

Good morning Sen. Luchini, Rep. Caiazzo, and members of the Veterans and Legal Affairs Committee. My name is Brett Messer, a resident of Biddeford, and the Owner and General Manager of Brigid Farm located in Saco. I have been a patient for twelve years, a caregiver for nine years and a hemp producer for two years. I have served thousands of medical patients in Maine. I appreciate the opportunity to present testimony for you this morning on cannabis related matters.

Each and every year alcohol kills tens of thousands across the country including about 424 people annually here in Maine. Alcohol is responsible for 31% of all traffic fatalities in Maine. It is both addictive and destructive to one's body. Cannabis meanwhile has no related deaths in Maine. It is not physically addictive; in fact, it is used to treat addiction. And there is no risk of overdose. Yet given those abrupt facts that are easy to digest, we are constantly facing overregulation that is not based in fact or science.

If you compare Maine's craft brewing industry to Maine's craft cannabis industry, the differences are quite startling. You find alcohol advertising everywhere. Alcohol is sold in just about every store, and in the presence of minors. Licensees are not subject to annual third-party audits, or third-party testing of their products before they are sold and consumed. If alcohol kills, and cannabis does not, then why are we always facing additional regulations guised in the vail of public health and safety? There is no data that supports this.

If Americans for Safe Access rates Maine the best state in the country for safe and affordable access to medical cannabis, then why do we face over regulation in the name of aligning with National Best Practices? It appears we are the best practices that should be followed.

I need to address Rep. Hymanson's and other's comments that seem to have some factual inaccuracy. There has been clear and overwhelming objection to track and trace since the phrase came to be known. Additionally, she wants you to believe that cannabis requires track and trace because it poses the same risk as pharmaceutical drugs, when in fact, just like alcohol, pharmaceuticals kill people every year, and cannabis does not. Some folks would like you believe we are operating in the wild west, and in an unregulated matter. We are in fact one of Maine's most highly regulated industries. It was mentioned that municipalities would not have oversight like they do in Adult use, but that's also not true, there is already an opt-in clause in place. It's almost laughable that it has been suggested that caregivers have a seat at the table through the rulemaking hearing process. The OMP took testimony opposing these rules for 8 hours straight, and flat out ignored them.

LD 1242 – Put plainly, this bill provides a solution to the nightmare of a rule draft that the Office of Marijuana policy is trying to move forward with, and in doing so threatening one of Maine's largest and fastest growing industries. Despite days of testimony over years of input sessions, where nearly every single stakeholder has told the OMP and legislators, we do not want medical and adult use to be combined or look the same, they have pulled a copy and paste scheme with the adult use rules. You cannot fix the failures of the adult use program, by copying those problems in medical. We understand there are regulatory issues with Adult Use,

that is why you have adult use license holders before you today speaking against this bill. They want to see to it that it becomes hard to do business in Medical Cannabis. The rollout of adult use has been extremely slow and painful. The OMP does not have a track record that indicates they could not handle relicensing all 3000 medical licensees in the manner they've suggested. But that's all a part of the plan; to mire the medical program in impossible regulations. In the years since Adult Use licensing began, 586 provisional licenses have been granted, yet there are only 72 active licensees. Barely 10% of applicants after years of work, and of those active licenses, the biggest companies with deepest pockets were the first to open. Simply put, the OMP does not represent the will of Maine citizens. The only voice being heard in that office is that of lobbyists of large out of state cannabis companies who seek to control the market with regulatory capture. Not only did the OMP not include Caregivers and Patients in this rulemaking process (the two largest stakeholder groups in the industry), but they are also attempting to completely sidestep the legislature with massive substantive rule changes that require legislative approval. We need to put the brakes on this and give it the proper evaluation, which is required by law, and create changes that take all stakeholders into consideration.

LD 1319 – This bill eliminates the language previously passed which opens dispensary licensing from the current stranglehold of monopoly. Most of the eight dispensary licenses are held by out of state corporations. By allowing an unlimited number of dispensaries, it creates a level playing field for Maine business owners and increases patient access to affordable medicine. I do agree with the language that dispensaries should be required to be owned by Maine residents, just as caregiver licenses are required to be held by Maine residents.

LD 1434 – I specifically oppose section 9.b of this rule. There needs to be some easing of the entry requirements. Back to my alcohol reference, it is on display everywhere. There is no harm caused in the view of cannabis in the store during the check in process located outside the store, but inside of the building.

LD 1445 – I oppose this bill. Cannabis does not have enough sufficient peer reviewed scientific study to set testing limits on cannabis at this time. This is another instance of overregulation where it is not needed. Additionally, Maine cannabis testing labs do not have the bandwidth for the additional testing required by this bill. Proponents of testing requirements of this nature would like you to believe that people are becoming sick, and their health is being put at risk, but there is no data to confirm these arguments. It's simply a false narrative that cannabis presents any public health risk. The days of Reefer Madness style fear mongering need to come to an end. Beer brewers in Maine are not subject to any testing requirements prior to releasing alcohol onto the market. Yet an incorrectly calculated ABV could directly affect someone's ability to safely operate a vehicle. The market will decide if rigorously tested cannabis is worth the additional costs. We at Brigid currently test all our products because we feel it positively contributes to our patient's experience. It's unnecessary to test for pesticides in every batch because we don't use pesticides. We do test for it intermittently to provide that confirmation to our patients should they ask. This is a perfect example of why an overreaching

one size fits all approach for testing will not work. The current law and rule as written around testing is functioning well in our experience and feedback we've received from patients.

I would love to have follow up conversations with each and every member of the committee to discuss specific examples related to each of these bills.

Thank you.