

STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. Box 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File:

HOUSE COMMITTEE ON HEALTH
HB2092, RELATING TO MEDICAL MARIJUANA

Testimony of David Sakamoto, MD, MBA
Deputy Director, Health Resources Administration

February 26, 2014

LATE

1 **Department's Position:** Comments

2 **Fiscal Implications:** None

3 **Purpose and Justification:** This bill amends Section 4 of Act 178, SLH 2013 by: 1) changing the term
4 "registry card" to "registration card"; 2) removing requirement that the physician issuing the written
5 certificate for the use of medical marijuana be the qualifying patient's primary care physician; 3) amends
6 the fee for the registration card from \$35.00 per year to "no more than \$35 per year." Takes effect
7 January 2, 2015.

8 The Department concurs with the change in terminology from "registry card" to "registration
9 card."

10 The Department recognizes the compassionate use of medical marijuana. The intent of limiting
11 the qualifying physician to the patient's primary care provider in Act 178, SLH 2013 was to ensure that
12 the patient's physician knows the entire patient rather than a limited organ system or symptom(s) and
13 that the potential benefits of medical use of marijuana would likely outweigh the health risks for the
14 qualifying patient. A single visit by a patient to a physician who has limited knowledge of that patient

1 might not meet the intent of compassionate use of a substance that does not fall within normal
2 pharmacologic standards.

3 Limiting the qualifying physician to the patient’s primary care provider, however, may create
4 problems for patients whose primary care physician refuses under any circumstance the compassionate
5 use of medical marijuana (which may be a substantial portion of primary care physicians in Hawaii) or
6 work at the Veteran’s Administration Hospital, Kaiser Health Care System, or federally funded
7 community health centers where they may not be permitted or discouraged to provide compassionate use
8 of medical marijuana. As a practical matter, currently, there are an inadequate number of primary care
9 providers on some of the neighbor islands.

10 In order to meet the intent of primary care provider in Act 178, SLH 2013 as best as possible, the
11 Department recommends that in addition to current requirements in the law, revised legislation should
12 require a physician to: 1) provide a medical history and physical examination (to minimize risk of
13 misdiagnosis); 2) review the patient’s medical records, including medical records from other treating
14 physicians from at least the previous 12 months; 3) maintain a medical record on the patient; and 4)
15 arrange for follow up of the patient’s condition while on medical marijuana therapy. These can be
16 added to chapter 329-126.

17 The costs of administering the program are substantial. The Department currently recommends a
18 \$35 annual fee for processing medical marijuana registrations and managing the medical marijuana
19 program.

20 Thank you for the opportunity to provide comments.

DEPARTMENT OF THE PROSECUTING ATTORNEY
CITY AND COUNTY OF HONOLULU

ALII PLACE
1060 RICHARDS STREET • HONOLULU, HAWAII 96813
PHONE: (808) 547-7400 • FAX: (808) 547-7515

KEITH M. KANESHIRO
PROSECUTING ATTORNEY

ARMINA A. CHING
FIRST DEPUTY PROSECUTING ATTORNEY



THE HONORABLE DELLA AU BELATTI, CHAIR
HOUSE COMMITTEE ON HEALTH
Twenty-Seventh State Legislature
Regular Session of 2013
State of Hawai'i

February 26, 2014

RE: H.B. 2092; RELATING TO MEDICAL MARIJUANA.

Chair Au Belatti, Vice Chair Morikawa and members of the House Committee on Health, the Department of the Prosecuting Attorney of the City and County of Honolulu submits the following testimony in opposition to H.B. 2092.

H.B. 2092 deletes the requirement in the Medical Marijuana law that the certifying physician of medical marijuana patients be the qualifying patient's primary care physician. The primary care physician is aware of the medical history of his or her patient and can best make the determination on whether or not medical marijuana is in the best interest of his or her patient. Some of the other doctors prescribing medical marijuana may have other motives.

For the foregoing reason, the Department of the Prosecuting Attorney of the City and County of Honolulu opposes H.B. 2092. Thank you for the opportunity to testify on this matter.

POLICE DEPARTMENT

CITY AND COUNTY OF HONOLULU

801 SOUTH BERETANIA STREET · HONOLULU, HAWAII 96813
TELEPHONE: (808) 529-3111 · INTERNET: www.honolulu.gov



KIRK CALDWELL
MAYOR

LOUIS M. KEALOHA
CHIEF

DAVE M. KAJIHIRO
MARIE A. McCAULEY
DEPUTY CHIEFS

OUR REFERENCE **JI-TA**

February 26, 2014

The Honorable Della Au Belatti, Chair
and Members
Committee on Health
State House of Representatives
415 South Beretania Street
Honolulu, Hawaii 96813

Dear Chair Belatti and Members:

SUBJECT: House Bill No. 2092, Relating to Medical Marijuana

I am Jerry Inouye, Major of the Narcotics/Vice Division of the Honolulu Police Department, City and County of Honolulu.

The Honolulu Police Department opposes House Bill No. 2092, Relating to Medical Marijuana.

This bill seeks to amend Section 329-123 of the Hawaii Revised Statutes by removing "primary care" physician from the required information section of the medical marijuana application form.

Marijuana use is harmful. In 2010, marijuana was involved in more than 461,000 emergency room visits nationwide. This amounts to almost 39 percent of all emergency room visits involving illicit drugs. In 2011, approximately 872,000 Americans who are 12 years and older reported receiving treatment for marijuana use, and this is more than any other illicit drug.

Marijuana has a high potential for abuse and can result in addiction. According to the Alcohol and Drug Abuse Division of the State of Hawaii Department of Health, 31.3 percent of those admitted for treatment (adults and juveniles) in 2009 stated that marijuana was their primary substance of abuse.

When physicians recommend the use of a scheduled substance, they must exercise great care. The American Society of Addiction Medicine asserts that physicians who recommend the use of medical marijuana to a patient must adhere to the established tenets of proper patient care, must have a bona fide physician-patient relationship with the patient, ensure that their issuance of medical marijuana recommendations is not a disproportionately large aspect of their practice, and have adequate training in identifying substance abuse and addiction.

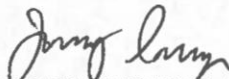
The Honorable Della Au Belatti, Chair
and Members
Page 2
February 26, 2014

The responsibility of certifying a patient for the use of medical marijuana should remain with the patient's primary care physician.

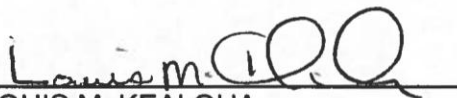
The Honolulu Police Department urges you to oppose House Bill No. 2092, Relating to Medical Marijuana.

Thank you for the opportunity to testify.

Sincerely,


JERRY INOUE, Major
Narcotics/Vice Division

APPROVED:


LOUIS M. KEALOHA
Chief of Police



House Committee on Health

Rep. Della Au Belatti, Chair

Rep. Dee Morikawa, Vice Chair

Wednesday, February 26, 2014, 10:00AM

Conference Room 329
State Capitol
415 South Beretania Street

Strong Support – HB2092 – Relating to Medical Marijuana

Dear Chair Belatti and Vice Chair Morikawa and members of the House Committee on Health:

The Big Island Chapter of the Americans for Safe Access strongly supports HB 2092 and urges the legislature to pass it during the current legislative session.

