

Jordan Smith
Pownal
LD 1840

In support of LD 1480

Greetings Senator Hickman, Chair Supica and the Honorable VLA committee. This Is Jordan Smith of Pownal, It was an honor to take part in the many public hearing hearings on Monday. Thank you all for putting in the work to get through such a long day, and for your service to the People of Maine.

I am writing in strong support of LD 1840. This may not be in the same order as everything appears in the bill. It seems there is a lot of misunderstanding based upon reading and witnessing written and verbal testimony from opponents of the bill. This bill does not make the sweeping changes they state. Removing the IHS license does not remove the safety requirements that must be met in order to operate safely. These remain intact and may be inspected by OCP for their compliance with applicable safety regulations especially NFPA standards. All equipment and the space must be certified by a licensed Maine engineer. We are talking several hundred thousand dollars in safety equipment in many cases. And again the only difference for anyone operating a new lab from how it is right now would be the physical form which probably won't be changed before 2026 regardless. So the notion that labs will be popping up everywhere is unfounded for several reasons.

You likely all know my story as I have spoken/ written it many times. Ill go over it again for the record and for reference. I was put out of business by a piece of paper released by OCP. No laws had changed, no ordinance in my town had changed, just a different code enforcement officer and a new form from OCP she refused to sign. We were grandfathered, we had been operating since 2010. We had the blessing of the town for 14 years, than OCP gave my town a chance to act like we were never approved after being authorized for years by the state. We fought the town for 6 months. We eventually lost since they were the ones ultimately deciding our fate. It was all an exercise in futility, it felt as though we were on trial for doing what the town has always allowed us to do, it was so surreal. They also wasted 6 months of legal fees to put us under. I just don't understand the preference for procedure over people that seems so sadly common place today. Nobody in our town has a problem with us, they turned up in our support, we filled the room. Tons of money wasted in legal fees between us and the town, we lost our business and several hundred thousand dollars in revenue thus far. The town gained absolutely nothing in closing our business that again had been there for 14 years helping everyone we could including several people from our own town. We have had to use up all of our available credit, take out loans and borrow against our life insurance policies just in order to not lose everything we have spent our lifetime to gain. (my Wife and I) Also at the end of everything the code enforcement officer got fired so who knows what the next one would have said. We have several a year in some cases it has been as many as 3 within a 6 month period in my town. Some lasting only days (info from FOAA request)

2. One must get this form signed and notarized every year in perpetuity. If there is potentially a new person each year as Code enforcement officer etc. there is nothing stopping a new town Official from using this form to deny previous approval. Even if OCP has evidence of that approval and has licensed you based upon that. It is 100% up to the town, via this form. OCP will still take the word of a town employee over hard evidence provided by a stakeholder, like, in our case a literal municipal approval on town letterhead that specifically says we are grandfathered and have operated for over a decade at that address. It literally mentions the space, the equipment etc. We were licensed by OCP for years with that very document. I am still in disbelief to this day.

3. There is home rule people who have been in the program since 2009 or know the history of our laws well know that LD 975 as amended in 2010 expressly allowed

for the production of cannabis extract by any patient or caregiver until LD 238 went into effect 8 years later (I will send the committee LD 975 2010) for reference. Under this statute we produced and provided cannabis concentrates to those who needed them most for years before IHS was even a term. In the beginning many of our patients were terminal or very ill. These high dose products customized to the patients needs were scarce in the market at the time. We filled a hole in producing them for those who needed them most, and we were honored to do so. There was in fact a long period of time where any caregiver could produce extracts by any method with no municipal approval and with anonymity. There were no safety regulations, this was the infancy of legal “IHS” extraction using butane in Maine. I guess I might ask where is the grandfathering for those who were doing this before the town was even allowed to know? They have no recourse, nothing from their town. Many towns simply say it’s run by the state, “we don’t have anything to do with it.” We loose a lot of people in this fuzzy area. I lovingly call this “great grandfathering.” From a time when anonymity was still integral to the program. I’m not necessarily asking we go back this far but I want to be clear that “IHS” extraction has been authorized conduct of a caregiver since 2010. (Before the term IHS was even used) most towns think IHS is a new thing, not being aware that a lab may have operated long before they were allowed to even know in their town. Again LD 975 allowed for 8 years of anonymous operation before LD 238 went into effect. Then it was simply a matter of letting DHHS know you were going to operate a lab and where it was. Which obviously we did as soon as that was required.

4. Enter LD 238: I worked on 238 with many others which added sensible regulation of butane and other extraction labs. We worked to make the process safer and sensib. regulated. The form that has become such a problem was sadly born from the rule making section of this bill. Another cautionary tale about what we leave open to interpretation or as a loose end. This was never the intent of LD 238. Anyway we kept up with the regulatory requirements as they expanded, we even opened a second lab for 3 years. Eventually closed the second lab and we hit a wall with the municipal approval form with our Home location last year. Deliberating for 6 months with the town while still operating because they knew that they could only stop us with the form when our renewal was up because we were indeed legally operating up into that day. Obviously we were not able to meet the requirements for our renewal due to the refusal of our town to sign the form. Closing our doors on June 28, 2024.

5. I am a huge proponent of lab safety. It is literally the most important part of an “IHS” lab and the SOPs used to operate it. Every SOP I write has safety and PPE (personal protective equipment) as the first section. Anyone implying that these regulations would be eliminated is incorrect and is absolutely not the intent of this bill. I would not advocate for the operation of unsafe/ uncertified equipment or environments.

