

Good morning Madam Chair Lee and members of the Human Services Committee. My name is Jason Wahl, Director of the Division of Medical Marijuana within the Department of Health. I am here to support and provide information on House Bill 1417 related to proposed changes to language within the Medical Marijuana chapter of state law. It should be noted several additional changes are necessary to the Medical Marijuana chapter not currently addressed by the bill.

House Bill 1417 would make a change in the amount allowed to be purchased and possessed by a qualifying patient with cancer. The purchasing amount in a 30-day period would more than double, going from 2.5 ounces to 6 ounces. Also, the bill would provide for a 2.5 times higher possession limit (going from 3 ounces to 7.5 ounces).

Similar to House Bill 1283, this bill would modify the definition of written certification by removing language currently requiring a health care provider to state in their professional opinion the patient is likely to receive therapeutic or palliative benefit from the medical use of marijuana. We do support this change to the law as we have heard from the medical community that this requirement may be limiting the number of health care providers willing to complete a written certification.

The bill would also eliminate the requirement for a health care provider to authorize the use of dried leaves or flowers. This, in turn, would eliminate the requirement for a registry identification card to include whether the qualifying patient is authorized for dried leaves or flowers.

With the current language in House Bill 1417, there are other sections under NDCC Chapter 19-24.1 that require amendments to provide consistency. For example, NDCC Section 19-24.1-01, Subsection 38 references authorization of dried leaves or flowers and is not amended under House Bill 1417. This would cause a conflict in statute. We would be willing to work with our legal counsel or Legislative Council to introduce an amendment to the bill to address all necessary revisions for the Committee's consideration.

With the dispensing of marijuana products recently to registered qualifying patients, we have identified an additional potential change to state law that we would like to bring to the Committee's attention. Under the program, a qualifying patient may not purchase more than 2,000 milligrams of THC in medical marijuana products in a 30-day period. The Committee may want to consider revising this amount as this amount appears low. For example, the concentrates available when the dispensary opened were disposable vaporizing pens and shatter. A vaporizing pen had 453 milligrams of THC while shatter had 356 milligrams of THC. An individual would only been allowed to purchase four vaporizing pens under the 2,000 milligram limit. As a contrast, under the state of Ohio's program, which began

dispensing the middle of January 2019, a patient may collectively purchase within a 90-day period:

- 26,550 milligrams of THC in patches, locations, creams, or ointments;
- 9,900 milligrams of THC in oils, tinctures, or capsules; and
- 53,100 milligrams of THC in oil for vaporization.

The Department of Health did submit a fiscal note regarding implementation of House Bill 1417. There are three areas of the bill that would require changes to the information technology system. This includes changes to the written certification form, the addition of an enhanced amount of dried leaves or flowers, and the removal of the additional authorization for the use of dried leaves or flowers. The estimated cost to change these items in the system is approximately \$30,000. The Department of Health would use funds derived from fees to pay for the costs associated with the changes. The fees are deposited into a special fund and appropriated through a continuing appropriation.

This concludes my testimony. I am happy to answer any questions you may have.