



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. Box 3378
Honolulu, HI 96801-3378
doh.testimony@doh.hawaii.gov

WRITTEN ONLY

**Testimony in OPPOSITION to S.B. 174, SD2, HD1
RELATING TO MEDICAL MARIJUANA**

SCOTT Y. NISHIMOTO, CHAIR
HOUSE COMMITTEE ON JUDICIARY

Hearing Date: March 29, 2017

Room Number: 325

1 **Fiscal Implications:** None

2 **Department Testimony:** The purpose of this bill is to amend the list of debilitating conditions
3 for the medical use of marijuana by adding a number of new conditions. The Department
4 generally opposes the passage of new laws related to marijuana until the medical marijuana
5 dispensaries open and we can gauge the impact upon the State. We specifically oppose this bill
6 because the Department through §11-160-7, Hawaii Administrative Rules has already laid out a
7 comprehensive annual process to consider addition or deletion of qualifying conditions for the
8 medical use of marijuana. Physicians or potential medical marijuana patients may petition the
9 Department for new conditions. This process will focus on all available medical evidence and
10 research on efficacy and safety for patients. It will include a public hearing where testimony
11 from the public can be provided. The evidence gathered with recommendations will be provided
12 to the Director of Health for decision making.

13

14 The Department has already queried registering physicians and several plan to petition for a
15 variety of conditions. The first annual petition process will be implemented this year. Decisions

- 1 will be grounded in the best available science that shows that medical marijuana helps treat or
- 2 relieve any proposed additional conditions.
- 3
- 4 Thank you for the opportunity to testify.

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



CHRISTOPHER D.W. YOUNG
FIRST DEPUTY PROSECUTING ATTORNEY

THE HONORABLE SCOTT Y. NISHIMOTO, CHAIR
HOUSE COMMITTEE ON JUDICIARY
Twenty-Ninth State Legislature
Regular Session of 2017
State of Hawai'i

March 29, 2017

RE: S.B. 174, S.D. 2, H.D. 1; RELATING TO MEDICAL MARIJUANA.

Chair Nishimoto, Vice Chair San Buenaventura and members of the House Committee on Judiciary, the Department of the Prosecuting Attorney of the City & County of Honolulu (“Department”) submits the following testimony in opposition to S.B. 174, S.D. 2, H.D. 1.

If passed, S.B. 174, S.D. 2, H.D. 1 would expand the definition of a “debilitating medical condition” to include “lupus, epilepsy, multiple sclerosis, arthritis, [and] autism” among the enumerated qualifying conditions.

The Department is very concerned that the proposed amendments would open the door to individuals who would abuse the medical marijuana system, such as physicians whose sole or primary practice is issuing medical marijuana certifications, regardless of whether the patient truly has a truly debilitating medical condition that warrants use of this highly controversial drug. Indeed, under Hawaii’s laws, an issuing physician need not have any specialized knowledge or expertise in the patient’s qualifying condition, nor are there any requirements for face-to-face visits, physical examinations, or ongoing treatment by the issuing physician.

Rather than opening the floodgates to make medical marijuana available to anyone diagnosed with arthritis or similarly common conditions, the Department maintains that any expansion of the medical marijuana qualifiers must be done in a very careful and measured way. To this end, we note that the Department of Health (“DOH”) is currently preparing to hold annual petition hearings— as permitted by statute—to consider additional conditions, not already listed as a “debilitating medical condition,” on a case-by-case basis.

As always, the Department’s primary concern is for public safety and welfare. Given the huge potential for the amendments proposed in S.B. 174, S.D. 2, H.D. 1 to facilitate abuse and/or outright illicit activity, using our medical marijuana laws, the Department is strongly opposed to this proposition. For all of the foregoing reasons, the Department of the Prosecuting Attorney of the City and County of Honolulu opposes S.B. 174, S.D. 2, H.D. 1. Thank you for the opportunity to testify on this matter.



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

TO: House Committee on Judiciary
FROM: Carl Bergquist, Executive Director
HEARING DATE: 29 March 2017, 2PM
RE: SB174 SD2 HD1, Relating to Medical Marijuana, **SUPPORT**

Dear Chair Nishimoto, Vice Chair San Buenaventura, Committee Members:

The Drug Policy Forum of Hawai'i (DPFHI) supports this measure to add various new medical conditions (lupus, autism, multiple sclerosis, arthritis and epilepsy) as qualifying for the legal use of medical cannabis in Hawai'i. In particular, we welcome the purpose and findings section added by the House Committee on Health to the SD2 HD1 version, which accurately reflects the reality surrounding the growing evidence that cannabis can help people afflicted by these conditions.

Of these, the one that attracts the most attention is autism. There is growing evidence that certain patients can benefit from medical cannabis therapy. In fact, success in some cases of autism mirror those seen in high profile cases of epilepsy (Dravet's Syndrome), a fact that is unsurprising given that epilepsy frequently accompanies autism. If a physician or advanced practice registered nurse determines that an autism patient could benefit from medical cannabis, we believe that this should be a decision left up to the parent based upon informed consent. As dispensaries get set to open, the very products that can best address the symptoms of these conditions will go on the market. **We believe it is better to allow parents to make decisions within the medical system rather than force them to seek help elsewhere.**

While we support the Department of Health's ongoing work to set up a petition process to add further conditions – indeed we are planning to help petition for “opiate use disorder” – we see it as a complement to expeditiously adding specific conditions by statute. Accordingly, we respectfully request your support for this bill that can help relieve the suffering of many patients who otherwise may find no relief or risk becoming addicted to more powerful narcotics.

