Jared Rolfe Windham LD 2185

Hello Members of the Veterans and Legal Affairs Committee,

My name is Jared Rolfe, and I'm a patient, Medical Registry Identification Card (RIC) holder, I've worked in both Medical and Adult Use, and a father to a four-year-old. I just spent 4 hours typing my written testimony for this online portal to accidentally close and I have no way to get any of it back. Because of my medical issues it affects my memory. Because of this I will not have as many specific reference numbers but more general points/sections, I apologize.

Firstly, I urge the committee to vote ought not to pass on the proposed rule changes. I've encountered significant challenges with several sections of the proposed rule.

Section 4, which outlines the requirement for a "bona fide medical provider-patient relationship," is particularly troubling. During the COVID-19 pandemic, I was unable to physically visit my doctor due to my symptoms. This requirement would have prevented me from obtaining my first medical card, highlighting a clear possible barrier to access for patients. As we navigate the modern landscape of healthcare in 2024, it's imperative that we adapt our regulations to align with emerging trends. One such trend is the increasing reliance on telehealth services for medical consultations. In light of this, I propose the inclusion of provisions that strengthen access to telehealth medicine. By embracing telehealth, we can enhance patient access to medical cannabis evaluations and consultations, particularly for those who face barriers to in-person appointments. This proactive approach not only improves accessibility but also reflects the evolving nature of healthcare delivery in our digital age.

In Section 3, the mandate for commercial-grade fencing and locks seems excessive, especially for home medical cannabis cultivation. As someone who grows both adult-use and medical cannabis plants, I fail to understand the necessity for such stringent security measures in the medical context. When I am not required to have fencing at all for adult use, they just can't be visible from the road. I rent, I can't build a new fence at every property I will live at

Furthermore, the requirement to tag every plant in a home garden between family members appears unnecessary and environmentally detrimental. This practice not only adds to wastefulness but also imposes an undue burden on patients and caregivers.

Section 8 proposes additional fees and fines, further exacerbating the financial burden on patients and caregivers already struggling with the costs associated with medical cannabis access. It will affect caregivers directly and could cause prices to go up accordingly.

Moreover, Section 10 introduces vague definitions and potential violations, particularly concerning "public safety" and advertising regulations. The lack of clarity surrounding these terms leaves room for interpretation by inspectors, raising concerns about inconsistent enforcement and undue scrutiny. We were recently inspected at one of my jobs and I was told the inspector said "Everyone else does it this way, but I do it this way" When measuring plant canopy. I Do not think it is a good idea to implement even more open ended laws up for inspector interpretation What does it mean to advertise to someone under 21? What does that look like? "Making claims about the health or physical benefits of cannabis or cannabis products for medical use;" conflicts with "Patient Education" example, How can we talk about effects of cannabis on blood pressure without talking about possible benefits/risks? When talking to an older patient this can be very very important.

"Conducting any authorized activity at a location not provided to, and approved by, the Department;" would effectively ban farmer markets, trade shows, seshes, whatever word you want to use. Not only do farmers rely on these events, but so do patients. As well as making it harder to meet caregivers directly at locations, I, the patient, am comfortable with. This would negatively affect me in many ways.

I also oppose the provision for "Emergency Suspension or Revocation" without a clear definition of "public safety." The absence of evidence indicating a public emergency undermines the necessity for such drastic measures.

The requirement holding caregivers or dispensaries responsible for the actions of authorized agents is unjustified and impractical. It unfairly burdens caregivers and dispensaries with liability for actions they may not directly control.

Furthermore, the prohibition on forming or engaging in collectives infringes on caregivers' rights and resembles an overreach of regulatory authority. This restriction mirrors tactics used to suppress collective bargaining rights and undermines caregivers' ability to advocate for their interests. To me this is borderline a violation of the National Labor Relations Board. "The National Labor Relations Act forbids employers from interfering with, restraining, or coercing employees in the exercise of rights relating to organizing, forming, joining or assisting a labor organization for collective bargaining purposes, or from working together to improve terms and conditions of employment, or refraining from any such activity. Similarly, labor organizations may not restrain or coerce employees in the exercise of these rights." I know caregivers are not employed by OCP, but rather regulated by the body of OCP. I feel as though it is a very similar relationship and that makes the rule a complete overstep from OCP

I also urge the removal of open-ended language such as "but are not limited to" to ensure clarity and consistency in rule enforcement.

The removal of the "avoid conflict of interest policy" raises concerns, particularly in light of speculation surrounding conflicts of interest within the Office of Cannabis Policy (OCP). Transparency and accountability are essential for maintaining public trust in regulatory bodies.

Lastly, I'd like to address the department's priorities regarding the allocation of resources. Rather than investing in redundant rule revisions that keep being shot down, I urge the department to prioritize public education initiatives. Effective education campaigns can enhance understanding and compliance with existing regulations, fostering a safer and more informed cannabis community.

I have too much anxiety to go to Augusta. Fear of targeting/retaliation from OCP is a very real fear. There is video online of OCP inspectors breaking and entering to do an inspection. There are first hand accounts online of OCP asking for specific samples from specific growers during the testing campaign they just ran, leading the public to not trust their results.

Just before the hearing this AM 2/72/24 OCP was out with local Sheriffs "verifying" a patient's grow. Trying to criminalize law abiding citizens.

Why would anyone want to come before OCP and talk at all?

The department is failing.

I don't understand why the department doesn't use our tax dollars on education for the public, rather than paying a company to keep writing almost the same proposed rules again and again.

The only education I've seen come out of OCP is, don't smoke & drive campaigns, and what I'd consider a failed storage bag campaign. The info is even hidden under the stakeholder engagement tab on the OCP website, not very visible/accessible for someone who is looking for it. With no information on where to actually get one, it only says "participating retailers" without actually letting you know who. I think the department should focus on improving/fixing the failed parts of their

system in place before implementing new major rule changes.

Why is there no effort to expunge or clear criminal records? We've had cannabis longer than I have been alive, I'm 24. Why do people in our state still face criminal penalties for a plant & the states most valuable agriculture crop? We should be

pushing for more criminal reform in our state, not looking at how to punish more people.

In conclusion, the concerns raised today highlight the importance of crafting regulations that prioritize accessibility, clarity, and fairness for patients, caregivers, and the broader cannabis community. By voting against passing these amendments, we can work towards a regulatory framework that better serves the needs of those who rely on medical cannabis for their health and well-being.

Thank you for your time and consideration.