The bill will correct a last minute change during an 11th hour Conference Committee last year which stated that only primary care physicians could recommend cannabis to their patients.

This becomes problematic for many patients whose PCP works for the VA, Kaiser or another HMO which have policies restricting them from recommending cannabis. Additionally, other PCP's will not recommend cannabis because they are not knowledgeable about the benefits of the medicine, are fearful of losing their license or have other reasons not to certify.

If not corrected the medical cannabis program could be seriously in jeopardy because a very high number patients receive their certification from a relatively small number of physicians who are knowledgeable about the efficacious uses of cannabis.

HB2092 will simply remove the problematic language and allow any licensed doctor to recommend cannabis.

The bottom line here is that legislators should not play the role of doctors. And, there is no reason for them to dictate how medicine should or should not be administered. There are patients residing in every single legislative district. Why should our elected officials try to make it more difficult for those who are suffering or have illness for which cannabis provides relief?

Patients should have the right to select the physicians they trust and know. No one should be required to decide who they wish to have treat them based on a restrictive sentence in the law.

Please advance this bill. Mahalo.

Andrea Tischler, Chair

COMMUNITY ALLIANCE ON PRISONS

P.O. Box 37158, Honolulu, HI 96837-0158

Phone/email: (808) 927-1214 / kat.caphi@gmail.com



COMMITTEE ON HEALTH

Rep. Della Au Belatti, Chair

Rep. Dee Morikawa, Vice Chair

Wednesday, February 26, 2014

10:00 a.m.

Room 329

SUPPORT FOR HB 2092 - MEDICAL MARIJUANA

Aloha Chair Belatti, Vice Chair Morikawa and Members of the Committee!

My name is Kat Brady and I am the Coordinator of Community Alliance on Prisons, a community initiative promoting smart justice policies for more than a decade. This testimony is respectfully offered on behalf of the 5,800 Hawai'i individuals living behind bars, always mindful that approximately 1,500 Hawai'i individuals are serving their sentences abroad, thousands of miles away from their loved ones, their homes and, for the disproportionate number of incarcerated Native Hawaiians, far from their ancestral lands.

HB 2092 makes clarifying housekeeping amendments to the registration requirements regarding the medical use of marijuana. Effective January 2, 2015.

Mahalo nui to Chair Belatti and the committee for hearing this important measure.

Community Alliance on Prisons supports this measure that upholds the spirit and intent of the law that was passed in 2000 as a compassionate measure to help relieve the discomfort of our residents who suffer from various health problems.

I have attached an article from Salon magazine on how *phytocannabinoids* work. As a caregiver to three patients, I can attest to this. The article can be accessed at:

http://www.salon.com/2013/08/17/science_for_stoners_heres_how_pot_works/

We urge the committee to pass this measure.

Mahalo for this opportunity to testify.

SATURDAY, AUG 17, 2013 05:00 AM HST

Science for stoners: Here's how pot works

Explaining the chemistry behind medical marijuana that got Sanjay Gupta and others to finally believe

K.M. CHOLEWA

TOPICS: MEDICAL MARIJUANA, POT, DRUGS, SANJAY GUPTA, SCIENCE, EDITOR'S PICKS, POLITICS NEWS



(Credit:

Reuters/Alexandria Sage)

Last week, CNN's Dr. Sanjay Gupta [grabbed headlines](#) for coming out in support of the validity of the medical use of marijuana, something he had opposed in the past. What changed his mind? Science.

Here's what he — and those studying the chemistry of marijuana — now understand.

Marijuana makes chemical contact with human bodies through cannabinoids, which are chemical compounds in marijuana (cannabis). The human body also creates cannabinoids. The body creates cannabinoids on-demand, such as when they are produced to serve as neuroprotectants when the brain's nerve cells begin to fire too much, as in the case of stress, seizures or an impact to the brain. Our bodies also have cannabinoid receptors. Together, the cannabinoids and their receptors make up the human cannabinoid system.

Just as there was a time when we didn't know we had immune systems or hormonal systems, until 1988 we didn't know that we had cannabinoid systems.

The human body produces and utilizes its own cannabinoids, but the body can also utilize cannabinoids from external sources. One source of exogenous cannabinoids is marijuana, or to use marijuana's botanical name, cannabis. Because these cannabinoids are plant-based, they would be considered *phytocannabinoids*. Phytocannabinoids from marijuana fit nicely into human cannabinoid receptors. Thus, the cannabinoids from the cannabis plant can be utilized by the human cannabinoid system.

Any woman who has had a hot flash can find an analogy in the hormone estrogen. As the process of menopause ensues, a woman's estrogen level drops. Many women seek to balance their hormonal systems by taking in plant-based estrogens, *phytoestrogens*, such as soy or yams.

Other women, during menopause, seek to balance their hormonal systems through the use of a synthetic estrogen (rather than a plant-based one) such as with the pharmaceutical Premarin. Likewise, one can take in synthetic cannabinoids through the pharmaceutical Marinol.

So, in this analogy, pot is to a yam what Marinol is to Premarin.

One of the cannabinoids in cannabis – THC (delta-9-tetrahydrocannabinol) — creates a euphoric effect. The other 65 cannabinoids in cannabis do not. CBD (cannabidiol) is another cannabinoid in cannabis. In Gupta's report, Charlotte Figi, the 6-year-old whose seizures were dramatically reduced by using marijuana, was using a strain of the plant high in CBD. Despite marijuana's classification as a schedule 1 drug, meaning no medicinal applications, in 2003, the [U.S. federal government patented CBD for medical use](#). CBD has medicinal applications in conjunction with THC, but also independently of it.

Cannabinoids are generally considered inhibitors. They damp down neurotransmitter release. But this doesn't mean they necessarily damp down neural activity. [If you inhibit an inhibitor, you get a release](#).

The big risk with many drugs and pharmaceuticals is respiratory and/or cardiovascular failure. Not so with cannabis. Numerous sources cite the lethal dose of marijuana at 40,000 times greater than the dose it takes to create the euphoric effects. It may be that there are no fatalities from marijuana use because there are no cannabinoid receptors in the medulla oblongata, the part of the brain stem responsible for respiratory and cardiovascular function.

The human body's cannabinoid receptors provide places for cannabinoids — human-made, plant-based, or synthetic – to “plug in.” The cannabinoid receptor was discovered by Alan Hewitt in 1988. Raphael Mechoulam discovered the first cannabinoid, anandamide, in 1992. Anandamide, a cannabinoid made by the body, affects the same functions as the plant-based cannabinoid THC does: memory, pain, focus, etc.

