

Testimony in Opposition to LD 1847

“An Act to Institute Testing and Tracking of Medical Use Cannabis and Cannabis Products Similar to Adult Use Cannabis and Cannabis Products”

To the Committee on Veterans and Legal Affairs:

My name is Josh D, and I am the owner and operator of a small, caregiver-run craft cannabis business here in Maine. I am writing today in strong opposition to LD 1847.

Let me be clear: I fully support the goal of patient safety and responsible cannabis production. However, LD 1847, as written, would have devastating consequences for small producers like myself and threaten the very existence of Maine’s locally grown, patient-centered medical cannabis program.

LD 1847 proposes to implement mandatory testing and tracking requirements for medical cannabis that mirror those in the adult-use market. While ensuring product safety is essential, the infrastructure and costs associated with such comprehensive testing and tracking systems are prohibitively expensive for small operators. Unlike large-scale operations with economies of scale, we do not produce massive, uniform batches. We focus on small, carefully curated crops tailored to the specific needs of our patients.

Current testing fees in the state average around \$500 per sample, and every distinct strain, harvest, or product requires its own individual test. As a small producer operating an 8-light room with 10 or more strains per cycle to meet patient needs and market demand, I could be facing over \$5,000 in testing costs per harvest. That’s before factoring in potential failed tests, resampling requirements, or lost product—expenses that small businesses like mine simply cannot absorb.

Now consider my passion: pheno-hunting and breeding unique genetics. My current pheno-hunt room includes 76 individual female plants, each representing a distinct cultivar. Under this bill, if I wanted to legally share or offer even small retail amounts of these phenotypes to patients for feedback, I’d be looking at \$38,000 in testing fees—just to share the fruits of innovation and craftsmanship.

This bill doesn’t just threaten small businesses—it threatens the creative engine behind Maine’s rich cannabis genetic pool. If passed, it will stifle experimentation, limit patient access to novel and effective cultivars, and destroy the very innovation that sets Maine’s medical cannabis program apart.

LD 1847 would also require medical producers to adopt a comprehensive inventory tracking system, like Metrc, originally built for large-scale adult-use markets. These systems are not only costly to implement, but incredibly burdensome for small, vertically integrated caregiver operations like mine. We already track our own inventory and patient

transactions diligently. Forcing us into a commercial-grade software platform is unnecessary, punitive, and removes the flexibility that has allowed Maine's caregiver program to thrive.

Let's not forget: the medical cannabis program in Maine was built by caregivers—people like me—who have cultivated strong relationships with patients, often serving individuals with chronic conditions who can't afford high retail prices. LD 1847 effectively imposes the same regulatory burden on a homegrown industry as it does on multi-million dollar recreational operations. That is neither fair nor sustainable.

This bill would force many of us out of business. It would eliminate patient choice, raise prices, and concentrate market power in the hands of a few large producers—the opposite of what Maine voters and patients have supported for over a decade.

Instead of this one-size-fits-all mandate, I urge the committee to consider alternative solutions—voluntary testing incentives, patient education, or tiered testing and tracking requirements based on business size and output. Protect patients, yes—but don't destroy the small businesses and caregivers who've been the backbone of this industry.

Thank you for your time and for considering the perspective of Maine's small cannabis producers.

Sincerely,
Josh D