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LD 1847

I am strongly against LD 104 and 1847 as it would negatively impact my access to medical cannabis for the following reasons:

Crushing Costs (Especially for Small Businesses) • METRC systems come with steep implementation costs (software fees, RFID tags, printers, and scanners to name a few). For larger scale and/or vertically integrated businesses, these may be manageable. For small caregivers operating on narrow margins, these costs can be the difference between staying open or shutting down.

Disproportionate Administrative Burden

• METRC demands meticulous, time consuming tracking of every plant and product (with real threat of closure for non-conformity). For many Mainer caregivers who work solo or with minimal staff, this will require hours of daily compliance work, pulling focus from patient care and cultivation.

No Demonstrated Need • There is no widespread evidence of diversion or noncompliance in Maine's current caregiver model. METRC is a solution looking for a problem. Imposing it will overregulate a system that already functions transparently and effectively.

Loss of Autonomy and Trust • METRC centralizes data in a way that undermines the spirit of the caregiver model which is one based on trust, direct relationships, and flexibility. It's a top down corporate solution incompatible with Maine's decentralized, grassroots system. We have operated without standardized seed to sale tracking and testing without problem, adding this extra layer of regulation would add a positive benefit to these patients or program participants.

Outsourced Oversight to a For-Profit Monopoly

• METRC is a proprietary system controlled by a single company. Giving it control over Maine's medical data and compliance system outsources oversight to an unaccountable, for-profit entity with no connection to local patient or caregiver needs.

Risk of Access Disruption • Historically, rollouts in other states have shown METRC implementation leads to supply chain slowdowns, product shortages, and data errors. Medical patients visiting and living in Maine many of whom rely on consistent and personalized products, could see their access interrupted or delayed from what they're accustomed to.

Cultural and Community Erosion • Maine's medical cannabis program is unique for its patient centered, caregiver-led ecosystem.

Imposing METRC threatens to homogenize the market, favoring those with compliance departments over those with healing experience and plant knowledge.