[There is evidence that anandamides are necessary to forget conditioned fear and trauma](#). Mice engineered to be unable to access their anandamides (cannabinoids produced by their bodies) were unable to get over a negative association to a nonthreatening input, specifically, a tone

associated with an electric shock. Even when the electric shock no longer accompanied the stimulus, the mice maintain the conditioned stress response. Without a functioning cannabinoid system, they were biologically unable to “get over it.”

Mice in the control group (those who retained their access to their anandamides) in time no longer responded with stress to the tone, once the shock was uncoupled from it. They could hear the tone without experiencing the stress response. They got over it. They “unlearned” it, biochemically. When THC (a plant-based cannabinoid) was administered to the mice unable to access their own cannabinoids, those mice were able to “forget” the negative association, too, just like the mice in the control group who were never cut off from their bodies’ own cannabinoid systems.

“Human cannabinoid receptors are extremely similar to those found in rodents,” says professor of pharmacology Leslie Iverson in [“The Science of Marijuana.”](#) In humans, the analogy lies in the biochemistry of post-traumatic stress disorder. With PTSD, it is recognized that a person can be conditioned to respond as though his or her life is at risk every time there’s a loud noise; for example, as occurs in war zones. Even outside the war zone, conditioned associations are made, such as being conditioned to respond with stress, as if violence is imminent any time an authority figure gets frustrated, if one grew up in a home where a parent responded to frustration with violence.

Out of the war zone, or as an adult at work, these responses don’t make sense. They are no longer responses to reality, i.e., real threats. Uncoupling that fear response from the stimulus appears to involve the cannabinoid system. This uncoupling could be called “forgetting.” It is different than repression as repression keeps the faulty association active, though unconscious. Forgetting circumstantial, conditioned associations is critical to our capacity to read reality. Conditioned responses, though they perhaps at one time made sense, were “true” in reference to one’s experience, become maladaptive with a change in context. Forgetting is not the failure of mental function. [It is a mental function.](#) In the body, “forgetting” can represent the capacity to “unlearn” a biochemical pattern.

The ability to “unlearn” is necessary for change. Whether we call it unlearning, forgetting or deprogramming, dislodging the entrenched – in our minds, bodies or culture – requires accurate assessments of reality. When it comes to marijuana, the larger Drug War and the institutions built up around it, Dr. Gutpa’s message is another shot at a citadel constructed on misinformation and that shot comes straight from the mainstream of America.

K.M Cholewa has worked as a political writer, policy consultant and lobbyist in Montana for 22 years, including on issues related to medical marijuana. Her novel, [Shaking Out the Dead](#), is due out Spring 2014. Follow her on Twitter [@katecac](#).

Matthew Brittain, MA, LCSW, DCSW, DABFSW
Diplomate, Clinical Social Work, NASW
Diplomate, American College of Forensic Examiners
56 Waiianuenue Ave. Suite #207 Hilo HI 96720-2474
(808) 934-7566 (phone) 934-9442 (Fax)
WWW.effectivechangelc.com

LATE

Date: 02-25-2014

REGARDING: MEDICAL MARIJUANA LEGISLATION HB2092

Dear Senator Green:

Here are a few points to help you in your decision-making process:

- 1) Political polling on the Medical Use of Marijuana (MUM) issue consistently shows about 2/3 of voting citizens support medical marijuana; hence your duty as an elected official is to support Medical Marijuana access as much as you can.
- 2) Currently there are about 12,000 MUM patients in Hawaii; Given that each person has a circle of family/friends that include an average of 10 others, that means that there are about 120,000 people that are directly or second-order directly affected by the use of Medical Marijuana.
- 3) Given my pivotal position as a broker for MUM patients' access to their certificates, with 11 years of experience in this field, I am aware that if the law changes to restrict access to the MUM certificates then there will be a massive (approximately 90% of current patients would not be able to be renewed) exodus from the legal system into the criminal black market, with the approximate numbers involved:
 - A) WHEREAS, 90% of 12,000, there will be about 10,800 patients without a legal certificate;
 - B) WHEREAS, each patient is consuming about one ounce per month of marijuana, which equates to 129,600 ounces of medical marijuana per year;
 - C) WHEREAS, the black-market value of marijuana averages about \$400 an ounce, equating to \$51,840,000 total value;
 - D) NOW, THEREFORE, if the law is not revised to delete the "primary care physician" requirement for certifying physicians, then that approximate \$51,840,000 will revert to the black market, further fueling drug dealers, illegal activity of all sorts, and further erosion of law and order in Hawaii.

- 4) Legalization of marijuana, in general, and Medical Use of Marijuana specifically at this time, is a National and Local fact, and will happen. You can take advantage of this popular movement of the civil, medical, civil rights, and legal evolution, or identify yourself as part of the old-guard prohibitionists. In order for you to take good advantage of this popular movement, I advise that you create a dispensary system, so that the hundreds of millions of dollars of legal production may be regulated and taxed.
 - A) The current law does not allow for the production, storage, processing, and access of a consistently adequate supply of Medical Marijuana; hence, law enforcement assertions that citizens violate the law to get their medicine is true, given that the law is flawed. Only correcting the law to be reasonable will correct the current problems of citizens consistently breaking the law to achieve what the law originally intended. Law enforcement should be in support of this, but they do not see this from the way that the vast majority of the voting public does.
 - B) Creating legal MUM dispensaries will remove Medical Marijuana from the black market. Law enforcement and you should be in support of taxing and regulating marijuana, to keep it out of the black market, criminal element. Black market money is normally used to further other criminal activity, including hard drug sales and terrorism.
 - C) Law enforcement has good intentions, but they are using outdated, ineffective logic that has proven itself to not work; treating a health issue as a law enforcement issue.
 - D) Law enforcement benefits from the creation of a dispensary system, in that they will no longer be burdened with the need to arrest patients and caregivers; the judicial system will also realize cost savings through reduced use of its resources for marijuana cases.
- 5) Physicians who certify medical marijuana patients are akin to specialists; they know about marijuana, and are willing to certify patients that other physicians do not feel competent to certify. Some physicians fear political or professional censure due to the propaganda and punitive laws that have historically been in place. For these reasons, and others, the few physicians who do certify marijuana patients are valuable and should be considered as an asset, not as criminals.
- 6) I kindly petition you to uphold the will of the people, and approve HB2092

Sincerely,

Matthew Brittain, MA, LCSW, DCSW, DABFSW



LATE

Dedicated to safe, responsible, and effective drug policies since 1993

TO: HOUSE COMMITTEES ON HEALTH

FROM: PAMELA LICHTY, M.P.H., PRESIDENT

DATE: FEBRUARY 26, 2014, ROOM 329

RE: H.B. 2092 RELATING TO MEDICAL MARIJUANA – IN **STRONG SUPPORT**

Good afternoon, Chair Belatti, Vice Chair Morikawa and members of the Committee. My name is Pam Lichty and I'm President of the Drug Policy Action Group (DPAG), the government affairs arm of the Drug Policy Forum of Hawaii.

First I'd like to thank Representative Belatti for introducing this bill and the Committee for scheduling it today.

