part of this change. Test results on cannabinoid, terpene, and contaminant levels should be made available to the public.
- **Increase Possession Limit** – remove the current two ounce per 30-day purchase limit for medical card holders. For some patients the current limit is an impediment to their treatment if heavy use is needed to relieve severe symptoms.
- **Allow Patients to Visit Any Dispensary** – giving patients the freedom to visit a dispensary of their choice without requiring they pay a \$25 change fee will increase competition and improve access for patients. Patients should also have the option to purchase marijuana tax-free from non-medical dispensaries if they present a valid Vermont Marijuana Registry ID card.
- **Exempt Chronic Conditions from Annual Provider Form** – for patients that suffer from a life-long debilitating medical condition the requirement to complete the Healthcare Professional Verification Form is an unnecessary when the patient and their health care provider know the condition is with them for life.
- **Exempt PTSD diagnosis from physical exam** – the medical marijuana law in Vermont currently requires that all applicants undergo a physical examination in order to be eligible for the Registry. For patients with a PTSD diagnosis this can be a frequent impediment if their mental health counselor is unwilling to perform a physical exam as part of their treatment process or if their primary care physician is unwilling to complete the Healthcare Professional Verification Form. In other patients the very act of undergoing a physical examination can be a barrier depending on the circumstances of their past trauma.
- **Advertising** – regulations governing advertising by marijuana dispensaries should be aligned with those of alcohol and tobacco.
- **Reciprocity** – allow visitors that hold a valid medical marijuana card from another state to purchase from Vermont's medical marijuana dispensaries
- **Remove 3 Month Relationship Requirement** – this requirement is an unnecessary hurdle once it is legal for all adults 21 years of age or older to purchase and consume marijuana.

Vermont Maritima Registry
 Registered Patients and Caregivers Progression Diagram
 4,616 Registered Patients and 500 Registered Caregivers as of January 19, 2021





Recommendations for Medical Marijuana in Vermont (cont.)

- **Increase Patient-to-Caregiver Count** – allowing caregivers to assist more than one patient will improve access and the ability of patients to obtain specific varieties suited to their needs.
- **Use of Excess Funding** – the Vermont Marijuana Registry is funded by fees paid by applicant and licensing fees. Registration fees have historically exceeded the operating costs of the Registry. The Committee proposes restricting funds deposited into the VMR account for administering the provisions contained in Title 18 Chapter 86 and prior to the State reallocating excess receipts a reduction in fees should be considered to lessen the financial burden on patients and caregivers. The VMR should have the ability to charge a fee equal to the rate for reimbursable services provided by the program.