Mahalo for the opportunity to testify.

COMMUNITY ALLIANCE ON PRISONS

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

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



COMMITTEE ON JUDICIARY

Rep. Scott Nishimoto, Chair

Rep. Joy San Buenaventura, Vice Chair

Wednesday, March 29, 2017

2:00 pm

Room 325

STRONG SUPPORT FOR SB174 HD1 - ADDING DEBILITATING CONDITIONS

Aloha Chair Nishimoto, Vice Chair San Buenaventura 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 in Hawai'i for two decades. This testimony is respectfully offered on behalf of the approximately 6,000 Hawai'i individuals living behind bars or under the "care and custody" of the Department of Public Safety on any given day. We are always mindful that more than 1,600 of Hawai'i's imprisoned people 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.

SB 174 SD2, HD1 amends the definition of debilitating medical condition to include lupus, epilepsy, multiple sclerosis, arthritis, and autism as conditions that qualify for the legal use of medical marijuana.

Community Alliance on Prisons is in strong support of this measure. When the medical cannabis program was established in 2000, as Act 228, it was planned that new diseases and ailments where medical cannabis has been shown effective would be added by the Department of Health. To date, only Post Traumatic Stress Disorder, has been added.

This bill would update the program to include other conditions for which medical cannabis has shown efficacy. As a caregiver to three terminally ill people, I urge the committee to pass this important bill.

Mahalo for the opportunity to testify.

HAWAII EDUCATIONAL ASSOCIATION FOR LICENSED THERAPEUTIC HEALTHCARE

To: Representative Scott Nishimoto, Chair Judiciary Committee
Representative Joy San Buenaventura,, Vice-Chair Judiciary Committee
Members of the House Judiciary Committee

Fr: Blake Oshiro, Esq. on behalf of the HEALTH Assn.

Re: Testimony in **Support of Senate Bill (SB) 174, Senate Draft (SD) 2,
House Draft (HD) 1**

RELATING TO MEDICAL MARIJUANA.

Amends the definition of debilitating medical condition to include lupus, epilepsy, multiple sclerosis, arthritis, and autism as conditions that qualify for the legal use of medical marijuana.

Dear Chair Nishimoto, Vice-Chair San Buenaventura, Members of the Committee:

HEALTH is a recently formed trade association made up of the eight (8) licensed medical marijuana dispensaries under Haw. Rev. Stat. (HRS) Chapter 329D. HEALTH's members are all committed to ensuring the goals of patient safety, product safety and public safety. We **strongly support** SB174 SD2, HD1 which adds additional conditions to qualify for the legal use of medical marijuana. Attached, is a list of the state's that allow medical marijuana and the qualifying conditions. See <https://www.leafly.com/news/health/qualifying-conditions-for-medical-marijuana-by-state>

While we note that the range of conditions vary state to state with some more restrictive, some broader, than Hawaii, we think it is important to note that Hawaii was one of the first states to authorize the use of medical marijuana program in 2000. Yet, since that time, the list of conditions remained the same until 2015's Act 241 added "post-traumatic stress disorder."

However, we believe that there is an abundance of evidence to demonstrate and substantiate the medicinal benefits of medical marijuana for certain conditions, including those in this bill.

As with any other medication, a patient has the opportunity to try the product and see if it produces positive results, and weigh that against any negative side-effects. In close collaboration with their physician who provided the certification, they can then make their own decision whether to continue or discontinue the use of medical marijuana.

Therefore, we support this bill. Thank you for your consideration.

Alaska

Qualifying conditions to become a medical marijuana patient in Alaska include:

- Cancer
- Glaucoma
- HIV/AIDS
- Cachexia (wasting syndrome)
- Pain
- Nausea
- Seizures
- Muscle spasms
- Multiple sclerosis

For a complete list of qualifying conditions and guidelines, please refer to [Alaska's application for medical marijuana registry](#), or catch up on the latest [Alaska cannabis news](#).

Arizona

Qualifying conditions to become a medical marijuana patient in Arizona include:

- Cancer
- Glaucoma
- HIV/AIDS
- Cachexia (wasting syndrome)
- Pain
- Nausea
- Seizures
- Muscle spasms
- Multiple sclerosis
- PTSD

For a complete list of qualifying conditions and guidelines, please refer to the [Arizona state legislature concerning medical marijuana](#), or catch up on the latest [Arizona cannabis news](#).

Arkansas

Qualifying conditions for the [Arkansas Medical Marijuana Amendment](#) include:

- Cancer
- Glaucoma
- HIV/AIDS
- Hepatitis C
- ALS or Lou Gehrig's Disease
- Tourette's Syndrome
- Crohn's disease
- PTSD
- Severe arthritis
- Fibromyalgia
- Alzheimer's disease
- A chronic or debilitating disease that produces:
 - Cachexia or wasting syndrome
 - Peripheral neuropathy
 - Intractable pain
 - Severe nausea
 - Seizures

- Severe or persistent muscle spasms

Arkansas' medical marijuana qualifying conditions are currently effective, but licenses for dispensaries will not be accepted until June 1, 2017.

