

To: Members of the Veterans and Legal Affairs Committee

Fr: John M. Jemison, Jr.

Re: L.D. 1242, AN ACT TO ENSURE APPROPRIATE OVERSIGHT OF MAINE'S MEDICAL MARIJUANA PROGRAM

Thank you for the chance to provide my support for Representative William's bill, L.D. 1242, with regard to the following:

Before adopting or amending rules governing the medical use of marijuana, the department must establish a process to include caregivers, registered caregivers and patients and physicians and certified nurse practitioners with significant knowledge and experience certifying patients under the laws governing the medical use of marijuana in the development of these rules or amendments and must consult with caregivers, registered caregivers, patients, physicians and certified nurse practitioners.

I am an Extension Professor at the University of Maine and a volunteer member of the Seed2Health learning health alliance. I am a resident of Orono Maine. I am actively involved in applied research to support the resinous hemp industry by conducting field research in weed management and soil fertility practices. I teach classes and educational programs on CBD hemp and a cannabis short course for the School of Food and Ag for work-force development.

I am a medical cannabis card holder. I have used both high and low THC cannabis for many years. I have an unusual medical condition called migralepsy which is a cross condition between migraines headaches and a seizure disorder. I have chronic pain in my lower back and in my right knee due to an injury in the 1990's. I have been told it will likely have to be replaced in a year or two. As a result, I grow and use resinous hemp to treat my migralepsy condition and high THC cannabis at night to help me sleep. I use acupuncture, quality diet, gentle exercise like walking and osteopathic manipulation along with cannabis to improve my health. I do not currently work with a caregiver because I grow my own plants and make my own medications. My wonderful primary care physician does not understand the plant (not an unusual occurrence); so, I use the Cannacare Docs of Maine to maintain my card. My regular use of CBD has helped keep me seizure free now for more than a decade. I support plant-based medicine both as a stand-alone medical approach and as a compliment to traditional western medicine.

I understand the state's desire to improve medical cannabis production standards. But, our medical program has been a model for other states. In 2019 the industry brought in over \$120 million into the state in tax revenue. The system proposed by OMP would kill the industry as has happened in a few legal adult use states and drive registered growers out of business. Most medical growers produce using good sustainable agricultural practices. They have

experience; they know the plant is not easy to grow well, and they use their knowledge of integrated pest management to produce quality medicine for their patients and for the dispensaries. I would enjoy working with a team to develop training materials to help growers learn and understand what these best practices are to prevent pest issues, and if/when problems do happen in a grow facility, what products growers can use that would not violate pesticide labels. Product selection and timing during plant development is critically important, and I would enjoy the opportunity to use my 20 years of working with the Board of Pesticides Control and my 30 years of Extension experience to voluntarily help craft integrated crop management practices as this is what I teach in my class.

What is the heart of the issue? We are growing plants in a setting where it is essentially always summer. There are never freezing temperatures to kill pests. Cannabis is currently classified federally as a Schedule 1 drug, and as such no pesticides are federally registered for its use. I teach my students that the first step to pest management is exclusion/prevention. We at Seed2Health are ready to help OMP design strategies to prevent pest issues. But again, sometimes problems happen. The Board of Pesticides Control in an effort to not promote pesticide products or make pesticide recommendations (not in their purview) developed a flow chart to help growers identify products which they could use. But that is limiting and difficult to follow. So, I have begun to go through and identify, using the flow chart, products registered both federally and in Maine which could be used without violating the label (a draft of the table is included at the end of my testimony).

While I am sure there are likely ways to improve the medical cannabis industry, these changes should be developed in concert with growers, not by a consulting firm. Why not try to establish educational programs and educate growers on best practices instead of onerous rules that make growers feel like they are being surveilled or breaking the law doing what they have done well for years. One change I would suggest would be to keep the total number of flowering plants that a card holder can grow remain the same but allow a larger number of immature non-flowering plants. If you grow cannabis from seed, you can't know that plant is female until the plant begins to show sex in late July or early August, and by then, most of those plants exceed the size allowed by the state. If the goal is to limit production by the resident, this is a more effective way to do this. As plants have different cannabinoid, terpene, and flavonoid profiles, this would allow the card holder to have a diverse profile of products to help with pain management.

My request is that OMP allow Seed2Health, Maine Craft Cannabis and other caregivers interested in the plant and the industry the chance to volunteer to help develop rules that work for this industry and not effectively end it. I appreciate your time.

Thank you,



John Jemison