6. The town had always approved of our activities but they have also kept it somewhat quiet. This is how a lot of towns are, they are supportive until they are not, or until they have to essentially come out as a town that has a medical cannabis operation in it. OCP puts the towns in a tough spot with these forms, and they feel as though by signing the form that somehow “opts them in” and opens the town up for more cannabis businesses to take hold. Which is absolutely not the case, especially when it comes to grandfathered businesses. The only thing 1840 asks in this regard is that those who were unfairly displaced by the municipal approval form or IHS application be made whole again. Claims from opponents saying this will undo years of work are referring to work that was done to harm Mainers. It seems no matter what the people of Maine want OCP is at the ready to take it away or misinterpret it and use it against them. So no, this will not undo years of work. It will undo years of mistakes, while leaving intact and untouched the good work that has been done over those years at the same time.

7. A lot of towns are choosing to use this municipal approval form to destroy businesses. Others are grappling with what the form even means and are spending

months or over a year in town meetings, hearings, etc.

8. 1840 does not authorize someone who has not in the past or does not currently have IHS authorization. It does seek to regain authorization for previously authorized “IHS” labs, caregiver stores, dispensaries, manufacturing facilities who had municipal approval that was revoked due to a form (the municipal approval form) not being completed by their municipality or due to a change in leadership or other factors. It also seeks to fix the misalignment between towns allowing cannabis businesses and actually having an ordinance. It does not allow for anyone to just set up a lab, or a store etc. This is a huge misconception that has been asserted by essentially everyone that has spoken or written in opposition. I hope this help you understand that this is not the boogeyman opponents are seeing/ claiming it to be. If you listen to what caregivers and patients have said and written thus far it’s clear that there is wide support by patients, caregivers, individuals, several trade and industry associations, groups etc. many who are not alway on the same page.

9. The reason for getting rid of the IHS license is because it never should have existed. It’s been allowable conduct of a patient, caregiver, dispensary, manufacturing facility since 2010. Municipal approval was not required until 2018 at the earliest and that was just something you had

to show upon inspection, it was not part of the application process until 2022. The new IHS application ended up being essentially a cut and paste of AU regs that you would need to agree to in order to continue to operate. Another example of something we didn’t need that ended up harming stakeholders. Again this was all done through an application for a new license that you needed now even if you had been operating for years. The IHS license was a control/ money grab and we simply do not need it. This death by a thousand cuts is painful and it’s incredibly sad. I have tried to open a dialogue with various individuals at OCP on several occasions but we ultimately end up at the horseshoe instead every year. A few conversations/ meetings with smaller stakeholders could help solve so much but for some reason that seems off the table.

10. I was extremely shocked to hear from OCP, during the hearing that they don’t have a problem with the caregiver list list causing people to loose their bank accounts, mortgages and more. And to continue on to say that they have had no complaints? Everyone loves it?

I don’t know how to respond to that given the measurable harm that OCP is very much aware of being caused by this list.

11. Again, this list is is incredibly reckless and puts caregivers and RIC card holders in danger. OCP themselves have used this to try to justify legislating for professional security systems for program participants. So if they know it’s a risk, why publish a “hit list” of everyone in the med industry? When I first called OCP about this their response was “well we were nice enough to leave your exact addresses off” That was the moment, for me that this became an even more important matter to address this session. The confrontational and now perceivably aggressive actions of OCP. needs to stop. This has created an environment where OCP and the registrants are both always in a sort of fight or flight state. Static, no progress, both of us pushing so hard against one another that all of our energy is wasted on getting nowhere. Meaningful stakeholder engagement by OCP is paramount. This is something we have not had in some time. I’m not sure if it’s happened much at all since AU launched.

12. 1840 will restore some of the damages done over the past few years, much of which has happened starting in January of 2024 when several new forms were released by OCP that sent shockwaves through the community, killing businesses left and right. These specifically were the new municipal approval forms needed for any store, lab,”IHS” facility, manufacturing facility, or dispensary. These were made under rule making but ran amuck of the scope of what that rule making allows and if the intent of the legislation that they were born/ interpreted from. Many parts completely disconnected from the statute and or it’s intent. They in addition to several other forms /documents in my option have been acting as substantive rule change under the guise of a form, guidance document, memoranda, application etc. Since

OCP lost the ability to make substantial rule changes after the tobacco products incident they have relied heavily on leveraging these methods. Everyone sees it everyone knows it. It needs to be fixed.

13. Farmers markets: I am 100% in support of this. This was commonplace in Maine for a very long time and then all of a sudden OCP made another “not a rule change” and now they are apparently banned. So anyway these are at the heart of Maine’s cannabis community and a place where connections are made personally and professionally. Not being able to have that sort of event is eroding what’s left of Maine’s rich cannabis culture and community. I am in full support of this and all sponsor’s amendments so I will let the rest speak for themselves.

14. To address concerns regarding not being able to create forms or guidance. This bill simply creates some limitations on how far from statute this guidance can drift. We can’t keep accepting these outrageous interpretations, guidance and forms etc. that in some cases are used to enforce the opposite of the intent of statute. Something has to be done to stop that, LD 1840 is that something.

Please support this comprehensive, reparative bill that will help a struggling caregiver community better serve their patients and patients better access the caregivers that are the heartbeat of Maine’s medical program.

Thank you so much for taking the time to read my testimony on LD 1840. Thank you all again for all your hard work in service to the People of the great State of Maine.

Sincerely,
Jordan Smith