California

Qualifying conditions to become a medical marijuana patient in California include:

- Cancer
- Anorexia
- AIDS
- Chronic pain
- Cachexia
- Persistent muscle spasms, including those associated with multiple sclerosis
- Seizures, including, but not limited to, those associated with epilepsy
- Severe nausea
- Glaucoma
- Arthritis
- Migraines
- Any other chronic or persistent medical symptom that substantially limits the ability of the person to conduct one or more major life activities (as defined by the Americans with Disabilities Act of 1990) or, if not alleviated, may cause serious harm to the patient's safety or physical or mental health

For a complete list of qualifying conditions and guidelines, please refer to [California Proposition 215](#), with revised [Senate Bill 420](#), or catch up on the latest [California cannabis news](#).

Colorado

Although Colorado has implemented a legal recreational cannabis market, it still operates medical marijuana dispensaries for valid patients. Colorado medical marijuana patients still pay standard sales tax on cannabis but are exempt from the high excise taxes and additional state taxes collected from recreational cannabis sales.

Qualifying conditions to become a medical marijuana patient in Colorado include:

- Cancer
- Glaucoma
- HIV/AIDS
- Cachexia (wasting syndrome)
- Persistent muscle spasms
- Seizures
- Severe nausea
- Severe pain

For a complete list of qualifying conditions and guidelines, please refer to [Colorado's Debilitating Conditions for Medical Marijuana Use](#), or catch up on the latest [Colorado cannabis news](#).

Connecticut

Qualifying conditions to become a medical marijuana patient in Connecticut include:

- Cancer
- Glaucoma
- HIV/AIDS
- Parkinson's disease
- Multiple sclerosis

- Damage to the nervous tissue of the spinal cord with objective neurological indication of intractable spasticity
- Epilepsy
- Cachexia (wasting syndrome)
- Wasting syndrome
- Crohn’s disease
- Post-traumatic stress disorder (PTSD)

For a complete list of qualifying conditions and guidelines, please refer to [Connecticut’s medical marijuana qualification requirements](#), or catch up on the latest [Connecticut cannabis news](#).

Delaware

Qualifying conditions to become a medical marijuana patient in Delaware include:

- Cancer
- HIV/AIDS
- Hepatitis C
- Lou Gehrig’s disease (amyotrophic lateral sclerosis, or ALS)
- Alzheimer’s
- Post-traumatic stress disorder (PTSD)
- Cachexia (wasting syndrome)
- Intractable nausea
- Seizures
- Muscle spasms
- Multiple sclerosis

For a complete list of qualifying conditions and guidelines, please refer to Delaware’s [medical marijuana program guidelines](#), or catch up on the latest [Delaware cannabis news](#).

District of Columbia (Washington, D.C.)

Qualifying conditions to become a medical marijuana patient in Washington, D.C. include:

- HIV/AIDS
- Cancer
- Glaucoma
- Muscle spasms
- Multiple sclerosis
- Lou Gehrig’s disease (ALS)
- Cachexia (wasting syndrome)
- Decompensated cirrhosis
- Alzheimer’s
- Seizure disorders
- Any condition diagnosed as “debilitating” by a licensed physician

For a complete list of qualifying conditions and guidelines, please refer to the [District of Columbia’s Medical Marijuana Program Patient FAQ](#), or catch up on the latest [Washington, D.C. cannabis news](#).

Florida

Qualifying conditions to become a medical marijuana patient in Florida include:

- Cancer
- Epilepsy
- Glaucoma
- HIV/AIDS

- PTSD
- ALS or Lou Gehrig's disease
- Crohn's disease
- Parkinson's disease
- Multiple sclerosis

For more information on the Florida Medical Marijuana Legalization, please refer to [Amendment 2](#).

Georgia

Georgia only allows for the use of [low THC oil](#) (less than 5% THC by weight).

Qualifying conditions to become a medical marijuana patient in Georgia include:

- Cancer
- Lou Gehrig's disease (ALS)
- Seizure disorders related to diagnosis of epilepsy or trauma-related head injuries
- Multiple sclerosis
- Crohn's disease
- Mitochondrial disease
- Parkinson's disease
- Sickle cell disease

For a complete list of qualifying conditions and guidelines, please refer to [House Bill 1 \(Haleigh's Hope Act\)](#), or catch up on the latest [Georgia cannabis news](#).

Hawaii

Qualifying conditions to become a medical marijuana patient in Hawaii include:

- Cancer
- Glaucoma
- HIV/AIDS
- Cachexia (wasting syndrome)
- Pain
- Nausea
- Seizures
- Muscle spasms
- Multiple sclerosis

For a complete list of qualifying conditions and guidelines, please refer to [Hawaii Senate Bill 862](#), or catch up on the latest [Hawaii cannabis news](#).

