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May 5, 2025

Testimony of Representative Marc Malon introducing

LD 104, An Act to Protect the Health of Medical Cannabis Patients and Streamline the Mandatory Testing of Cannabis

Before the Joint Standing Committee on Veterans and Legal Affairs

Senator Hickman, Representative Supica and esteemed colleagues of the Veterans and Legal Affairs Committee: I am Marc Malon, and I represent House District 133, which is part of the great City of Biddeford. I am here to present LD 104, An Act to Protect the Health of Medical Cannabis Patients and Streamline the Mandatory Testing of Cannabis.

LD 104 is a department bill drafted by the Office of Cannabis Policy, but this is not an example of a department bill where the legislative sponsor simply presents it without much comment. The moment I signed the jacket it became my bill, and I strongly believe in the policy changes it proposes.

What does LD 104 do?

Let's walk through the bill's changes in reverse order, because Part B of the bill informs Part A.

Streamlines Mandatory Testing for Adult-Use Cannabis

LD 104 amends the Adult-Use statute in two principle ways: it clearly defines the "matrix," which is the form in which the cannabis or cannabis product is at the time it is subject to mandatory testing; and it adds greater specificity, and thus clarity, to which harmful contaminants are required to be tested for and when, based on the matrix as defined earlier in the bill.

This will streamline the mandatory testing program for adult-use cannabis and ensure that the requirements are science-based, realistic and achievable, which will protect consumers, boost

District 133: Biddeford (Part)

consumer confidence and make the process more efficient for industry participants by reducing duplicative testing requirements.

Once we reform the testing requirements in adult-use, we can then look at the medical statute:

Mandatory Testing of Medical Cannabis

Part A of the bill, the part which has reasonably received the most attention, establishes mandatory testing requirements for harmful contaminants in medical cannabis and for potency, and further establishes the tracking and tracing of medical cannabis. Under this proposal, the testing and tracking requirements for medical-use would be identical to the requirements in adult-use, incorporating the changes to adult-use testing located in Part B of the bill.

In short, we improve adult-use and apply its standards to medical-use.

Background and Context

I do not need to educate this committee about the history of cannabis policy in the United States. We are still dealing with the consequences of decades of harmful prohibition and biased enforcement, contributing to mass incarceration and destroying families. I strongly believe these policies were a grave and tragic mistake, and thus strongly support legal cannabis.

Within that construct, I also strongly support medical cannabis and believe Maine should maintain its separate medical and adult-use programs. As you will hear from others testifying, many patients rely on cannabis for a variety of medicinal purposes, and its usage in consultation with a qualified medical provider can yield benefits both on its own merit and as an alternative to traditional pharmaceuticals. My earnest hope is that eventually, through federal rescheduling and eventual federal legalization, greater research will be done in order to better understand the beneficial uses of cannabis and better utilize the plant for patient-centered medical treatment.

The issue we face is that it is incredibly difficult to bring an industry from the illicit market to the legal marketplace. It is more difficult when considering that the product remains federally illegal. And it is more difficult still in Maine when you consider that our medical cannabis program began long before adult-use cannabis was legalized by the voters in 2016. I say this to note that getting the regulatory balance correct is a challenging process, one which will necessarily evolve over time and involve much trial and error. Both industry participants and regulators should be given a degree of grace as the process and industry evolve.

Why Testing is Important

When a product has long been illegal and stigmatized, there can be hesitancy from consumers when it becomes legal. This is why quality of product matters — as it can demonstrate that the product is something consumers can have confidence in. This confidence is undercut when there is inconsistency in the marketplace and poor quality control standards.

Let me be clear: I believe the vast majority of Maine's cannabis industry participants, from caregivers to large vertically integrated operations, act honorably and do their best to provide quality products to their consumers. Some medical participants even test their products voluntarily. I have heard from longtime medical cannabis providers and am struck by the depth of their knowledge and their passion for helping patients.

But the word "patient" is crucial. Any medical program for any product, cannabis or otherwise, must be patient-centered. Medical cannabis patients are relying on cannabis to treat a potentially wide variety of chronic and acute health conditions. By definition, they are more vulnerable. And as a result, contaminants such as *E. coli*, *salmonella*, certain pesticides, and certain levels of yeast and mold — contaminants which are harmful to all people — pose even higher risks for people with the health conditions cannabis is used to treat. There are others testifying after me who can speak to this in greater detail.

Maine cannabis patients deserve to have confidence that the product they are using to treat their health condition(s) is clean and works as intended.

Maine's Outlier Status is Bad for Patients - and the Cannabis Industry

Maine's medical cannabis program is the only medical cannabis program in the United States without mandatory testing requirements. This is why whenever I speak with ordinary Mainers — folks not involved in politics or the cannabis industry — they are stunned to hear that medical cannabis isn't subject to the kinds of testing standards as adult-use. If anything, they expected the reverse to be true. The word "medical" means something — it connotes a higher purpose and quality.

If current and potential future cannabis consumers are not confident in the quality of cannabis available legally in Maine, it puts the entire industry at risk, both of enthusiasts turning back to the illicit market and of potential consumers – especially potential patients – deciding it is not worth the risk.

Mandatory testing and the tracking and tracing of cannabis adds protections to the program and improves its image by demonstrating that the industry has a serious commitment to quality and integrity. It also helps reduce the harmful impact of a growing illicit market. It will keep illegally cultivated, dirty cannabis from ending up on shelves to be sold with the appearance of legality. It

is a safeguard which leads to fewer product recalls and fewer consumer complaints. And most importantly – it protects patients' health.

Moving Forward

Today you will hear from cannabis patients, industry participants, medical cannabis advocates and health care professionals – in addition to the Office of Cannabis Policy itself – who will provide their detailed reasons for supporting LD 104 and will be able to answer questions and correct misguided claims. You will also hear from opponents of the bill. I urge the committee to respectfully listen to and engage with folks from both sides of the debate.

Oftentimes in this building we have seen debates around cannabis policy become heated and personal. It's understandable. But I urge everyone participating today, from legislators to members of the public, to try and focus on the policy question itself. This is not about specific individuals nor is it about any specific businesses. It's about how we want our regulatory system to be structured and what we want it to accomplish.

My policy goal is straightforward: I want Maine's medical cannabis program to be the gold standard for product quality and patient outcomes. I believe this requires mandatory testing and tracking and tracking and tracking. I am open-minded, however, on the details, and am willing to listen to any ideas for how this bill could be improved.

I noted earlier that the moment I signed my name to LD 104, it became my bill. Once this public hearing concludes, it will become *our* bill. It deserves a thorough work session and this committee's full consideration. I am confident we are up to the task.

Thank you for listening. I will do my best to answer any questions you have.