



HOUSE OF REPRESENTATIVES

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**Testimony of Representative David Boyer
In Support of L.D. 541 An Act to Create Parity in the Taxation of Medicine
Before the Joint Standing Committee on Taxation**

Senator Grohoski, Representative Perry and distinguished members of the Joint Standing Committee on Taxation, my name is Representative David Boyer and I come before you today in support of L.D. 541, An Act to Create Parity in the Taxation of Medicine.

As you probably know, in order to be a qualified patient under Maine's Medical Cannabis Program a medical professional must consult with and certify a patient. Certifications last a year and allow patients to purchase medical cannabis from caregivers or dispensaries.

I have worked for a decade on cannabis policy in Maine and I know firsthand how beneficial cannabis can be for patients. I cannot tell you how many times I've heard "Cannabis gave me my life back." Whether it was from veterans suffering from PTSD or patients struggling with opioid addiction, cannabis was the thing that turned their lives around.

Children suffering from epilepsy, having hundreds of seizures a day, found that medical cannabis was the only medication that would bring relief.

The premise of L.D. 541 is simple, we as a society, have generally decided to not levy a tax on prescribed medication. Currently, medical cannabis is taxed at the general sales rate of 5.5% and 8% for edibles.

Originally, the decision to tax medical cannabis was a political one. Surprising, right? The idea at the time was that the State of Maine would be more likely to defend our medical program from federal intervention if the program was generating tax revenue from the state.

Many states that developed their medical cannabis program after Maine made the decision to not tax cannabis, including New Hampshire, Massachusetts, and Vermont. Since 2009, patients in Maine have generated tens of millions of dollars in tax revenue for the state and hundreds of millions in sales. It's time to give Maine patients a break. The fees that come from licensing caregivers and dispensaries more than cover the cost of regulation by the Office of Cannabis Policy. Thank you for considering LD 541 and I would be happy to take any questions the committee may have.