This measure, HB 2092 is described in the legislative summary as "making clarifying housekeeping amendments to the registration requirements regarding the medical use of marijuana." While the statutory amendments in this bill appear to be very simple, there are many far-reaching implications.

Last Session SB 642, CD1 was enacted which added the requirement that the certifying physician be the qualifying patient's "primary care physician." This was reportedly included to address purported problems with Hawaii-licensed physicians flying in from out of state and certifying patients in the absence of the "bona fide physician-patient relationship" acquired by law. In addition to this provision, the existing law also requires that the written certification "is based upon the physician's professional opinion after having completed a full assessment of the patient's medical history and current medical condition." We believe that this statutory language offers adequate safeguards regarding the professional behavior and integrity of participating physicians.

In our judgment, after 14 years of closely observing the Medical Marijuana Program in action, we believe this change was unnecessary. More significantly it has had far-reaching unintended consequences.

Soon after SB 642, CD1 passed, we became aware that there are many, many situations where patients do not have access to a primary care physician who is willing

or able to issue the certification. Those unable to do so, include physicians affiliated with Kaiser Permanente and those working at Veteran Administration hospitals and often those seeking care at a Community Health Center. The Neighbor Islands are at a particular disadvantage, moreover, since there is a shortage of primary care physicians in all the counties outside of Honolulu.

As advocates for patients, caregivers and physicians for the last 14 years, we believe the most equitable remedy for all concerned is to delete the PCP revision entirely, as this bill does, and revert to the original language of the law – which does not specify the type of physician who can certify but rather the type of relationship said physician must have with the patient.

As your Committee knows, the medical marijuana program is transitioning to the Department of Health and will be housed there as of January 1, 2015. As public health professionals, they are well positioned to address any problems that may arise vis a vis the participating physicians.

We urge the Committees to pass this measure so that Hawaii's medical cannabis law can proceed as intended by restoring the original wording of the law as enacted in 2000.

Mahalo for the opportunity to testify. Of course, we are available now, as well as in the future, to answer any questions you may have.



LATE

Committee: Committee on Health
Hearing Date/Time: Wednesday, February 26, 2014, 10:00 a.m.
Place: Conference Room 329
Re: Testimony of the ACLU of Hawaii in Support of H.B. 2358, Relating to Medical Marijuana

Dear Chair Belatti and Members of the Committee on Health:

The American Civil Liberties Union of Hawaii (“ACLU of Hawaii”) writes in support of H.B. 2092, which seeks to improve Hawaii’s medical marijuana program.

This bill allows a patient’s treating physician – including pain specialists, oncologists, and other specialists – to recommend medical marijuana, and removes an unnecessary requirement that the recommending physician be a patient’s “primary care physician.” In so doing, this bill puts control of marijuana recommendations back where it belongs, in the hands of doctors.

Thank you for this opportunity to testify.

Sincerely,

Daniel Gluck
Senior Staff Attorney
ACLU of Hawaii

The mission of the ACLU of Hawaii is to protect the fundamental freedoms enshrined in the U.S. and State Constitutions. The ACLU of Hawaii fulfills this through legislative, litigation, and public education programs statewide. The ACLU of Hawaii is a non-partisan and private non-profit organization that provides its services at no cost to the public and does not accept government funds. The ACLU of Hawaii has been serving Hawaii for over 45 years.

American Civil Liberties Union of Hawaii
P.O. Box 3410
Honolulu, Hawaii 96801
T: 808.522.5900
F: 808.522.5909
E: office@acluhawaii.org
www.acluhawaii.org

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 2:20 PM
To: HLTtestimony
Cc: evanbelaga@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
evan belaga	Individual	Support	No

Comments: strong support!! Hawaii has a unique opportunity to correct many injustices. Hawaii's position on cannabis needs to be brought more in-line with the current will of the public as can be seen in many states across the country. Criminalizing the use of marijuana is archaic and has enormous costs and consequences to all aspects of our community.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 12:34 PM
To: HLTtestimony
Cc: cbisnow@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Chris Bisnow	Individual	Support	No

Comments: Good day, I'm writing to voice my opinion regarding this bill. I agree with this bill's intention to remove the 'primary care physician' stipulation for a doctor to be able to prescribe medical cannabis (marijuana). If this problem is not corrected many will be forced to search for a new doctor or part with their required medicine. Some doctors are unable to prescribe medical cannabis because of policies, even though they may believe it is the proper treatment. If we agree that cannabis is a medicine then we need to stop treating it differently from other medications and allow our doctors (all of them!) to use it effectively in treatment regimens. Thank you for taking the reasonable and responsible point of view and supporting this bill. Mahalo, Chris Bisnow (808) 238-0524 73-4837
Manu Mele St Kailua Kona, HI 96740

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 2:41 PM
To: HLTtestimony
Cc: eublalock@hotmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
elizabeth blalock	Individual	Support	No

Comments: I am a neurologist. For many patients with chronic conditions that respond well to cannabinoids such as pain and spasticity the treatment of those symptoms is handled by specialists such as neurologists, pain management specialists, physiatrists. Rather than designate the specialty of the physician allowed to 'prescribe' medical marijuana, it would be better to insist there be an ongoing therapeutic relationship in a traditional medical setting. Also the law needs to recognize that not all physicians will be comfortable prescribing medical marijuana due to the federal law against it even if they feel it is warranted. Their patients and VA patients will have to find physicians outside their usual medical office setting. They should be able to be seen in legitimate medical marijuana clinics, if such exist, solely for the purpose of obtaining the medicine their treating physician recommends but cannot or will not prescribe.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 4:15 PM
To: HLTtestimony
Cc: rodneye9110@msn.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Rodney Evans	Individual	Support	No

Comments: I have a VA doctor as my primary physician. He tells me that his job would be in jeopardy if he recommended medical marijuana. Even though he is well aware of the benefits, he cannot recommend it without losing his job. We should be allowed to use herbal medications even without the for-profit medical practitioners approving.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 3:25 PM
To: HLTtestimony
Cc: radiopeg@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Peggy Gentle	Individual	Support	No

Comments: I am strongly in support of HB2092, to allow others than our primary care physicians to handle medical cannabis needs. It is a hardship that is not a helpful solution at this time.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

Aloha Hawaii Lawmakers,

I am writing to voice support for HB 2092. As an engineer and scientist I am in support for putting medical decision making into the hands of those trained to do so. I believe this bill is important because there are currently several groups of doctors who are unable to recommend some medications to their patients. Please leave prescription of medications up to the discretion of doctors. Mahalo.

