

Steven Robinson
Albion
LD 40

My name is Steve Robinson. I am a cultivator and caregiver who operates from our family farm in Albion. I would like to thank Senator Hickman and the members and staff of the VLA who have worked so hard to create LD40, along with the various work groups and market participants who have helped provide input in this process. As a small business owner trying to operate in rural Maine, providing what our patients considerable to be an essential products at a reasonable, it would be really helpful for the regulatory framework to be stabilized. Having to respond to proposed rulemaking by OCP in the middle of harvest (or frankly, at any time) is a distraction that takes time and effort and expense, yet the cost benefit of such regulatory proposals causes one to think about the phrase “if it ain’t broke, don’t try to fix it” and wonder when OCP will try to help rather than hurt the functioning of the medical cannabis program.

LD40 goes a long way in addressing some of the clarity needed with regard to the medical program and we really appreciate your addressing some of the issues on which guidance was needed. While our activity is limited to the medical cannabis program, we appreciate the efforts that LD40 has made to providing a more workable framework for the adult use program as well. At the same time, we appreciate the recognition by the VLA of the differences between the medical program and the adult use program and your resistance to some of the proposals by OCP to have caregivers subjected to some of the burdens that exist in the adult use program. After a tough growing season like the summer of 2023, many caregivers who rely on outdoor growing to be able to keep prices down suffered greatly from the drop in productivity of our plants. Year-on-year yield was down more than 50% for us, so having to consider expenses like METRC or mandatory testing for pesticides when we don’t use pesticides are challenges to the existence of many small operators like us.

As for specific comments, there are a few things that I thought might be considered.

1. The annual report requirement for OCP with regard to the Adult Use program looks like a useful discipline to be followed with regard to the Medical program as well. Suggest that a comparable report be made for Medical, with requirements tailored to provide the information needed to effectively oversee the program.
2. The committee considering hospitality could also benefit from input from the medical community, so a representative of caregivers, patients and medical professional involved with card issuance should be added to the committee.

Thank you for your hard work.