COLLEGE OF SOCIAL SCIENCES
public policy center
UNIVERSITY OF HAWAI'I AT MĀNOA

MEDICAL MARIJUANA LEGISLATIVE OVERSIGHT WORKING GROUP
ACT 230, HB 2707, SESSION LAWS OF HAWAII 2016

Meeting Minutes

DATE:	Wednesday, October 12, 2016
TIME:	2:00 pm
PLACE:	Conference Room 325 State Capitol 415 South Beretania Street

Working Group Members & Presenters in Attendance:
Senator Rosalyn Baker, Co-Chair
Representative Della Au Belatti, Co-Chair
Representative Joy San Buenaventura
Professor Susan Chandler, Facilitator, UH-Manoa Public Policy Center
Carl Bergquist, Drug Policy Forum of Hawai,,i
John-Paul Bingham, University of Hawai,,i, College of Tropical Agriculture
Christopher Garth, Executive Director, Hawai,,i Dispensary Alliance
Wendy Gibson, Drug Policy Forum of Hawai,,i/Medical Cannabis Coalition of Hawai,,i (alt.)
Richard Ha, Lau Ola, Dispensary Industry Representative (Hawai,,i County)
Stacy Karcher, APRN/RX
Rob Lee, Department of Transportation, Airports Division (alt.)
Peggy Leong, Hawai,,i Department of Health (DOH), Medical Marijuana Dispensary Licensing Program Supervisor (alt./presenter)
Assoc. Professor Colin Moore, Director, UH-Manoa Public Policy Center
Keith Ridley, Hawai,,i DOH, Office of Healthcare Assurance
Scottina Ruis, Hawai,,i DOH, Medical Marijuana Registry Program Coordinator (presenter)
Michael Takano, Pono Life Sciences, Dispensary Industry Representative (Maui County)
Calvin Tong, Honolulu Police Department
Thomas Wills, University of Hawai,,i Cancer Center
Patricia Wilson, Honolulu Police Department (alt.)
Greg Yim, MD

Working Group Members Present by Phone:
Michael Contrades, Kauai Police Department
Thayne Taylor, Hawai,,i Dispensary Alliance

I. Introduction of Members

Welcoming remarks made by Representative Belatti followed by brief introductions of Working Group members[1] present in person and by phone.

[1] A list of Act 230 Working Group members is posted on the UH-Manoa Public Policy Center website at http://www.publicpolicycenter.hawaii.edu/projects-programs/act230.html

II. Overview of Act 230, HB 2708, CD1 (SLH 2016)

Representative Belatti highlighted the three main purposes of Act 230: (1) to clarify and amend statutes pertaining to the dispensary system; (2) ensure the efficient and responsible operation of medical marijuana dispensaries; and (3) further ensure access to medical marijuana for qualifying patients.

Representative Belatti provided a brief overview of the main provisions of Act 230.[2]

III. Explanation of Public Policy Center Facilitator Role and Working Group Ground Rules

Professor Chandler explained role of UH-Manoa Public Policy Center (PPC) which has been tasked with administrative oversight of the working group. This role entails: (1) facilitation; (2) coordinating activities; and (3) information dissemination.

Professor Chandler presented ground rules for meetings that were accepted by the Working Group. These ground rules include the following:

- Everyone is welcome and encouraged to contribute their ideas and participate which means.... everybody will get airtime, so be conscious of how much time you are taking and how much you are leaving for others.
- Be open to learning from each other and respect all points of view, even if you disagree.
- One person speaks at a time. Please do not interrupt.
- Respect confidentiality. Issues discussed in the Legislative Oversight Working Group stay in the group until agreements are forged and made public.
- Try to stick to the theme and topic being discussed.
- Be solution-oriented.
- Silence electronic devices. If you must make or receive a call, as a courtesy to others, please leave the room.

Working group approved the October 12, 2016, agenda.