Illinois

Qualifying conditions to become a medical marijuana patient in Illinois include:

- Acquired Immunodeficiency Syndrome (AIDS)
- Alzheimer's disease
- Lou Gehrig's disease (ALS)
- Arnold-Chiari malformation and syringomyelia
- Cachexia/wasting syndrome
- Cancer
- Causalgia
- Chronic inflammatory demyelinating polyneuropathy
- Crohn's disease
- CRPS (Complex Regional Pain Syndrome Type I)
- CRPS (Complex Regional Pain Syndrome Type II)

- Dystonia
- Fibromyalgia (severe)
- Fibrous dysplasia
- Glaucoma
- Hepatitis C
- Human Immunodeficiency Virus (HIV)
- Hydrocephalus
- Hydromyelia
- Interstitial cystitis
- Lupus
- Multiple sclerosis
- Muscular dystrophy
- Myasthenia gravis
- Myoclonus
- Nail-patella syndrome
- Neurofibromatosis
- Parkinson's disease
- Post-concussion syndrome
- Post-Traumatic Stress Disorder (PTSD)
- Reflex sympathetic dystrophy
- Residual limb pain
- Rheumatoid arthritis (RA)
- Seizures
- Sjogren's syndrome
- Spinal cord disease (including but not limited to arachnoiditis, Tarlov cysts, hydromyelia & syringomyelia)
- Spinal cord injury
- Spinocerebellar ataxia (SCA)
- Syringomyelia
- Tarlov cysts
- Tourette syndrome
- Traumatic brain injury (TBI)

For a complete list of qualifying conditions and guidelines, please refer to the [Illinois Medical Cannabis Pilot Program's FAQ](#), or catch up on the latest [Illinois cannabis news](#).

Iowa

Iowa allows for the use of [high-CBD cannabis extracts](#) with less than .3% THC.

Qualifying conditions to become a medical marijuana patient in Iowa include:

- Intractable epilepsy

For a complete list of guidelines, please refer to [Iowa Medical Cannabidiol Act Quick Facts](#), or catch up on the latest [Iowa cannabis news](#).

Kentucky

Kentucky allows for the use of low-THC cannabis or industrial hemp-derived CBD oil. Only those who are participating in a clinical trial or expanded access program are legally allowed to possess CBD oil.

For more information on accessing CBD in Kentucky, please refer to [Senate Bill 124](#), or catch up on the latest [Kentucky cannabis news](#).

Louisiana

Qualifying conditions to become a medical marijuana patient in Louisiana include:

- Symptoms related to cancer
- Glaucoma
- Spastic quadriplegia

For more information on Louisiana's medical marijuana law, please refer to [Senate Bill 143](#), or catch up on the latest [Louisiana cannabis news](#).

Maine

Qualifying conditions to become a medical marijuana patient in Maine include:

- Chronic pain that has not responded to conventional therapy for more than six months
- Post-traumatic stress disorder (PTSD)
- Lou Gehrig's disease (ALS)
- Alzheimer's
- Cachexia (wasting syndrome)
- Cancer
- Crohn's disease
- Glaucoma
- Hepatitis C (active form)
- HIV
- Inflammatory bowel disease (IBS)
- Seizure disorders
- Severe muscle spasms (including multiple sclerosis and other diseases causing severe and persistent muscle spasms)
- Severe nausea

For a complete list of qualifying conditions and guidelines, please refer to [Maine's medical use of marijuana guidelines](#), or catch up on the latest [Maine cannabis news](#).

Maryland

Qualifying conditions to become a medical marijuana patient in Maryland include:

- Cachexia (wasting syndrome)
- Severe, debilitating, or chronic pain
- Severe nausea
- Seizures, including those characteristic of epilepsy
- Severe and persistent muscle spasms
- Multiple sclerosis
- Crohn's disease
- Alzheimer's
- Cancer
- Glaucoma
- HIV/AIDS
- Hepatitis C

For a complete list of qualifying conditions and guidelines, please refer to [Maryland Senate Bill 757](#), or catch up on the latest [Maryland cannabis news](#).

Massachusetts

Qualifying conditions to become a medical marijuana patient in Massachusetts include:

- Cancer

- Glaucoma
 - AIDS
 - Hepatitis C
 - Lou Gehrig's disease (ALS)
 - Crohn's disease
 - Parkinson's disease
 - Multiple sclerosis
 - Other debilitating conditions as determined in writing by a qualifying patient's certifying physician.
- For a complete list of qualifying conditions and guidelines, please refer to the [Massachusetts medical use of marijuana overview](#), or catch up on the latest [Massachusetts cannabis news](#).

Michigan

Qualifying conditions to become a medical marijuana patient in Michigan include:

- Cancer
- Glaucoma
- HIV/AIDS
- Hepatitis C
- Lou Gehrig's disease (Amyotrophic lateral sclerosis, or ALS)
- Alzheimer's
- Nail-patella syndrome
- Cachexia (wasting disease)
- Severe and chronic pain
- Severe nausea
- Seizures
- Epilepsy
- Muscle spasms
- Multiple sclerosis

For a complete list of qualifying conditions and guidelines, please refer to the [Michigan Medical Marihuana Registry Program FAQ](#), or catch up on the latest [Michigan cannabis news](#).