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 1:58 PM
To: HLTtestimony
Cc: solsir42003@yahoo.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
andy kress	Individual	Support	No

Comments: I very strongly support this bill

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 12:33 AM
To: HLTtestimony
Cc: victoriahokulani@gmail.com
Subject: *Submitted testimony for HB2092 on Feb 26, 2014 10:00AM*

HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Victoria Latenser	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 1:09 PM
To: HLTtestimony
Cc: technicalcat@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Jennifer Martin	Individual	Support	No

Comments: Hello, I'm writing to ask that you support this bill. Restricting a doctor's recommendation to only a primary care physician is difficult and confusing in a number of ways. MD's are all MD's, and as such, should have the right to advise and make available recommended treatments for patients. Please support this bill. Thanks, Jennifer Martin

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 1:11 PM
To: HLTtestimony
Cc: dmatthews@jhu.edu
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Daryl Matthews	Individual	Support	No

Comments: Any doctor that determines that marijuana is what is best for their patient should be able to recommend it, and legislators should not get between doctors and their patients. This bill puts control of marijuana recommendations back where it belongs, in the hands of doctors.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 5:22 PM
To: HLTtestimony
Cc: rmacpam@hawaiiintel.net
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Randolph McCreight	Individual	Support	No

Comments: STRONG SUPPORT OF HB2092

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 8:08 PM
To: HLTtestimony
Cc: jonathanmcroberts4@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Jonathan McRoberts	Individual	Support	No

Comments: Many physicians are unwilling to prescribe cannabis because it is still wrongly classified as a class 1 drug. Until that status is changed, most doctors will only prescribe drugs that are approved by the Federal Government. the only medicines which relieve my stomach condition are opiates and cannabis. I do not want to have to go back on opiates because my primary physician is afraid to prescribe cannabis. I strongly support the passing of HB2092.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 3:59 PM
To: HLTtestimony
Cc: mojo@hedonisiahawaii.com
Subject: *Submitted testimony for HB2092 on Feb 26, 2014 10:00AM*

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Mojo Mustapha	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 3:02 PM
To: HLTtestimony
Cc: mark@solights.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Mark Nelson	Individual	Support	No

Comments: Strong Support for this HB2092 to pass. After Changing what worked for 13 years to something designed to prohibit was wrong and a manipulative move in last legislation session. Shame to our legislatures for allowing it to happen last year!!!

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

To: House Committee on Health

Rep. Della Au Belatti, Chair

Rep. Dee Morikawa, Vice Chair

Re: HB 2092

Hearing: Wednesday, February 26, 2014, 10:00AM

From: Clifton Otto, MD

Position: Support

This bill is an important step towards protecting the sacred doctor-patient relationship.

Patients have the right to seek medical assistance from any doctor that they feel comfortable with, and in whom they are willing to place their trust.

Doctors have the right to create a confidential doctor-patient relationship with any patient that comes to them seeking medical assistance.

Any doctor with a valid Hawaii State Medical License and a valid State and Federal Narcotics License can complete a Hawaii State Medical Marijuana Certification. It would be a violation of the right to practice medicine in Hawaii to restrict certifications to only certain types of medical doctors.

It is the intent of Hawaii's Medical Marijuana Law to respect the confidential doctor –patient relationship, since this is where such medical decision making should be taking place.

If the concern is over having certifications performed by medical doctors who are not maintaining legitimate offices in the State, then one solution would be to have DOH write guidelines into its future rules that would require the maintenance of at least one bone fide office location in the State of Hawaii, confirmed by periodic on-site inspections.

And as we continue to place band aids on a program that still cannot provide safe access to our patients without violating federal law, please don't forget to address the fact that the currently accepted medical use of Marijuana in treatment already exists in Hawaii and the United States, which means Marijuana does not meet criteria for inclusion in Federal Schedule I.

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 12:17 AM
To: HLTtestimony
Cc: nimo1767@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Robert Petricci	Individual	Support	No

Comments: HLT 2/26/14, 10am, Conference Room 329 RE: HB2092 Robert Petricci, medical marijuana patient, Position: Strong support. Aloha Rep. Della Au Belatti, Chair, HLT Rep. Dee Morikawa, Vice Chair, HLT and committee members. My name is Robert Petricci, I have a primary care physician that recommends medical marijuana to treat my severe degenerative arthritis. After years of living in pain in July of 2013 I began to use medical marijuana. The results are nothing short of amazing. I am pain free for the first time I can remember. My knees are no longer swollen, allowing me greatly increased mobility. I have lost over 50lbs in 6 months going from 258lbs (my last primary care doctor visit in July 2013) to 205lbs last month. Unfortunately my primary care physician just does not know much about marijuana or the various treatment options it presents. I had to go to marijuana specialist (pot doctors) to get the best information on my options such as ingesting, topical, or smoked, vaporized, concentrates, juicing, raw, or cooked, ect. My best comparison is if I wanted information about a brain treatment, I would see a neurologist, if I want to understand heart treatment options I see a cardiologist and if I want to know how to effectively use medial marijuana I have to see a marijuana specialist. Please help me by passing this HB2092. Thank you for your interest and consideration. Mahalo Robert Petricci HLT 2/26/14, 10am, Conference Room 329 RE: HB2092 Robert Petricci, medical marijuana patient, Position: Strong support. Aloha Rep. Della Au Belatti, Chair, HLT Rep. Dee Morikawa, Vice Chair, HLT and committee members. My name is Robert Petricci, I have a primary care physician that recommends medical marijuana to treat my severe degenerative arthritis. After years of living in pain in July of 2013 I began to use medical marijuana. The results are nothing short of amazing. I am pain free for the first time I can remember. My knees are no longer swollen, allowing me greatly increased mobility. I have lost over 50lbs in 6 months going from 258lbs (my last primary care doctor visit in July 2013) to 205lbs last month. Unfortunately my primary care physician just does not know much about marijuana or the various treatment options it presents. I had to go to marijuana specialist (pot doctors) to get the best information on my options such as ingesting, topical, or smoked, vaporized, concentrates, juicing, raw, or cooked, ect. My best comparison is if I wanted information about a brain treatment, I would see a neurologist, if I want to understand heart treatment options I see a cardiologist and if I want to know how to effectively use medial marijuana I have to see a marijuana specialist. Please help me by passing this HB2092. Thank you for your interest and consideration. Mahalo Robert Petricci

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

House Committee on Health

Rep. Della Au Belatti, Chair

Rep. Dee Morikawa, Vice Chair

Wednesday, February 26, 2014

10:00AM

Conference Room 329

State Capitol

415 South Beretania Street

Support – HB2092 – Relating to Medical Marijuana

Dear Honorable Committee Chairs and Vice Chairs,

I am not a medical marijuana patient or a doctor. In my work as a field organizer for the Drug Policy Action Group of Hawaii I speak with and write to many patients every day. They use marijuana to treat many awful conditions, from Multiple sclerosis to Hepatitis to chronic pain. I hear from patients who are worried, dismayed, or furious about developments in the legislature because they rely on marijuana, the best medicine that is available to them, and I dread having to be the bearer of bad news.

This bill attempts to fix a glaring problem with the current marijuana legislation, a provision that limits which doctors can recommend medical cannabis to only a patient's primary care physician. This is a huge problem, as it will deny access to legal medicine to many people, or force them to change their insurance or doctors. People whose health care is managed by either the VA or Kaiser, both of which have organization-wide policies against recommending medical marijuana due to its federal status, will be forced to choose between a doctor they know and trust, and a medicine they know and trust. This is a cruel way to treat the very sick.