IV. Update on Patient Registry Program and Dispensary Program

DOH representatives (Keith Ridley; Scotti Ruis; & Peggy Leong) presented[3] an update of the two parts of the DOH Medical Marijuana Program: (1) the Medical Marijuana Patient Registry Program; and (2) the Dispensary Program.

Mr. Ridley began by identifying the foundational principles of the overall program as (1) patient safety; (2) product safety; and (3) public safety.

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[2] A copy of Act 230 is posted on the UH-Manoa Public Policy Center website at: http://www.publicpolicycenter.hawaii.edu/projects-programs/act230.html

[3] A copy of the DOH presentation is posted on the UH-Manoa Public Policy Center website at http://www.publicpolicycenter.hawaii.edu/projects-programs/act230.html. More information about both the Medical Marijuana Patient Registry Program and the Dispensary Program can be found at the DOH website at http://health.hawaii.gov/medicalmarijuana

Ms. Ruis provided an overview of the Patient Registry Program that included:
- A historic overview of the laws associated with medical marijuana;
- An overview of the Registration Program process;
- Qualifying debilitating medical conditions;
- Patient requirements;
- Physician/APN requirements;
- Law enforcement verification and access to data for law enforcement purposes;
- Patient and Caregiver Protections;
- "Medical use" definition and conditions of use;
- Applicabilty of all smoke-free laws; and
- Citable offenses.

Ms. Ruis highlighted items that are coming up in 2018: (1) reciprocity of patients certified in other states; and (2) phasing out of caregiver grow sites.

Ms. Ruis reported the following statistics related to the Patient Registry Program:
- DOH issues 1200 cards per month;
- Registered patients have increased by over 25% since the beginning of the online registry system;
- As of September 30, 2016: 14,638 registered patients certified by 98 different physicians statewide;
- Majority of certified patients are age 46 or older (62%);
- Miniors make up less than 1% of all patients;
- Male to female patient ratio is about 2:1 (67% male; 33% female);
- Pain indicated by over 90% of patients; and
- About 10% of patients have caregivers.

Ms. Ruis provided staffing and administrative updates as follows:
- Staffing: 4 personnel currently hired; 1 vacancy (can fill no sooner than Jan. 1, 2017)
- System improvements continue
- Amendments to administrative rules – public hearings were held to allow for disclosure of certaint registration information to persons authorized with the dispensary system and federal law enforcement officials for law enforcement purposes;
- Patient application turnaround time has been reduced to about 18 business days (turnaround time has been cut in half compared to same time last year)

Mr. Ridley and Ms. Leong presented information about the Dispensary Licensing Program. Highlights from their presentation include the following:
- Organizational structure: Dispensary Licensing Program Section falls under the DOH"s Office of Health Care Assurance;
- Statutory timeline;
- Dispensary timeline;
- Dispensary locations statewide;
- Status of dispensary rules;
- Key definintions for "production center" and "retail dispensing location";
- Key provisions of House Bill 2707 (SLH 2016);
- Status of licensees noting that one licensee requested Department of Agriculture to test imported potting mix that was not previously on pre-approved DOA list and now is on list; 3 NED (Narcotics Enforcment Division) certificates have been issued to date; one licensee is ready to cultivate; and no "notices to proceed" have been issued yet.

Mr. Ridley and Ms. Leong concluded presentation by identifying the following next steps for notices to proceed:

- DOH Environmental Health checklist and contact list being completed;
- Confirmation on other licenses or permits;
- Computer software tracking system (Seed-to-Sale);
- Registry system interface with tracking system
- Establishment of certified labs (verbal interest from multiple labs for 2 islands; no lab applications received as of October 10, 2016).

Following the DOH‟s presentation, Working Group members engaged in the following question and answer session with Mr. Ridley, Ms. Ruis & Ms. Leong:

Q: What is turnaround time for patient certification?
A: 18 business days.

Q: What is the status of the patient registry system interfacing with the seed-to-sale tracking system?
A: Interface needs to be built out once the contract is signed. Build out will occur in phases. Currently there are two vendors for the registry system and the seed-to-sale tracking system. A statement of work is needed to get the systems to interface.

