



April 27, 2021

Written Submission of Testimony delivered 4/23/2021 to Maine Veterans and Legal Affairs Committee regarding LD 1242.

My name is Chris Wolfkiel. I am a PhD in Bioengineering currently specializing in clinical guidelines consensus development, work that I do with medical societies across the United States. I am also a co-founder of Seed2Health, LLC, located in Brunswick, Maine.

Seed2Health, LLC is developing consensus learning health standards - a framework for health that learns from its experience and is leading the Seed2Health Alliance, an unincorporated collaboration of stakeholders that is dedicated to plant and human standards to define and improve the safety and efficacy of medicinal cannabis in Maine.

I'd like to bring awareness to payer coverage to medicinal cannabis that has begun in workers compensation. We think this should be part of the expert perspectives to be consulted as part of MMMP rule making and should be considered in any Economic Impact Analysis, as well.

As background, between 2008-2013 I was Director of Practice Guidelines for the American College of Occupational and Environmental Medicine, the most comprehensive evidence-based medicine compendium for treating injured workers and am strongly biased to evidence-based approaches wherever possible.

In 2017, the National Academy of Medicine, formally the Institute of Medicine, published a [systematic review of published cannabis research](#) and found that there were four areas where the evidence supported use: chronic pain, nausea, MS spasticity symptoms and as a sleep aid. As you know, chronic pain is a primary issue in workers comp, especially considering the long-term implications of opioids and [the potential role of marijuana](#). Many leading workers compensation payers are actively tracking medical marijuana including:

[Coventry](#)  
[Optum](#)  
[CorVel](#)

And some payers and TPAs are actively managing medicinal cannabis benefits including:

[Bennabis](#)  
[Safety National](#)

The complexities of navigating regulatory and legal implications of federal marijuana scheduling, state "medical marijuana" programs, and workers compensation rulings are challenging and changing rapidly. [Six states have ruling or laws supporting workers compensation coverage](#) including NJ, NY, CT, NH, MN and NM), and New Mexico has established medical marijuana in its fee schedule. While many states have laws and rulings that do not compel coverage (including Maine and Massachusetts) few have laws that *prohibit* coverage, leaving decisions to individual payers. Those decisions are the result of legal



review, medical benefit and cost (see Safety National for more details) and generally are on a [case-by case basis](#) (including in Maine):

“When you look at what has already happened and the conversations around the country, there are a large number of (workers comp) payers that are reimbursing voluntarily or open to it, without any state mandate requiring them to do so,” said Mark Pew, Atlanta-based senior vice president of product development and marketing for pharmacy benefits manager Preferred Medical, who has been tracking marijuana’s emergence in the comp realm.

Mr. Pew said that comp payers are finding anecdotally that medical marijuana has replaced other drugs prescribed under workers comp for such issues as pain, and are going case by case on whether they will reimburse.

Furthermore, the likelihood of federal marijuana rescheduling in this administration and congress is high which likely would result in the reversal of many state court coverage rulings.

We believe there's a lot of hidden knowledge (especially with selection and dosage to minimize impairment) with patients, caregivers and providers that could be a tremendous advantage for Maine as one of the longest serving and highly regarded medical cannabis programs in the nation. It's Seed2Health's intention to uncover the knowledge created by focused use of medicinal cannabis by Maine patients as guided by caregivers and their providers.

It's also worth noting that medicinal cannabis is actively used in PTSD and now is being [studied in veterans](#), another potential target area for Maine.

Implications and opportunities for legislation and rulemaking include:

- Including non-physician work comp providers such as chiropractors and physical therapists working with caregivers
- Engage Workers Compensation underwriters
- Stimulate Maine based research

As a mentor once said, "there's always a choice, lead, follow or get out of the way". When it comes to the MMMP, we decided to launch our work in Maine within the MMP because we see it as Maine's unique opportunity to lead.

Thank you for your attention.

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