I understand that there are fears that the program is or will be misused by people seeking recreational marijuana. That said, in an imperfect world we should err on the side of giving to much access to treatment, rather than too little. The best people to decide when and for whom medical marijuana is appropriate are their doctors. By trying to constrain the program through legislation, we have reduced safe access, and more and more patients will either be forced to change doctors, or forced to buy and consume medicine illegally, on the black market. We made this law out of compassion for the sick. For those reasons we need to return it to a compassionate law.

Thank you for taking the time to hear this bill, and for your consideration.

Rafael Kennedy
91-1018 Kaiiau Ave.
Kapolei, HI 96707

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 8:14 PM
To: HLTtestimony
Cc: saralegal@live.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Sara Steiner	Individual	Support	No

Comments: Dear Legislators, Please pass this HB2092 immediately! As a medical marijuana patient on the Big Island for the last 3 years, with a degenerative condition which there is no cure, I have found it impossible for my "primary care physician" to recommend cannabis due to the fact that the Bay Clinic is federally funded and does not care to go against the laws of the federal government. Because of their fear, I was forced to locate and use the services of a doctor who was knowledgeable in the uses of cannabis, and was not afraid of the local Narcotics Enforcement Division, who does their best to demonize any doctor who dares recommend cannabis to their patients. Please pass this bill and strengthen the rights of the patients. We have been waiting since the year 2000 for meaningful legislation and protection. There is overwhelming evidence that cannabis is a useful plant for numerous ailments, and the archaic prohibition for profit stance taken by law enforcement, the prison industrial complex and the pharmaceutical companies can no longer stand the test of truth! Sincerely, Sara Steiner P.O. Box 2011 Pahoa, HI 96778

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 9:35 PM
To: HLTtestimony
Cc: danielhayesuppendahl@gmail.com
Subject: *Submitted testimony for HB2092 on Feb 26, 2014 10:00AM*

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
daniel uppendahl	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

House Committee on Health

Rep. Della Au Belatti, Chair

Rep. Dee Morikawa, Vice Chair

Wednesday, February 26, 2014

10:00AM

Conference Room 329

State Capitol

415 South Beretania Street

Support – HB2092 – Relating to Medical Marijuana

This bill strikes a problematic provision from the current Medical Marijuana Law that limits what doctors can recommend marijuana to “primary care physicians.” This provision will prevent many qualified patients from having access to medical cannabis because some insurance providers and doctors at the VA are prevented from recommending medical marijuana. While other bills have other ways to fix this, this bill takes the correct approach by simply removing this problematic language.

Any doctor that determines that marijuana is what is best for their patient should be able to recommend it, and legislators should not get between doctors and their patients. This bill puts control of marijuana recommendations back where it belongs, in the hands of doctors.

The current language excludes many people. Currently, several groups of doctors including those at the VA and those at Kaiser, are unable to recommend medical marijuana because of policies.

If this provision is not amended it may force some patients to decide between staying with a doctor that they know and trust, and a medicine that is safe and effective. There is no reason to put sick people in that position.

Thank you for the opportunity to testify,

Craig R. Ellenwood

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 8:49 AM
To: HLTtestimony
Cc: taraseverns@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Tara Severns	Individual	Support	No

Comments: Aloha, I am writing to ask you to please support this measure to ensure that palliative, hospice, and other non-primary care physicians may prescribe medical cannabis to their patients. My mother suffered horribly in her last year of life as a rare and untreatable cancer in her spinal cord caused excruciating nerve pain. Her primary care physician referred her to a specialist in palliative care, who prescribed medical cannabis. She applied for and received her "blue card" and I am so grateful, because medical cannabis consistently worked in *seconds* to bring her pain level from a 10 to a 2 or 3! Had the law been in place that limits the right to prescribe medical cannabis to primary care physicians, my mother would not have been able to receive the relief she did. In loving memory of my mother, I appeal to your good sense and compassion to support this bill.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 11:35 AM
To: HLTtestimony
Cc: mattbinder@earthlink.net
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM



HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Matt Binder	Individual	Support	No

Comments: Any doctor that determines that marijuana is what is best for their patient should be able to recommend it, and legislators should not get between doctors and their patients. This bill puts control of marijuana recommendations back where it belongs, in the hands of doctors. Trying to legislate what doctors can and cannot recommend for their patients is the wrong approach. If there are problems with individual doctors, those cases should be referred to the Medical Board. Politicians should not be in the business of micromanaging doctors.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 1:24 PM
To: HLTtestimony
Cc: Lcaldwell12@live.com
Subject: *Submitted testimony for HB2092 on Feb 26, 2014 10:00AM*



HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Larry Caldwell	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 10:48 AM
To: HLTtestimony
Cc: islandeyesvideo@yahoo.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM



HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Mary Marvin Porter	Individual	Support	No

Comments: I support HB 2092. It has a more fair balanced approach then previous legislation. On the Island of Hawaii, it is very difficult to find a doctor that takes new patients. I have a friend who has had surgery for a tumor on her brain, not cancer, and she has chronic pain. She has called numerous doctors and is told they do not take chronic pain patients. Requiring and placing stringent requirements on the kind of doctor is not appropriate in Hawaii's situation in which most doctors do not take new patients. Other approaches that made it more difficult for residents to access medical marijuana in concern that a person may not be "sick enough" is a "sick" approach to providing for the welfare of our citizens. Mahalo for your concern in this matter, please support HB 2092

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 3:33 PM
To: HLTtestimony
Cc: juggler@aloha.net
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM



HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Graham Ellis	Individual	Support	No

Comments: We need to put control over recommendations back where it belongs: in the hands of doctors!

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: John Lockwood <ainamaikai@hawaii.rr.com>
Sent: Wednesday, February 26, 2014 8:27 AM
To: HLTtestimony
Subject: *****SPAM***** BillHB2092 - SUPPORT!



Dear Representatives:

I have lived on the Big Island for most of my life, but yesterday when testimony was due regarding HB2092 was to be submitted was on Oahu (for minor cancer surgery). I have had a medical marijuana "blue card" for several years, and rely on (very small amounts) of pakalolo for pain control associated with ongoing cancer and PPS problems. My annual evaluation to renew this card is given by Dr. Russell Down - an expert on natural medicine, and not by my Primary Care physician (Dr. Craig Kadooka).

I wish to continue to consult Dr. Down for my pain control needs, as I am not sure of Dr. Kadooka's perspectives on medical marijuana, and do not wish to discuss this with him.

Please make the changes required to correct the flawed Senate bill restricting access to physicians other than those listed as "Primary Care" doctors - PLEASE HELP TO PASS HB2092!

Thank you,

John P. Lockwood, Ph.D.

John P. ("Jack") Lockwood
'Aina Maika'i Ranch
19-4260 Alanui I'iwi (P.O. Box 69)
Volcano, HI 96785
Tel: 1-808-967-7357 (h); 967-8579 (o); 345-9422 (cell)
Fax: 1-808-967-8525
e-mail: ainamaikai@hawaii.rr.com (h); jplockwood@volcanologist.com (o)
<http://www.volcanologist.com>



This email is free from viruses and malware because [avast! Antivirus](#) protection is active.