Q: Is DOH not able to issue certificates until interface is complete?
A. The registry system is operational. The lack of an interface system will prevent sales.

Q: Is growing prevented because of the lack of interface between registry and seed-to-sale tracking system?
A: No, growing can occur.

Q: When does DOH expect seed-to-sale tracking system contract to be signed?
A: Legal review of the contract is underway.
Further comment: Legislators do not want to see bureaucratic delays.

Q: Why is there only one production site for each license?
A: Licensees have only identified one so far for their licenses.

Q: When a production site is approved, what's the criteria?
A: DOH verifies that a production center is at least 750 feet from a school, playground, etc.

Q: How long will it take to process a lab application?
A: Will need to get back to Working Group.

Q: With regard to cancer patients and minors‟ application process (timeliness), is DOH working on prioritizing the most needy (e.g. hospice patients)?
A: DOH has had meetings about this matter. This population keeps coming up as a priority item. The current system does not allow DOH to sort electronic applications before reviewing it. DOH continues to look at this.

Q: How much time does DOH spend on addressing issues that delay the application process?
A: Cannot give an exact percentage of time. There are two ways for applicants/patients to interact with staff – email and phone. Time taken to respond to inquiries is time taken away from patient application review.

Q: Is there a way to expedite applications? If DOH cannot flag an application prior to review, can DOH create a box to check for hospice patients?
A: Once the online form is built, it is limited to what has been defined. Any changes require modifications to contracts and systems. It is possible to flag for certain conditions, but it would require negotiation with the vendor.

Q: Who is the vendor for the patient registry system? Is it difficult have changes made to the system?
A: Hawaii Information Consortium (HIC) is the vendor. Not sure about support provided by HIC to other State programs. At DOH, internally program has to prioritize items. Things can get done, but not all at once.
Further comment: Concerns expressed about HIC. Further discussion is needed on this topic.

Q: Has DOH ever denied a patient application based on improper/missing certification?
A: DOH has not denied an application, but DOH has returned incomplete applications. Patients have expressed frustration with application denial when criteria met. But important to remember that the patient is responsible for completing the application correctly. They must list a grow site that needs to be registered and certified.

V. Brainstorming Topics by Working Group members

Working Group members identified topics and discussed the establishment of sub-committees and volunteer leaders for the topic area discussions.

Senator Baker suggested and Working Group members concurred that monthly updates from DOH Patient Registry and Dispensary Programs should be a permanent standing item on the monthly working group agenda.

The following topics were identified for further discussion and work by the Working Group:

(1) Product issues
- Expanding products to include edibles (understanding that some patients benefit from long-action medications in conjunction with short-acting medications);
- Expanding sales to include seeds and clones;
- Advertising & packaging concerns related to edibles & other products;
- Expanding products to include medical devices & other consumer products.

(2) Marketing and advertising
- Current law has standards for & prohibitions against advertising;
- Consider how statute may be changed to allow for advertising;
- Noted that advertising and mail through US postal service is allowed for hemp products.

(3) Education
- Industry training for staff employed by dispensaries;
- Greater public education needed (in all sectors: medical, legal, agriculture, etc.);
- Medical personnel (physician/APRN) training;
- Patient education about their options;
- Cancer consortium could be a resource for education.

(4) Patient Issues
- Expand qualifying conditions (as more research comes out, consider expanding conditions);
- Get medical and community input during update/review process of qualifying conditions;
- Suggestion made that in addition to MD on the working group, effort be made to reach out to medical board and/or Board of Nursing for input (Senator Baker noted that she would reach out to Medical Board);
- Improving patient certification process (look to other states such as OR, MA, NV where patients are able to access medication upon meeting initial criteria on application);
- Establishing conditions of retail locations to ensure safety & comfort of patients.