Minnesota

Minnesota does not allow for smokeable cannabis, only a 30-day supply of oils, [edibles](#), and [concentrates](#). Qualifying conditions to become a medical marijuana patient in Minnesota include:

- Lou Gehrig's disease (Amyotrophic lateral sclerosis, or ALS)
- Cancer
- Cachexia
- Crohn's disease
- Glaucoma
- HIV/AIDS
- Seizures
- Severe and persistent muscle spasms
- Terminal illness
- Tourette syndrome
- Intractable pain*

*Recently recommended qualifying condition soon to be available for Minnesota patients.

For more information, please visit the [Minnesota Department of Health – Medical Cannabis](#), or catch up on the latest [Minnesota cannabis news](#).

Mississippi

Mississippi allows access to [CBD oil](#) only. Qualifying conditions to become a medical marijuana patient in Mississippi include:

- Debilitating epileptic seizure disorders

Patients must receive medical recommendations by a physician from the University of Mississippi Medical Center to participate in the clinical trial. For more information, please refer to [House Bill 1231](#) or [Harper Grace's Law](#), or catch up on the latest [Mississippi cannabis news](#).

Missouri

Missouri allows access to [CBD oil](#) only. Qualifying conditions to become a medical marijuana patient in Missouri include:

- Intractable epilepsy

For more information, please refer to [House Bill 2238](#), or catch up on the latest [Missouri cannabis news](#).

Montana

Qualifying conditions to become a medical marijuana patient in Montana include:

- Cancer
- Glaucoma
- HIV/AIDS
- Cachexia (wasting syndrome)
- Chronic pain
- Intractable nausea or vomiting
- Epilepsy or an intractable seizure disorder
- Multiple sclerosis
- Crohn's disease
- Painful peripheral neuropathy
- A central nervous system disorder resulting in chronic, painful spasticity or muscle spasms

For a complete list of qualifying conditions and guidelines, please refer to [Montana Code Annotated 2013](#), or catch up on the latest [Montana cannabis news](#).

Nevada

Qualifying conditions to become a medical marijuana patient in Nevada include:

- AIDS
- Cancer
- Glaucoma
- Condition or treatment for a medical condition that produces cachexia (general physical wasting and malnutrition)
- Persistent muscle spasms (including multiple sclerosis)
- Seizures (including epilepsy)
- Severe nausea
- Severe pain

For a complete list of qualifying conditions and guidelines, please refer to the [Nevada Medical Marijuana Program](#), or catch up on the latest [Nevada cannabis news](#).

New Hampshire

Qualifying conditions to become a medical marijuana patient in New Hampshire include:

- A chronic or terminal disease
- Cachexia (wasting syndrome)

- Severe pain
- Severe nausea/vomiting
- Seizures
- Severe, persistent muscle spasms

For a complete list of qualifying conditions and guidelines, please refer to [New Hampshire House Bill 573](#), or catch up on the latest [New Hampshire cannabis news](#).

New Jersey

Qualifying conditions to become a medical marijuana patient in New Jersey include:

- Lou Gehrig's disease (amyotrophic lateral sclerosis, or ALS)
- Multiple sclerosis
- Terminal cancer
- Muscular dystrophy
- Inflammatory bowel disease (IBS)
- Crohn's disease
- Terminal illness if the physician has determined a prognosis of less than 12 months of life
- Seizure disorder, including epilepsy
- Intractable skeletal muscular spasticity
- Glaucoma
- HIV/AIDS
- Cancer

For a complete list of qualifying conditions and guidelines, please refer to the [New Jersey Medicinal Marijuana Program](#), or catch up on the latest [New Jersey cannabis news](#).

New Mexico

Qualifying conditions to become a medical marijuana patient in New Mexico include:

- Severe chronic pain
- Painful peripheral neuropathy
- Intractable nausea/vomiting
- Severe anorexia
- Cachexia (wasting syndrome)
- Hepatitis C infection currently receiving antiviral treatment
- Crohn's disease
- Post-traumatic stress disorder (PTSD)
- Lou Gehrig's disease (amyotrophic lateral sclerosis, or ALS)
- Cancer
- Glaucoma
- Multiple sclerosis
- Damage to the nervous tissue of the spinal cord with intractable spasticity
- Epilepsy
- HIV/AIDS
- Inflammatory autoimmune-mediated arthritis
- Hospice patients

For a complete list of qualifying conditions and guidelines, please refer to the [New Mexico Medical Cannabis Program FAQ](#), or catch up on the latest [New Mexico cannabis news](#).

New York

Qualifying conditions to become a medical marijuana patient in New York include:

- Cancer
- Epilepsy
- HIV/AIDS
- Huntington’s disease
- Inflammatory Bowel Disease (IBS)
- Lou Gehrig’s disease (ALS)
- Parkinson’s disease
- Multiple sclerosis (MS)
- Neuropathies
- Spinal cord damage

For a complete list of qualifying conditions and guidelines, please refer to the [New York State Medical Marijuana Program FAQ](#), or catch up on the latest [New York cannabis news](#).

