

April 23, 2021

Re: LD 1242 , *An Act to Ensure Appropriate Oversight of Maine’s Medical Marijuana Program (emergency)*
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 (emergency)*

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

For the record, my name is Gillian Schauer, PhD, MPH. I am a Research Scientist at the Addictions, Drug & Alcohol Institute at the University of Washington, and public health and policy consultant and advisor to a number of states on cannabis policy issues and the potential public health impacts policies can have. I do not have any contracts with the State of Maine, and my testimony today is my own and not necessarily representative of any opinions of any of the agencies or states with whom I work.

I am here to speak in opposition to LD 1242 and LD 1319 – both bills that would undermine attempts to promote public health and safety on the medical cannabis marketplace in Maine.

Strong regulation of a medical cannabis program is important. The medical cannabis marketplace should be at least as regulated as the adult use marketplace given that individuals with medical conditions - some of whom may be very sick - are using these products as medicine and deserve to have safe products available to them. Substantial oversight and regulation exist for other medicines in this country, and cannabis should not be an exception.

All other comprehensive state medical cannabis programs regulate cannabis for public health and safety, requiring - for example - product testing across a range of contaminants, requiring specific product packaging and labeling, and tracking products to avoid diversion and to make it possible to quickly recall products if ever needed for public health or safety reasons.

A poorly regulated or unregulated medical cannabis program, which in my opinion would result from the passage of LD 1242 or LD 1319, poses a number of public health and safety concerns, including:

- **Contaminated products** due to a lack of product testing. These could include things like molds, microbials, and unsafe additives that can harm human health and may pose particular danger to patients with certain medical conditions.
- **Products that are insufficiently labeled** for a consumer to reasonably understand what they are consuming, how it may interact with other medicines, what potential risks and considerations of use might be, and the full list of ingredients - active and inactive - in the product.
- **Products that may appeal to youth** - including product types and forms that could appeal to youth, and product packaging that could appeal to you - or could be confused with non-cannabis products.
- **Products that can be accidentally or inadvertently consumed or overconsumed**, including accidental ingestion among children and youth due to a lack of childproof packaging, and overconsumption among adults due to a lack of reasonable standard serving sizes.

- **Products that can be diverted to the illicit market** due to a lack of a track and trace system and due to unregulated plant counts, which can lead to excess product in a state.
- **The inability to recall products in the case of a public health emergency** (like another Vaping Lung Injury Outbreak, for example) due to a lack of a track and trace system to facilitate quickly identifying the products, ingredients, or additives in question.

Finally, it is important to note that even the strongest adult use cannabis regulations mean little if a parallel, far less regulated medical marketplace exists. When states have both adult use and medical use marketplaces for cannabis, it is imperative for public health and safety in the state that major regulations across both programs are similar or the same, including those related to lab testing, packaging and labeling, and product tracking. An unregulated or insufficiently regulated medical cannabis market can pose unintended harms to patients and to youth who may more easily access diverted products. It can also undermine the establishment of a regulated adult use marketplace in the state. For these reasons, I urge you to vote against LD 1242 and 1319.

Thank you for your time and consideration.

Gillian L. Schauer, PhD, MPH
Research Scientist
Addictions, Drug & Alcohol Institute
University of Washington
Seattle, WA