(5) Research Needs & Issues
- Strains of medical marijuana;
- Better ways to grow, process manufacture products;
- Impact on patients;
- Medical marijuana presents opportunity for medical and agricultural research by JABSOM, Cancer Center, CTAHR, School of Pharmacy;
- UH and research institutes bound by federal rules and concerns about losing federal funding that constrain participation in marijuana research;
- Need to understand and be better educated about the statutes and rules allowing or constraining research institutions from engaging in research;
- Impact on community at large – need social science research too (attitudes, beliefs & perception);

(6) Labs
- Concern expressed about whether labs that will be testing product are certified facilities;
- Concern expressed about length of time it takes to establish a certified lab;
- Concern expressed that there may be different standards at different labs & how to ensure quality of lab testing;
- Suggestion made that Hawaii look to other states that have laboratory testing and adapting those standards to fit Hawaii.

(7) Reciprocity
- Need to start working on what reciprocity will entail;
- Reciprocity recognition of all patients vs. patients with particular types of eligible conditions;
- Need to consider compatibility of other states‟ laws with Hawaii‟s laws.

(8) DOH Organization and Resource Issues
- Capacity of DOH;
- Organizational structure of programs;
- Staffing, resources and budget.

(9) Banking Issues

(10) Caregiver concerns
- Delay of production centers opening may prompt amending 2018 caregiver cultivation prohibition;
- Need to better understand and address "card stacking" where there may be different challenges and solutions depending on rural vs. urban areas

(11) Transportation/Accessibility issues:
- Because other states allow travel within state borders, consider interisland transport beyond limited lab exception;
- Delivery options for patients;
- Need to better understand issues facing patients & caregivers on different islands (ie. Molokai dispensary needed; & limited bus system on Big Island will present challenges for access to retail sites.

(12) Dispensary licenses
- Revisiting horizontal vs. vertical production-distribution model;
- Look into possibility of allowing more production sites per license;
- As data collected, identify/make recommendations whether to increase number of licenses.

(13) Status of DOH rules and further rulemaking
- Question raised about whether DOH willing to amend rules before 2018; and
- Suggestions made that there is a need for clearer definitions of physical structures, labs, and production center.

Next steps:
(1) PPC will categorize the interest areas discussed by the Working Group and email list to the working group members;
(2) PPC will send out a poll to the working group to prioritize the issues;
(3) At the next meeting, the Working Group can decide which areas individuals would like to work on.

Dates for next meetings:
Wednesday, November 9 at 1:00 pm; &
Wednesday, December 14 at 1:00 pm

VI. Questions and comments from public

One public member expressed concerns about patient privacy rights especially if patient information is being sent to a federal databse. Commented that all states have a sales database that can be verified at the state level. Measures need to be taken to protect a patient‟s right to grow and access medication. Would also like to get a clear timeline when dispensaries will be dispensing medicine.

A second public member requested that Working group address interisland transport issue. Consider looking at OaklandAirport that allows transport and has devised a way to handle this issue with TSA.

A third public member commented that there are parties interested in opening up labs in Hawaii. Explained that these parties are timing the opening of a lab with the production by dispensaries because the lab testing instruments are expensive and labs cannot afford to order equipment just to sit around and wait.

A fourth public member requested the Working group consider delivery options for dispensaries to address accesibility issue. Also asked question about prohibition of extraction techniques in the manufacturing process. Representative Belatti clarified that extraction processes involving flammable solvents are being allowed within dispensaries. The prohibition on use of butane applies to those growing medicine outside of the dispensary program.

VII. Announcements

Representative Belatti explained co-chairs are proposing to invite dispensary licensees to make presentations at the upcoming meetings. Working Group members agreed that this would be useful.

Representative Belatti explained that parking passes are available for Working Group members to attend meetings at the Capitol and that teleconferencing would also be available for Working Group members. In addition to teleconferencing, the co-chairs will also be organizing the broadcasting of future meetings with Olelo or Capitol TV in order to facilitate participation by working group members unable to attend meetings in person.

Working group members should contact Jon at Representative Belatti‟s office at (808) 586-9425 with any of these requests.

VIII. Adjournment

The next Task Force Meeting is Wednesday, November 9, 2016
at the State Capitol, Room 325, 1:00-3:00pm.