



To the Committee on Veterans and Legal Affairs
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LD 939 OUGHT TO PASS

My name is Mark Barnett. I am a resident of Auburn, Maine, a medical marijuana Caregiver and the owner of Higher Grounds, a coffee shop and Caregiver store in Portland. I am the Executive Chair of the Maine Craft Cannabis Association, a diverse group of independent professionals and activists committed to defending and strengthening an authentic and responsible craft cannabis industry in Maine.

LD 939 ought to pass. This bill contains common sense fixes to Maine's medical program. It closes oversights in statute and lowers Caregivers' liabilities for operating since, unfortunately, marijuana is still federally illegal and can bring unjust legal complications.

Mainers have repeatedly voted against the unjust criminalization of cannabis. But the OMP is trying to create technical rules so burdensome that the majority of Maine Caregivers would be out of compliance on Day 1, and there is a threat that Caregivers out of compliance could be referred to the DEA for unjust prosecution. Therefore, the Legislature should act to prevent this, and LD939 is an important start.

The largest problem LD939 seeks to remedy is the requirement for all Caregivers to sell 25% of their crop directly to patients. By forcing Caregivers to engage in direct retail sales, the 25% policy generates several problems:

- It directly conflicts with municipal ordinances that prohibit Caregiver retail without a second municipal retail license that is expensive and often impossible for most Caregivers to obtain
- It forces farmers to either 1) own a retail store (a very expensive move), 2) receive patients in a Caregiver's home (problematic or infeasible), or 3) deliver to the patients' home, a practice which the OMP aims to make significantly more expensive and difficult
- It hinders Caregivers from 'specializing' in what they do best, e.g. cultivate rare strains and make formulations that target specific conditions. The Medical Program will function best when Caregivers differentiate from each other (as well as from Adult Use producers) but



the 25% restriction discourages that. All other participants can specialize. Why are we putting this limit on the most important part of the supply chain?

- OMP could use this confusing grey area to sanction, fine, and disqualify Caregivers, potentially exposing them to unwarranted federal legal problems
- OMP inspectors have told registrants that even doing business with caregivers who don't comply with the 25% requirement might be working with 'criminals'

Another important change would be to equalize fees for the two different cultivation styles caregivers may use (plant count vs. canopy area). The Legislature created the option to grow unlimited plants within 500 SF instead of with a 30 plant limit, but the OMP needs authority to charge fees on a canopy-area basis (rather than per plant). This missing sentence in statute led to the unintended consequence that Caregivers pay twice as much for a canopy license while not being able to crop unlimited small plants in the canopy area as they wish (now limited to 60).

The intent of the Legislature was for the Caregiver to choose one or the other cultivation style at the same license price, since cultivators can produce similar amounts of cannabis with either 500 SF or 30 plants, but the 'square-footage' approach allows for more specialty varieties and more efficient farming practices.

The other items in this bill reflect common sense revisions to an overly-restrictive regulatory regime. While there are many other small items in Title 22 that could use updating, we believe these are the easiest and clearest changes and recommend that this Committee pass this bill.

Sincerely,

Mark Barnett
Executive Chair, Maine Craft Cannabis Association