North Carolina

North Carolina allows for the use of [CBD oil](#) only. Qualifying conditions to become a medical marijuana patient in North Carolina include:

- Intractable epilepsy

For more information, please refer to [House Bill 1220](#), or catch up on the latest [North Carolina cannabis news](#).

North Dakota

North Dakota’s qualifying conditions for the North Dakota Compassionate Care Act include:

- Cancer and its treatments
- HIV/AIDS
- Hepatitis C
- ALS or Lou Gehrig’s disease
- PTSD
- Alzheimer’s disease, dementia, or treatment of these conditions
- Crohn’s disease
- Fibromyalgia
- Spinal stenosis
- Chronic back pain, including:
 - Neuropathy or damage to the nervous tissue of the spinal cord with objective neurological indication of intractable spasticity
- Glaucoma
- Epilepsy
- A chronic or debilitating disease, medical condition, or its treatment that produces one or more of the following:
 - Cachexia or wasting syndrome
 - Severe, debilitating pain that has not responded to previously prescribed medication or surgical measures for more than three months or for which other treatment options produced serious side effects
 - Intractable nausea
 - Seizures
 - Severe or persistent muscle spasms, including but not limited to those characteristic of multiple sclerosis.

For more information, please refer to the [North Dakota Compassionate Care Act](#).

Oklahoma

Oklahoma allows for the use of [CBD oil](#) only. Qualifying conditions to become a medical marijuana patient in Oklahoma include:

- Must be under the age of 18 suffering from:
 - Lennox-Gastaut syndrome
 - Dravet syndrome
 - Severe myoclonic epilepsy of infancy
 - Any form of refractory epilepsy not treatable by traditional medical therapies

For more information, please refer to [Katie and Cayman's Law \(House Bill 2154\)](#), or catch up on the latest [Oklahoma cannabis news](#).

Oregon

Qualifying conditions to become a medical marijuana patient in Oregon include:

- Cancer
- Glaucoma
- Alzheimer's
- HIV/AIDS
- Cachexia (wasting syndrome)
- Severe pain
- Severe nausea
- Seizures, including but not limited to seizures caused by epilepsy
- Persistent muscle spasms
- Multiple sclerosis

For a complete list of qualifying conditions and guidelines, please refer to the [Oregon Medical Marijuana Act](#), or catch up on the latest [Oregon cannabis news](#).

Pennsylvania

Qualifying conditions to become a medical marijuana patient in Pennsylvania include:

- Cancer
- HIV/AIDS
- Amyotrophic Lateral Sclerosis (ALS)
- Parkinson's Disease
- Multiple sclerosis
- Damage to the nervous tissue of the spinal cord with objective neurological indication of intractable spasticity
- Epilepsy
- Inflammatory bowel disease (IBS)
- Neuropathies
- Huntington's disease
- Post-traumatic stress disorder (PTSD)
- Intractable seizures
- Glaucoma
- Sickle cell anemia
- Severe, chronic or intractable pain of neuropathic origin or severe chronic or intractable pain in which conventional therapeutic intervention and opiate therapy is contraindicated or ineffective
- Autism
- "Terminally ill" – a medical prognosis or life expectancy of approximately one year or less if the illness runs its normal course.

For more information, please refer to [Senate Bill 3](#).

Rhode Island

Qualifying conditions to become a medical marijuana patient in Rhode Island include:

- Cancer
- Glaucoma
- HIV/AIDS
- Hepatitis C
- Cachexia (wasting syndrome)
- Chronic pain
- Severe nausea
- Seizures, including but not limited to those characteristic of epilepsy
- Severe and persistent muscle spasms
- Multiple sclerosis
- Crohn's disease
- Alzheimer's

For a complete list of qualifying conditions and guidelines, please refer to [Rhode Island's medical marijuana approved qualifying debilitating medical conditions](#), or catch up on the latest [Rhode Island cannabis news](#).

South Carolina

South Carolina allows for the use of [CBD oil](#) only. Qualifying conditions to become a medical marijuana patient in South Carolina include:

- Certain forms of epilepsy as part of a state-run clinical trial

For more information, please refer to the [Medical Cannabis Therapeutic Treatment Research Act](#), or catch up on the latest [South Carolina cannabis news](#).

Tennessee

Tennessee allows for the use of [CBD oil](#) only. Qualifying conditions to become a medical marijuana patient in Tennessee include:

- Intractable seizures (as part of a clinical research study)

For more information, please refer to [Senate Bill 280](#), or catch up on the latest [Tennessee cannabis news](#).

Texas

Texas allows for the use of [CBD oil](#) only. Qualifying conditions to become a medical marijuana patient in Texas include:

- Intractable epilepsy

For more information, please refer to [Senate Bill 339](#), or catch up on the latest [Texas cannabis news](#).

Utah

Utah allows for the use of [CBD oil](#) only. Qualifying conditions to become a medical marijuana patient in Utah include:

- Intractable epilepsy

For more information, please refer to [House Bill 105](#), or catch up on the latest [Utah cannabis news](#).

Vermont

Qualifying conditions to become a medical marijuana patient in Vermont include:

- Cancer
- AIDS/HIV
- Multiple sclerosis

- Cachexia (wasting syndrome)
- Severe pain
- Nausea
- Seizures

For a complete list of qualifying conditions and guidelines, please refer to the [Vermont patient marijuana registry FAQ](#), or catch up on the latest [Vermont cannabis news](#).

