

Testimony opposing LD 1847

Honorable members of the Joint Standing Committee of Veterans and Legal Affairs,

My name is Virginia Milton, of Gardiner and I am submitting testimony in opposition to LD 1847.

To begin with I am not fundamentally opposed to Cannabis testing, nor to a Study Group to Examine Youth Consumption. I am a patient as well as a caregiver. I care deeply about providing patients with safe and effective medicine. I am also a mother and a grandmother and care about our youth and creating a safe environment in which they can grow and thrive. I was not ok with my children smoking pot when they were younger and I can promise you that no one would have ever predicted that I would be involved in a family cannabis business. A close family member suffering from chronic pain had exhausted every option using doctor prescribed pharmaceuticals with no relief and often horrible side effects. It is medical cannabis that finally made a difference for our family member. Watching this firsthand completely changed how I perceive cannabis use and its place in our society.

If enacted, this bill would negatively impact what medicine is available to patients and be financially devastating to small medical cannabis businesses and employees as well as patients and communities.

At our grow each of the flower rooms in any given cycle contains anywhere from five to eight different cultivars. The competitive market in Maine demands variety. And that variety as well as the high quality of Maine's medical cannabis makes Maine special and provides the opportunity for much more tailored medicine for patients. They have broad needs and preferences. In addition it is not a viable option for us to grow just one or two strains per harvest. We could not sell that volume of one strain.

If enacted this bill would require us to do five to eight unique tests from each of our harvests. With testing costs of \$550 per test (not including PFAF testing) this bill would create an added financial burden of \$2750 to \$4400 per harvest. Downward pricing pressure in the Maine Medical Cannabis market over the last several years leaves us absolutely no chance of passing on these higher costs to our customers. The added cost and administrative burden would very likely put us and many other growers out of business. This would leave patients without access to their trusted medicine as well as many jobs and tax revenues lost.

The Medical Cannabis Caregivers of Maine already have tracking. We have trip tickets and invoices, as required by law. Adding an inventory tracking system such as METRC would add another layer of administrative and financial burden to our business. As demonstrated by things happening outside of Maine such systems do not reliably provide what is promised.

There is also a portion of LD1847 addressing THC Potency and creating a limit of 10 mg per serving of "product". In our experience, 10 mg is woefully inadequate for a very large percentage of medical cannabis patients. Imposing a 10 mg limit would result in higher costs to patients who would have to buy larger quantities to get the dosage they require. While a 50 mg edible costs more than a 10 mg edible it does not cost 5 x more. Lower THC edibles also increase the volume that the patient must ingest. For someone who is weak and possibly nauseated eating more is often hard or impossible and sugar which is often an ingredient in edibles can hinder healing. Filling up on edibles may keep a patient from having room for more nourishing foods.

I believe Maine can do better than LD1847 to ensure safety and legal compliance in the Maine Medical Cannabis market. I respectfully ask for you to vote AGAINST LD 1847. Thank you very much for your time and your service.