House Committee on Health
Rep. Della Au Belatti, Chair
Rep. Dee Morikawa, Vice Chair

LATE

Wednesday, February 26, 2014
10:00AM
Conference Room 329
State Capitol
415 South Beretania Street

Support - HB2092 - Relating to Medical Marijuana

I am a 60 year old local resident who has been benefiting from Hawaii's enlightened Medical Marijuana Law. Recently my KAISER physician was advised by KAISER that he may NO LONGER ASSIST PATIENTS LIKE ME to renew our Medical Cards. Now I learn that even if I pay out of pocket to be advised (and perhaps recommended to continue with the Medical Marijuana) by a different licensed physician in this matter I might still be denied the remedy that has served me so well. Kindly find a better way to achieve your aim of improving the law.

This rule change would affect MANY OTHER legitimate LOCAL patients who's "Primary Care Physicians" at the VA, and at KAISER would be denied medicine that has been proven to help their conditions mightily with a very manini risk of overdose or side effects. Please do not put this roadblock in the path of medicine between patient and the physician they choose. Mahalo.

While other bills have other ways to fix this, this bill takes the correct approach by simply removing this problematic language.

Respectfully, (Rev) Claudia Charters, Honolulu

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 8:38 AM
To: HLTtestimony
Cc: vince.callagher@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
vincent callagher	Individual	Oppose	No

Comments: To whom it may concern. Everyone I know that has medical licensees, their doctors refuse to deal with the draconian laws that now exist..this will basically make elderly and disabled patients not to mention all other pain etc...medical conditions un supported by the compassionate pain act. these patients will not be available to their medicine.I strongly oppose this measure and will actively campaign against it.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 2:41 PM
To: HLTtestimony
Cc: annstarshine@yahoo.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Elizabeth Davis	Individual	Oppose	No

Comments: I oppose for many reasons. Most doctors can't refer due to insurance and other bureaucratic red tape. Also doctors rarely support herbal medicine and often will refuse to treat patients that use herbs including medical marijuana. Naturpathic, Ayurveda and Chinese medicine are poorly respected although they are gaining support. Please encourage doctors to refer patients to life saving medical marijuana and alternative medical programs. However interfering with the privacy rights of patients by forcing them go to doctors that are basing decisions on fear etc. will only encourage patients to go underground or die from lack of appropriate care. Although no one has died from medical marijuana many have died from lack of access to medication that helps or cures without deadly side effects. I was personally on 17 different medications at once with life threatening side effects and none were reported. I support natural herbal medicine and healthy lifestyles. Simple living and common sense will help to improve our economic security over dependence on costly unnecessary allopathic medicine used for incurable conditions. Thank you for considering my testimony.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 2:24 PM
To: HLTtestimony
Cc: krishnakirtanahi@yahoo.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Keth Fetterhoff	Individual	Oppose	No

Comments: I oppose this measure. Most primary physicians are unwilling or unable to recommend medical marijuana due to bureaucratic red tape. This sounds like more tape... sorry I oppose. However I do feel doctors should be encourage to accept patients and assist them in getting medication that is safe and effective such a medical marijuana. The cost savings to the government should be carefully considered during these challenging economic times. A vote to suppress herbal medication is a vote against our island economy.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 2:58 PM
To: HLTtestimony
Cc: johnhayeser@yahoo.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
john hayes	Individual	Oppose	No

Comments: Any certified doctor should be able too prescribe.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

TESTIMONY ON HOUSE BILL 2092
A BILL FOR AN ACT RELATING TO MEDICAL MARIJUANA

By
Keith Kamita

House Committee on Health
Representative Della Au Belatti, Chair
Representative Dee Morikawa, Vice Chair

Wednesday, February 26, 2014, 10:00 a.m.
State Capitol, Conference Room 329

Chair Belatti, Vice Chair Morikawa and Members of the Committee:

I am testifying as a private citizen however I have 27 years of experience in the regulation and enforcement of controlled substance laws in the State of Hawaii. I cannot support House Bill 2902 which attempts to amend changes made by Act 178 Session Laws of Hawaii 2013 to address the need for tighter regulations on physicians participating in Hawaii's medical use of marijuana program starting January 1, 2015. In Hawaii there are presently 12,982 patients in Hawaii's medical use of marijuana program and 103 physicians issuing permits out of a possible 4756 physicians that could. Of these 103 physicians there were 10 physicians that issued 90% or 11,740 of the 12,982 medical use of marijuana permits. Bringing to light the need for better laws relating to requirements for physicians participating in Hawaii's medical use of marijuana program to give better patient care instead of just a revolving door for permits.

Physician Ranked #	# Patients
1	2793
2	2013
3	1614
4	1390
5	1177
6	978
7	675
8	520
9	365
10	215

ISLANDS	PATIENTS	CAREGIVERS	DOCTORS issuing permits
HAWAII	5270	632	52
KAUAI	1822	282	27
LANAI	0	0	0
MAUI	2947	360	36
MOLOKAI	206	28	10

NIIHAU	1	0	1
OAHU	2736	297	57
TOTALS:	12982	1599	183

NOTE: These physicians travel between islands issuing permits.

The requirement in Act 178 SLH 2013 that the physician recommending that the patient utilize marijuana for medical purposes be that patient's primary care physician was to address the need for physicians participating in the medical use of marijuana program to provide better patient care. Nothing has changed since the passage of Act 178, SLH 2013 since it does not take effect till 1-1-2015. We still need physicians to take better patient care similar to the requirements we place on physicians that prescribe controlled substances to their patients. I would also even recommend that stronger language be inserted into the bill requiring that physicians participating in the program have an actual "physician patient relationship" as defined in Section 329-1 HRS the definition of "Physician-patient relationship" means the collaborative relationship between physicians and their patients. To establish this relationship, the treating physician or the physician's designated member of the health care team, at a minimum shall: (1) Personally perform a face-to-face history and physical examination of the patient that is appropriate to the specialty training and experience of the physician or the designated member of the physician's health care team, make a diagnosis and formulate a therapeutic plan, or personally treat a specific injury or condition; (2) Discuss with the patient the diagnosis or treatment, including the benefits of other treatment options; and (3) Ensure the availability of appropriate follow-up care. This language could be added into House Bill 2092 to stress the need for physicians to have a physician patient relationship prior to recommending the medical use of marijuana.

Thank you for the opportunity to testify on this matter.