Washington

Changes to Washington state's marijuana laws via Senate Bill 5052 will result in the state's medical marijuana industry being absorbed by its recreational cannabis market. These changes will [go into full effect July 1, 2016](#). Until then, medical marijuana dispensaries will still be operational but are ultimately expected to close or incorporate themselves into an existing licensed retail cannabis shop.

Qualifying conditions to become a medical marijuana patient in Washington include:

- Cancer
- HIV/AIDS
- Multiple sclerosis
- Epilepsy or other seizure disorder
- Spasticity disorders
- Intractable pain
- Glaucoma
- Crohn's disease
- Hepatitis C
- Diseases, including anorexia, which result in nausea, vomiting, wasting, appetite loss, cramping, seizures, muscle spasms, or spasticity

For a complete list of qualifying conditions and guidelines, please refer to the [Washington state legislature regarding medical cannabis](#), or catch up on the latest [Washington state cannabis news](#).

Wisconsin

Wisconsin allows for the use of non-psychoactive CBD oil only. Qualifying conditions to become a medical marijuana patient in Wisconsin include:

- Seizure disorders

For more information, please refer to [Lydia's Law \(Act 267\)](#), or catch up on the latest [Wisconsin cannabis news](#).

Wyoming

Wyoming allows for the use of [CBD oil](#) only. Qualifying conditions include:

- Intractable epilepsy

For more information, please refer to [House Bill 32](#), or catch up on the latest [Wyoming cannabis news](#).

Testimony in Opposition to SB 174 SD2 HD1– Relating to Medical Marijuana
Hearing on March 29, 2017 at 2:00 pm
Conference Room 325 of the State Capitol

TO: Committee on Judiciary
Honorable Representative Scott Nishimoto, Chair
Honorable Representative Joy San Buenaventura, Vice Chair

FR: Alan Shinn, Executive Director
Coalition for a Drug-Free Hawaii
1130 N. Nimitz Hwy., Suite A259
Honolulu, HI 96817
(808) 545-3228 x29

Please accept this testimony in opposition to HB174 SD2 HD1 – Relating to Medical Marijuana, that amends the definition of debilitating medical conditions to include lupus, epilepsy, multiple sclerosis, autism, and arthritis. Currently there is no scientific research that shows that the use of marijuana products have a positive, long-term effect on individuals with those health conditions.

Most if not all, national public health organizations support more research into the benefits of cannabis-based products and delivery systems, but do not endorse state-based medical marijuana programs or the legalization of marijuana. The consensus is that the use of marijuana should meet the current standards for prescription drug products which include FDA approval.

For example, the National Multiple Sclerosis Society states that cannabinoids have potential both for management of MS symptoms, such as pain and spasticity, as well as for neuroprotection. However, the Society cannot recommend that medical marijuana be made widely available to people with MS for symptom management based on legal barriers to its use, and because issues of side effects, systemic effects, and long-term effects are not yet clear.

We recommend that the Legislature commission the UH JABSOM to explore research into the medical use of marijuana and/or clinical trials to test the effectiveness of promising cannabinoids. Otherwise, the bill SB 174 SD2 HD1's intent appears to be a way to further expand the use of marijuana without scientific or public health rationale.

Thank you for the opportunity to provide testimony.



Hawaii's Voice for Sensible, Compassionate, and Just Drug Policy

TO: HOUSE COMMITTEE ON JUDICIARY

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

DATE: March 29, 2 p.m., Room 329

RE: S.B. 174 SD2, HD1 RELATING TO MEDICAL MARIJUANA – **IN SUPPORT**

Good afternoon, Chair Nishimoto, Vice Chair San Buenaventura, 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 Hawai'i.

We strongly support this measure and are pleased to see that SB 174, SD2, HD1 addresses the needs of patients first and foremost.

We believe that the findings section of the bill explains the situation succinctly. Hawaii's law was enacted in 2000 when there was far less available research about the conditions that medical cannabis may ameliorate. And even though a process has been in the law **since its inception** to add new covered conditions via a Department of Health process, the process and protocols and required hearings have not been initiated to date. Hence only one new condition has been added to the law in 17 years, and that was one, PTSD, was added via the legislative process.

Therefore in the interests of provide quicker access and potential relief, to the patients afflicted with the enumerated conditions, we urge you to use SB174 as the vehicle to do so.

Thank you for introducing this measure and hearing it today. And mahalo for the opportunity to testify.

To: House Committee on Judiciary
Representative Scott Nishimoto, Chair
Representative Joy San Buenaventura, Vice Chair

Re: SB174 SD2 HD1 – Relating to Medical Marijuana

Hearing: Wednesday, March 29, 2017, 2:00 pm, Room 325

From: Clifton Otto, MD

Position: Support with changes

Please add the following severely debilitating/terminal medical conditions to this bill:

Amyotrophic Lateral Sclerosis (ALS):

AR, CA, DE, D.C., FL, GA, IL, ME, MA, MI, MN, NH, NJ, NM, NY, ND, PA.

Parkinson's Disease:

CA, CT, FL, GA, IL, MA, NY, PA.

