

March 9, 2023

Susan Meehan, Sweden, Maine

Good afternoon Senator Nicole Grahoski, Representative Joe Perry and the Committee On Taxation of the 131st Legislature My name is Susan Meehan. I live in Sweden Maine. I represent the Cannabis Council of Maine, a consensus group of four large cannabis advocacy groups in Maine. From 2017 to 2023 I was a registered caregiver in the program. I am currently a Registered Identification Cardholder and a patient in the Maine Medical Use of Cannabis Program. I appear before you today to support Ld 541 An Act to Create Parity in the Taxation of Medicine

Seven years ago this week, I testified with my 13 year old daughter standing by my side, in Hartford Connecticut to beg Cyndimae's home state to legalize pediatric medical use of cannabis so she could legally travel home to her many cousins, aunts, uncles, grandparents.... Driving from our home in Augusta Maine that day, we illegally crossed 3 state lines (twice), and we illegally took Cyndimae's medicine bag with her seizure rescue formulation into the Hartford Connecticut statehouse. The police officer ironically gave Cyndimae a junior sheriff's sticker and her smile lit up that copper dome – stickers were one way to her heart. Connecticut legislators knew Cyndimae, but that day they met a new child from the one who begged them for 3 years for safe access to cannabis; this child was able to walk and talk and answer their questions. They knew Cyndimae pre-cannabis in a wheelchair and drugged into a nearly constant seizure stupor by legal pharmaceuticals. They witnessed the miracle of cannabis that day. Cyndimae returned home to Connecticut and the Mohegan reservation on March 13, 2016 for the last time – this time, legally, death certificate in my hand. The Connecticut bill was posthumously named the Cyndimae Law in October 2016. My advocacy for this plant is always in Cyndimae's honor especially this time of year.

When Cyndimae, 2 out of 3 of her sisters, and I rushed to move to Maine as medical refugees seeking treatment for Cyndimae in 2013 at her neurologist's last hope recommendation, it was as they say on a wing and a prayer. Our family was still supporting a rising senior in Connecticut, paying a large mortgage on the family home in Connecticut, my husband had 5 more years left to work to receive his firefighter's pension, and we were paying rent and utilities in Maine. We struggled. A lot. If not for caregivers who donated medicine only charging the 5.5% sales tax, we never could have funded Cyndimae's medicine. Even still, we had trouble putting healthy food on the table and Cyndimae had a very wholesome medically indicated diet. Cyndimae came to Maine prescribed 5 pharmaceutical anti epileptic drugs that kept her seizing and bound to a wheelchair. We paid small copays and no tax on these harmful drugs. Midazolam was her rescue med back then. It came with a free cpr mask and ambu bag to resuscitate Cyndimae when it stopped her breathing and the 4 times it stopped her heart Over only the first 8 weeks in Maine, weaned from these harmful benzodiazepines and barbiturates, and using only cannabis, Cyndimae's seizures were down over 95% from literally countless numbers every few seconds to 1 to 4 – a week.

To charge patients an extra 5.5% is not kind. I know this is the bean counting committee and as a mathematician I can relate. As a patient and the mom of a deceased child in the program who utilized relatively high cannabis doses, I ask that the Committee strongly consider the personal impact more so than the financial impact. Perhaps raising the tax elsewhere to decrease the financial impact to Maine would help? At about \$6 60 (0.05cents a mg, 1200mg a week of two tinctures, \$120 plus 5.5% tax) a week it may not seem like much, but when a family is struggling to put food on the table, it really is a lot to ask of Maine's patients.

Thank you for hosting this meeting today. I would be happy to answer any questions.

Susan Meehan

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