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Senator Louie Luchini, Chair Representative Chris Caiazzo, Chair Joint Standing Committee on Veterans and Legal Affairs 100 State House Station Augusta, ME 04333

Re: LD 1242, An Act to Ensure Appropriate Oversight of Maine's Medical Marijuana Program and LD 1319, An Act Regarding Registered Dispensaries Under the Maine Medical Use of Marijuana Act and the Definition of "Resident" in the Marijuana Legalization Act

Senator Luchini, Representative Caiazzo, Members of the Joint Standing Committee on Veterans and Legal Affairs:

Thank you for the opportunity to provide written testimony on behalf of the Department of Health and Human Services (DHHS) in opposition to LDs 1242 and 1319, two bills that would jeopardize the public's health and safety.

These two bills would put a stop to ongoing efforts by the Office of Marijuana Policy (OMP) to update the Maine Medical Marijuana Program (MMMP) Rule which was last updated by DHHS in February 2018, before the MMMP was moved to the Department of Administrative and Financial Services and a number of substantive changes were made to the laws governing that program. The result is that by the conclusion of 2018, the existing rule promulgated by DHHS was out of date; the gulf between current statute and program rule has only expanded in the intervening years.

The legislative changes that went into effect between February 2018 and today have dramatically transformed the contours of the MMMP that was regulated under our department. Those changes include removal of the debilitating medical conditions required in order for a physician to issue a patient certification, an end to patient designation of a specific caregiver or dispensary to assist them in the medical use of marijuana, and extensive modifications to the caregiver model that cleared the way for an increasingly commercialized medical market without the necessary transparency and oversight required for most other prescription and over-the-counter drugs.

Imposing any moratorium on rulemaking for the MMMP would exacerbate ongoing public health and safety issues within the program created by a dearth of federal oversight, research, and best practices. We are confident OMP is working to provide qualifying patients with the information necessary to make informed decisions about their medicine. As public health officials, we wish to highlight three of the most important public health tools integrated into the proposed MMMP rule: municipal authorization, inventory tracking, and mandatory packaging and labeling requirements.

First, Maine has a strong tradition of home rule that promotes creativity and ingenuity among municipalities tackling issues in their many communities. The proposed MMMP rule provides an opportunity during the application process for municipalities to have a say in how medical marijuana businesses are regulated within their boundaries. It allows large cities and small town across the state to

determine what kind of economic activity is appropriate in their community given each localities unique history and circumstances.

Next, the draft MMMP rule would implement the statutorily required and very necessary inventory tracking system authorized by 22 MRS § 2430-G. Inventory tracking of a high value, recreationally attractive medication like marijuana is critical to protecting public health for several reasons. First, it serves as a deterrent to diversion of medical marijuana to individuals who are not qualifying patients. We know that as of 2017, nearly 1 in 10 Maine kids between the ages of 12 and 17 reported having used marijuana within the past month¹. Except for minor qualifying patients, no child should be able to access marijuana from Maine's regulated markets, but without inventory tracking, the incentives for diversion are very high and the potential for enforcement or prosecution is very, very low.

In addition to deterring diversion, inventory tracking protects public health by ensuring that if and when contaminated or defective marijuana or marijuana products makes it to qualifying patients, it can be promptly and comprehensively recalled.

Finally, it is important to note that the draft MMMP rule would standardize the packaging requirements and label information to be affixed to all marijuana and marijuana products. These requirements are critical for two reasons. First, mandatory packaging that requires sometimes very, very potent marijuana or marijuana products to be contained in childproof packaging prevents accidental access to and ingestion of marijuana for medical use by children. This is important because Maine witnessed a 61 percent increase in the number of calls to poison control related to minors exposed to marijuana from 2018 to 2019.²

Mandatory labeling requirements provide important information to qualifying patients, their physicians and caretakers to ensure appropriate titration and dosing. Without the label information required by statute and the draft MMMP, qualifying patients have no consistent way of understanding the potency and impacts of a particular medical marijuana item on their body.

Qualifying patients deserve to have as much information about, and predictability from, the medical marijuana they are consuming as we do about the pain relievers and multivitamins in our medicine cabinets.

Sincerely,

Nancy Beardsley Deputy Director

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Maine CDC

¹ U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (2018). *Comparison Of 2008-2009 And 2016-2017 NSDUH State Prevalence Estimates*, *National Survey on Drug Use and Health 2016* (NSDUH-2016-DS0001) Retrieved from https://www.samhsa.gov/data/report/comparison-2008-2009-and-2016-2017-nsduh-state-prevalence-estimates

² Northern New England Poison Control Center