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 4:56 AM
To: HLTtestimony
Cc: kobash@msn.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Randal Kobashikawa	Individual	Oppose	No

Comments: Aloha, My name is Randal Kobashikawa, and I'm a 30 yr. service connected (90%) disabled veteran, as you know my primary care physician at the VA medical center is prevented from prescribing medical cannabis, nor are they allowed to sign the state handicap permit application (a challenge I've been trying to get resolved). The only remedy for my back injury is a very high risk operation, one that my surgeon says I'm not ready for. He told me we'll try it before just "We put you in a chair". Making it a "No lose situation". I tried for 5 years to control the pain on meds from the VA, and the risks out-weighed the benefits. They started me out with Methocarbamol (3000 mg./ day), Etodolac, and others in that drug class. Finally I tried the type 1 meds, leaving me doped up all day (morphine, Vicodin, etc...). Not only do I live alone, I have to try to live a life as close to "normal" as possible. So please ask yourself this: What are the long term effects of all these pain medicines? What about a quality of life? If we had a pharmacy then we could get cannabis high in CBD (THC is what makes you "Stoned"). Please feel free to contact me if I can offer an assistance in this matter kobash@msn.com Aloha Randal Kobashikawa

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 11:07 AM
To: HLTtestimony
Cc: namaka@interpac.net
Subject: *Submitted testimony for HB2092 on Feb 26, 2014 10:00AM*



HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Joan Lander	Individual	Oppose	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 25, 2014 3:38 PM
To: HLTtestimony
Cc: kindness808@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM



HB2092

Submitted on: 2/25/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
brian	Individual	Oppose	No

Comments: I will be brief. I have serious pain, will have for the remainder of my life. Cannabis helps a lot - no more Oxycontin. Amazing, a miracle. I have followed Hawaii law to the letter. I have had a 'blue card' for several years. I sleep better at night knowing I am not breaking the law. HB2092 will take that away from me. My provider is Kaiser. My pain doctor is not. You know the rest. If the state passes this bill as written, I get to choose between becoming a criminal or going back on the Oxycontin. That is a lousy choice to force on a citizen. For this reason, I believe HB2092 is a lousy piece of legislation. It puts the state between the patients and their pain doctors. Poorly thought out. I understand the arguments on both sides. This is the wrong means to address them. A blunt instrument that does more harm than good. I am a registered voter. I hope that you, the legislature, will do the right thing, the smart thing, the humane thing. I speak for 3 other MMJ patients. Let us live out our remaining years in peace instead of fear.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 1:16 PM
To: HLTtestimony
Cc: heidihayeshawaii@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
heidi zucker	Individual	Comments Only	No

Comments: I have more than a PCP provider; I see more than one licensed Hawaii registered doctor. It should not be law mandated that my permit must be signed by my PCP! As long as they are my doctor; it must not matter who says cannabis is right for me. Let's be realistic and logical and let one of my doctors say I need the permit. I am an adult and my doctors are adults who can make sane decisions. Be smart law makers and trust that one of my doctors is no more better informed than if they were a PCP provider. They should be recognized as all being able to prescribe cannabis for me! Thank you.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 3:32 PM
To: HLTtestimony
Cc: barefootmd@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
James Berg, MD	Individual	Comments Only	No

Comments: I am a board certified primary care physician who has helped many patients in Hawaii with medical marijuana. I believe the law restricting the marijuana certification to primary care doctors is directly contrary to patient's welfare and the very spirit of the law. This amendment to the law was an arbitrary restriction of the practice of medicine for doctors and patients for political, not medical reasons. No patient will benefit from that law, when a oncologist can't help a cancer patient; an ophthalmologist, a glaucoma patient; a neurologist a seizure patient, gastroenterologist a wasting or nauseated patient; an infectious disease specialist, an AIDS patient; a rheumatologist or pain specialist, a pain patient. These doctors have more training than primary care physicians and often see the patient in crisis more often. Marijuana is the safest medicine any of these doctors would be using in their pharmacopeia with their patients. There is no other medicine restricted to licensed medical doctors like this. The new amendment is simply arbitrary. The primary care doctors in Hawaii are often not allowed by their employers to help patients with marijuana. Kaiser insurance, the VA and any federally funded local clinic forbids their primary care doctors from participating. Most other primary care doctors in the state are not participating; and many of the patients are not comfortable bringing it up to their doctors in fear of loosing their access to other pain medicine. Another problem with the previous amendment was that the definition of "primary care physician" is not defined in the law. This is left up to the rules and regulations of the Health Department. Can a patient have a primary care "provider" through their insurance, and another privately paid primary care physician for their more natural approaches? This is America, a patient should be able to choose as many primary care physicians they want, for after all, primary care is a type of medicine (as opposed to a specialist) – it does not mean the patient's primary doctor. The health department is now practicing medicine and determining what kind of doctor a patient can see? The purpose of the medical marijuana law is to help patients get access to their medicine under responsible medical supervision. If a doctor is acting irresponsibly, then the Hawaii State Board of Medicine and Health Department is responsible for investigating it. I see no complaints in the testimony from any patients on the way that the law was prior to this arbitrary amendment! Please repeal the previous amendment to the marijuana law and allow responsible doctors to determine with their patients the way to practice medicine so the patients can be served most appropriately! Pass HB 2092.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 7:21 PM
To: HLTtestimony
Cc: jarronn@hotmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Elijah Ariel	Individual	Comments Only	No

Comments: I am 59 years old and my aches and pains from old injuries continue to be a growing problem. The gymnastic neck injury that qualified me for my medical marijuana card is just part of the problem. I never reported most of my other injuries because I was so 'macho tough'. Well, as I age those injuries continue to come back to 'haunt' me and medical marijuana helps me deal with my aches and pains. PLEASE make things easier for me by making it easier for me to get my medicine. Don't do ANYTHING to make it more difficult for me to get my medicine. Thank you!

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 12:33 PM
To: HLTtestimony
Cc: johnhayeser@yahoo.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
john hayes	Individual	Comments Only	No

Comments: As to a patients insurance approved pop being the only prescriber of medical marijuana, I believe I unfair and will leave truly needy people out of the program. Any certified doctor should be capable of this decision. Thank you

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov

morikawa2-Joanna

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 24, 2014 2:59 PM
To: HLTtestimony
Cc: Albertthomas1953@gmail.com
Subject: Submitted testimony for HB2092 on Feb 26, 2014 10:00AM

HB2092

Submitted on: 2/24/2014

Testimony for HLT on Feb 26, 2014 10:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Albert Thomas	Individual	Comments Only	No

Comments: This bill strikes a problematic provision from the current Medical Marijuana Law that limits what doctors can recommend marijuana to “primary care physicians.” This provision will prevent many qualified patients from having access to medical cannabis because some insurance providers and doctors at the VA are prevented from recommending medical marijuana. While other bills have other ways to fix this, this bill takes the correct approach by simply removing this problematic language. In greater depth: Any doctor that determines that marijuana is what is best for their patient should be able to recommend it, and legislators should not get between doctors and their patients. This bill puts control of marijuana recommendations back where it belongs, in the hands of doctors. The current language excludes many people. Currently, several groups of doctors including those at the VA and those at Kaiser, are unable to recommend medical marijuana because of policies. If this provision is not amended it may force some patients to decide between staying with a doctor that they know and trust, and a medicine that is safe and effective. There is no reason to put sick people in that position.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email webmaster@capitol.hawaii.gov