Alzheimer's Disease:

AR, CA, DE, D.C., IL, ME, MD, MI, ND, OR, RI.

<https://www.leafly.com/news/health/qualifying-conditions-for-medical-marijuana-by-state>

From: mailinglist@capitol.hawaii.gov
Sent: Sunday, March 26, 2017 2:04 PM
To: JUDtestimony
Cc: marilynwick@pobox.com
Subject: Submitted testimony for SB174 on Mar 29, 2017 14:00PM

SB174

Submitted on: 3/26/2017

Testimony for JUD on Mar 29, 2017 14:00PM in Conference Room 325

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Marilyn Mick | Individual | Support | No |

Comments: Adding lupus, epilepsy, multiple sclerosis, arthritis, and autism as conditions that qualify for the legal use of medical marijuana. Adding these conditions via statute means there will be less of a delay for suffering patients than by going via the Department of Health process to add conditions.

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: Saturday, March 25, 2017 4:23 PM
To: JUDtestimony
Cc: mendezj@hawaii.edu
Subject: *Submitted testimony for SB174 on Mar 29, 2017 14:00PM*

SB174

Submitted on: 3/25/2017

Testimony for JUD on Mar 29, 2017 14:00PM in Conference Room 325

| Submitted By | Organization | Testifier Position | Present at Hearing |
|-----------------------|---------------------|---------------------------|---------------------------|
| Javier Mendez-Alvarez | 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

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 28, 2017 8:51 AM
To: JUDtestimony
Cc: j.bobich@tcu.edu
Subject: *Submitted testimony for SB174 on Mar 29, 2017 14:00PM*

SB174

Submitted on: 3/28/2017

Testimony for JUD on Mar 29, 2017 14:00PM in Conference Room 325

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Joseph A. Bobich | 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

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 28, 2017 9:49 AM
To: JUDtestimony
Cc: gifts9954@gmail.com
Subject: *Submitted testimony for SB174 on Mar 29, 2017 14:00PM*

SB174

Submitted on: 3/28/2017

Testimony for JUD on Mar 29, 2017 14:00PM in Conference Room 325

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Susan Vickery | 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

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, March 28, 2017 10:14 AM
To: JUDtestimony
Cc: ncsugano@gmail.com
Subject: Submitted testimony for SB174 on Mar 29, 2017 14:00PM

SB174

Submitted on: 3/28/2017

Testimony for JUD on Mar 29, 2017 14:00PM in Conference Room 325

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Jari S.K. Sugano | Individual | Support | Yes |

Comments: SB 174 Dear Chair Nishimoto, Vice Chair San Buenaventura and members of the House Judiciary Committee My name is Jari Sugano and I am a caregiver of a minor in the Hawaii medical marijuana program and a member of the medical marijuana dispensary working group. I strongly support changing the current list of debilitating medical conditions to include lupus, epilepsy, multiple sclerosis, arthritis, and autism, under Hawaii's medical marijuana program. We have family members affected by lupus, multiple sclerosis, arthritis, and autism. We see first hand the long term pain and suffering associated with these conditions and hope our family members will also be able to access of medical marijuana as an adjunct treatment option in the near future. For our children who both have autism, we currently use medication such as methylphenidate to control focus, hyper activeness and spontaneous rage issues for symptoms relating to autism which causes side effects such as eating and social disorders. Our daughter has severe behavior issues that includes self inflicted harm and harm of others around her. The addition of THC for her seizure control has been found to help her behavior rages as well. We look forward to evaluating new treatment options that may one day bring natural relief to our family members. Please consider expanding the current list of conditions.

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 in SUPPORT of: SB174 SD2 HD1, RELATING TO MEDICAL MARIJUANA

TO: COMMITTEE ON JUDICIARY

HEARING: Wednesday, March 29, 2017 at 2:00 pm in Conference Room 325

FROM: Wendy Gibson R.N./BSN. American Cannabis Nurses Association member.

Dear Chair Nishimoto, Vice Chair San Buenaventura and Members of the Committee,

My name is Wendy Gibson. I am a Cannabis Nurse Educator who **STRONGLY** supports HB174 SD2 HD1 as a means to increase access to patients who suffer from lupus, epilepsy, multiple sclerosis, arthritis, and autism. The medical cannabis scientific community has a body of research, which can verify the usefulness for treating these conditions.

I believe that passing HB174 SD2 will facilitate a speedier and less costly approach for adding qualifying conditions than the process the Department of Health is currently developing.

For these reasons, I stand in **STRONG SUPPORT** of SB174 SD1.

Thank you very much for the opportunity to provide testimony on this measure.

Respectfully,

Wendy Gibson R.N./BSN

LATE

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, March 29, 2017 10:41 AM
To: JUDtestimony
Cc: lady.flach@gmail.com
Subject: *Submitted testimony for SB174 on Mar 29, 2017 14:00PM*

SB174

Submitted on: 3/29/2017

Testimony for JUD on Mar 29, 2017 14:00PM in Conference Room 325

| Submitted By | Organization | Testifier Position | Present at Hearing |
|---------------------|---------------------|---------------------------|---------------------------|
| Teri Heede | 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